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**EVIDENCE**

**Thursday, October 27, 2011**

**Chair**

**Mr. Kevin Sorenson**



## Standing Committee on Public Safety and National Security

Thursday, October 27, 2011

• (1140)

[English]

**The Chair (Mr. Kevin Sorenson (Crowfoot, CPC)):** Good morning, everyone. This is meeting number nine of the Standing Committee on Public Safety and National Security, October 27, 2011.

Today we're going to continue our study on drugs and alcohol in prisons. We are examining how drugs and alcohol enter prisons and the impacts they have on the rehabilitation of offenders, the safety of correctional officials, and on crime within the institutions.

For the listening audience, I will state that on Tuesday of this week, our committee traveled to Kingston to inspect the institutions of Collins Bay and Joyceville. I'm certain that all members benefited from that experience and from what we learned there in regards to our study—and probably a little more than just in regards to our study. It was informative just being able to hear some of the concerns of both offenders and correctional officers, and management as well.

We have one panel of witnesses appearing before us today via teleconference from Edmonton, Alberta. We have Andrea Markowski, the warden at the Edmonton Institution for Women; and from my constituency of Crowfoot, we have Darcy Thompson, security intelligence officer at the Drumheller Institution.

On behalf of our committee, I want to thank both of our witnesses for their time and effort in helping us with our study. We appreciate very much having your input. We apologize that we couldn't have you here today and couldn't have it via video conferencing. It was a matter of the resources at this end, I think, that let us down.

We also apologize for being a little late today. We had a vote in the House of Commons. It was a quick vote dealing with the long-gun registry, which for some of us was fairly important.

I invite both of you now, Mr. Thompson, and Ms. Markowski, to give some opening comments, and then we will move into a couple rounds of questions that we may have for you. We look forward to your comments.

Thank you for joining us via teleconference.

**Ms. Andrea Markowski (Warden, Edmonton Institution for Women, Correctional Service of Canada):** Thank you.

I'm Andrea Markowski and I'll provide my opening remarks first and then Darcy will follow me.

Good morning to you, Mr. Chair, and all the committee members. I want to thank you for asking me to appear and giving me an opportunity to share my experiences with you.

I've been the warden here at Edmonton Institution for Women since April 2009. You'll probably hear me refer to Edmonton Institution for Women as EIFW. That's the acronym that we often use. EIFW is one of six regional multi-level facilities for federally sentenced women in Canada. One of those facilities is a healing lodge, called Okimaw Ohci Healing Lodge, near Maple Creek, Saskatchewan. In that facility they only house minimum- and medium-security women, but the other five facilities are fully multi-level: minimum, medium, and maximum.

By way of background, I want to let you know that EIFW has a capacity for 125 women. We have 100 minimum- and medium-security beds for our general population; we have 10 beds in the structured living unit, a mental health placement unit; and we have 15 maximum security beds, totalling a 125-bed capacity.

It's noteworthy that we've been operating at or above capacity for the last few years. We're using double-bunking in our secure unit, which is the maximum-security level, as a means of managing this population pressure. At times, we have had to use our private family visiting units as regular housing for women within the general population. But infrastructure enhancements are under way, and we will be adding 40 minimum beds and four additional beds to the structured living unit for a total of 44 additional beds over the next few years.

Our approach at facilities for federally sentenced women in Canada is based on the principles established by the task force report called *Creating Choices*, namely meaningful and responsible choices, shared responsibility, respect and dignity, empowerment, and a supportive environment. These principles guide the operation and design of our facilities, and also the way in which we deliver services to women. In that sense, we work collaboratively with the women who live here—and you'll often hear me refer to them in that way—to build a community where everyone can feel included, respected, and able to flourish.

With respect to federally sentenced women, the women-offender population is the fastest-growing incarcerated population in Canada, surpassed only by the aboriginal women-offender population.

Most women admitted to federal custody have serious substance abuse concerns that require intervention; many suffer from mental health difficulties; most have experienced trauma in the form of physical and sexual violence during disrupted and chaotic childhoods and victimization in adulthood; and about half, and in fact up to about 65%, are serving a sentence for violence offences. Most of these women are suffering from severe substance abuse difficulties. Some will continue to seek drugs during their sentence, particularly at the beginning when they're just starting out on their journey.

Drug abuse can take many forms inside institutions. It can include illicit and prescription drugs, as well as the consumption of substances that contain alcohol, such as homemade brew. We take a coordinated approach to these challenges—prevention, intervention, and interdiction. Darcy is going to speak to you at greater length about some of our activities.

Drug and alcohol abuse in prison is somewhat different in a women's facility. A woman's ability to hide items in her body cavity for long periods of time can impede our interdiction efforts. It certainly makes dry cell interventions—which I can explain to you later, if you're not sure what that is—a less effective intervention for us. Those are specific challenges we face.

• (1145)

However, the women do tend to have fewer connections outside of prison, so in that sense, we have fewer throw-overs; and smuggling of drugs into the facility and within the facility is less evident than in prisons for men. But the reality is that women sometimes do arrive at our site from remand centres with drugs or other unauthorized items like tobacco, or they attempt to bring them in when they've been on an escorted absence or when they've had visits in the facility.

Efforts by the Correctional Service of Canada, such as our investments and enhancements at principal entrances, perimeter security, the effective use of dynamic and static security, and the bolstering of our intelligence capacity have really proven to be effective deterrents. This notion is supported at my institution and at women's facilities in general across the country by very low rates of drug seizures and a low rate of positive urinalysis testing.

In order to address the root issue of substance abuse, women in federal custody are offered comprehensive mental health and substance abuse assessments on intake. These assessments are followed by the development of a detailed and comprehensive correctional plan.

Gender-sensitive interventions are offered as early as during the intake process. In fact, on average women begin programming within 50 days of arriving at our facility—and that is still within the intake process phase. Women are highly motivated to engage in treatment while they're incarcerated, so we have very high rates of enrolment and completion of programs.

While some women are loosely affiliated with gangs prior to their incarceration—usually through a male partner—they rarely carry on these activities while they in custody. Therefore, gang management in women's facilities is not a major concern for us at this time.

Mr. Chair, I trust this covers some of the areas of your interest.

After Darcy Thompson has had the opportunity to provide his opening remarks, I would be more than happy to respond to any questions from the committee.

Thank you very much.

• (1150)

**The Chair:** Thank you very much.

We'll move to Mr. Thompson.

I should say, Mr. Thompson, before you begin, that at one committee a couple of weeks ago, I mentioned one of the tours that I had gone on in Drumheller and the intelligence board that you have there with the pictures and intelligence-gathering information. You won many accolades from those involved. I think the commissioner was one, and there were others.

So we're pleased to have you here today, and perhaps your testimony here today is a result of some of those testimonials and the recognition of what you do there in Drumheller.

Mr. Thompson.

**Mr. Darcy Thompson (Security Intelligence Officer, Drumheller Institution, Correctional Service of Canada):** Thank you very much for your comments. They are very much appreciated. Mr. Chair, I would really like to thank you for this unique opportunity. It is an honour and a privilege to share my experiences with you.

