



**Submission to Senate Standing Committee on Social Affairs, Science and Technology**  
**Re: Study of the government's response to the COVID-19 pandemic**  
**Canadian Association of Elizabeth Fry Societies (CAEFS)**  
**Friday, July 10, 2020**

## **Introduction**

The Canadian Association of Elizabeth Fry Societies (CAEFS) submits this brief in the context of the study of the government of Canada's response to the COVID-19 pandemic conducted by the Standing Senate Committee on Social Affairs, Science and Technology. This study is an important opportunity to address the government's response to the pandemic thus far, and assess what steps are needed to appropriately respond to the crisis in the months to come.

The COVID-19 pandemic has compounded the existing vulnerabilities of individuals in prisons, particularly with regards to physical and mental health, and the right to be free from discrimination of any kind. As the fastest growing population in prisons, women and gender diverse people are particularly vulnerable in this time of crisis. In this submission, we draw the Standing Committee's attention to the specific risks facing individuals in federal prisons designated for women during the COVID-19 pandemic.

## **About 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.

## **Background**

Throughout the COVID-19 pandemic, CAEFS has maintained regular contact with incarcerated women and gender diverse people and continues to actively monitor and report on the conditions of confinement inside federal prisons designated for women.

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.



Groups that have been identified by the Public Health Agency as having an increased risk of more severe outcomes during COVID-19 (those 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 (OCI) noted that on 2017-18, 25.2% of the federally incarcerated population was 50 years of age and over. Previous OCI reports also remind us that it is “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.

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 health repercussions – including mental health impacts – of the pandemic on women and gender diverse people in the prisons, access to justice and upholding human rights throughout this crisis.

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 issues that have been raised to us by people incarcerated in the federal prisons for women, along with our recommendations.

### CONCERNS REGARDING FEDERAL PRISONS DESIGNATED FOR WOMEN DURING COVID-19

When Correctional Services Canada suspended visits from the public into the prisons on March 14, 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. CAEFS is particularly concerned about issues related to the physical health and mental health, the increased risks for Indigenous women and gender diverse people in the prisons, and access to critical services and programming.

#### *Physical Health Concerns*

Health concerns stem from two main issues: (1) the impossibility of physical distancing while incarcerated and (2) substantive changes to conditions of confinement.

##### **i) 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.

## ii) 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;

### ***Mental Health Concerns***

The impacts of COVID-19 on the mental health and wellbeing of the general population in Canada have been significant. Prison conditions and the restrictive measures imposed on the prison population during the pandemic only exacerbate these mental health impacts.

On May 27, 2020, Statistics Canada released the results from a survey of approximately 46,000 Canadians on the impacts of COVID-19 on their mental health. The survey results showed that nearly one quarter (24%) of participants reported fair or poor mental health, compared to 8% in 2018, and over half of the participants reported that their mental health has worsened since the physical distancing measures were implemented. Fears about the health impacts of the virus, concerns for family members, extended social isolation, economic uncertainty were all cited as sources of distress ([Statistics Canada, May 2020](#)).

The pandemic is impacting the general mental wellbeing of Canadians, but it is also causing a widening of existing mental health inequities and worsening the situation for those who are already vulnerable. On June 25, 2020 the results of another national survey conducted by the Canadian Mental Health Association (CMHA) and UBC exposed the troubling mental health impacts of the pandemic on vulnerable groups. The study found that suicidal thoughts or feelings as a result of the pandemic were more common for individuals with existing mental health issues (18%), Indigenous people (16%), those living with a disability (15%) or those who identify as LGBTQ+ (14%) or parents with kids under 18 (9%)([CMHA, June 2020](#)). Additionally, 22% of the people of colour surveyed reported having a harder time coping (up from 14% pre-pandemic).

Even before the pandemic hit, 1.6 million Canadians reported they had unmet mental health care needs. According to [CMHA](#), since the onset of the pandemic, those who were already struggling with their mental health are:

- twice as likely to say their mental health has declined (59% vs 33%)



- 5 times as likely to feel depressed (46% vs 17%)
- three times as likely to have trouble coping (28% vs 11%)
- four times as likely to have had suicidal thoughts (18% vs. 4%)
- four times as likely to have tried to harm themselves (4% vs. 1%)

There is no doubt that prisons exacerbate the mental health concerns we are seeing in the Canadian population. Before COVID-19 was declared a pandemic, the Office of the Correctional Investigator of Canada (OCI) reported that more than three quarters of federally sentenced women have a lifetime or current mental disorder (**OCI, Annual Report**, June 2019). During the pandemic, the compounding effects of confinement, lack of programming (including a lack of social, spiritual and religious supports), and the stressors associated with the health risks of COVID-19, have an aggravating impact on the mental health of women and gender diverse people in federal prisons.

