



To: Lilian Kordic, Institutional Head
Edmonton Institution for Women
11151 178 St NW Unit 1, Edmonton, AB T5S 2H9

October 8, 2026

Dear Lil,

I want to thank you and other members of the institutional management team (IMT) at the Edmonton Institution for Women (EIFW) for taking the time to meet with me on August 31st, via Teams.

This letter summarizes reports received during CAEFS' August 25 and 26, 2026 visit to the Edmonton Institution for Women, conditions observed during that visit, the subsequent discussion with members of the IMT, relevant laws and policies, and CAEFS' recommendations.

We look forward to receiving your response.

Respectfully,

Jacqueline Omstead
Senior Advocate



Staff Support and Response Following Vehicle Accident

Description: Individuals raised the tragic and fatal vehicle accident extensively to CAEFS. People generally described feeling well supported following the accident, which led to the loss of three lives. Chaplains, Elders, mental health staff, and institutional staff were said to have been highly visible and present, demonstrating compassion in the aftermath of the tragedy. Contrary to some earlier reports, it was shared that institutional movement was only minimally disrupted.

The institutional memorial held to recognize the life of Kiara Mooswa was widely appreciated, and people noted positively that many staff members attended. People also shared that a GoFundMe campaign had been established to support Kiara's family, providing an opportunity for donations from those who wished to contribute. Individuals spoke candidly about the profound sadness felt throughout the institution following the loss of all three lives. Both officers were described as highly respected, kind, and dedicated professionals. Incarcerated people reflected on Kiara's life and shared that she had been particularly excited about her transfer to OOH because it would allow her to see her children for the first time in approximately 18 months. Peer Advocates and Inmate Committee members expressed support for the proposed grief and loss workshop with a community partner, organized through CAEFS.

Many individuals expressed hurt and disappointment that the Prime Minister's public statements following the accident did not acknowledge Kiara's death. Concerns were also raised about media reporting that repeatedly emphasized her sentence length and referred to her only as an "offender." People incarcerated at EIFW described this language as dehumanizing and felt it failed to recognize that Kiara's death was also a tragedy deserving of dignity and acknowledgment. Several individuals emphasized the importance of recognizing the shared humanity of all those who lost their lives in the accident.

Discussion: The IMT shared that they were grateful for the respect demonstrated by incarcerated people at EIFW in the aftermath of the accident. Ongoing discussions between CAEFS and EIFW regarding grief supports continue.

Law & Policy:

CCRA s.3: The federal correctional system carries out sentences through the safe and humane custody and supervision of federally sentenced people.

Canadian Charter of Rights and Freedoms, s.15. (1) Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination [...]

CAEFS' Recommendations: CAEFS appreciates the supportive response demonstrated by EIFW and the mutual respect reported by both staff and incarcerated people following this tragedy. CAEFS recommends that the Prime Minister's Office acknowledge losses experienced by both staff and incarcerated people, and that media outlets be mindful of the impact of their reporting. Omitting an incarcerated person from public expressions of condolence, or referring to them only by their legal status, can have a dehumanizing impact and compound the grief experienced by incarcerated people and their loved ones. Such omissions may also be perceived as signalling that the lives of incarcerated people are less worthy of public recognition and concern, contributing to broader public attitudes that diminish the humanity of people in prison. As articulated by the Supreme Court in its first section 15 case and subsequently reaffirmed, "the promotion of equality entails the promotion of a society in which all are secure in the knowledge that they are recognized at law as human beings equally deserving of concern, respect and consideration."¹

Safety of Transport Vehicles

Description: Closely related to the accident, the most consistently raised concern this month was fears about the safety of CSC transport vehicles. Many individuals reported having profound grief and trauma overlapping, sharing many of their own experiences being restrained and transported in CSC transfer processes. People described being held in rear vehicle

¹ Charterpedia: Section 15, Equality Rights



compartments made of metal, with no ability to see outside, where they were handcuffed and shackled, and kept on small metal seats without seatbelts during the transfer process. They reported being unable to brace themselves or otherwise protect themselves in the event of sudden movement or a collision, and some described being injured or “thrown around” during transport. Several individuals referenced recent media reporting in which CSC indicated that transport vehicles contain seatbelts. While acknowledging that officers have access to seatbelts, they stressed that incarcerated people transported in the rear compartment of most CSC transport vehicles do not. Additional concerns focused on double-locked rear compartments and blacked-out windows, which were said to limit visibility and communication. Concerns were raised regarding the absence of an emergency exit, emergency communication system, or call button. Individuals expressed anxiety that, in the event of an accident or emergency, a person in the rear compartment would have no ability to contact emergency services or independently exit the vehicle. People shared that these experiences felt intensely traumatizing following the recent accident and media about CSC transfer protocols. The women and gender diverse people we spoke to questioned the routine use of highly restrictive transport measures regardless of documented security risk and why more humane and safe transportation practices could not be implemented.

