



Department of Planning,
Lands and Heritage



FREMANTLE PRISON
The Convict Establishment



Fremantle Prison

Accessibility and Inclusion Plan 2023

Acknowledgement of Country

The Department of Planning, Lands and Heritage acknowledges the Whadjuk people, as the traditional custodians of Walyalup, the land on which Fremantle Prison is located. The Department pays respect to Elders past and present, and all Western Australian Aboriginal communities.



Above: Tour guide and tour group stretching in the Crown Theatre. J Wyld.
Cover: Birds-eye view of Fremantle Prison gatehouse and main cell block.

This document may contain images and names of deceased Indigenous people.

Welcome

Fremantle Prison is pleased to present the 2023-2028 Accessibility and Inclusion Plan (AIP).

Fremantle Prison is a World Heritage-listed site over 160 years old and welcomes over 200,000 visitors every year. The site is managed by the Department of Planning, Lands and Heritage for the State Government of Western Australia. It is important that the experiences and information shared with our visitors are accessible to national and international visitors of all abilities.

Since the launch of the 2019-2029 Fremantle Prison Master Plan, we are proud to have overseen:

- Installation of a new lift to access the Commissariat (basement) located below the Main Cell Block.
- Completion of many accessibility upgrades to the Main Cell Block ground floor, including widening an existing tour route for those using mobility devices.
- Significant improvements to our website so visitors can be more informed when planning their visit to the Prison.
- Formation of the AIP Reference Group to ensure we have continuous feedback from people with lived experience of disability.

In line with our commitment to the United Nations Global Sustainable Development Goals, this plan sets out site specific objectives and actions to make the Prison as welcoming as possible. Broadly, this includes:

- Enhanced accessibility and wayfinding across the site in line with stakeholder feedback, always with respect to heritage fabric.
- Increased training opportunities for staff to ensure the information we share can be clearly understood by all.
- Improved feedback processes and enhanced employment and volunteering opportunities for people with lived experience of disability.

We thank the many individuals and organisations who have shared their knowledge and continue to guide us in delivering the actions of this Plan. We look forward to working together to deliver better accessibility outcomes for all our visitors.



Anthony Kannis PSM

Director General, Department of Planning, Lands and Heritage



Above right: Anthony Kannis, Director General, Department of Planning, Lands and Heritage.

About Us

Built in the 1850s, Fremantle Prison is one of the State's premier cultural tourism destinations, playing an important role in the history and identity of many Australians.

As an award-winning tourist site, the Prison is maintained on behalf of the Western Australian Minister for Heritage, by the Department of Planning, Lands and Heritage. The site is recognised by UNESCO as one of 11 Australian Convict Sites on the World Heritage List that tell the story of convict transportation and the impact of colonisation on Aboriginal culture. In 2019 it was estimated by AEC Group that Fremantle Prison made a direct contribution of \$19.1 million to the regional economy.

The 6.2 hectare site is home to more than 50 buildings constructed throughout the past 160 years, none of which were designed to current accessibility standards. The Prison staff have a dual role to conserve the heritage values of the site whilst ensuring it's accessible for all staff and visitors.

The Prison team of over 60 employees are made up of two branches: Heritage Conservation and Commercial Operations. The Heritage Conservation team is responsible for the maintenance and conservation of built fabric, preserving the museum and archaeological Collections, and interpreting the site for visitors. The Commercial Operations team coordinates our tour programs, marketing, promotions, functions and events and gift shop. Safety is the responsibility of everyone who works on site, and we strive to ensure the place is as inclusive as possible for our team as well as the public.

Our Values

- **Collaboration**
- **Respect**
- **Integrity**
- **Accountability**
- **Innovation**



Abbreviations

ACS: Australian Convict Sites

AIP: Accessibility and Inclusion Plan

BMR: Building Material Reference

Cont'd: Continued

CRPD: United Nations Convention on the Rights of Persons with Disabilities

DDA: Disability Discrimination Act 1992

DPLH: Department of Planning, Lands and Heritage

HCT: Heritage Conservation Team (Fremantle Prison)

NDIS: National Disability Insurance Scheme Act 2013

SDG: United Nations Sustainable Development Goals

TGSIs: Tactile ground surface indicators

UAT: Unisex accessible toilet

UNESCO: United Nations Educational, Scientific and Cultural Organisation

VS: Visitor Services (Fremantle Prison)



Above: Fremantle Prison Gatehouse with administration buildings on left.



Above: View of 3 Division cell range within the Main Cell Block, Fremantle Prison.

Collaborators

This plan has greatly benefitted from the AIP reference group members who have provided their personal feedback on our service chain offering at Fremantle Prison. Organisations such as E-Qual Disability Consultants, O'Brien Harrop Access, VisAbility and (formerly) John Massey Group building surveyors have contributed extensively to auditing and guiding the specific policies and actions within this Plan.

Our internal staff working groups for physical, information, social and economic access have provided their expertise and experience to ensure the recommendations of this Plan are achievable, measurable and prioritised.



Above: Fremantle Prison Accessibility and Inclusion Reference Group. March 2023.

Other Formats

This plan is available upon request in alternative formats such as large print, easy-read, electronic format (disk or emailed) or audio.

To obtain the plan in another format please contact Fremantle Prison as per the contact details below, or email info@fremantleprison.com.au.

Feedback

Fremantle Prison welcomes feedback on the Plan or any other aspect of our services for people with disabilities, their carers or organisations who represent people with disabilities.

Feedback can be sent in writing to:

Fremantle Prison
1 The Terrace
FREMANTLE Western Australia 6160

Alternatively you can send feedback via our:

Website: fremantleprison.com.au/contact/

Email: info@fremantleprison.com.au

Phone: (08) 9336 9200



Above: View of the Main Cell Block from the Parade Ground.



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Above: Visitors with various disabilities touring the grounds of Fremantle Prison.

What is Disability, Accessibility and Inclusion?

Disability is defined by the *Disability Discrimination Act 1992* (DDA) as ‘any impairment, abnormality, or loss of function, of any part of the body or mind’, which includes:

- Immunological (the presence of organisms causing disease in the body)
- Intellectual
- Learning disability
- Neurological
- Physical
- Physical disfigurement
- Psycho-social
- Sensory.

Accessibility at the Prison is explored through four main categories:

- Physical access: Including access to areas, spaces and buildings within the Prison complex.
- Access to information and communication: Being printed, verbal, electronic and emergency services information.
- Social access: The ability to experience the cultural heritage values of the site and actively participate in events.
- Economic access: Ensuring fees are based on equality of service (with no fees for carers) or reduced/ free of charge fees if there is an unequal experience offered.

Inclusion means to respect everyone as they are, and that individuals have the right to fully take part in the life of society and specifically the services offered at the Prison.

We have identified the barriers currently in place across our service chain, and we’re working collaboratively to find solutions to these issues.

The AIP has identified:

- Areas where the site does not meet a reasonable ‘Duty of Care’ threshold.
- Specific, targeted areas where access and inclusion can be improved.
- Policies and actions to deliver a meaningful outcome for all.

Accessibility and Inclusion at Fremantle Prison has been approached from both a legal and human rights perspective, based on the social model of disability. The Prison is conscious of its duty under existing legislation and will ensure our actions keep the end user in mind at all stages of planning.

The social model sees ‘disability’ is the result of the interaction between people living with impairments and an environment filled with physical, attitudinal, communication and social barriers. It therefore carries the implication that the physical, attitudinal, communication and social environment must change to enable people living with impairments to participate in society on an equal basis with others.¹



Above: Family touring main cell block. J Wyld.

The Framework

This AIP has been aligned to the policies and requirements in the following levels of legislation:

International

- The United Nations Sustainable Development Goals (SDGs), in particular by promoting equality and opportunity for all.



- The United Nations Convention on the Rights of Persons with Disabilities (CRPD), which promotes respect, non-discrimination, participation, equality and inclusion for people with disabilities.
- United Nations Declaration on the Rights of Indigenous Peoples, ensuring a universal standard for the well-being, dignity and inclusion of indigenous peoples is acknowledged, and particularly for those with a disability.
- World Wide Web Consortium (W3C) and Web Content Accessibility Guidelines (WCAG) which outlines the accessibility standard of web content to meet the needs of everyone.

Commonwealth

- The Australian Human Rights Commission helps individuals and organisations to understand their legal responsibilities under the DDA. The act is supported by a series of Disability Standards and Guidelines.
- The *Fair Work Act 2009* describes the Prison's obligations as an employer to ensure that discrimination based on disability or temporary absence due to illness or injury, does not occur.
- The *National Disability Insurance Scheme Act 2013* provides for the consistent delivery of individualised services for people with disability. People with disability can use their funding in a variety of ways to participate in the community including to access local services, recreation or volunteering opportunities.
- The Australian Disability Strategy 2021-2031 which drives initiatives to ensure greater inclusion and participation of people with disability in all areas of Australian life including employment, housing, education, health and wellbeing.

