Women’s health after imprisonment

Dr Penelope Abbott and Professors Wendy Hu and Parker Magin in the School of Medicine, have been awarded funding to investigate how women newly released from prison might have better access to primary health care. The project, which is supported by the RACGP Foundation (Royal Australian College of General Practitioners) Family Medical Care Education and Research Grant, aims to identify the barriers this vulnerable group faces in achieving something as routine and important as visiting a GP.

“Women in custody are a marginalised, disadvantaged group with high medical and social needs. On leaving custody, they are at high risk of poor mental and physical health, hospitalisation and death, family disruption, social and economic disadvantage, disconnection from their community and recidivism,” says Dr Abbott.

High-quality primary health care may ameliorate some of these risks. However, there is insufficient knowledge about how readily and easily women released from custody visit a doctor, and what sort of care they might be offered. This research will compile a detailed picture of these women’s perceived health needs and experience during the transition from custody to the community. The relationship between women who have been released from prison and general practitioners will be explored, as will their health-care expectations in prison and outside.

Interviewees for the research project will cover a cross-section (including health status, gender, ethnicity, custodial history and health service use in custody) of women at three Sydney correctional centres: Silverwater, Dillwynia and Emu Plains. Women from all over NSW, including those who will be released to rural communities, are housed in these prisons.

One-third of women in custody in NSW are Aboriginal, and studies have repeatedly shown these women to be a high risk of hospitalisation and death after release. The health disparity between non-Indigenous ex-prisoners and other women is similarly stark: one Australian study showed non-Indigenous women were 69 times more likely to die in the six months after release than their counterparts in the general community.

This project will be used to inform strategies that improve care for this vulnerable group of women. However, it is also envisaged that the work will help to provide better models of primary health care for other people in disadvantaged and/or marginalised populations.

Project Title: The health needs, pre-release planning and experiences of women on release from custody and their engagement with general practice in the community

Funding has been set at: $14,330
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June 2014