My name is Darcy Thompson. I am a security intelligence officer in the Drumheller Institution in the prairie region. We are a medium security institution, housing approximately 600 inmates. Surrounding our institution is a 15-foot double fence equipped with a fence detection system, as well as a motion detection system between the fences. We also have a minimum security unit located outside the perimeter fence, which currently has a capacity of 72 beds.

I've been working for the Correctional Service of Canada for just over 17 years. I have been a security intelligence officer for 9 of those 17 years. Prior to assuming this role in 2002, I was a correctional officer and was also involved with the institutional emergency response team, first as a member, then as team leader at Drumheller.

As an intelligence officer, one of my main responsibilities is to gather information, process that information into intelligence, and provide that intelligence to our decision-makers. Our overall goal, of course, is to maintain a safe and secure environment inside the institution for both staff and inmates, as well as the community as a whole. We gather information from a variety of different sources, including electronic means and image sources, but most of all, from our staff who work with offenders on a daily basis. The more information I share with the staff, the more information I receive back, which is essential for us to do an effective job.

It goes without saying that information-sharing goes beyond CSC. We have established positive relationships with our law enforcement partners, such as the RCMP, municipal police departments, Criminal Intelligence Service Canada, and the Canada Border Services Agency, to name a few. Our ability to share information is crucial in the fight against criminal activity within our institutions and in the community, especially when it comes to drugs, gangs, and violence.

Mr. Chair, we know that gangs and drugs go hand-in-hand. When members of a gang are incarcerated, it does not mean they cease their efforts to continue their criminal activity. As my commissioner said during his recent appearance, a significant amount of violence that occurs within the institution can somehow be tied back to drugs, debt, and gangs. Therefore, we need to continuously adapt and keep up with the most current information and new technologies to be able to put a stop to their activities.

For instance, when a new inmate is scheduled for placement at Drumheller, my department is consulted to see if he has a gang affiliation and whether he can safely exist in our population. Here communication within CSC and our partners becomes crucial. An incident could happen on the street, or in another institution, or in a remand centre that could drastically affect relationships between two groups in our population.

We also have effective tools in place to help stop the introduction of drugs into our institution. For example, our drug detector dog program is an excellent and effective means of identifying those who may try to bring drugs inside. Inmate visitors are a well-known means of introducing drugs. We have had numerous seizures as a result of our drug dogs. I have witnessed drivers of vehicles coming for a visit turn away as soon as they see the dog handler's vehicle parked at our entrance. I have listened to phone calls to inmates who are asked if they think the drug dog will be there. This program has proven itself not only effective in interdiction but also at deterrence.

Visitors aren't the only means to get drugs inside an institution. Inmates themselves may try to smuggle drugs back inside when returning from temporary absences. We have also seen offenders purposefully seek suspension and return from remand after they were able to acquire drugs on the street. Of course, we also see drugs introduced by throw-overs and hidden in the vehicles that come on our grounds. We have also seen contraband stashed in produce entering our kitchen. Inmates are very innovative, but it is my job, and that of every member of Drumheller's staff, to stay on top of the problem and use all of the resources at our disposal to keep drugs out.

Mr. Chair, over the years I have seen a dramatic change in how CSC is meeting this challenge head-on. I have provided you with

just a few examples here. In my area, the increase in our security intelligence capacity, as well as the introduction of new technology and the establishment of positive working relationships within the intelligence community, have all proven that we are definitely moving in the right direction.

I would be happy to take any questions from the committee at this time.

• (1155)

**The Chair:** Thank you very much, both Ms. Markowski, and Mr. Thompson.

I will move into our first round, and we will go to the government.

Mr. Norlock, you have seven minutes.

**Mr. Rick Norlock (Northumberland—Quinte West, CPC):** Thank you.

It's sometimes of benefit to add a little bit of humour to these instances, if this weren't such a serious issue. I was looking at some of the pictures you sent along on how drugs enter our prisons. I saw a loaf of bread and it reminded me of the cartoon where people smuggle a file into jail so they can get out. So it doesn't surprise me. I imagine there are even cakes with drugs in them.

Some of my questions emanate from our visit yesterday to Joyceville. My question to one of the inmate representatives was whether drugs in a prison made prison safer for inmates. He indicated that a drug-free prison would be safer for inmates.

You left some things out of your statement, which is understandable. But some of the advocates on behalf of people who are in our prisons indicate that 70% of the drugs are brought in by staff. Of course, I'd like you to comment on that. You mentioned who was bringing the drugs into prisons, but I'd like you to elaborate on that.

Mr. Thompson, perhaps you can talk about the methods by which drugs have come into your institution that may differ from others. Or do they follow the same pattern?

Then you alluded to drugs, gangs, and violence. This government has invested quite heavily in funding drug interdiction in prisons, so I'd also like you to comment on the difference in the situation before and after that infusion of resources into drug interdiction.

You have a lot to chew on there.

**The Chair:** Maybe I'll ask committee members whether they have questions specifically for one or both of the witnesses, because they can't see you. Otherwise whoever feels able to or wants to answer can go ahead.

**Mr. Rick Norlock:** That's why I mentioned Mr. Thompson by name.

**The Chair:** Yes. I'm just making sure everyone else knows that.

Mr. Thompson.

**Mr. Darcy Thompson:** To begin with, on the comment that 70% of drugs entering our institution do so through staff members, I don't believe that to be so. No organization wants to admit there's corruption within its staff, but in reality it does exist.

There are many methods that inmates can think of to get drugs inside our institution. The majority of the drugs enter as small portions via visitors who are attending open visits with the inmates. But there are a number of different ways, including private family visits, or when inmates go out into the community on escorted temporary absences. Normally they're in sight and sound of the escorting officer, but at times there is an opportunity to slip something into their pocket, such as when they go to the washroom.

We have contractors who are coming in all the time. We're not saying that all of the contractors are bringing contraband into the institution. But is it a reality? Yes, it is.

In my opinion, drugs are the evil of all evils, especially in an institutional environment. Muscling, extortion, debt, and violence are usually all tied back to drugs. We look at this as having two different elements. We look at the drug users and the drug dealers. The drug dealers are the main concern, in my capacity.

In the last few years there has been an increase in the capacity of our department, in terms of the number of security intelligence officers and administrative resources. I can honestly say that our drug seizures have significantly gone up since then.

• (1200)

**Mr. Rick Norlock:** Thank you very much.

Can you expand on the banking system used with drugs? We've learned that drugs and tobacco are part of a banking system. There is no exchange of cash, but records are kept. Could you talk about that?

**Mr. Darcy Thompson:** Normally, financial transactions are done on the street. If I'm a drug dealer and three inmates each owe me \$100, I'll provide those three inmates with a bank account number and tell inmate number 1 to deposit \$100.06 into that specific bank account. I will tell inmate number 2 to deposit \$100.12 into that specific bank account, and inmate number 3, maybe \$100.16. Then I'll phone my contact on the street to check the deposits into that account. If I know there is \$100.06 deposited in that account, inmate number 1 has paid his debt.

Most of the financial transactions are not done inside the institution but on the street.