State

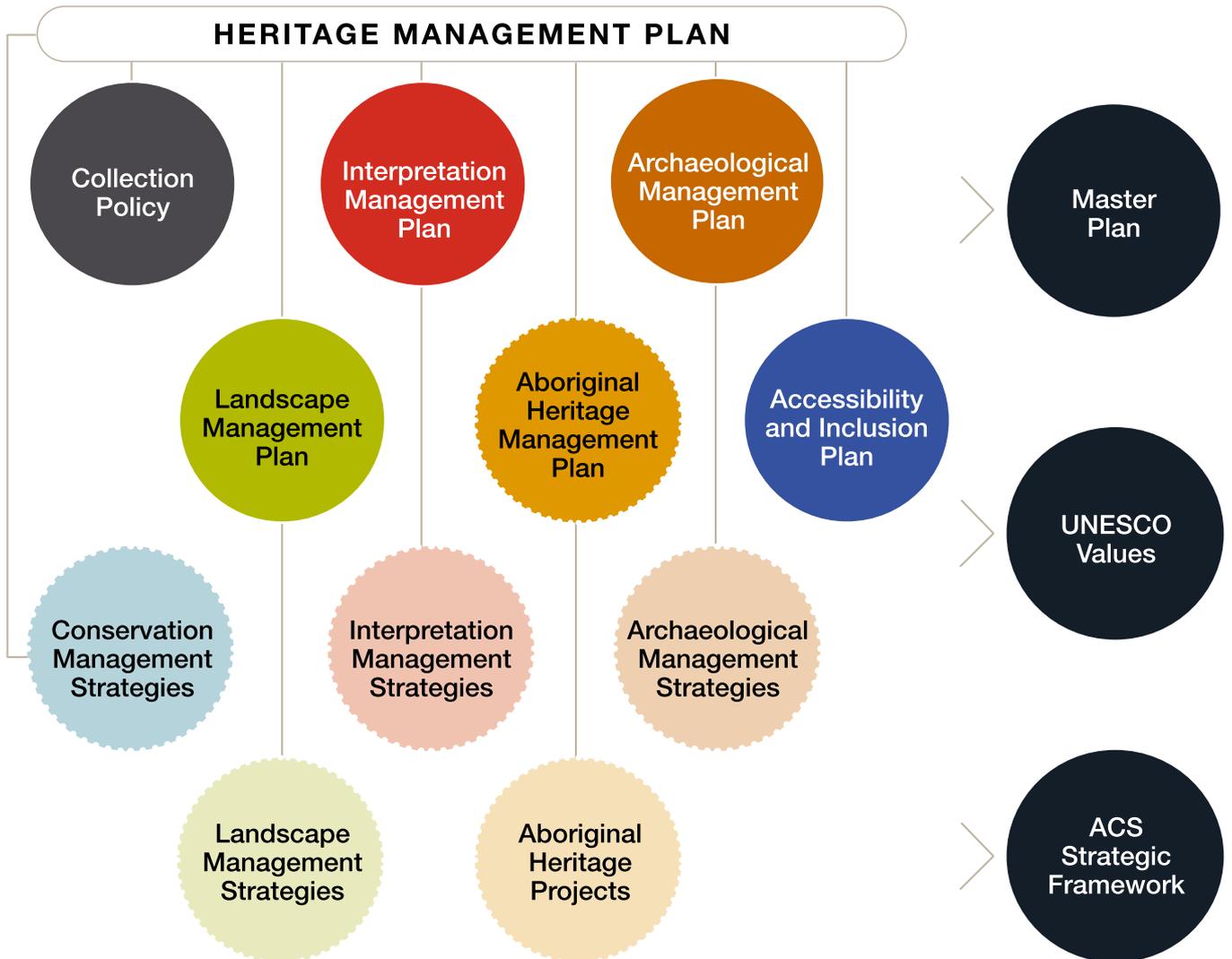
- The Equal Opportunity Commission, Western Australia, which is responsible for the administration of the *Equal Opportunity Act (WA) 1984* (EOA). The Act seeks to promote equality of opportunity and avenues for redress in respect of discrimination.
- Department of Communities, Western Australia, which is responsible for the administration of the *Disability Services Act (WA) 1993* (DSA). Among other things, the DSA requires State Government authorities to have a Disability Access and Inclusion Plan, and to report on their access initiatives in their annual report.
- State Disability Strategy 2020-2030 aims to create an inclusive community which supports and empowers people with disability. The Plan sets the foundation for building a more inclusive Western Australia, empowering people with disability to participate meaningfully in all parts of society. It is a demonstration of our state's commitment to promote equitable opportunities and outcomes across all aspects of life. Four pillars of the State Disability Strategy encompass the capability of people with disability to:
 - participate and contribute;
 - to live in inclusive communities;
 - be supported in living well; and,
 - their rights and equity.

As a site managed by a Public Authority, Fremantle Prison is required to meet the requirements outlined in the above framework, and progress State Government policy.

Fremantle Prison

The AIP is a second-tier management document for Fremantle Prison and addresses many Specific Policies and Actions outlined in the Fremantle Prison Heritage Management Plan 2019 (HMP). The HMP is the overarching guiding document for the site and is supported by the 2019-2029 Master Plan.

Where conflict exists between future use and conservation, conservation considerations outlined in the HMP will always take priority.



Above: Fremantle Prison Heritage Management Framework, 2023.
 Note: dotted icons are still in development.



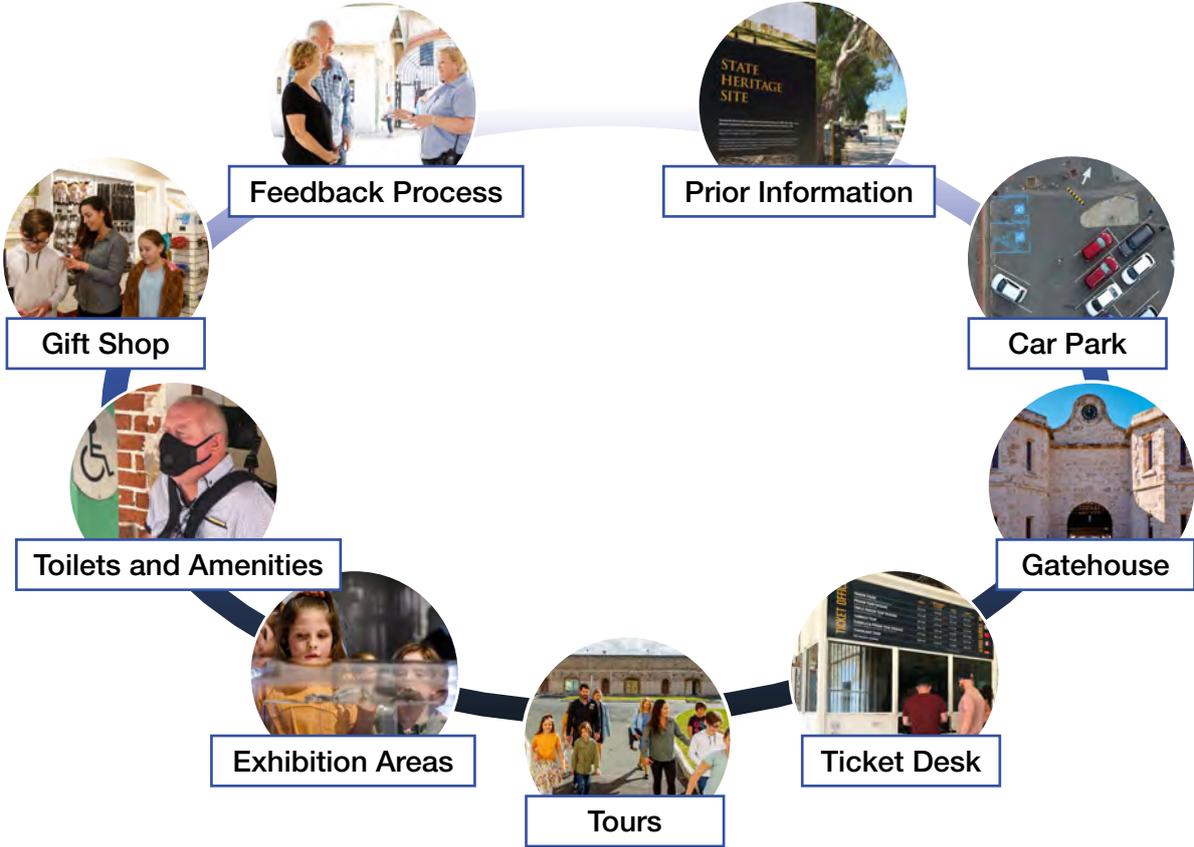
Above: Visitors with disabilities touring the grounds of Fremantle Prison.

What we have Achieved

AIP Consultation and site audit

This AIP is the first site specific action plan prepared for Fremantle Prison and will be reviewed on a five yearly basis. Since starting this journey in 2019, an audit of the entire site for performance against the Premises Standards 2010 was conducted by (formerly) John Massey Group Building Surveyors (refer Appendix I). This identified a range of non-compliance issues across the site.

In 2022, we engaged E-Qual Disability Consultants to coordinate a group of people with lived experience of disability to review the entire Service Chain at the Prison and provide us with their feedback. Below is a diagram of the Fremantle Prison Service Chain:



Above: Diagram of the Service Chain developed for the Come-In! Guidelines by Interreg Central Europe.