Discussion: CAEFS and the IMT acknowledged that the design and construction of CSC transport vehicles are not decisions made at the institutional level, and that there is more than one type of vehicle available, but that the design of the vehicle used differ, and are dependent on the security classification of individual's being transferred. The IMT clarified that CSC does not utilize restraints connecting the waist to the feet, although such restraint practices may occur within provincial transportation systems.

Law & Policy:

Charter of Rights and Freedoms, s.12: Everyone has the right not to be subjected to any cruel and unusual treatment or punishment.

CCRA s. 3 The purpose of the federal correctional system is to contribute to the maintenance of a just, peaceful and safe society by (a) carrying out sentences imposed by courts through the safe and humane custody and supervision of [federally sentenced people]

CCRA s. 4(c) the Service uses the least restrictive measures consistent with the protection of society, staff members and [federally sentenced people].

CCRA s. 4(b) the Service enhances its effectiveness and openness through the timely exchange of relevant information with victims, offenders and other components of the criminal justice system and through communication about its correctional policies and programs to victims, offenders and the public;

CAEFS' Recommendations: CAEFS recommends that CSC ensure all individuals transported in escort vehicles have access to crash-tested seating, appropriate occupant restraint systems, and other safety features designed to protect them in the event of a collision or sudden vehicle movement. CSC should also equip escort vehicles with emergency communication systems accessible to incarcerated occupants, ensure that safe emergency evacuation procedures are in place, and review transportation practices to ensure they are consistent with the principle of least restrictive measures. CAEFS further recommends that CSC publicly disclose any existing policies, standards, and safety requirements governing escort vehicle design as CAEFS was unable to identify any publicly available policies. Finally, CAEFS recommends that an independent engineering and safety review of all current CSC escort vehicle designs be conducted and that the RCMP report from the accident mentioned above be released to the public.



Use of Body Scanners

Description: During this visit, concerns were frequently raised regarding the operation and interpretation of body scanner results, expressing a belief that staff reviewing scans do not have sufficient training to accurately assess findings. Examples were provided in which medical conditions or scar tissue were allegedly identified as potential contraband. Women at EIFW also reported being asked questions during the scanning process that they viewed as inappropriate, unrelated to the scan, or unprofessional, including comments about physical injuries, medical conditions, or anatomical features that they did not consider relevant to the search. Several individuals stated that these incidents resulted in interim transfers to the SIU and, in some cases, increased security classifications. They expressed concern that scanner interpretations can have significant consequences for their liberty and progression through correctional plans when relied on without adequate verification. Some suggested that these experiences may discourage participation in ETAs and other activities involving transportation, searches, or community access. It was also noted that the version of Commissioner's Directive 566-7 currently available to the population is significantly outdated and does not contain information regarding body scanner procedures.

It was also reported that women in the general population are routinely subjected to both strip searches and body scans following in-person visits and, when CAEFS advised that this practice is inconsistent with policy, many expressed surprise.

Discussion: The IMT offered to review practices regarding the use of both strip searches and body scanners, noting that body scanners are intended to replace strip searches rather than supplement them. The IMT advised that staff receive training on scanner use and that EIFW employs a train-the-trainer model. While some questions asked during the scanning process may appear unrelated to the individual being searched, the IMT noted that they may be relevant to interpreting scanner results. The IMT further explained that EIFW serves as a pilot site for body scanner technology. Staff have identified opportunities for improvement, particularly increasing image resolution, which could improve scan accuracy and reduce the need for repeat scans. The IMT also provided further context and updates regarding some of the individual reported concerns and the presence of contraband.

Law & Policy:

The Canadian Charter of Rights and Freedoms, s.12: Everyone has the right not to be subjected to any cruel and unusual treatment or punishment.

The Canadian Charter of Rights and Freedoms, s.7: Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

CCRA s. 48(2) A body scan search of the inmate shall be conducted instead of the strip search if (a) the body scan search is authorized under section 48.1; and (b) a prescribed body scanner in proper working order is in the area where the strip search would be conducted.