**Mr. Rick Norlock:** Would you mind expanding on how in the prison, the chain of financial transactions actually relates to organized crime and gangs, and how the latter account for a significant part of the drug trade within prisons? Can you also

expand on how the drugs themselves get into prison via gangs and organized crime?

**Mr. Darcy Thompson:** Organized crime groups have a lot of connections on the street and, frankly, a lot of money. Normally, they would contact their connections on the street to arrange packages to be put together and to be brought into our institutions.

The main players and significant drug dealers within our institutions sometimes pressure other inmates to have their visitors bring them in. They are not normally directly involved with the drugs entering our institutions but are orchestrating it from inside our prisons. Normally, that's not done over our telephone system but through cell phones that have been smuggled in.

**The Vice-Chair (Mr. Randall Garrison (Esquimalt—Juan de Fuca, NDP)):** Thank you, Mr. Thompson.

For the benefit of the witnesses, I'm Randall Garrison, the vice-chair who has temporarily assumed the chair.

We'll go to the official opposition and Mr. Sandhu, for seven minutes.

**Mr. Jasbir Sandhu (Surrey North, NDP):** Thank you, Mr. Vice-Chair.

I would like to thank our witnesses for being here today. Your testimony is extremely important in navigating this issue of drugs and alcohol in prisons. It's very complex.

We've had opportunity to hear from many witnesses over the last few weeks and had an opportunity to visit a prison this week, to see firsthand what a prison environment is like and to hear from the prisoners. This was actually a very good experience and one that I think is necessary to be able to begin to understand the issue of drug and alcohol abuse in prisons.

It's clear that the problem is a complex one that requires a comprehensive, balanced approach, including a focus on effective programs and rehabilitation.

Having visited the prison this week, we heard prison officials and inmates themselves talk about the drugs that are available in the prison and the cost of those drugs compared to what you would pay for drugs outside. It's a significantly higher cost for drugs, if you're purchasing inside. It's significant, maybe 10, 15, or 20 times higher, which is what we heard from officials. It may be more than that.

There was a document entitled "A Flawed Compass: A Human Rights Analysis of the Roadmap to Strengthening Public Safety". I'm going to quote from it and ask you for your analysis of it. Quoting from that document, it states:

...that even if the flow could be successfully reduced, this increased scarcity would significantly increase the value of drugs and competition for them with the result that the drug trade in prison could become more lucrative, desperate and, therefore, more violent.

Mr. Thompson, would you agree with that, or what do you think about this analysis?

●(1205)

**Mr. Darcy Thompson:** I don't fully agree with that statement. Obviously we make it very difficult for inmates to smuggle drugs into our institution and so, yes, the institutional value of drugs is significantly higher than it is on the street.

Drug prices within an institution obviously fluctuate through with supply and demand. But from my experience over the years, they have seemed somewhat consistent. Drug addicts are going to use them, if drugs are readily available. The value of the drugs and what these individuals are paying for these drugs is a major issue because, frankly, they cannot afford the drugs and yet they just keep buying them. They become indebted and keep using them. They get into more debt, and they eventually come to us for protection, because they just cannot continue paying off their debt.

Yes, I agree that if we reduced the drugs significantly inside the institution, the value would increase and, yes, the debts would increase. And if people aren't paying off their debts, that's when we see the violence, the assaults.

I'm not sure if that answers your question or not.

**Mr. Jasbir Sandhu:** Certainly. It's very clear to me that when you have a commodity that's scarce, the prices go up and you have less of it and then more people want access to that lesser amount, and there is going to be competition for that. That's not only for drugs in prison but anything else outside of it.

I'm going to go back to Ms. Markowski. I've got a question for her.

In the minutes of an Amnesty International meeting held in Edmonton in March 2010, you are cited as saying that in your Edmonton institution, you try to create a place of healing. How important is it to the female inmates you work with that they feel trusted and respected, so that healing to take place?

**Ms. Andrea Markowski:** It's absolutely critical, and it's the foundation of everything we do here. A woman's pathway into prison is a terrible journey, filled with trauma, abuse, and marginalization of all sorts. And her pathway into crime has often included drug use and misguided attempts to manage the financial burdens she has faced without her having the skills to get employment to be able to care of her family members.

When you look at the number of women in prison compared to the number of men, you will see that there are only about 1,100 women under federal jurisdiction, and just under half are in the community. There are almost 23,000 men in prison. So a very small number of women eventually make their way into prison. By the time they get here, they're suffering very seriously from substance abuse and mental health difficulties and financial marginalization trauma. Their journey back to balance, recovery, and safety has to be founded on creating safety in the environment they live in, and that relationships of trust and respect. That then becomes the platform for them to be able to accept accountability for the harm they have caused and to repair that harm. This restorative justice is integral in terms of how we operate at the facility.

I'd like to see if you have other questions, or I can tell you more about what we do here.

**The Vice-Chair (Mr. Randall Garrison):** Do you have questions?

**Mr. Jasbir Sandhu:** Yes. In your statement, Ms. Markowski, you pointed out that some continue to seek drugs during their time in custody, particularly at the beginning of their sentences. Are there programs available for them right away when they get into the prison, so they are able to enrol in a treatment program the first day? Or do they have to wait a while?

●(1210)

**Ms. Andrea Markowski:** Well, there are all kinds of programs operating in different timeframes, and our intervention with the women starts the day they arrive. I think what's critical is that we don't just do interdiction; we must do prevention, harm reduction, and treatment, and I can tell you we do that in a really comprehensive way.

So when women arrive, they are seen by health care right away, for example. They enter into a reception awareness program. They also have a comprehensive medical assessment, and soon after that the mental health and substance abuse assessments begin. The assessment is part of the treatment. So all of that begins right away, and I'm very proud of the statistics.

In the women's facilities, women are in a core program within 50 days. The way we deliver programs now is that they're either moderate or high intensity, and they're modular, addressing a whole variety of issues. So within 50 days, women have started the engagement phase of treatment, often targeted at their substance abuse. They have access to a chaplain, and a psychologist or psychiatric services. As well we have AA and NA meetings here in the facility, and many volunteers come in and offer support to the women.

**The Vice-Chair (Mr. Randall Garrison):** Thank you, Ms. Markowski.

We're going to have to go to the government side at this point.

Mr. Rathgeber.

**Mr. Brent Rathgeber (Edmonton—St. Albert, CPC):** Is it five minutes or seven minutes, Mr. Chair?

**The Vice-Chair (Mr. Randall Garrison):** It's still seven minutes.

**Mr. Brent Rathgeber:** Thank you.

Thank you to both of the witnesses for your interesting testimony and evidence here this morning. I've had the opportunity to visit both of your institutions, being an Alberta MP.

Certainly with respect to the Edmonton women's facility, Warden Markowski, I think you'd agree that the physical layout is a campus-style format: it's fairly open; there's a perimeter fence and lots of green space. Would that be a fair characterization for the members who have not had the opportunity of visiting the lovely city of Edmonton?

**Ms. Andrea Markowski:** Yes, for the general population it is very much like that. The women live in houses. Ten women live there collaboratively, and they cook and clean and share the chores and move around during the day to work and programs.