After this, we asked the wider community to tell us where accessibility and inclusion could be improved. An online survey was uploaded to the Department of Planning, Lands and Heritage website, and was advertised in the West Australian newspaper. At the same time we reviewed prior visitor feedback and incident forms relating to accessibility.

Fremantle Prison Accessibility and Inclusion Plan Survey 2022



Overview

Fremantle Prison is committed to welcoming all members of the community. To help us achieve this we are developing an Accessibility and Inclusion Plan.

The purpose of this survey is to get your feedback about how we can improve the accessibility and inclusiveness of our tours, events, buildings, information, feedback and complaints processes, and employment and volunteering opportunities, for people with disability. We will use your feedback to develop the Plan.

The survey is being conducted by an independent organisation, E-QUAL Disability Consultants. If you can't answer all of the questions please focus on the ones that are important to you. All survey responses will remain confidential. We respect your privacy and will not disclose or publish your personal information.

If you would prefer this survey in an alternative format or to speak to someone please contact Leanda Syme from E-QUAL on 9389 9930 or leanda@e-qual.net

Above: Extract of community consultation online survey from the DPLH [website](#). The survey was also made available in alternative formats and responses could be discussed verbally with E-Qual Disability Consultants.

Once we had collated all of this feedback, we asked staff based on their experience and expertise to join one of four access groups (physical, information and communication, social and economic). The groups then provided comment on the feedback obtained relevant to a particular type of access.

AIP Reference Group

We then formed an AIP reference group who continue to provide us with guidance and feedback as we undertake the policies and actions which have come from the consultation process. The reference group have also helped to guide and ratify this AIP.

Website audit

During this time, we commissioned VisAbility to audit our website against the W3C guidelines to highlight areas where improvement was required.

History of Disability

We have also had a historian prepare the ‘Disability Narrative’ of Fremantle Prison. This research paper documents how the concept of disability has evolved at the Prison from the mid-1800s to the closure of the Prison in 1991.



Above: Kaide Stratton, Telethon child 2018 visiting with his school group.

Case Studies

Beyond the preparation of the AIP, the following information provides a snapshot of some of the accessibility infrastructure we've installed during the consultation process. Two such projects are: the Commissariat (2021-2022) and the Main Cell Block (2022).

1. Commissariat Project

- Installation of a new lift and access bridge allowing universal access to the basement rooms (Commissariat) of the Main Cell Block for the first time in the site's history.
- Installation of a new assisted hearing loop system.
- Raising ground levels and lowering door thresholds to reduce tripping hazards and provide ease of access for those using mobility devices.



Above (clockwise top left): New lift in Commissariat; (top right) statutory signage showing the location of the hearing loop system; and (right) footpath around the Commissariat yards entering the inside rooms now at the same level, Fremantle Prison 2023.

2. Main Cell Block Project

- Widening of the doorways within the Section 43 cell, allowing visitors using mobility devices to remain with the main group whilst on tours.
- Removal of tripping hazards and lowering threshold heights upon entering the Division Yards from the Main Cell Block.



Above: Widened doorway in Section 43 cell, Fremantle Prison 2023.



Above: Cement screed at the entrance to the Division Yard to remove a threshold hazard, Fremantle Prison 2023.

History of Disability at Fremantle Prison

A shortened version of the Disability Narrative is provided below. This narrative describes how concepts of access, segregation, stigmatism and reform have evolved over time within the Prison. To read the full version, please refer to Appendix II.

Introduction

Research has so far revealed that during the time the Prison operated from 1854 to 1991, there was no written policy or instructions on how to manage prisoners with disabilities. Likewise, there appears to be no legal obligation to provide access or services for inmates or staff with disabilities.

Fremantle Prison was built between 1852 and 1859 to house transported convicts using the convicts themselves for the arduous work of construction. By the time transportation ceased in 1868, nearly 10,000 convicts had passed through its walls. Within the prison system, 'servile labour' was intended to foster 'industrious habits'.² And yet prison life itself 'disabled' the prisoners in a physical sense; through solitary confinement, lack of substantial diet, and crippling corporal punishment. These same punishments and practices also impacted prisoners' mental health. Prison Medical Officers were in a difficult position of conflicting responsibilities. On the one hand, the Prison required inmates to suffer as punishment for their crimes. Prison doctors, for example, were called on to determine the maximum physical stress a prisoner could be subject to as part of prison labour programs, which were intentionally punitive. However, physicians were also responsible for rehabilitating and healing their patients, which would benefit from improved conditions and prisoner wellbeing.³

In the first years of Fremantle Prison, Doctor George Attfield arrived from England in 1854 to take up the position of colonial surgeon to the Convict Establishment. Attfield's approach was, in policy if not in practice, to exempt unwell or disabled convicts from work and excuse the mentally or physically ill from solitary confinement and flogging. His recommendations were often, but not always, followed. Through the 1860s, up to 75% of convicts were located away from Fremantle at convict depots or work camps. The Prison was used for those not yet trusted for remote work or as punishment for reoffenders.

Temporary disability due to illness was a constant presence in prison life. However, there was also an inclination to view prisoners' accounts of their ailments as attempts to avoid work duties or untruths due to an innate criminal disposition to lie. In Fremantle during the convict period, convicts were debarred from getting redress for wrongs, however grievous, by a rule which stated that any complaint made to a visiting justice or other authority, 'if either frivolous or groundless', would lead to severe punishment. The prisoner could be 'assaulted, handcuffed, ironed, starved, and confined in dark dungeons without redress'.⁴ The Prison's Medical Officer wielded considerable power over all matters to do with health.

It was in the interest of the prison officials to keep the convicts fit and well so that they could perform the tasks for which they had been sent to Western Australia and thus for 'the smooth implementation of the ideology behind the establishment of Fremantle as a public works prison'.⁵ However, a lack of written guidelines or policy meant that not all inmates who needed help for their condition were sent where they could receive proper medical treatment. This was the most salient failing of the system.

Disability was considered a medical matter rather than a social policy concern until the 1970s. The medical model conceived individuals with disabilities as abnormal. Pity, care and charitable handouts were considered as appropriate responses. This 'deficit model' assumed people with disabilities needed to change to be included and, if they could not, they could legitimately be excluded. They were generally marginalised and ostracised from mainstream society. From the 1970s, it was increasingly accepted that all persons had a human right to enjoy the same opportunities for a full life regardless of their level of actual or perceived ability. Limitations on opportunities were understood to result from social constructs and assumptions rather than the actual impairment of any individual. Thus, existing environments, both physical and social, are seen to place barriers in the way of full participation by disabled individuals. The way forward, therefore, is through restructuring society to be inclusive of all abilities. The 1981 United Nations International Year of Disabled Persons was an important turning point in attitudes, policies and legislation relating to disability. It was followed by the Decade for Disabled Persons (1982-1993) which consolidated many of the initiatives sparked during 1981, including urging the development of legislation around the world to protect the rights of persons with disabilities.⁶

Broad antidiscrimination provisions commenced in Western Australia with the *Equal Opportunities Act (1984)*. However, this legislation did not include disability as grounds for unlawful discrimination until it was amended in 1988 to include 'impairment of body or brain'. Further protections against discrimination, including proactive requirements to prevent against indirect discrimination, were enacted with the *Commonwealth Disability Discrimination Act (1992)*.⁷ This was followed in Western Australia by the *Western Australian Disability Services Act (1993)* which required that all Western Australian Government departments develop Disability Access and Inclusion Plans. However, by this time, Fremantle Prison had ceased operations.

The *Disability Discrimination Act (1992)* allows exemptions to the provision of fully accessible services where a premises was ‘so designed or constructed as to be inaccessible to a person with a disability’ and alterations to rectify this deficiency would ‘impose unjustifiable hardship’ on the agency responsible for access.⁸ Fremantle Prison is clearly a physical space not designed for accessibility. The threshold for ‘unjustifiable hardship’ is undefined in the legislation, which in any case dates from soon after the Prison closed.

For the purposes of this historical examination, and in the absence of almost any extent data relating to prisoners with physical disability, the notion of ‘disability’ will be broken into two segments. Firstly, physical disability due to illness or punishment and secondly, addiction. This report will also consider legislative changes pertinent to the subject of physical disability and penological reform. As the subject is of such current significance and is of such substantial historical import and due to the constraints of time and accessibility to historical documents, mental health and illness and juvenile prisoners is out of scope of this report.



Above: Visitor looking at reproduction of dietary scale.