CCRR s. 97 (3): The Service shall ensure that an inmate has reasonable access to [...] (b) non-legal materials, including (i) Commissioner's Directives

CAEFS' Recommendations: CAEFS recommends that EIFW take immediate steps to ensure that body scanners are used as an alternative to, rather than in addition to, strip searches and establish safeguards to prevent significant decisions affecting liberty interests from being based on potentially inaccurate scanner interpretations without further review or verification. CAEFS recommends that CSC automatically provide incarcerated individuals with printed copies of body scans whenever an abnormality is detected, particularly when it results in restrictions on liberty or other sanctions. The CSC must consider the impacts of strip searches and body scans on populations with deep histories of victimization and ensure practices are aligned principles of Creating Choices. CAEFS is committed to fostering a climate of legal literacy within penitentiaries, and we hope that EIFW will work alongside us to ensure that access to relevant current policies is supported, and free from barriers – particularly the policies that govern processes related to searches and that are relevant to bodily autonomy and liberty. Access



to legal and non-legal materials is an essential part of facilitating access to a fair and effective grievance system and is aligned with legislation and CSC's values statement.

Conduct of Staff in the Secure Unit

Description: CAEFS witnessed an interaction between staff and an incarcerated person that quickly escalated into yelling. Multiple staff members became involved in the exchange, which further increased tensions. CAEFS did not observe meaningful attempts at de-escalation and was concerned that staff responses contributed to the escalation rather than reducing conflict. The individual involved had reportedly experienced earlier difficulties with staff on the same day. Following the confrontation, the individual was not permitted to return to their meeting with CAEFS. CAEFS also overheard comments suggesting that some staff members were aware that the interaction was occurring in the presence of external observers and that they should stop yelling because of this. This raised concerns that staff recognized the conduct as inappropriate yet failed to intervene in a meaningful way, and that the interaction may have escalated further had CAEFS not been present.

Following the incident, CAEFS was permitted to continue meeting with individuals in the Structured Intervention Unit, although meetings were restricted to the interview room behind a glass barrier. During one such meeting, a staff member made a comment about a person from the SIU that was dismissive and inconsistent with principles of dignity and respect, specifically: "we need to put this one away."

Discussion: The IMT advised that they had already been made aware of the incident and was taking steps to address the staff behaviour. This included discussions with staff regarding professional conduct and the continued importance of the Creating Choices philosophy in interactions with incarcerated people. The IMT also noted that many staff members working on the unit that day had recently returned to work following the fatal accident and that the institution was continuing to navigate the impact of that event. The IMT acknowledged, however, that this does not diminish the importance of always maintaining professional and respectful interactions with incarcerated people.

Law & Policy:

Creating Choices, Principle 4, Supportive Environment: "A positive lifestyle which can encourage the self-esteem, empowerment, dignity and respect for self and others so necessary to live a productive, meaningful life, can only be created in an environment in which all aspects of environment are positive and mutually supportive"

CCRA s. 70: The Service shall take all reasonable steps to ensure that penitentiaries, the penitentiary environment, the living and working conditions of [incarcerated persons] and the working conditions of staff members are safe, healthful and free of practices that undermine a person's sense of personal dignity.

CD 001 s. 2: The CSC Values Statement guides behaviour, decision making and discretionary judgement in the Service. CSC staff are expected to demonstrate the following shared, reciprocal values in all of their interactions with [incarcerated people], colleagues (peers, subordinates and superiors), partners, stakeholders and the public: [...] Respectful behaviours honour the rationality and dignity of persons – their ability to choose their own path, within lawful order, to a meaningful life. A good test of respectful behaviour is treating others as we would like to be treated.

CAEFS' Recommendations: CAEFS appreciates the IMT's attention to this matter and that action was taken in advance of our raising these concerns directly. The Creating Choices philosophy is clear: the incarceration of women must provide an empowering, dignity preserving environment. While the CSC is facing constraints via cuts and overcrowding, there is nothing preventing the Service from treating women and gender diverse people with dignity. CAEFS recommends that CSC implement a service-wide standard for respectful, person-centered communication and conflict de-escalation, including encouraging staff to consider the demoralizing impact of their actions on people who enter incarceration with deep histories of victimization already.