Many callers from the prisons designated for women have described the feelings of fear, stress, and heightened anxieties that come with not being properly informed of the measures taken by the institution to adequately respond to the pandemic. Many have also expressed that social distancing guidelines are being used as a mechanism to further police and punish, rather than to address their concerns and prioritize safety and health.

### ***Increased risks for Indigenous women and gender diverse people in the prisons***

Over the years, through our monitoring of the conditions of confinement and advocating for women in Canadian prisons, the Canadian Association of Elizabeth Fry Societies (CAEFS) has consistently observed and spoken out about the over-representation of Indigenous women at all levels of the criminal justice system.

On January 21, 2020, the Office of the Correctional Investigator of Canada (OCI) issued a news release with disturbing data on the number of Indigenous people in Canadian prisons. Indigenous people now make up over 30% of the federally incarcerated population, despite comprising only 5% of the total Canadian population. More alarming is the fact that Indigenous women now account for 42% of all women who are incarcerated in Canadian federal prisons (**OCI, 2020**). These disproportionately high numbers reflect the ongoing and systemic oppression and criminalization of Indigenous women, girls and gender diverse people in Canada. The rates of mental health issues among Indigenous women and gender diverse people in prisons are also disproportionately high. CAEFS is concerned that COVID-19 and the restrictive measures implemented as a response to the pandemic have increased the risks to the health and wellness of Indigenous women and gender diverse people in federal prisons.

### ***Access to programming, education and employment***

In connection to the concerns related to mental wellbeing in the federal prisons designated for women, CAEFS has received many calls from women expressing their concerns regarding the conditions of confinement and the suspension of programming, education and some employment during the COVID-19 pandemic, including the inability to access spiritual or cultural supports. For instance, Elders and chaplains were not considered essential or critical services by CSC and have largely been unable to provide support to their clients since the beginning of the pandemic.

This has led to increased anxiety, stress and pent-up frustration among the population inside the prisons. For many, these restrictive measures have also had an adverse impact on correctional plans - including their parole



and release dates. On June 19, 2020, in an Update for Federal Corrections, the OCI stated that, “as the situation stands today, restrictions imposed by the pandemic show little sign of abatement” (OCI, June 2020).

Overall, many incarcerated people in the federal prisons designated 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 and lack of programming 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 to the attention of 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

#### Recommendation 1: 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, resource centres for people who use drugs, accessible childcare, basic income and poverty reduction strategies.

**Recommendation 2: Conduct an Inquiry into the government’s handing of the COVID-19 crisis in federal prisons.**

CAEFS joins the call of other organizations such as the John Howard Society 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.

**Recommendation 3: Reinstate critical services in prisons.**

The restrictive measures that have been put in place to respond to COVID-19 continue to have detrimental effects on the population inside federal prisons designated for women. The impacts of COVID-19 on mental health are being felt by the Canadian population at large but are worsened in prisons due to a lack of social supports, regular programming, contact with family and lack of information. As per Commissioner’s Directives 720, 726, and 735, Correctional Services Canada has an obligation to ensure that appropriate correctional programming, schooling, and employment is available to incarcerated people. There is a very real possibility that the pandemic will last for several months. While the health and safety of prisoners is paramount, prisons must ensure that education and employment opportunities are made available and that correctional programming, including spiritual and religious supports, be reinstated. These are critical services, necessary to ensure the health and wellbeing of those inside the prisons, and must be restored without delay.

**Conclusion**

In this time of crisis, all responses to COVID-19 must be grounded in compassion, dignity, a respect for human rights, and the preservation of health and life. Immediate action and the safe release of as many people as possible is needed in order to protect the mental and physical wellbeing of individuals 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. This crucial time poses many challenges, but also offers an opportunity to address systemic inequalities that plague the criminal justice system in Canada. We welcome the opportunity to appear before the Committee and present on the matters we have raised in this brief.

Sincerely,

**Emilie Coyle**

Executive Director, Canadian Association of Elizabeth Fry Societies