Physical disability due to illness or punishment

Illness, general health and diet

Analysis of convict deaths from 1850 to 1877 found 802 convict deaths, including 164 at Fremantle Prison. The leading cause of death was respiratory tuberculosis (29%). Other fatal ailments of significant number were non-tubercular respiratory conditions (14%), digestive system diseases (9%) diarrhoea and dysentery (9%), circulatory system conditions (8%) and fevers (7%). While rates of most of these declined across the period, particularly after the Prison opened in 1855, deaths from diarrhoea, dysentery and digestive diseases all increased between 1857 and 1877. This likely resulted from contaminated water or the proximity of privies to the cookhouse at the Prison. Respiratory causes of death, including tuberculosis, increased in the initial years at the Prison, probably due to overcrowding in the unfinished complex coupled with dietary changes that significantly reduced calorie intake. However, with the exception of a spike in the mid-1860s, fatal respiratory illness mostly declined through the 1860s and 1870s as sanitary conditions improved and ward accommodation ceased. In the 1870s, liver disease emerged as a factor in prisoner deaths, particularly reconvicted prisoners who had spent time outside the Prison, probably due to the prevalence of alcohol in the community and particularly its use as a work incentive for labourers.⁹ Tuberculosis was considered ‘the most significant killer of convicts in Western Australia’.¹⁰

Convicts received different rations depending on their status within the prison system. In some periods there were more than 1000 calories per day difference between the most meagre diets (reconvicted prisoners) and the most generous (workers in heavy labour). In 1898, following a series of serious complaints by prisoners, a Royal Commission of Inquiry into the Penal System of the Colony was appointed by Premier John Forrest. Megahey writes that the Commission “took the unusual step of inviting any prisoner who so wished to give evidence”, whether they wished to give evidence on personal grounds of complaint or to make suggestions for the general welfare of all prisoners. 171 prisoners gave evidence.¹¹ The Commission closely examined the diet of the prisoners, as evidence about food came from “almost every witness”.¹²

Non-fatal illness was common; dysentery and scurvy were a constant presence. Eye diseases such as ophthalmia and nyctalopia were so common among convicts that an ophthalmia ward was added to the Prison hospital.¹³ Ophthalmia was used generically in the nineteenth century to refer to a wide range of conditions causing eye inflammation. Dry winds and exposure to sun glare were believed to contribute, but an analysis of hospital records indicates eye complaints were most common in winter, suggesting vitamin A deficiency may have been a more significant cause, which is certainly attributed to diet and most likely due to the inadequacy of winter crops.¹⁴ Exposure to the sun also caused skin ailments. In 1857, Doctor Attfield wrote in the Medical Journal that he had ‘inspected the men on parade this morning, several of them affected with desquamation of the cuticle on the face evidently from the effects of the sun as it was limited to the parts exposed to its influence. There were also many prisoners with eyes, nose or lips affected by the glare of sand’.¹⁵ Where they could, prison doctors tended to protect the more severe cases by keeping them from outdoor labour, giving them work within the Prison instead.

Servile labour and Hard Labour

Convicts arriving in Western Australia had already served at least nine months in separate confinement in England, mostly at Pentonville, the 1842 London prison designed as the model for separate imprisonment. After serving the 'separate' term, prisoners moved to a public works prison before being selected for transportation.¹⁶ The Comptroller-General of Convicts, E.Y.W. Henderson, acknowledged in 1861 that convicts frequently arrived in 'a very deteriorated condition', particularly those from Ireland.

Private employers were able to secure more of the able-bodied convicts, leaving the Convict Establishment to house and occupy those 'unfitting instruments' with 'physical or other incapacity for anything like constant or laborious work', largely 'small boys and sickly or infirm men'. This included men with their ticket-of-leave who, unable to secure employment, remained as prisoners.¹⁷ As the labour of convicts was a major reason for the entire Convict Establishment, it might be expected that overseers would prioritise maintaining a physically able workforce and as such aim to uphold convict health. However, the parallel agenda of punishing convicts for their crimes undermined this consideration, leading to coercive labour systems and 'deliberately gruelling' work that reduced health outcomes for prisoners.¹⁸

Convicts were often set to dangerous work, resulting in injuries. Quarrying, blasting and timber-felling were particularly prone to accidents. The years prior to the Prison opening had the highest rates of accidents and injuries for convicts. This period included extensive use of convict labour in blasting and quarrying stone, acknowledged at the time as particularly dangerous work. It was made more dangerous for men whose movement was inhibited by wearing leg irons. Cullity writes that leg irons, apart from their use outside the Prison to prevent escapes, 'were worn by convicts undergoing punishment for 24 hours a day, sometimes for months on end, causing great pain and discomfort for the prisoner'.¹⁹ Additionally, punishment weights were used, weighing 25 kilograms or about 7.5 kilograms, these, writes Cullity, 'would have been secured to a convict using a leather belt'.²⁰

The use of shackles as punishment was a source of disagreement amongst the management of the Establishment.²¹ Cullity cites Lieutenant Wray "I am of the opinion that the punishment of irons is in no way beneficial on its effects on the prisoners".²² She continues that 'The [negative] effect of leg irons on prisoners' health and well-being was acknowledged by the supervisors and doctors alike'. She cites, for example, the medical doctor's description of one prisoner; 'the skin over both hipbones and in the groins is black and blue in consequence of the weight of the irons bearing on the strap around his loins, it appears to me (medically) that he cannot carry 28lbs [12.7kg] irons and be employed at the pump without physical injury'.²³ Cullity also writes that 'the number of objections to the consequence of using heavy irons prompted the authorities to fit the convicts with ankle protectors, used as a buffer between the men's ankle and the leg-irons to minimise damage'.²⁴

Solitary confinement

Punishment such as solitary confinement also had a significant impact on prisoners' physical health. Marshall writes that 'the bread and water ration enforced in the cells may also have increased susceptibility to disease'.²⁵ An 1858 Prison Medical Journal supports this view, exemplified in just one of Doctor Attfield's many notations on this subject:

I this day inspected all the probation and hard labour prisoners on parade, their appearance and general state of health was highly satisfactory. I then visited the solitary cells, these prisoners (the solitary) are decidedly more pale and have a very dejected air and this, I think, depends more on the deprivation of light and air coupled with the great uncertainty about the duration of their sentence than upon the scale of diet which is 4 oz of uncooked meat, 6 oz bread and 4 oz of potatoes less than for the probation prisoner.²⁶

Marshall quotes convict James Roe as describing those emerging from the Fremantle refractory block as 'famine-stricken'.²⁷

Governor Hampton's period (1862-1867) oversaw extreme punishments including separate confinement for longer than the legally permitted nine months and the use of dark cells. Doctor Attfield repeatedly drew attention to the physical effects of solitary confinement on the prisoners.

In a petition written by the convicts themselves, the prisoners noted that under Hampton's Governorship, although 'an act of parliament restricted imprisonment in dark cells, on bread and water, to seven consecutive or twenty-eight alternate days, during which time there is at least one hour per diem allowed for exercise, the usual custom at Fremantle is twenty-eight consecutive days and has been carried as far as 30, 40 and 50, without light, air or exercise'.²⁸ Cullity writes that according to Henderson's 'General Rules for Prisoners', Rule Seven identified that punishments would be established by the Superintendent and might include being confined to a 'dark or light cell' while being fed on bread and water (only or both) for a maximum of seven days. Separate confinement of up to 28 days could be ordered by the Superintendent, and a longer sentence determined by the Magistrate.

Solitary confinement continued as long as the Prison was operating. Marshall writes that 'scholars have found that the mental and physiological impacts of solitary confinement on prisoners have remained relatively consistent over the last 200 years. It increases the likelihood of suicidal impulses and can induce a 'panic state' in prisoners. Social segregation, sensory deprivation and physical restrictions can lead to "a feeling of abandonment, a back to the wall, dead-end desperation, an intolerable emptiness, helplessness and psychological distress".²⁹



Above: Fremantle Prison ramp artwork.

Corporal Punishment

A ‘return of corporal punishments’ was prepared in 1862 in response to the prisoners’ complaints about their treatment. The return records the frequency and extent of flogging as a punishment. One example shows Prisoner ‘2354 Thomas Maughan given 36 lashes for attempting to abscond from the Convict Establishment on 16 February, 1859; 100 lashes for Absconding from Public Works on 18 August, 1859 and again 50 lashes on 10 October, 1864 for Absconding from North Fremantle’.³⁰

Certainly, flogging was unpopular among Fremantle’s local residents, which found voice in the local papers of the day. In 1897 one newspaper reported that a prisoner had been awarded ‘thirty-six lashes and a month’s confinement in irons for escaping’ yet for the people in the vicinity when the flogging was being carried out, described ‘the screams which emanated from inside the prison walls as the most fearful and unearthly they ever heard during their lives’.³¹

Physical injury resulting from flogging could render a man useless for physical work. Cullity describes the ‘leather belt with broad arrows stamped on, [which] may have been a kidney belt used to protect vital organs during the damaging process of being flogged with the cat’o’nine tails’. She asks whether this protection was to protect the ‘resource’ of the working convict or for more humanitarian concerns.³² Similarly, Marshall suggests that ‘as convict labour was a prime function of the Prison, it is possible economic rather than humane motivations led away from flogging as a regular punishment’.³³ Cullity writes that ‘the experience of incarceration at Fremantle was shaped successively by the often competing agendas of reform and punishment’.³⁴ However, the Western Australian Commission into the Penal System in 1899 recommended the abolition of flogging for all prison offences.



Above: Convict Depot exhibition.

Addiction

In March, 1905, when William George, Superintendent of Fremantle Prison, was asked to provide comment on the classification of prisoners and the possible 'contamination' of the younger or more innocent female prisoners, he responded with dispassionate candour:

I am afraid that there is no classification required among the female prisoners, as it is quite an exception that any other than prostitutes and habitual drunkards, who are also nearly all prostitutes, are received. ³⁵

The female inebriate posed a particular dilemma for society. Degenerate theories of the late nineteenth century identified heavy drinking as 'part vice, part disease'.³⁶ However there was as yet still no inebriate's home or institution to which to send female inebriates. Thus, they were locked inside Fremantle Prison and branded criminals.