Access to Medication

Description: Concerns regarding medication access and management remain prevalent. Multiple individuals reported that transitions from Sublocade to Suboxone are not occurring in accordance with recommended practices, resulting in significant discomfort, withdrawal symptoms, and disruptions to daily functioning. Several people reported having medications discontinued following allegations or suspicions of diversion and expressed concern that these decisions were made without adequate communication, warning, or opportunity for discussion. Individuals affected reported worsening mental health symptoms, including increased anxiety, depression, and panic attacks, while facing lengthy delays in accessing follow-up appointments with healthcare providers after being cut off from their medications on the suspicion of diversion. Another person reported being denied access to important medications despite explaining that known medication side effects had contributed to her delay.

Broader concerns were also raised regarding anticipated formulary changes affecting mental health medications and their potential impact on individual wellbeing and institutional stability. Several individuals reported reductions or discontinuations of medications that had previously been effective in managing their mental health symptoms. They expressed concern about the speed of some medication changes and the impact these adjustments have had on their overall wellbeing and stability. Many people expressed broader concerns regarding anticipated formulary changes affecting mental health medications and the potential impact on both individual wellbeing and the institutional environment more generally.

Discussion: CAEFS and the IMT discussed individual examples, with consent. The IMT advised that the primary healthcare provider takes a careful and methodical approach when tapering or discontinuing medications. Individuals were encouraged to raise concerns and ask questions at the time medication changes occur. CAEFS raised the possibility of implementing a peer health worker role or supporting Peer Advocates to take on a more active role in health care to assist individuals in understanding healthcare processes, accessing information, and advocating for their healthcare needs. The IMT noted that allegations of diversion require documentation and that removing an individual from medication involves a formal process. Staff acknowledged that healthcare services are currently experiencing significant demand due to population pressures, resulting in longer wait times for appointments. Individuals who work with therapists were encouraged to raise concerns through those clinicians, who may assist in advocating for their healthcare needs. The IMT also noted that institutional physicians advocate for continued access to medications where clinically appropriate, although decisions regarding the national formulary are made outside the institution's control.

Law & Policy:

CCRA s. 86 (1): The Service shall provide every [incarcerated person] with (a) essential health care; and (b) reasonable access to non-essential health care.

The Canadian Charter of Rights and Freedoms, s.12: Everyone has the right not to be subjected to any cruel and unusual treatment or punishment.

The Canadian Charter of Rights and Freedoms, s.7: Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

CAEFS' Recommendations: CSC must ensure the dignity, health, and well-being of all people in its care. CAEFS recommends expanding access to medication counselling, including the routine provision of clear, written information about prescribed medications. To support professional autonomy and the delivery of essential health care, CSC's National Formulary should be aligned with evidence-based clinical best practices rather than driven by security considerations. CAEFS further recommends strengthened, proactive external oversight by the relevant regulatory bodies overseeing health professionals working in penitentiaries, alongside a renewed commitment to holistic, patient-centered care in both policy and practice. Finally, CAEFS suggests amending the Canada Health Act to recognize federally incarcerated people as insured persons. Such a change would help ensure equitable access to health care while reducing CSC's growing health-care costs and administrative responsibilities.



Physical Conditions of Confinement

Description: Concerns were raised regarding significant flooding within the MSU and a recent fire affecting the elevator. As a result, people expressed concerns about carrying heavy items, including groceries and fabric, up and down stairs. People on the main compound also reported ongoing flooding and sewage accumulation in the yard area. According to multiple reports, rainfall results in a strong sewage odour that has become increasingly noticeable since construction work occurred last summer. Several individuals reported having tested positive for H. pylori and expressed concerns that suspected contaminated water may be contributing to infections. People reported believing that water quality issues are connected to construction work undertaken on the grounds last year and expressed concerns about the safety of drinking water on the main compound.

Heat management also remains a concern. People reported that it was agreed that a third fan would be installed on living units on the main compound, but that this has not yet happened. Individuals further reported that only one fan is currently available in A House.

People also reported that second mattresses previously available to residents had been removed. Concerns were additionally raised regarding maintenance requests that either receive no response or are marked complete without the issue being resolved. Specific examples were shared.

People incarcerated at EIFW noted positively that kitchen renovations are underway and expressed appreciation for these improvements.

