

ICE PROGRAMS FOR PRISONERS



In response to an increase in methamphetamine (most commonly referred to as ice) as the most significant problem drug identified by Victorian prisoners, two pilot programs were launched by the Minister for Corrections, Wade Noonan, on 24 August 2015. Following the pilot, these ice programs were formally incorporated into the prison treatment model.



MANAGING ICE ADDICTION 24 HOURS

A health-based program that focuses on the issues underlying ice use, whilst encouraging participants to develop relapse prevention strategies.



BREAKING THE ICE 44 HOURS

A criminogenic program focusing on the links between offending and ice use. The program encourages participants to develop strategies to reduce their risks of relapse and re-offending.

THE RISK-NEED-RESPONSIVITY MODEL

The programs draws on the Risk-Need-Responsivity model for offender rehabilitation established by Andrews & Bonta (1998), which incorporates:

- Matching the program intensity to the offender's level of risk
- Providing targeted interventions to address criminogenic needs (such as substance use)
- Tailoring the intervention to the learning style, motivation, abilities and strengths of the offender.

PARTICIPANT PROFILE



All participants were over the age of 18, ranging between 22 and 52 years old.

38 participants completed the Managing Ice Addiction (24 hr) program, representing an 84% completion rate.

27 participants completed the Breaking the Ice (44 hr) program, representing a 75% completion rate.

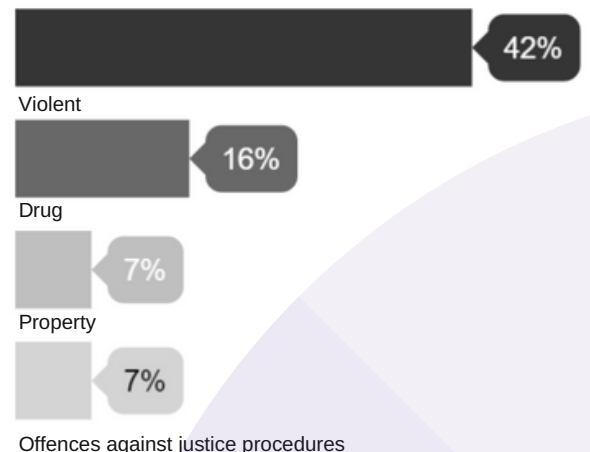
The majority of participants (68%) had not completed secondary schooling.

The majority of participants (65%) had a medium security rating.

Ice was reported by participants as the most problematic drug in relation to offending.

The majority of participants (73%) identified as Australian ethnicity.

MOST SERIOUS CURRENT CHARGE FOR PROGRAM PARTICIPANTS:



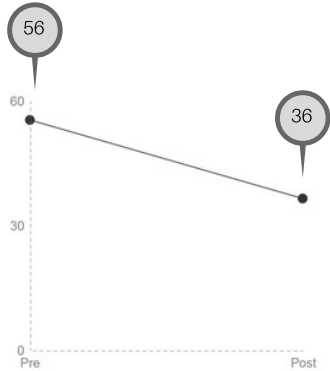
PROGRAM OUTCOMES

AT A GLANCE



Psychometric testing data collected before and after treatment show that these programs have resulted in positive outcomes for participants across a range of measures. The following provides a snapshot of those outcomes.

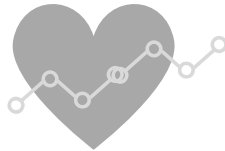
• REDUCTION IN CRIMINAL THINKING



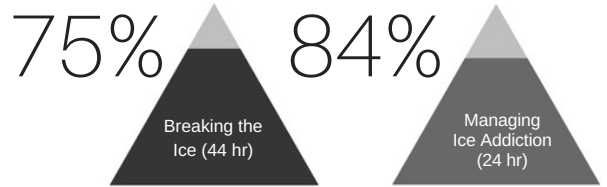
There was a significant decrease in Criminal Thinking for **Breaking the Ice (44 hr)** participants. Current Criminal Thinking reduced from a severity rating of 55.5 to 36.4.

• IMPROVEMENTS IN EMOTION REGULATION

Improvements in emotional regulation were observed in participants of both programs, including significant improvements for participants in the **Breaking the Ice (44 hr)** program for measures of impulsivity (14.8 to 12.1) and awareness of emotional regulation strategies (18.5 to 15.7).

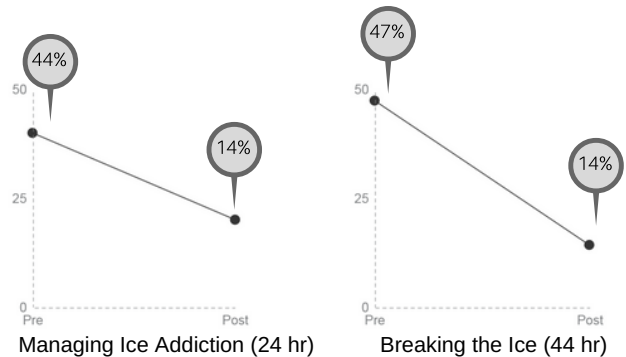


• HIGH COMPLETION RATES



• REDUCED INTENTION TO USE DRUGS

The number of participants intending to use drugs after completing the program reduced significantly for both programs.



PARTICIPANT FEEDBACK

"Completing the program puts drug use into perspective and forces you to face things you didn't want to face when you're in the community."

"The information provided about changes to the neurotransmitters in the brain was helpful and fascinating."

"(The program) helped me understand more about my triggers and I know I'm not the only one in this situation."

"(Completing the program) makes me more confident about getting out."

"It taught me a lot about drug use: what triggers it, thoughts and behaviours towards drug use, setting goals and how to achieve them."

"The fact that it was based on the drug ice, which is my poison, so I got a lot out of it."

"It was good – it helped me realise how bad ice is."

The majority of participants who provided feedback agreed or strongly agreed with the following statements:

- I learned a lot from the program.
- The program motivated me to work on my problems.
- I feel confident about tackling my problems as a result of the program.