By 1914, the Superintendent of Fremantle Prison, Hugh Hann had been working for some time with the Preventative Detention Committee and the Prison Gate Committee, pressing for the reform for female prisoners, and most especially for the establishment of a Female Inebriates Home. Over the next few years, Prison documents clearly show that the method of sentencing inebriates to prison had 'no tendency to reformation, either as a deterrent or otherwise'.³⁷ The Comptroller General, Frederic North and the Colonial Secretary, J. M. Drew, both active prisoner reformers, agreed, believing that the establishment of a female inebriate home will act as 'both a deterrent and as a Reformatory and Curative' they strongly urged for such a scheme to be established. No such establishment was ever permanently secured, ensuring that young girls and women remained in Fremantle Prison.

Similarly, by 1898 the majority of male prisoners in Fremantle Prison were those who had been charged with minor offences such as petty larceny, vagrancy and, most especially, drunkenness.³⁸ Following the investigation of a Select Committee, the committee reported that 'Lunatics, imbeciles, drunkards, vagrants (meaning thereby homeless wanderers and not necessarily criminal characters), diseased persons, should all be treated in institutions especially adapted to them, not in gaol'.³⁹

However, whilst many prisons and other authorities argued that the place for prisoners whose only 'crime' was inebriation and the petty crimes that were often associated with it, many years passed before a growing sense of justice was converted to law. In 1905, the Acting Superintendent of Fremantle Prison, Francis Townsend, recognised this, calling for the establishment of a home for inebriates which would, he thought, 'materially reduce the number of inmates of this prison' and pointing out that 'the victims of the drink habit are not only those convicted and sent here as drunks, but are largely to be found among the vagrants, the disorderly and the petty thieves'.⁴⁰

In December 1912, the Legislature of Western Australia passed the *Inebriates Act, 1912* in order to stem this problem. According to the Act, an inebriate was defined as anyone who 'habitually uses intoxicating liquor or intoxicating or narcotic drugs to excess'.⁴¹ Yet it took over two years to establish the kind of 'inebriates home' for which the Act came into being. Whitby Falls hospital (previously known as Whitby Falls Insane Asylum) was finally opened as an inebriate's home in early 1915. As the Act allowed for the detention and treatment of alcoholics in a 'home' for up to 12 months, at Whitby Falls, it was intended for the inmates to remain for long enough to cure their addiction to alcohol. In 1920, Whitby Falls had closed and Fremantle Prison continued to hold prisoners sent there for minor offences such as drunkenness, idle and disorderly, and disorderly conduct.

In 1963 the *Convicted Inebriates Rehabilitation Act* was introduced.⁴² The main feature of this legislation was the establishment of an advisory board which was to be given the task of overseeing, advising on and assisting in the clinical treatment and the rehabilitation of, what were termed convicted inebriates. The Act allowed the court, under certain conditions, to place inebriates in an institution specially set aside for them. The Advisory Board, could amongst other things, recommend variation of the sentence. The people dealt with under the Act were sent to Karnet, the new establishment in the Serpentine district opened on 29 March, 1963 which catered for sixty patients.⁴³

Megahey writes that 'the social revolution of the 1960s and 1970s impacted on Fremantle Prison in a number of ways, illicit drugs and alcoholic home-brews took their place alongside tobacco as jail currency'.⁴⁴ He continues, that during the 1970s and 1980s 'the use of drugs by inmates became widespread, including the use of heroin and hash and cannabis, glue and paint thinner from the workshops.' He writes that 'by the mid 1980s the Prisons Department had enlisted the assistance of the C.I.B. and the Customs Service in its effort to control the problem. In a Memorandum to his deputy-Directors in August, 1985 Ian Hill, the Director of the Department of Corrections, expressed his concern about the "small but steady rise in the number of prisoners committed for Drug offences and the increase in prison offences relating to drugs'.⁴⁵

There were, of course attempts to address the balance the negative impact of prison life. A memorandum in 1978 declared:

When a person is imprisoned he is deprived of his liberty and consequently this Department has to assume certain legal and moral responsibilities for his welfare. Therefore, the Department has actively encouraged to participate in recreational activities, believing that recreation improves the inmates' physical and mental health, fosters the specific ability to play specialised roles in an appropriate manner, provides socialising experiences by transmitting the presumed goals and values of society and also encourages character building activities.⁴⁶

From the 1980s, efforts were focussed on keeping people out of gaol. Thomas and Stewart observed that the problem of alcoholism was, and is, 'a matter which needs more imaginative treatment than crude imprisonment'.⁴⁷ Certainly, the opening of Karnet in Serpentine was intended as an 'institution' rather than a prison, with a view to reforming inmates. In 1971, another institution, Byford, was established for alcoholics.

A policy research paper in 1982, revealed that 'the most dramatic decline over the period has been drunkenness, which twenty years ago, accounted for one-third of all commitments. The dramatic fall in commitments for drunkenness after 1974 seems to reflect what appears to have been a conscious though informal decision on the part of many of the Judiciary to employ sanctions other than imprisonment'.⁴⁸

Recommendations

The History of Disability report has three recommendations. Two recommendations are to pursue research in areas of mental health and juvenile prisoners. The third recommendation relates to records access.

Regarding mental health, since the opening of Fremantle Prison, there has been ongoing dispute about how to manage people with mental illnesses within the criminal justice system. Current research shows that 'given to critical incidents involving mentally disturbed people might lead the public to believe that a high proportion of people with mental illness commit crimes, but this is not the case. Nevertheless, people with mental illness comprise a disproportionate number of the people who are arrested, who come before the courts and who are imprisoned'.⁴⁹

The Criminal Law (Mental Impairment) Bill 2022 was introduced to significantly improve the treatment and management of people with mental impairment in prisons. Initial research shows that this 2022 Bill reflects one hundred and seventy years of debate within Western Australian's prison system, by the various authorities who safeguarded Fremantle Prison inmates.

By the 1860s the Prison Surgeon, Doctor Attfield, found he was treating so many convict 'lunatics', that a dedicated Fremantle Asylum had become essential. Yet, prisoners with mental health issues continued to be sent direct to the Prison, to be kept under observation until it was proved that they could be sent to the Asylum. This was despite both the Colonial and Prison authorities view of the 'unjustifiable and illegal practice of sending to Gaol persons supposed to be of unsound mind'.⁵⁰ It was recognised that intrinsic elements of prison life, such as punitive discipline, separate confinement, overcrowding, poor diet or harsh conditions, had a detrimental impact on mentally unstable prisoners. Yet into the twentieth and then twenty-first century, the detainment and imprisonment of people with mental illness continued.

Until the closing of Fremantle Prison in 1991, it was estimated that a significant proportion, of the prison population suffered from emotional or mental disorders requiring psychiatric care.⁵¹

It is an existing and urgent concern that prisoners' rights to mental care are increasingly recognised. Given its role as an interpretive institution and a World Heritage Site, further research to examine how this important issue has been managed, historically, in Fremantle Prison is highly recommended.

Regarding Juvenile Prisoners, through the nineteenth century, English prisons were increasingly viewed as negative influences on young prisoners, who were in danger of being morally corrupted by adult inmates; separation of juveniles from adult prisoners was necessary to prevent the former's contamination by the older, more experience or 'hardened', inmates. The general acceptance was that young offenders could be served through appropriate moral guidance, rehabilitative care and disciplinary oversight. As a result of these views, juvenile detention institutions were established, including industrial and reformatory schools. Yet in Western Australia, these facilities, for various reasons, neglected to be established by Colonial and later, State, authorities.

The confining of children in adult prisons continues to this day and is an issue of significant importance and continued debate in the State of Western Australia.

Initial research shows that Fremantle Prison's attempts to address this issue began almost with the opening of the Prison and continued until its closing. Both female and male children have been exposed to the worst of the human condition; their experience and the way modes and methods which placed them there, their treatment once there and the debate over the social injustice of having youthful offenders within the Fremantle Prison system is an area which justifies much further and deeper inquiry. Given its role as an interpretive institution and a World Heritage Site, further research to examine how this important issue has been managed, historically, in Fremantle Prison is highly recommended.

Regarding access to records, proper historical enquiry cannot be conducted without access to a thorough historical archive.

The undertaking of research into this inquiry (Accessibility and Inclusion Plan – Physical Disability) has been hampered by the restrictive practices of access to the historical records in the keeping of the Department of Justice. Whilst no longer a part of the Department of Corrections, the interpretation of Fremantle Prison relies so heavily on access to that department's records, some better relationship between the two agencies would be of inestimable benefit. The protection of the rights and privacy of past inmates and staff of Fremantle Prison is both logical and essential. Yet perhaps a new policy and set of criteria that would allow researchers under the charge of Fremantle Prison's Heritage Conservation team, to have supervised access to the Department of Justice's records, could be developed.

Further discussion on this subject is highly recommended so that more thorough, comprehensive research can be undertaken, for the betterment of the public.