Discussion: The IMT advised that plans to repair the elevator are underway. Management stated that while certain low-lying areas of the grounds experience pooling due to recent heavy rainfall, there has not been significant flooding on the main compound. The IMT also noted that recent municipal water quality concerns in Edmonton are not unique to EIFW and indicated that no concerns relating to H. pylori had been previously brought to management's attention. The IMT confirmed that institutional policy permits only one mattress per person, whether a standard mattress or a medically authorized mattress. Management advised that installation of the third fan remains in progress and stated that additional funds had been invested to increase fan availability. Follow-up with Administrative Services was committed to. The IMT also noted that institutional appliances are replaced through a lifecycle management process and requested that specific maintenance concerns be forwarded by email for review, which has since been actioned.

Law & Policy:

CCRA s. 70: The Service shall take all reasonable steps to ensure that penitentiaries, the penitentiary environment, the living and working conditions of [incarcerated people] and the working conditions of staff members are safe, healthful and free of practices that undermine a person's sense of personal dignity.

CCRR s. 83 (1): The Service shall, to ensure a safe and healthful penitentiary environment, ensure that all applicable federal health, safety, sanitation and fire laws are complied with in each penitentiary and that every penitentiary is inspected regularly by the persons responsible for enforcing those laws.

CAEFS' Recommendations: CAEFS appreciates EIFW's efforts to address emergency situations and encourages continued action to ensure conditions of confinement support the safety, wellbeing, and dignity of incarcerated women and gender-diverse people. This includes responding to concerns in a timely and compassionate manner and working with the Inmate Committee and House Representatives to identify priorities and address gaps. While these measures are important, long-term solutions must address the population pressures and aging infrastructure that are driving deteriorating physical conditions of confinement. To this end, CAEFS recommends prioritizing community supervision and timely reintegration at eligibility dates to reduce the number of women and gender-diverse people in custody, a more cost-effective and evidence-based approach than constructing new facilities or retrofitting existing institutions to accommodate a growing prison population.



Medical Isolation

Description: CAEFS received a report that an individual in the Minimum-Security Unit (MSU) was placed on unit confinement for approximately 10 days after being identified as having been in contact with a person who had scabies in the community. The individual reported that they remained asymptomatic throughout the confinement period and were initially advised that the restrictions could remain in place for up to six weeks. During the confinement, the individual was restricted to their living unit and reported being unable to access outdoor time. The individual also reported that the restrictions resulted in the cancellation of eight ETAs and two visits, including employment-related ETAs and cultural programming. They described the confinement as isolating and comparable to segregation, noting negative impacts on their mental health and wellbeing. The individual also questioned the necessity and proportionality of the restrictions, particularly given the absence of symptoms and the fact that they continued to interact with others on the unit during meals, showers, and laundry. They expressed concern that the rationale for the confinement was not clearly communicated and that the response did not appear to align with community standards of care or the principle of using the least restrictive measures necessary.

Discussion: The IMT advised that available space and operational considerations contributed to decisions regarding where individuals are housed during periods of medical isolation. Management indicated that decisions were informed by community-based standards and guidance from Alberta Health Services relating to infectious disease exposure. This discussion led to a broader conversation about institutional concerns being raised for the first time during monthly meetings with CAEFS. The IMT encouraged individuals to raise concerns with staff as they arise so that issues may be addressed in real time rather than waiting for meetings.

CAEFS raised the Commissioner's Directive developed for COVID-19 medical isolation, including requirements for informing individuals of the reasons for isolation and associated restrictions, and suggested that this framework may provide a useful model in future situations. The IMT requested that the relevant directive be forwarded by email, which has since been actioned.

Law & Policy:

CCRA s. 4(c): the Service uses the least restrictive measures consistent with the protection of society, staff members and [federally sentenced people].

CCRR s. 83(2): The Service shall take all reasonable steps to ensure the safety of every inmate and that every inmate is [...] (d) given the opportunity to exercise for at least one hour every day outdoors, weather permitting, or indoors where the weather does not permit exercising outdoors.

CD 822, Purpose: [...] To ensure that the least restrictive measures are used in the implementation and use of medical isolation and modified routine for health purposes, which are informed by public health principles and guidance

CAEFS' Recommendations: Confining someone to their living unit is a significant restriction of liberty. Even where medical isolation is in the individual's best interests, CSC must use the least restrictive measures possible. CAEFS recommends amending CD 822, which sets out provisions requiring the formal documentation and authorization of medical isolation and operationalizes the person's right to contact legal counsel and external service providers, as well as the principles of least restrictive measures and humane living conditions, so that it explicitly applies whenever medical isolation is being considered. This would provide clearer guidance for both staff and incarcerated people.