The maximum security unit would look much more like the prisons that other folks might be familiar with, and for obvious reasons the women there need to be in a more structured environment.

**Mr. Brent Rathgeber:** There's a perimeter fence surrounding the entire facility, and I'm assuming that from time to time contraband is lofted over that fence, just given the physical layout of your institution. Would that be fair to say?

**Ms. Andrea Markowski:** That has not happened since I've been here—not that I'm aware of. But we put a lot of effort into preventing it. We have restricted movement within the yard area away from the perimeter fences, we have a lot of staff present, and we were given some additional resources that we utilize to prevent throw-overs. With the use of the other technology, we have not had an issue with throw-overs. That is not the way drugs are coming into this facility, to the best of my knowledge.

I checked with my colleagues before appearing, and at some other sites they are having challenges with throw-overs, but we are not.

**Mr. Brent Rathgeber:** I've also been to Drumheller. Your design is slightly more traditional, but still there is a perimeter fence, as opposed to the walls of the institution forming the perimeter.

What is your experience with respect to tennis balls or dead birds and other things that we've heard of being used to fly contraband over the fence, Intelligence Officer Thompson?

**Mr. Darcy Thompson:** Throw-overs have definitely been an issue here at Drumheller, especially in the last few years. Years back we didn't have that many throw-overs, I think because of our proximity.

I think this practice was brought in from other institutions. In other words, some thought, why don't we start trying this? They were successful at it, and it almost become commonplace that we were intercepting throw-overs. Most of the throw-overs are big packages, dark packages. We've intercepted some throw-overs with an institutional value of between \$100,000 and \$150,000.

We are experimenting with new technology today, specifically infrared image technology, which is essentially a radar system to detect unauthorized individuals approaching our perimeter fence. That has proven to be very successful so far. But still, we have had arrows come into our yard; the staff have found tennis balls; they have found....

As I explained during my opening remarks, we have two fences that are 16 feet high. We have had packages that haven't been able to make it over the second fence, getting caught in the wire on top of the fence, and we have gone up and retrieved those packages. But before the exercise yard is open, we have staff go into the yard and thoroughly search it to ensure that no contraband has entered our institution.

•(1215)

**Mr. Brent Rathgeber:** You mentioned contractors, Mr. Thompson, in regard to some of the volume of contraband coming into an institution. By contractors, do you mean maintenance personnel, people bringing in groceries, people bringing in clean laundry, or those types of folks?

**Mr. Darcy Thompson:** I mean contractors in the sense that we're doing a lot of construction right now, so we have different construction companies coming into our institution.

**Mr. Brent Rathgeber:** What kind of security clearance do the employees of those contractors have to submit themselves to?

**Mr. Darcy Thompson:** They submit a site clearance form to our department, and we run a CPIC check on them. If there are no issues, they are given a site clearance to come in. When they come in, they are escorted by a commissionaire.

**Mr. Brent Rathgeber:** Does either of you ever find contraband needles in your institutions?

**Mr. Darcy Thompson:** Do you mean needles, as in syringes?

**Mr. Brent Rathgeber:** Yes.

**Mr. Darcy Thompson:** Yes, but the majority of the syringes that we find are jail-made. They're not like the pharmaceutical syringes you would find at a hospital; they're very crude devices. I believe you have some pictures of the some jail-made syringes that were seized.

**Mr. Brent Rathgeber:** They're all made out of BIC pens and other material?

**Mr. Darcy Thompson:** Yes.

**Mr. Brent Rathgeber:** But are those homemade syringes, in your estimation, Mr. Thompson, also capable of being used as a weapon?

**Mr. Darcy Thompson:** Yes, I believe they obviously could be used as a weapon. A lot of these syringes are rented out, and inmates share them. With the concerns about HIV and hepatitis C, I definitely would not want to be stuck with one of those needles. In another sense too, it's a staff safety concern. When staff are searching an inmate's cell, they always ask them whether there is anything sharp that might poke or harm them, and the inmate normally says no. But during a routine search, there is the possibility that a staff member might be stuck by one of these needles.

**Mr. Brent Rathgeber:** And very quickly, Warden Markowski, do you have any incidents in which needles, homemade or otherwise, have been used as weapons inside your institution?

**Ms. Andrea Markowski:** There was one incident in which a needle was attached to another object and used as a weapon.

**Mr. Brent Rathgeber:** Thank you so much.

Those are my questions, Mr. Chair.

**The Vice-Chair (Mr. Randall Garrison):** Thank you.

Now we'll go to Mr. Valeriotte for seven minutes.



**Mr. Frank Valeriote (Guelph, Lib.):** Thank you both, Darcy, and Andrea, for presenting to us today. I have to admit that I'm only a temporary participant in this committee, as Mr. Scarpaleggia was unable to be here. And I haven't had the benefit of visiting the institutions, but I am familiar with Stonehenge in Guelph. I'm not sure to what degree either of you is familiar with that program in Guelph. There is one institution for men and one institution for women, to which people volunteer or are directed there through an alternatives program to incarceration.

My questions are first directed to Andrea. This is with respect to the effectiveness of your program for those who are substance-addicted, and the qualifications of the people in your institution to deal with people who have these addictions. Given that a full 80% of offenders are said to have some form of serious substance abuse problem and that fully half consider their abuse problems a factor in the commission of their crimes, would you think it advisable that a program that begins sooner than 50 days be developed so that people can be treated more immediately for their abuse?

**Ms. Andrea Markowski:** I'll just start with effectiveness of the program. We have some very compelling statistics from our research department showing that the likelihood of someone returning after committing a new offence is reduced by 45% if they have completed one of our substance abuse programs, and by 63% for violent offences. So the programs are very effective at helping offenders build the skill sets they need to manage their addictions or other difficulties and to live in a law-abiding way. We know, though, that anyone recovering from addiction experiences relapse and slips along the way. Those lapses are to be expected. But the effectiveness is demonstrated through the research we've done.

You ask about qualifications. There are various staff doing various things. Obviously the nurses are registered nurses, the psychologists are registered psychologists, and the program delivery officers have qualified through the competitive process. Then they have extensive training to assist them in delivering, for the most part, cognitive and behavioural types of intervention for the offenders.

• (1220)

**Mr. Frank Valeriote:** Do you have people who specialize in the delivery of drug treatment programs specifically?

**Ms. Andrea Markowski:** The programs for women address more than just substance abuse. What we do is to assess the level of intervention required. If it's low, we will engage with them or offer programs as a transition into the community. If there is a moderate need, we have a moderate program. And then we have higher-intensity programs, if there's a higher need. The general program will address all kinds of issues, including substance abuse at whatever intensity the person requires.

Then we have some specialized programs, for example, for sex offenders. We have two streams of programming. The modular programs are either offered through the general stream or in the aboriginal stream, meaning that an elder would be attached to the program and cultural teachings would be incorporated. There are usually three phases to treatment. There's engagement, there's treatment, and there's self-regulation or maintenance, which often starts in the institution and follows in the community.