Above: Tour group viewing the visible storage collection at Fremantle Prison.



Above: Tour group and guide inside Main Cell Block.

Comparative Analysis

An extensive search of comparative historic sites from around the world was undertaken to benchmark options for improving accessibility and inclusion at the Prison.

There are several guiding principles recommended in the ‘Come-In! Guidelines’ produced by Interreg Central Europe. These principals form the basis of the comparative analysis, and include:

- Disabled people have a right to be included in all activities on site
- Engage in dialogue with people with disabilities to find out what they need and wish, and how to deliver it
- Adopt the ‘Social model’ when discussing disability issues
- Identify and dismantle access barriers
- Adopt universal design principals
- Provide sustainable and supported recommendations

Some of the sites and organisations which were analysed include, but are not limited to, the following:

- Alcatraz East, Tennessee, USA
- Boola Bardip
- British Museum
- City of Mandurah
- Curtin University
- Crown Resorts
- Rijksmuseum
- Edinburgh Castle
- FringeWorld
- Smithsonian National Museum of Natural History
- Sydney Opera House
- The National Trust UK
- The National Trust of Western Australia
- Museum of London
- Museum Victoria
- Metropolitan Museum of Art
- The Museum of Modern Art
- Reading Museum
- Acropolis Monuments, Greece
- University of Notre Dame.

From benchmarking our site and studying best-practice at other cultural centres, a number of policies and actions have been prepared to assist the Prison. These are listed in the Policies and Actions section of this AIP. To read the full Comparative Analysis report, please refer to Appendix III.

As a result of this comparative analysis study, a Materials Palette for accessible infrastructure has been prepared in collaboration with our consultant team and the AIP Reference Group. The aim of this document is to ensure accessible infrastructure is easily identifiable, consistent and functional for the end user. Additionally, this fabric is obviously different to that of the surrounding heritage buildings in keeping with best practice heritage conservation principles. To read the full Materials Palette, please refer to Appendix IV.



Above: Concert being held in the Prison's Parade Ground.



Policies and Action Plan

As a publicly accessible site, we welcome everyone to the Prison. Our goal is to provide barrier-free access and make the buildings and experiences on site accessible to all.

The Policies and Actions of this plan focus on improvements in the Fremantle Prison Service Chain and provides recommendation for developing a specific language guideline and training opportunities for staff.

The components of the Fremantle Prison Service Chain have been cross checked against the four pillars of accessibility (physical, information and communication, social and economic access). The wider community, staff and the AIP reference group have provided their thoughts on what is required in these four areas. The feedback has then been prioritised into high, medium and long-term actions.

To access the full consultation feedback report, please refer to Appendix V, and to read more on specific prioritised physical access actions, please refer to the Access Management Strategy – Prioritised Task List, Appendix VI.

Table showing High Priority Policies (to be actioned within 2 years).

Policy	Action	Resources Required
<p>Policy 1: Accessible infrastructure such as ramps, steps, nosings, balustrades, handrails, surface indicators, etc. should present consistently around the site to be easily identifiable.</p>	<p>Action 1: Prepare a Materials Palette for accessible infrastructure to be installed around the Prison to ensure consistency, quality and functionality of design.</p>	<p>Architect required.</p>
<p>Policy 2: Provide visitors with clear information prior to, and during, their visit so they can plan their trip accordingly.</p>	<p>Action 2: Provide maps locating accessible toilets and routes.</p> <p>Action 3: Include closed captions in video productions.</p> <p>Action 4: Review the accessibility of our website and ensure compliance with Web Content Accessibility Guidelines Level AA.</p> <p>Action 5: Ensure all publications are available in large print and other formats on request.</p> <p>Action 6: Provide ‘Getting to the Prison’, quiet time, lighting levels, temperature, and parking information on website.</p> <p>Action 7: Provide a link to Transperth outage information.</p>	<p>VS required.</p> <p>Interpretation required.</p> <p>VS required.</p> <p>HCT required.</p> <p>VS required.</p> <p>VS required.</p>
<p>Policy 3: Ensure our accessibility policies are made clear to everyone.</p>	<p>Action 8: Update procurement guidelines to ensure accessible products and services are included in evaluation criteria. Consider use of Australian Disability Enterprise Procurement Guidelines.</p> <p>Action 9: Provide disability awareness training for staff and volunteers.</p> <p>Action 10: Provide support and flexibility to staff and volunteers with disability.</p>	<p>HCT required.</p> <p>HCT and VS required.</p> <p>HCT and VS required.</p>

Policy	Action	Resources Required
<p>Policy 4: People with disability have a right to be included in all our experiences.</p>	<p>Action 11: Use technology and sensory experiences to explore the site and Collection objects.</p>	Interpretation Curatorial required.
	<p>Action 12: Make access and inclusion part of tours and events planning.</p>	VS required.
	<p>Action 13: Include additional tours such as Auslan, people living with dementia, experiencing objects with other senses, and sensory friendly evening tours.</p>	VS required.
	<p>Action 14: Provide a mechanism for people to identify to Prison staff if they have a disability prior to arrival.</p>	VS required.
	<p>Action 15: Produce sensory maps.</p>	Interpretation required.
	<p>Action 16: Allow guide, assistance and companion animals on site as long as identification is provided. Be specific with what types of identification are accepted.</p>	VS required.
	<p>Action 17: Ensure the nearest toilet facility information is provided online.</p>	VS required.
<p>Policy 5: Continue to engage with the AIP reference group and the wider community to deliver the AIP actions.</p>	<p>Action 18: Strengthen connections with people with disability and organisations that support people with disability.</p>	HCT and VS required.
	<p>Action 19: Ensure all consultation processes are accessible.</p>	HCT and VS required.
	<p>Action 20: Develop connections with organisations that support people with disability in employment.</p>	HCT and VS required.
	<p>Action 21: Have a dedicated email address and phone number to access specific enquiries and complaints.</p>	VS required.
	<p>Action 22: Provide a low stimulus room for visitors to use, with comfortable seating and low lighting.</p>	HCT and VS required.

Policy	Action	Resources Required
<p>Policy 6: Adopt the ‘social model’ when discussing accessibility matters.</p>	<p>Action 23: Include the requirement for consultants and contractors to recognise the AIP in site induction or tender information.</p>	HCT required.
	<p>Action 24: Review the feedback process and ensure ease of use and the ability for complaints to be made in a variety of ways. Continue to identify means of improvement.</p>	VS required.
<p>Policy 7: Continue to identify and dismantle access barriers.</p>	<p>Action 25: Participate and celebrate International Day of Persons with Disability (03/12).</p>	VS required.
	<p>Action 26: Ensure meeting processes are accessible, including venues and information.</p>	HCT and VS required.
	<p>Action 27: Provide information on currently inaccessible content/ physical areas on the website.</p>	VS required.
	<p>Action 28: Design and implement a ‘planning your visit’ website page in easy-read format with explanatory graphics.</p>	VS required.
	<p>Action 29: Provide specific information tailored to disability i.e. information for visitors who are Deaf or Hard of Hearing, or information for visitors who are Blind or Vision Impaired.</p>	VS required.
<p>Policy 8: Adopt universal design principals with respect to the heritage fabric of the site.</p>	<p>Action 30: Pursue funding options and design of a Changing Places Facility.</p>	HCT required.
	<p>Action 31: Provide information on the nearest available Changing Places Facility where one isn’t provided at the Prison.</p>	VS required.
	<p>Action 32: Inform visitors of seating information prior to arrival and offer seating options such as lightweight folding stools/ wheelchairs free of charge.</p>	VS required.

Policy	Action	Resources Required
<p>Policy 9: Ensure the policies and actions of this AIP are sustainable and supportable.</p>	<p>Action 33: Continue to monitor for funding opportunities to deliver the actions of the AIP.</p>	HCT required.
	<p>Action 34: Incorporate access upgrade works into building works projects.</p>	Architect required.
	<p>Action 35: Promote the AIP to highlight our commitment.</p>	HCT and VS required.
	<p>Action 36: Prepare an indicative cost estimate according to low, medium and high priority works.</p>	Architect required.
<p>Policy 10: Provide accessible footpaths and roadways.</p>	<p>Action 37: Consolidate the hardstand around garden beds and tour routes within the Parade Ground.</p>	Architect and Contractor required.
<p>Policy 11: Make staircases safer.</p>	<p>Action 38: Install handrails, TGSIs and nosings to all publicly accessible stairs and tour pathways.</p>	Architect and Contractor required.
<p>Policy 12: Remove thresholds and tripping hazards.</p>	<p>Action 39: Replace any ramp at a doorway that has a level change of 190mm or less, with one that has a gradient no steeper than 1:10.</p>	Architect and Contractor required.
	<p>Action 40: Replace any ramp at a doorway that has a level change of 190mm or greater, with one that has a gradient no steeper than 1:14.</p>	Architect and Contractor required.
	<p>Action 41: Install handrails and kerb rails to both sides of all pedestrian ramps.</p>	Architect and Contractor required.
	<p>Action 42: If mats are required, ensure they're secured, and have a beveled edge.</p>	Maintenance required.
	<p>Action 43: Do not use mats to transition between lips or gaps on the ground.</p>	Maintenance required.

