



Standing Committee on Health
Thursday, June 25, 2020
Briefing on the Canadian Response to the COVID-19 Outbreak
Canadian Association of Elizabeth Fry Societies (CAEFS)

Background

The Canadian Association of Elizabeth Fry Societies (CAEFS) is regularly in contact with incarcerated women and gender diverse people and actively monitors and reports on the conditions of confinement inside federal prisons designated for women.

Groups that have been identified by the Public Health Agency as having an increased risk of more severe outcomes (aged 65 and over; with compromised immune systems; with underlying medical conditions) are prevalent within our federal prisons. In their most recent report, the Office of the Federal Investigator (OFI) noted that on 2017-18, 25.2% of the federally incarcerated population was 50 years of age and over. Previous OFI reports also remind us that it “universally established that correctional facilities house a number of health-compromised and vulnerable individuals”. The report addresses the rapid aging of prisoners, making the link between prisoners aged 50-55+ having comparative health risks and those who are 65+ living outside of prisons, due to the overrepresentation of chronic health issues and lack of access to adequate health care.

Of great concern to CAEFS is that **the rate of infection for people incarcerated in federal prisons for women is 77 times the rate for women in the general population.** This is high even in comparison to the rate for people incarcerated in federal prisons for men, which is more than 10 times the rate for Canada as a whole.

Since mid-March 2020, CAEFS has expressed our concerns that the safety of women and gender diverse people in prisons is further jeopardized by the pandemic. In April 2020, over 60% of those incarcerated in the Joliette institution for Women (Joliette) were infected with COVID-19. The example that Joliette so sadly demonstrated is that by the very congregate nature of prisons (lack of hygienic environment, impossible to physically distance), once COVID-19 enters into a prison, it is extremely difficult - if not impossible - to stop its rapid spread. This puts an already vulnerable population even more at risk. In particular, CAEFS is concerned about the negative mental health repercussions of the pandemic on women and gender diverse people in the prisons.

The Canadian Government has, and continues to have, a duty to act to preserve the health and wellbeing of federally incarcerated people. This brief outlines the concerns that have been raised to us by people incarcerated in the federal prisons for women, along with our recommendations.



Concerns Regarding the Federal Prisons Designated for Women During COVID-19

When Correctional Services Canada suspended visits from the public into the prisons on March 14th, 2020, CAEFS' in-person monitoring of the conditions of confinement within the federal prisons designated for women was also suspended. However, through phone calls to our Regional and National 1-800 numbers, CAEFS has collected detailed and up-to-date information about conditions of confinement from incarcerated women and gender diverse people in federal prisons designated for women. During our recent communications with these groups, **concerns about health were reported more than any other concerns**. Health concerns stem from two main issues: (1) the impossibility of physical distancing while incarcerated and (2) substantive changes to conditions of confinement.

The Impossibility of Physical Distancing

Consistently, individuals informed us that it is impossible to maintain physical distancing in the prisons, given their communal living arrangements. **Living units are shared by up to a dozen people**, where each unit shares toilets, showers, fridges, sinks, pots, pans and utensils. Many people in the prisons have also expressed that they **do not have control over when or if staff enters their living**. This has led to concerns over the possibility of staff bringing in the virus. The impossibility of physical distancing is compounded with a frequently noted **lack of access to cleaning supplies**. Indeed, prisoners have continually expressed worry over limited access to cleaning supplies, personal protective equipment and hand sanitizer and how this puts them at even more of an increased risk of infection.

The Substantive Changes to Conditions of Confinement

Since the emergence of COVID-19, the following changes have also been regularly reported in the federal prisons for women:

- The use of “cell restriction” (being confined to one’s room)
- The reported use of Structured Intervention Units to isolate prisoners who were showing symptoms.
- The suspension of all programming and visits;
- Limited access to health care staff, including for prenatal concerns, and a lack of onsite doctors;
- Adapted movement schedules, such as only being allowed out of their living units or pods for less than an hour a day;
- Limited access to phones, especially in areas where the phone is located outside of the living unit or pod;
- Limited access to legal counsel;
- Limited access to video visits and reports of malfunctioning technology;
- Limited access to parole officers and grievance coordinators;
- Limited access to Elders and other cultural supports;
- Lack of response and /or delayed response times to ‘inmate’ requests;

Overall, many incarcerated people in the federal prisons for women have reported that the general environment is tense and anxious, that there is a lack of transparent communication, and that they are given insufficient information regarding COVID-19 and current conditions. Numerous callers have expressed that the current restrictions may, or have, adversely impacted their overall physical and mental health.