I also think you have to remember that on admission to federal custody, a lot of adjustment and many assessments need to happen. There's also some relationship-building that needs to happen. I think 50 days is a laudable time to begin our core programming, and we do many other interventions with the women before that. But obviously, the sooner we can begin to assist them, the better. There are efforts under way to do that at all the facilities.

**Mr. Frank Valeriote:** Okay, thank you.

Darcy, as a layperson, it would seem to me that the use of more drug dogs would be advisable. I know that resources are limited, and regardless of whether the price of drugs might go up if the supply is limited, my own feeling is that we need to keep drugs out of prisons. I'm just wondering if you would think it advisable that institutions be properly funded in order to have more drug dogs so that everyone is sniffed, for lack of a better word, when he or she comes in. It just makes sense to me. Is that a naïve perception?

Otherwise, are there ways of getting drugs past the drug dogs?

**Mr. Darcy Thompson:** As I said earlier, the drug dog program is an excellent program. We currently have two dogs at Drumheller Institution, but they can't be everywhere all the time.

Yes, one of our priorities is the visitors coming in. But the dogs can't be at our principal entrance every day; they have other obligations. They may need to be deployed down into the units to search a cell. We might have some intelligence that inmates are coming back from remand, so we would want the inmates who are coming back and are being dropped off by the sheriff's department to be searched by the drug dogs.

**Mr. Frank Valeriote:** Let me be more direct then. Would you like more drug dogs?

**Mr. Darcy Thompson:** Yes, definitely.

**Mr. Frank Valeriote:** Okay, and so that would be a recommendation?

**Mr. Darcy Thompson:** Yes, it would be.

**Mr. Frank Valeriote:** Okay, thank you.

I think I have time for one more question, and that would be to Andrea again.

Andrea, with the expected increase in the numbers of people to be incarcerated—and I don't think I'm speculating here—as a result of the new omnibus bill coming through, are you going to need more support, particularly with respect to addictions and other ailments, including mental illness, that people will be suffering from as your numbers increase?

Could you tell me what plans you are making to prepare for that eventuality?

**Ms. Andrea Markowski:** More and more women admitted to federal custody have very high rates of mental health difficulty. At this point, about 30% come in with a diagnosis, and the expectation would be that this would continue at that rate, or increase as our population increases.

We're already very well positioned with my interdisciplinary team to assess, treat, and offer services to these women. We're pre-positioning ourselves by establishing pools of qualified staff, and also reaching out to those hard-to-recruit staff, so that as our numbers increase we have the staff we need to deliver the services.

• (1225)

**The Vice-Chair (Mr. Randall Garrison):** Thank you, Ms. Markowski.

[Translation]

Ms. Morin, you have five minutes.

**Ms. Marie-Claude Morin (Saint-Hyacinthe—Bagot, NDP):** Thank you.

My question is for Ms. Markowski. I'm sorry if I'm not pronouncing your name correctly. First of all, thank you for being here. I'd like to thank the other witness for being here as well. It's very interesting.

A little earlier, you spoke briefly about programs for aboriginal women. I'd like to know whether aboriginal women serving a federal sentence have the same substance abuse problems as non-aboriginal women. Are their treatment needs different?

[English]

**Ms. Andrea Markowski:** Thank you.

Aboriginal women have at least as high or higher rates of substance abuse, violent offending, and mental health difficulties. Their difficult experiences have compounded and they come in with very high needs. What we've found in the past was that mainstream programming was not as effective as it could be for aboriginal women. It wasn't as culturally sensitive or appropriate for them, and that's why the stream that we have now, which they opt into voluntarily, has been shown to be much more effective. It uses different techniques and incorporates teachings and ceremonies, and an elder. It's similar but enhanced, so that it's more effective for aboriginal women.

[Translation]

**Ms. Marie-Claude Morin:** The Correctional Service of Canada offers intervention programs for offenders with a substance abuse problem, for women with a substance abuse problem and for aboriginals. Are the programs for aboriginal women the same as for the men or are we talking about programs that are truly adapted for aboriginal women?

[English]

**Ms. Andrea Markowski:** All of the programs for women are specifically for women, and the programs for aboriginal women are specifically for aboriginal women. All of our programs are evidence based. They are based on research and evaluated to ensure they are effective and appropriate.

[Translation]

**Ms. Marie-Claude Morin:** Thank you. I have no other questions for you. Thank you very much.

[English]

**The Vice-Chair (Mr. Randall Garrison):** We will go to Mr. Aspen for five minutes.

**Mr. Jay Aspin (Nipissing—Timiskaming, CPC):** Thank you, Chair. Thanks to our guests for providing their expertise this morning.

The first question I have is for Ms. Markowski. As you indicated in your opening remarks, the women offender population is the fastest growing incarcerated federal population. That took me by surprise.

I wonder if you could elaborate on the reasons for that.

**Ms. Andrea Markowski:** I would only be guessing why that population is growing as fast as it is. Over the last 10 years, the women offender population has grown by 9% per year on average. Between 2006 and 2010, the women offender population increased by 23%. In fact, it increased by 28% for aboriginal women.

Everyone has been taken by surprise by this trend. It's very complex and sad. I would only be guessing about the social context and environment that might be contributing to making them more vulnerable to being criminalized. The criminal justice system ends up taking care of folks who probably also need a lot of care from social and mental health services.

**Mr. Jay Aspin:** Thank you.

In your estimation, is there a difference between males and females in terms of how drugs are smuggled into prisons?

**Ms. Andrea Markowski:** What I would say is that the problem is different, because women in prison do not have the supports or connections outside of prison that men do. They are not connected to networks of organized crime. They don't have people willing to bring things in for them, especially not in large quantities. They don't have the resources to move hundreds of thousands of dollars' worth of drugs.

We deal with a different situation. We deal with women coming in from remand centres who sometimes have some drugs or tobacco in their body cavities, usually in small amounts. Mostly they are just managing their withdrawal and their anxiety about coming to prison and it's not about their having access to drugs. Is say this because our prisons for women are quite drug-free.

We have other challenges. The women are on a lot of medications for various health and mental health issues. We have diversion challenges that I think are more prevalent than they are in the men's facilities. Those would be for methadone and other medications that they might be pressured to share, or that they might sell because they want resources for other things, such as the canteen.

I think visitors are sometimes bringing in small amounts of drugs or tobacco. It isn't often. We are quite effective in deterring and monitoring that, but it does happen sometimes. The women are definitely making efforts, on occasion, to bring drugs back in after they've been out on an escorted absence, whether for their own use or because they feel pressured sometimes to do that.

I think the flavour of the problem with drugs and alcohol in prison is quite different in women's facilities.

• (1230)

**Mr. Jay Aspin:** When we took part in a visit to Collins Bay and Joyceville earlier this week and talked to the prisoners, they were pleased that a lot of these programs were put in place. They generally spoke positively about them.

Could you comment on your assessment of the value of the government's investment of \$122 million in addictions and rehabilitation programs? Could you both briefly comment?

**Ms. Andrea Markowski:** I can say that my site received significant reinvestment funds that have been directed specifically to hiring more nurses, occupational therapists, psychologists, program delivery officers, and parole officers. That has significantly enhanced our ability to address the needs of the women and to help prepare them for a safe transition to the community.