Policy	Action	Resources Required
<p>Policy 12 cont'd: Remove thresholds and tripping hazards.</p>	<p>Action 45: If doorways along main tour routes are less than 850mm wide, consider the following options:</p> <ul style="list-style-type: none"> • Install an off-set or parliament hinge. • Remove the door leaf. • Remove the door leaf and frame. • If access cannot be achieved through a doorway for heritage reasons, consider an alternate route to the same destination. <p>Action 44: Install a timber rod (or similar) into deep sliding door/gate runners to fill the gap and provide a traversable surface without any gaps. Where the door is to be opened/closed, a member of staff should place the trim into the gap once the door has been opened.</p> <p>Action 45: Install a heel-safe cover on all publicly accessible ramps, paths and grates.</p> <p>Action 46: Identify where grates and service/pit lids create a gap or a vertical lip more than 3mm.</p> <p>Barricade or divert the tour around these areas and investigate solutions to address the hazard.</p>	<p>Architect and Contractor required.</p> <p>Maintenance and VS required.</p> <p>Architect and Contractor required.</p> <p>Architect and Contractor required.</p>
<p>Policy 13: Capture visitor feedback and continue to improve experiences.</p>	<p>Action 47: Locate benches and council bins away from signage.</p> <p>Action 48: Use different types of torches for tours as appropriate (i.e., hand-held, red light and/ or head torch).</p> <p>Action 49: Use clear mask covers when masks must be worn.</p> <p>Action 50: Re-write the Declaration Form to consider people may not know how they will experience the tour.</p>	<p>Maintenance required.</p> <p>VS required.</p> <p>VS and Maintenance required.</p> <p>VS required.</p>

Policy	Action	Resources Required
<p>Policy 13 cont'd: Capture visitor feedback and continue to improve experiences.</p>	<p>Action 51: Include tagging for screen readers on Declaration forms, with the flexibility for alternative signatures.</p>	<p>VS required.</p>
	<p>Action 52: Encourage visitors to give feedback via the website, on paper or via TripAdvisor.</p>	<p>VS required.</p>
	<p>Action 53: Ensure all interpretation and wayfinding information is provided in multiple formats.</p>	<p>Interpretation required.</p>
	<p>Action 54: Clarify what can and can't be touched on site.</p>	<p>HCT and VS required.</p>
	<p>Action 55: Ensure iPads are mounted at accessible heights, and accessibility features are enabled.</p>	<p>VS and Interpretation required.</p>
	<p>Action 56: Request advice from Better Hearing Australia and purchase hearing devices e.g., loops or microphones.</p>	<p>VS and Interpretation required.</p>
	<p>Action 57: Locate an example safety harness for people interested in Tunnels Tour to see/ touch at the front gate.</p>	<p>VS required.</p>
	<p>Action 58: Ensure everyone is present before continuing with a tour.</p>	<p>VS required.</p>
	<p>Action 59: Make it clear what concession cards are accepted.</p>	<p>VS required.</p>
	<p>Action 60: Include AUSLAN interpreters on the concession list.</p>	<p>VS required.</p>
<p>Action 61: Provide both visual and verbal hazard information to visitors.</p>	<p>VS and Interpretation required.</p>	
<p>Action 62: Include a standard question for ticket-sellers: "Do you have any comfort or access requirements to help you get the best experience on your tour?"</p>	<p>VS required.</p>	
<p>Action 63: On windy days or when near construction works, use an appropriate microphone.</p>	<p>VS required.</p>	

Policy	Action	Resources Required
Policy 13 cont'd: Capture visitor feedback and continue to improve experiences.	Action 64: Collaborate with the D/deaf community on designing an Auslan interpreted tour.	Interpretation and VS required.
	Action 65: Participate in Disability Pride Week with disability specific tours made available.	VS required.
Policy 14: Make audio guides accessible.	Action 66: Include captioning with AUSLAN and have a larger device.	Interpretation required.
	Action 67: Provide an audio guide menu where the numbers and their corresponding stories are narrated.	Interpretation required.
Policy 15: Ensure the Prison website is accessible and inclusive.	Action 68: Provide a map of parking facilities.	VS required.
	Action 69: Include a site-specific Acknowledgement of Country.	Interpretation and VS required.
	Action 70: Include photos and plans to describe the site for visitors.	VS required.
	Action 71: Complete the recommendations outlined in the 2022 VisAbility audit. (Refer Appendix VI).	VS required.
	Action 72: Provide clear information on use and availability of audio guides.	Interpretation and VS required.
	Action 73: Prepare an Accessibility and Reasonable Adjustment webpage.	VS required.
	Action 74: Provide a link to the weather forecast.	VS required.
	Action 75: Provide trigger warnings on the website and before tours start (including about loud or sudden noises).	VS required.
	Action 76: Encourage visitors to ask if they require modifications or accommodations.	VS required.
Action 77: Provide information about wheelchairs for loan at the Prison, and introduce a booking system.	VS required.	

Policy	Action	Resources Required
<p>Policy 15 cont'd: Ensure the Prison website is accessible and inclusive.</p>	<p>Action 78: Remove information that makes assumptions about people and include enough information for people to make an informed decision.</p>	<p>VS required.</p>
	<p>Action 79: Provide a number to call and an email address concerning accessibility at the Prison.</p>	<p>VS required.</p>
	<p>Action 80: Provide regular updates on what works may interrupt access to areas of the Prison.</p>	<p>VS required.</p>
	<p>Action 81: Provide social stories about bookings, tours and exhibitions.</p>	<p>VS required.</p>
	<p>Action 82: Provide a 3D example of a cell and make this information available on an iPad if visitors can't access area on tour.</p>	<p>VS and Interpretation required.</p>
	<p>Action 83: Provide an example Declaration Form online.</p>	<p>VS required.</p>
	<p>Action 84: Advise visitors to be sun-smart and bring water, hats, sunscreen, etc.</p>	<p>VS required.</p>
	<p>Action 85: Notify visitors of shade resting spots along the tour routes.</p>	<p>VS required.</p>
	<p>Action 86: Provide online booking capability for all tours and ensure access for visitors using screen readers.</p>	<p>VS required.</p>
<p>Action 87: Advise costs for ACROD parking tickets and parking time limits on the website.</p>	<p></p>	

Policy	Action	Resources Required
<p>Policy 16: Ensure wayfinding is accessible and inclusive.</p>	<p>Action 88: Where parts of a tour route are not accessible, provide directional signage for the return journey or alternative accessible route to a meeting point in order to resume the tour.</p>	<p>Architect required.</p>
	<p>Action 89: Provide directional signage from banks of male and female (only) toilets to the closest unisex accessible toilet.</p>	<p>Architect required.</p>
	<p>Action 90: Install Braille, raised tactile text and symbol signage to all toilets and explore further options for beacon technology.</p>	<p>Architect required.</p>
<p>Policy 17: Ensure toilet facilities are accessible.</p>	<p>Action 91: Install automatic doors for toilets.</p>	<p>Architect required.</p>
	<p>Action 92: Install hooks on the inside of all toilet doors.</p>	<p>Architect required.</p>
	<p>Action 93: Investigate relocating the toilets to a new purpose-built facility.</p>	<p>Architect required.</p>
	<p>Action 94: Provide wayfinding to the toilets at the entrance.</p>	<p>Architect and Interpretation required.</p>
<p>Policy 18: Provide a safe and accessible arrival experience.</p>	<p>Action 95: Re-locate and design the ACROD parking bays closer to the entrance.</p>	<p>Maintenance required.</p>
	<p>Action 96: Advise visitors of additional parking areas around Fremantle.</p>	<p>VS required.</p>
	<p>Action 97: Explore how people with invisible mobility impairments and other people with disability who may not receive the mobility concession could be included.</p>	<p>VS required.</p>
	<p>Action 98: Show tour routes on arrival experience maps and note stairs etc. that might impact accessibility.</p>	<p>VS required.</p>
	<p>Action 99: Provide more shading opportunities within the car-park and over seating areas.</p>	<p>Architect required.</p>

Policy	Action	Resources Required
<p>Policy 19: Create accessible exhibitions.</p>	<p>Action 100: Ensure video content avoids flashing lights.</p>	<p>Curatorial and Interpretation required.</p>
	<p>Action 101: All exhibition cases to be at accessible heights.</p>	<p>Curatorial and Interpretation required.</p>
	<p>Action 102: Ensure exhibition design caters for accessibility.</p>	<p>Curatorial and Interpretation required.</p>
	<p>Action 103: Create a process for staff and visitors to provide feedback on exhibitions.</p>	<p>Curatorial and Interpretation required.</p>
	<p>Action 104: Identify more tactile and sensory opportunities, such as touching the BMR collection, smell-scapes in cells and kitchens, soundscapes, etc.</p>	<p>Curatorial and Interpretation required.</p>
<p>Action 105: Ensure lighting levels are adjustable and suitable.</p>	<p>Curatorial and Interpretation required.</p>	
<p>Policy 20: Promote accessible events at the Prison.</p>	<p>Action 106: Ensure concert promoters are aware of the Prison's accessibility standards.</p>	<p>VS required.</p>
<p>Policy 21: Provide accessible and inclusive hospitality.</p>	<p>Action 107: Create an online menu and ensure it complies with accessibility standards.</p>	<p>Tenant and VS required.</p>
<p>Policy 22: Continue to offer accessible training opportunities to support staff and visitors.</p>	<p>Action 108: Coordinate regular and developing training sessions for staff on the following topics, as outlined in the table below.</p>	<p>HCT and VS required.</p>

Table showing recommendations for staff awareness training.