It should be noted that since April 2, 2020 these concerns were consistently and regularly brought forward to the Wardens of the federal institutions designated for women via teleconference meetings regional advocacy teams. Following these meetings, CAEFS wrote letters to summarize the systemic concerns discussed and sent them to the institution's Warden, copying the Commissioner of Correctional Services Canada, the Deputy Commissioner for Women's Prisons of Correctional Services Canada, the Correctional Investigator, the Chief Commissioner of the Canadian Human Rights Commission and interested Senators. As such, we can confirm that Correctional Services Canada National Headquarters and the Wardens of the federal prisons designated for women have been made aware of these concerns throughout the pandemic.

CAEFS' Recommendations

Depopulate the Prisons

Correctional Service of Canada's health care system is not equipped to care for prisoners who have contracted COVID-19 and adequate preventative measures are not being employed to protect prisoners from future outbreaks or a second wave of COVID-19.

Any steps taken to depopulate prisons would help protect healthcare resources in the communities where the prisons for women are located, thus protecting the overall health and safety of the public. There are already options available to help facilitate releases:

- Section 121(1.b) of the *Corrections and Conditional Release Act* states that "parole may be granted at any time to an offender [...] whose physical or mental health is likely to suffer serious damage if the offender continues to be held in confinement". We argue that continuing to be incarcerated during COVID-19 has indeed caused serious damage to prisoner's mental and physical wellbeing.
- Sections 81 and 84 of the *Corrections and Conditional Release Act* should be used to transfer Indigenous women and gender diverse people into community, and to ensure that ample supports are provided to allow these communities to respond adequately.
- Institutions can also focus on extending unaccompanied temporary absences for medical reasons and expediting hearings for suspension and revocation cases.

Despite these concerns and our advocacy efforts with Correctional Services Canada and senior management at federal prisons designated for women to use the tools at their disposal, little action has been taken to depopulate federal prisons designated for women.

CAEFS encourages the depopulation of prisons as a compassionate and dignified response to preserve human health and life and for the Government of Canada to embrace the community release available for federally incarcerated women.

As an organization dedicated to prison abolition, CAEFS understands that prisons have never served to keep our communities healthy, safe or address harm. Especially now, we echo the calls from prisoners, families of prisoners, legal professionals, health care workers, senators, advocates, organizers, unions, and other service providers to release as many people from prison as possible. We also emphasize the need to direct funds away from carceral systems and invest them in community resources such as long-term housing solutions, mental health support services, accessible childcare, basic income and poverty reduction strategies, resource centres for people who use drugs.



Public Inquiry

CAEFS supports the John Howard Societies' calls for an in-depth independent Inquiry into the government's handling of the COVID-19 crisis in federal prisons, to assess whether obligations were met, how people became ill and died (both from the virus and from the strict isolation imposed), and what should be done in future in the case of a second wave or another pandemic.

We support the questions put forward by the John Howard Society, and would add the following:

- Given the lack of information around the effects of the coronavirus on fetuses and breastfeeding, as well as small children, once COVID-19 was declared a global pandemic, why weren't pregnant women and mothers and children who are participating in the mother-child program immediately released from the prisons in order to safeguard against any negative repercussions of becoming infected by the virus?

Conclusion

All responses to COVID-19 must be grounded in compassion, dignity, and the preservation of human health and life. We need immediate action and the safe release of as many people as possible in order to protect the mental and physical wellbeing of women and gender diverse people in federal prisons. We do not have the death penalty in Canada, but inaction on the part of the government during this critical time, before a second wave of COVID-19, will effectively sentence some of our country's most marginalized people to death. We hope that the Committee recommends that an in-depth and independent inquiry be held into whether duties and obligations to prisoners were met during this health crisis, and heeds our advice to encourage the depopulation of prisons.

Sincerely,

Emilie Coyle

Executive Director, Canadian Association of Elizabeth Fry Societies

ABOUT THE CANADIAN ASSOCIATION OF ELIZABETH FRY SOCIETIES (CAEFS)

The Canadian Association of Elizabeth Fry Societies (CAEFS) is an association of self-governing, community-based Elizabeth Fry Societies that work with and for federally incarcerated women and gender diverse people. CAEFS advocates to increase support services for marginalized, victimized, criminalized, imprisoned and otherwise vulnerable women and gender diverse people – including services which allow for alternatives to incarceration and increased access to community integration. CAEFS is regularly in contact with incarcerated women and gender diverse people and actively monitors and reports on the conditions of confinement inside federal prisons designated for women