**The Chair:** You're out of time. I'm sorry, Mr. Aspin.

Did Mr. Thompson want to answer that as well?

You did ask both.

**Mr. Darcy Thompson:** I agree with Warden Markowski. We have excellent substance abuse programs. We have Narcotics Anonymous and Alcoholics Anonymous available for the inmate population.

One thing that I find very difficult is that it's very hard to help someone who doesn't want any help. A lot of our offenders don't recognize that they have a problem, or they enjoy their current lifestyle. But these programs have to be available. It's absolutely essential to their rehabilitation and for them to be able to be released back into our community and to be law-abiding citizens.

**The Chair:** Thank you.

Mr. Chicoine.

[Translation]

**Mr. Sylvain Chicoine (Châteauguay—Saint-Constant, NDP):** Thank you, Mr. Chair. I'd also like to thank the two witnesses for sharing their expertise, especially on the security information. I would like to ask one of them a question.

We've talked a lot about systems that have been put in place in recent years, including sniffer dogs and other systems to detect the drugs that might be found in prisons. Some witnesses have said that there are fewer drugs in our prisons. Others have some doubt about the effectiveness of these systems.

Could you please talk about the effectiveness of these detection systems? Should more resources be dedicated to them?

[English]

**Mr. Darcy Thompson:** I will answer, if I may, Warden Markowski.

I think our tools are excellent tools. For example, our drug dog is an excellent tool, but a drug dog is not foolproof. A drug dog alerts on the scent of the drug, but it's not as if it can tell if a person has drugs on him. It depends on the type of drug, whether it's pharmaceutical or a THC product, and on how it's packaged. For 95% of our visitors who come in, it's most likely that the contraband is concealed in the body cavity. Well, how long has it been there? How much scent is emitting off of it?

Our tools aren't foolproof, but they're very, very good tools. Our ion scanner for testing visitors entering our institution is an excellent tool, but that tool is not going to tell me if the individual has drugs on him or herself. It's just going to tell me if the person has been in recent contact with drugs.

So, yes, I think there's a lot of technology out there. For example, at the Correctional Service of Canada, we don't utilize full-body walk-through scanners like you see at the airport. I think that would be an excellent tool, which we could utilize at our principal entrance. I've heard there's some controversy over it, that it may be too intrusive, but it works well at the airports and it would work well at our institutions.

• (1235)

**The Chair:** Do you have a comment, Ms. Markowski?

**Ms. Andrea Markowski:** I would agree very much with what Darcy said. In the end, it comes down to staff. The tools are excellent. The staff need to remain vigilant, and they do. They're well trained and do a good job. And I'm not just talking about correctional officers; it's everybody's responsibility. The key is the funnelling of the information into a central point for security intelligence, so that we can intercede and prevent or deter folks from wanting to bring drugs in.

When I look at the urinalysis results at the women's facilities, for example, they are significantly lower than at the men's facilities. I think we have a different dynamic in the women's facilities. It's less organized and less prevalent. The women are very highly motivated to get the help they need. We have a significantly lower rate for positive testing, which suggests to me that we've made significant headway with the resources we've been given to prevent drugs from coming in.

**The Chair:** You have two more minutes.

[Translation]

**Mr. Sylvain Chicoine:** Of all these measures, which ones are the most effective in terms of expenses? Which ones cost the least? Dogs or scanners? What's your opinion on this?

[English]

**Mr. Darcy Thompson:** I think any new technology that helps assist in detecting drugs entering institutions is money well spent. As Warden Markowski said, our staff are very vigilant and are very well trained in trying to stop drugs entering our institution. The more drug dogs and scanners we can have on site, I think, the better for creating a safe and secure environment.

**Ms. Andrea Markowski:** I feel that the key is really to have a multi-pronged approach. I think we've made significant investments on the security side. We've shown very good results there. We've made significant investments on the treatment and prevention side. That's also showing very good results.

I would agree with Darcy. I think the money has been very well spent.

**The Chair:** Thank you very much.

We'll now move to Ms. Young.

**Ms. Wai Young (Vancouver South, CPC):** I'd like to echo my colleagues in thanking you both for your comprehensive and excellent presentations.

I'd like to ask you a little bit about outcomes. Obviously, with the investment of the \$122 million over the past three years, we've heard from other witnesses that this has led to a decline of drugs in prisons, from 12% to 7.5% in testing.

Would you agree that there is a downward trend? I think you did mention it earlier, but because of your two different institutions, I just wanted to hear it directly from you.

**Mr. Darcy Thompson:** Ms. Markowski, would you like to comment on that?

**Ms. Andrea Markowski:** Sure.

Sometimes I find it easier to look at women's facilities somewhat separately and to look at the history. For the most part, I think the rate of positive urinalysis in these facilities is probably quite a bit lower than at the men's facilities—but certainly it has been falling based on the efforts we've been making.

• (1240)

**Ms. Wai Young:** I notice in your presentation, warden, that you don't specifically state what that percentage is. Could you share that with us?

**Ms. Andrea Markowski:** If you want, I'll compare the most recent data from the last fiscal year. It's a calculation per 100 inmates.

The national average, which includes all facilities, for positive urinalysis testing is 7.43%, and the average among the women's sites is 2.4%.

**Ms. Wai Young:** Wow.

**Ms. Andrea Markowski:** It's much, much lower.

**Ms. Wai Young:** That is significantly lower, as you said. That's cause for celebration, in some ways.

Would you attribute that to the infusion of investment into the prevention programs that happened, the \$122 million that we've been referring to?

**Ms. Andrea Markowski:** I believe that has certainly helped. You just need to look at the women's facilities somewhat differently and recognize, I think, that the numbers have always been lower, which in part is because we have less drugs coming in for the reasons I've already explained.

Sometimes, though, when women are getting involved in drug abuse within the facility, it may be the use of prescription medications they are receiving from other inmates, which would not necessarily show up on some of the testing we do. Some of the self-medicating that may be going on would be in a different form, and that may be part of the reason we see the lower number.

**Ms. Wai Young:** Could I ask you, then, for a comparator. What is it lower number than? I ask because we don't have that other figure.

**Ms. Andrea Markowski:** That I'll have to get for you. If you are looking for trends over the last five to ten years, let's say, of positive urinalysis rates in women's facilities, I know that the folks in parliamentary relations will pull that data for you and get it to you. I'll arrange that.

**Ms. Wai Young:** Thank you so much.

I'd like to turn to you now, Mr. Thompson, and ask you to reply to the same questions.

**Mr. Darcy Thompson:** We also look at this with a multi-pronged approach, with prevention, intervention, treatment, and interdiction, but also disruption. Drumheller Institution has been quite well-known for its high rate of positive urinalysis—although, yes, we've been seeing a decline.

I don't have the actual statistics on our actual rates in front of me now, but I'd be pleased to get back to the committee, if that's required.

**Ms. Wai Young:** I would then I ask both of you to think about this question around leveraging—and Warden Markowski you can answer first. We've now heard that with this infusion of extra funding, you've been able to expand and provide a comprehensive and multi-level series of treatments and programs and services, which I think is quite wonderful. It's led to these great results. However, how are we leveraging this, or is there any thought around leveraging this to go steps further?