Topic	Content	Potential training provider or solution	Target group
Understanding disability.	Diversity of people with disability. Invisible disabilities. Avoiding assumptions and labels. Social model of disability.	People with disability involved in providing the training. Reference Group. Training providers e.g: <ul style="list-style-type: none"> • Inclusion Solutions • Inclusive World • Evolve • E-QUAL Disability Consultants. 	All staff.
Effective communication with people with disability.	Appropriate language. Communicating effectively with people considering: <ul style="list-style-type: none"> • Neurodiversity • D/deaf and Hard of Hearing e.g. working with interpreters, using microphones • Intellectual/ cognitive impairment. 	People with disability involved in providing the training. AIP Reference Group. Training providers e.g: <ul style="list-style-type: none"> • Inclusive World • E-QUAL Disability Consultants • AccessPlus (Auslan, working with interpreters). 	All staff.

Topic	Content	Potential training provider or solution	Target group
Inclusive customer service.	<p>Adapting tours to range of visitors e.g. audio description, sensory opportunities.</p> <p>Assistive technologies.</p> <p>Mobility aides.</p> <p>Offering assistance without offending.</p> <p>Assisting people with safety equipment e.g. harness etc for Tunnels Tour.</p> <p>Sighted guiding.</p> <p>Deaf awareness.</p>	<p>People with disability involved in providing the training.</p> <p>Reference Group.</p> <p>Training providers e.g:</p> <ul style="list-style-type: none"> • Inclusion Solutions • Inclusive World • E-QUAL Disability Consultants • AccessPlus (deafness awareness). 	Tour guides and Ticketing Officers.
Trauma informed care.	Potential triggers at the site.	Evolve.	Tour guides.
Overview of AIP.	<p>Legislation and good practice including Come-In! guidelines and universal design principles.</p> <p>AIP purpose, context, methodology, implementation plan.</p>	AIP authors.	All staff.
Disability confident recruiting.	Recruiting and managing workforce.	Training providers e.g. Australian Network on Disability.	Managers.
Emergency response and evacuation.	Training for emergency situations with people with lived experience of disability.	Reference Group.	Managers.

Table showing Medium Priority Policies (to be actioned between 2-5 years).

Policy	Action	Resources Required
<p>Policy 23: Comply with the Public Sector employment requirements.</p>	<p>Action 109: Ensure all reasonable adjustments are made to encourage people with disability to work and volunteer on site.</p>	<p>HCT and VS required.</p>
<p>Policy 13 cont'd: Capture visitor feedback and continue to improve experiences.</p>	<p>Action 110: Create a virtual reality tour of the tunnels.</p> <p>Action 111: Re-make the Tunnel Tour safety video so that the instructions and images are clear and include captions and voice over. Test with people with different access and inclusion needs.</p> <p>Action 112: Introduce a small group tour option for visitors unable to do tours with lots of people.</p> <p>Action 113: Provide a “top-side” tunnel tour for those unable to access the tunnels.</p> <p>Action 114: Create an embossed site-plan for visitors to touch.</p> <p>Action 115: Increase the range of mobility devices that visitors can loan whilst on site such as wheelchairs, cushions, walkers, etc.</p> <p>Action 116: Discuss concession fees with Treasury.</p>	<p>Interpretation and VS required.</p> <p>Interpretation and VS required.</p> <p>VS required.</p> <p>Interpretation and VS required.</p> <p>Interpretation required.</p> <p>VS required.</p> <p>Director required.</p>

Policy	Action	Resources Required
<p>Policy 15 cont'd: Ensure the Prison website is accessible and inclusive.</p>	<p>Action 117: Audit colour/luminance contrast not just on the website but in all areas with public information.</p> <p>Action 118: Celebrate the staff on the website e.g, have the staff present a video.</p> <p>Action 119: Create social story videos from tour guides.</p> <p>Action 120: Create video teasers for tours.</p> <p>Action 121: Install a mock-up display of the equipment and boat so people can make an informed decision before the tour. Make it into a fun addition to the Fremantle Prison tourist attraction and a great photo opportunity.</p>	<p>Architect and VS required.</p> <p>VS required.</p> <p>VS required.</p> <p>Interpretation VS required.</p> <p>Interpretation and VS required.</p>
<p>Policy 16 cont'd: Ensure wayfinding is accessible and inclusive.</p>	<p>Action 122: Adopt the principals of good signage design for all wayfinding, informative, directional and interpretive signs.</p> <p>Action 123: Make ticket desk locations clearly identifiable and accessible, with clear wayfinding to alternative locations as required.</p>	<p>Architect Interpretation required.</p> <p>VS required.</p>
<p>Policy 18 cont'd: Provide a safe and accessible arrival experience.</p>	<p>Action 124: Install a signpost near the entrance to show where various buildings are.</p>	<p>Architect and Interpretation required.</p>
<p>Policy 19 cont'd: Create accessible exhibitions.</p>	<p>Action 125: Continue to install signage for people who are blind in alternative formats.</p> <p>Action 126: Ensure the number, title, price, and the location of where the artwork was created, closer to the artwork.</p> <p>Action 127: Prepare an accessibility guideline for exhibitions.</p>	<p>Architect Interpretation required.</p> <p>Curatorial required.</p> <p>Curatorial required.</p>
<p>Policy 20 cont'd: Promote accessible events at the Prison.</p>	<p>Action 128: Prepare an accessibility guideline for events hosted at the Prison.</p>	<p>VS required.</p>

Policy	Action	Resources Required
Policy 21 cont'd: Provide accessible and inclusive hospitality.	Action 129: Create a menu with a greater range of dietary options and make this clear online and in printed formats.	Tenant VS required.
	Action 130: Review ramp incline and matting at the entrance to café.	Architect required.
	Action 131: Provide access to the outdoor seating area for those using mobility devices.	Architect required.
Policy 23: Accessible ramps and stairs must be visible day and night.	Action 132: Ensure ramps and stairs are well-lit for Torchlight Tours.	Architect and Contractor required.
	Action 133: Ensure signage is well-lit for Torchlight Tours.	Architect and Contractor required.
Policy 24: Prepare a language guideline specific to Fremantle Prison.	Action 134: Scope the requirements for a language guideline, including a review of available supporting information from International, Commonwealth State bodies, staff training and the AIP Reference Group.	HCT and VS required.

Table showing Low Priority Policies (to be actioned between 5-10 years).

Policy	Action	Resources Required
Policy 13 cont'd: Capture visitor feedback and continue to improve experiences.	Action 135: Investigate the option of self guided experiences.	Interpretation and VS required.
Policy 17 cont'd: Ensure toilet facilities are accessible.	Action 136: Construct a unisex accessible toilet (UAT) to service locations where male and female toilets are currently provided, and locations where demand for toilets is evident.	Architect required.
Policy 18 cont'd: Provide a safe and accessible arrival experience.	Action 137: Promote discussions with Transperth to provide a free CAT bus service to the Prison.	VS required.
Policy 19 cont'd: Create accessible exhibitions.	Action 138: Create 3D walk-throughs of exhibitions.	Curatorial and Interpretation required.
Policy 25: Provide access to upper and lower levels in the Prison.	Action 139: Complete a feasibility study for installing a platform lift in the Tunnels area, Main Cell Block and New Division.	Architect required.



Above: Vision impaired visitor touring the Fremantle Prison grounds.

Monitoring and Review

The AIP's success will be assessed in its next iteration against both qualitative and quantitative measures, including:

- Policies and actions that have been successfully implemented over the life of the AIP. The outcomes to be achieved for each policy or action, as applicable, will be identified to allow for progress to be measured.
- Progress of the AIP will be measured as part of the wider departments annual reporting requirements to comply with State legislation.
- Regularly engaging with the Reference and Working Groups, and other stakeholders to achieve good outcomes in line with the AIP's Policies and Actions.

The AIP will be registered with the Australian Human Rights Commission, the Department of Communities and the Equal Opportunity Commission so that the plan is available for other organisations to build upon, and so that the managers of the site are accountable for implementing the recommendations noted therein.

Responsibility

The AIP will be monitored and implemented by the Heritage Conservation Manager, Fremantle Prison, working with relevant staff alongside external organisations and key stakeholders.

The Director, Fremantle Prison will ensure that progress is reviewed and reported, and that significant milestones and targets are catered for as part of the ongoing site budget.

Feedback and Grievance process

Feedback from visitors, staff and disability organisations will be sought throughout the life of the AIP, as the views of people with lived experience of disability will fundamentally help determine its success. Contact details for this process are as per page [vi](#) of this report.

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Above: Inside Main Cell Block, Fremantle Prison.

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Above: Visitors behind Wray Gates of Fremantle Prison.



FREMANTLE PRISON
The Convict Establishment