Let me give you one example of some ideas or thoughts that I've been chatting about with other people. Tell me whether you think this is viable or not. We've talked about a lot of the successes in regard to family visitors in both men's and women's prisons, and that these visitors are a source of drugs coming into prisons. Are there educational and/or short little videos shown to new guests in particular to inform, educate, and warn them about what happens if they bring in drugs, or how they can support their loved ones when they are still in prison and when they come out?

In other words, what are we doing around second-level information and education program support services?

**Ms. Andrea Markowski:** We have a program for visitors. Before they're allowed to come in for the first time, they watch a video, and we educate them about the rules and some of the risks and how they can reach out for help if they find themselves being pressured or feel that their loved ones are in danger.

There are significant consequences to bringing drugs into the facility. I can tell you from personal knowledge of the sentences I've seen imposed on folks who have done it that they are lengthy and the penalty they pay is very high.

If you're asking if we can do more to work with our population, I would guess there's always room to do more. The family visits, though, are integral to the rehabilitation of offenders and their reintegration. So we always have to strike a balance. Crucial to our success are our partnerships with the community and the folks who come in and engage with the women and help them transition.

• (1245)

**The Chair:** Thank you.

We'll go to Mr. Sandhu.

**Mr. Jasbir Sandhu:** Thank you, Mr. Chair.

In today's meeting and others we've often heard the terms "multi-pronged approach" and "balanced approach". This seems to be a trend. A lot of the experts or witnesses are saying that we need to take a balanced approach. We've seen your urinalysis tests over the last little go down. Would it be fair to say that interdiction and rehabilitation treatment play a part in getting that number lower?

**Ms. Andrea Markowski:** Absolutely. Efforts on all fronts are necessary to help the inmates manage their addictions.

**Mr. Jasbir Sandhu:** Darcy?

**Mr. Darcy Thompson:** I agree 100%. We have to look at all of the different approaches, from prevention to interdiction to treatment.

**Mr. Jasbir Sandhu:** We've also heard the term "drug-free prisons" during these meetings. How realistic is that? Can we really get drug-free prisons?

**Ms. Andrea Markowski:** I guess we have to be realistic, in that folks with substance abuse issues are at times going to be seeking drugs. That happens in treatment centres, in schools, and everywhere. The most important thing is to strive to create an environment that is safe and that facilitates recovery, rehabilitation, and accountability. Part of what we need to do is to make our institutions as drug free as we possibly can, just as a piece of the puzzle.

**Mr. Jasbir Sandhu:** That would be ideal, but is it realistic?

**Ms. Andrea Markowski:** I don't know if it's possible, but the key is to strive for it. For folks working on their recovery, the presence of drugs can be a triggering event that can sabotage their recovery. We need to do that for them. We need to do it because of all of the violence associated with the drug trade inside the facility, like the violence surrounding debts, and the risk to our staff—and to the public if we release people who are still actively addicted. So it's really key that we strive.

**Mr. Jasbir Sandhu:** The urinalysis tests are much lower for women in prisons. What can we learn from the experience in women's prisons? You talked about being less organized. What can

we learn from you that we can apply to the men's prisons to bring their rates down?

**Ms. Andrea Markowski:** Some of it is not within my control; I guess I got lucky. I'm the warden of a women's facility, and women are somewhat different when they come into custody. They are highly motivated, less connected, with fewer resources, and they want to get out of prison to take care of the kids they have. So with some of these things, we're just lucky to have to them.

For example, we don't struggle with gang issues to any great degree, compared with what we've seen in the men's facilities. We need to make sure that those gangs do not get a foothold in our facilities, because the absence of active gang activity allows us to create an environment that is much more conducive to rehabilitation.

**The Chair:** Be very quick, Mr. Sandhu.

**Mr. Jasbir Sandhu:** I'll pass, actually.

**The Chair:** Mr. Leef, I'm just going to warn you right now that I'm going to take the prerogative here pretty quickly as the chair and ask a question of Mr. Thompson as well.

So go ahead, Mr. Leef.

**Mr. Ryan Leef (Yukon, CPC):** Okay. Thank you, Mr. Chair, and I'll make this quick.

This question is for Mr. Thompson. During some of the witness testimony, we heard about a safe needle exchange program in correctional facilities, and that this might be a good idea. I believe there was a comparison made or a description stated that not allowing a safe needle exchange would be akin to discrimination. Could I get you to comment, from your experience, on needle use in the correctional centre and how it relates to gangs.

Also, could you talk specifically about your experience with tattooing. I know we're talking about gangs, but you spoke in your testimony about gangs controlling drugs. Could you share with the committee how tattooing plays a role in that environment?

And could you tell us what a safe needle exchange might mean in terms of health concerns and the proliferation of gang activity through tattooing.

• (1250)

**Mr. Darcy Thompson:** Obviously, the sharing of needles in an institutional environment is a health and safety concern from an inmate's perspective.

Jail-mate tattoos are commonplace within our institution, especially within our gangs. Our gangs, especially our aboriginal gangs, like to get their tattoos, their patches. They're proud to an Alberta Warrior or Red Alert, and they want to publicly display that.

In regard to the needle exchange, are you referring to that in terms of tattooing or intravenous drug use?

**Mr. Ryan Leef:** I would say in terms of both, because there is a direct link, I would suppose, between the ability to tattoo and brand yourself and to show that off, and using that as just a physical symbol of your involvement in the drug trade and organization within the correctional environment. Would that be correct?

**Mr. Darcy Thompson:** Yes, that would be correct.

In regard to the needle exchange program, I am an advocate of not having any drugs in our institution and thus not have needles either. I have a hard time supporting the actual needle exchange program, but on the other side, I don't want to see anyone get an infectious disease when it's not necessary.

**Mr. Ryan Leef:** I'll turn my time over to the chair now.

**The Chair:** Actually, you still have more time if you want to continue on that. We do go to the government side for two questions in a row, so I meant that I would perhaps take a little time in the next round.

**Mr. Ryan Leef:** Okay, we were all in a generous mood, handing time out, weren't we?

**Ms. Candice Hoepfner (Portage—Lisgar, CPC):** If you've got any time, I would like to—

**Mr. Ryan Leef:** Okay, then I'll share my time with Ms. Hoepfner, then.

**Ms. Candice Hoepfner:** Thank you, Mr. Leef.

I have a question for the warden of the women's prison. I'm sorry, but I don't have your name in front of me.

**A voice:** It's Ms. Markowski.

**Ms. Candice Hoepfner:** Ms. Markowski, I'm sorry. I was just putting all my papers away, as I didn't realize I'd have a chance to ask a question.

First of all, you said there are obviously women who trying to bring drugs in, and you talked about the fact that many times it's very difficult because they have different ways of hiding these drugs, which are a lot more difficult to detect. Is that correct?

**Ms. Andrea Markowski:** Yes, that's correct. It can be difficult.

**Ms. Candice Hoepfner:** Would you say, then, that the ability to perform strip searches of these women is something that would help in intercepting these drugs?

**Ms. Andrea Markowski:** We can do strip searching, and we do strip searching, but you may be referring to body cavity searching. Is that what you're asking me about?

**Ms. Candice Hoepfner:** Yes. I'm sorry, I thought they were the same thing, but you're telling me they are two different things. Strip searching is not body cavity searching?

**Ms. Andrea Markowski:** Strip searching is the removal of clothing and a visual inspection, which is something that happens on a regular basis in all prisons, and would certainly happen quite often when women are coming back from escorted temporary absences and that sort of thing.

Body cavity searches are rare. I know the commissioner appeared before you and spoke about them. These are very restricted and not something that we use very often.

**Ms. Candice Hoepfner:** Thank you very much for that clarification.

Are you aware, Madam, that we heard testimony from the Elizabeth Fry Society that they believe that a strip search, which I'm now understanding doesn't even involve a body cavity search, constituted sexual assault? Were you aware that was said? Would you agree with that? What's your view of your officers being accused of sexual assault when doing a strip search?

**Ms. Andrea Markowski:** I'm aware that Ms. Pate made those comments, and I profoundly disagree with her characterization of a strip search. A strip search for all intents and purposes is done on a consensual basis in a very private and respectful way, and the women understand it's done for their own safety as well.

I actually think that's an inappropriate characterization of the activity going on, particularly given some of the experiences the women have had in terms of sexual abuse in their past. We work very hard to make sure that nothing we do here would in any way harm them any further.

•(1255)

**The Chair:** You have 30 seconds.

**Ms. Candice Hoepfner:** Could you just reiterate for us the importance of striving towards a drug-free prison?

There sometimes seems to be this attitude that, well, it's too difficult so let's not try to aim for it. I think you made some very positive comments, and I think it's important that you reiterate them for us.

You're telling us that having a drug-free prison would also help protect women who are trying to get off drugs, and the women who are not on drugs but who would like a safe environment. Is that correct?

**Ms. Andrea Markowski:** It makes it safer and more conducive to the work we're trying to do here, when we don't have drug abuse happening.

The really nice thing is that women tend to be very highly motivated, so they engage effectively and make a lot of changes while they're in prison. My job is to make sure I remove anything that will be an impediment to that process.

**Ms. Candice Hoepfner:** Thank you very much.

**The Chair:** Thank you, Ms. Hoepfner.

My question is for Mr. Thompson.

Mr. Thompson, in the introduction I made some reference to the fact I have the pleasure of representing the riding of Crowfoot, and that Drumheller is in my riding. Consequently, I've been through that institution a number of times and have been impressed, when I have been on that tour, by the intelligence board. When I talk about the intelligence board, you know what I'm referring to. It's that board on the wall with pictures, arrows, and information.

That seems to be a security centre of sorts there. Is that basically what you're responsible for?

**Mr. Darcy Thompson:** I am responsible for that board. The board is located in our briefing room for the correctional officers.

**The Chair:** That's correct.

**Mr. Darcy Thompson:** When I came up with this idea, I thought it would be very good to have everything displayed where officers could sit. Actually putting a face to a name goes is important; it goes a long way. I encourage the staff and the sharing of information in our department, so that the staff are active with the board. I encourage them to go up and write on them, and they do. They're very accepting of that.

**The Chair:** If, for example, a correctional officer overheard a conversation, or perhaps an offender gave a bit of a heads-up that there were drugs entering or coming in a certain way, what happens then? Does the correctional officer report it, or does he go down and write it on the board? Does he make a presentation? How does that work?

**Mr. Darcy Thompson:** An officer would submit an observation report on it to our office.

It depends on the reliability of the information and exactly what the information is. If it's good information, we would go down and maybe put a link to the individual concerned on the board, and during our staff briefings and our institutional updates, we would advise the staff to monitor that individual closely because we believe he's involved in the institutional drug trade.

**The Chair:** All right.

Sometimes inmates may feel pressured by another offender to become involved in some kind of activity that isn't kosher. Does information ever come from inmates or go directly to an officer? Would an inmate give information to an inmate committee that might pass it on? Or is that not in the cards?

**Mr. Darcy Thompson:** A lot of times inmates approach correctional officers in the unit and provide them with information. That information is then relayed to our department. Inmates are very reluctant to go to the inmate committee and provide information to them.

We have, in the past, utilized the inmate committee. For example, if an inmate comes to us and says he's getting pressured to do something he doesn't want to do, we'll definitely explore the option of getting the inmate committee involved and refer that inmate to that committee, and have them sit down with him. Then they're not aware that this individual has been talking specifically with us but is just approaching them for their assistance in trying to resolve a situation.

**The Chair:** In our travels to a number of other penitentiaries, we didn't see such a board. This, as you've already stated, is something that you've come up with. As I mentioned earlier, you are receiving accolades down here for it because it seems to be working.

Are you aware of any other federal or provincial institution that has perhaps done the same thing?

• (1300)

**Mr. Darcy Thompson:** Those charts were created through a program called the i2 Analyst's Notebook. I'm very aware that our

other institutions and the analysts at regional headquarters are utilizing that same program. Different law enforcement agencies are utilizing that program. A lot of other institutions want to implement that same board in their institutions, but it's more of an infrastructure issue. There is no adequate room for it.

**The Chair:** The next question I would like to ask, I'm almost hesitant to ask to you, not just because you're in my constituency but also because we have a great deal of confidence in all of our correctional officers. I know many of them. I've had some who have served with me politically. I know the calibre of the people, but occasionally we hear of correctional officers being involved in bringing in drugs, or maybe being pressured to bring in a drug.

Have you ever been aware of pressures on correctional officers, perhaps from the inside or from the outside? I'm not asking how many officers have lost their jobs or have suffered job repercussions because of this, but are there instances you know of where there has been pressure put on correctional officers to become involved in this type of activity?

**Mr. Darcy Thompson:** I'm not directly aware of any specific incidents where they've had pressure put on them from outside the institution. As I said before, it's not that we want to admit that a correctional officer will bring in drugs, but in some cases that is reality. I definitely do not agree that 70% of the drugs entering our institutions are through our staff.

If you were referring to criminal organizations trying to intimidate a correctional officer to bring in drugs at our institution, I cannot recall a specific incident where that has occurred. Most of the time it will start by doing a small favour, maybe bringing in a little bit of tobacco. Once they do that, they're pretty much hooked. The next time they'll bring in the tobacco and a couple of pills, and it just goes from there.

**The Chair:** All right. I want to thank both of you for joining us via the telephone today. We very much appreciate it. We've had correctional officers in; we've had the union in; and we've had the commissioner in. We've heard from a number of different penitentiaries, and it's certainly nice to hear from the Edmonton Institution for Women and the Drumheller Institution. We thank you very much.

I see that our time is up. We would perhaps also like to make a request of you. If in the next few days you consider some of the questions you have been asked and begin to think you should have answered them this way, or if there's more information you could supply us with, I would encourage you to get a hold of us, whether by writing or calling, and let us know of any further information you may have that would help us enhance this study.

I want to thank you.

The meeting is adjourned.







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