



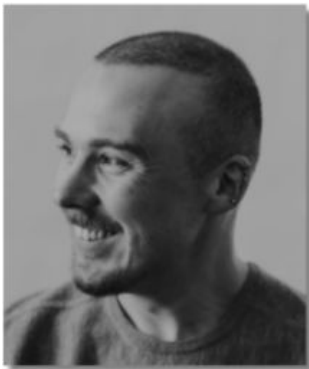
Podcast: Voices from the Field 32 – Decarceration and health – Part 2: Dr. Justin Tetrault

Description

Decarceration and health: Breaking down bars for systemic change is a mini-series within Voices from the Field. It explores the realities and impact of community-based justice alternatives, their connection to health, and what is needed to affect and inspire change and address the current injustices reflected in the over-incarceration of First Nations people, Inuit, and Métis people across the country.

Decarceration and health: Breaking down bars for systemic change – Part 2: Dr. Justin Tetrault. In this episode, we hear from Dr. Justin Tetrault, a Métis criminologist and Assistant Professor of Sociology at the University of Alberta. We learn about Dr. Tetrault's research in prison environments and the importance of Indigenous programming in prisons; as well as the critical issues affecting health and well-being for Indigenous people in prison. We also learn about what is needed and being done to spark policy change and support Indigenous people's self-determination over justice and healing.

Bios



Dr. Justin Tetrault

Dr. Justin Tetrault is an Assistant Professor of Sociology at the University of Alberta, Augustana campus. His research focuses on social movements, political theory, qualitative methods, decolonization, and prisons. Justin is also a senior researcher and project manager of the University of Alberta Prison Project, a multi-year study of life experiences of imprisoned people. Through this work, he has published on Indigenized programming and race relations inside Western Canadian prisons. His current research examines the obstacles Indigenous people face upon release from prison. Justin also studies Canadian nationalism and has published on right-wing extremism and hate crime. Justin is a proud citizen of the Manitoba Métis Nation



Andrea Menard

I am a Métis individual associated with the Otipemisiwak Métis Government and work on Treaty 6 lands in amiskwacîwâskahikan (Edmonton). Originally, my family hailed from the now-dissolved Red River Settlement within Treaty 1 territory. Our Métis lineage bears the surnames Bruneau, Carrière, and Larocque.

I am humbled to have been recognized as one of the Top 5 Most Influential Lawyers of 2023 by CIO Times and as one of the Top 25 Most Influential Lawyers of 2022 by Canadian Lawyer Magazine.

These accolades reflect my deep commitment to partnering with Indigenous nations across Treaties 4, 6, 7, 8, and 10, including collaborations with the Otipemisiwak Métis Government.

My personal journey as a Métis individual informs my ambition to reform academic and legal workplace policies through the inclusion of Indigenous laws, enriched by my PhD studies in Social Dominance Theory and Legal Pluralism at Royal Roads University in the Doctor of Social Sciences program.

As a sessional law instructor at the University of Calgary's Faculty of Law and at Osgoode Hall Law School, I develop and teach innovative courses such as "Reconciliation and Lawyers" (LAW 693) and "In Search of Reconciliation Through Dispute Resolution" (ALDR 6305). In addition, I serve as the Lead Educational Developer for Indigenizing Curricula and Pedagogies at the Centre for Teaching and Learning at the University of Alberta.



Denise Webb

Denise Webb is a Research Associate with the National Collaborating Centre for Indigenous Health. Denise holds a Master of Science in Health Services Research, with an emphasis in health policy and specialization in Indigenous health, from the Institute of Health Policy, Management, & Evaluation at the University of Toronto. Her research focuses on the intersection and relation between health policy and First Nations, Inuit, Métis public health. Denise is of Irish and Scottish settler ancestry and is an aspiring ally, working toward informing the decolonization of health systems and policy research.



Transcript

Denise Webb: Welcome to Voices from the Field, a podcast series produced by the National Collaborating Centre for Indigenous Health. The NCCIH focuses on innovative research and community-based initiatives promoting the health and well-being of First Nations people, Inuit, and Métis people across Canada.

-Music-

Denise Webb: Hello and welcome to *Decarceration and Health: Breaking Down Bars for Systemic Change*, a mini-series within Voices from the Field. My name is Denise Webb. I'm of Irish and Scottish settler ancestry and live as a guest on the unceded traditional territory of the Lheidli T'enneh here in northern British Columbia, and work as a Research Associate with the National Collaborating Centre for Indigenous Health. I'll be co-hosting this mini-series alongside Andrea Menard.

Andrea Menard: Hello, tânsi, bonjour, everyone. And thank you, Denise. I am a Métis, anticolonial legal scholar originally hailing from the Red River Settlement, where my families last names are Bruneau, Carrière, and Larocque. I am also a card-carrying member of the Otipemisiwak Métis government, or the government of the Métis Nation within Alberta, and I currently reside on the unceded lands of Treaty 6 and Métis Nation Homeland Region lands.

I have over two decades of experience working in law, government, legal non-profit, legal academia, and legal regulatory sectors, and I have built relationships across what is now known as Canada with Indigenous nations, organizations, and individuals, as well as with non-Indigenous professionals and academic partners, where we collaborate on a number of decolonizing and reconciliation programs and initiatives.

Denise Webb: Thank you, Andrea. *Decarceration and Health: Breaking Down Bars for Systemic Change* builds off a report I completed that was published by the National Collaborating Centre for Indigenous Health in 2024, titled *Barred: Over-incarceration of Indigenous People in Canada's criminal legal system, the health implications, and opportunities for decarceration*. The report was intended to help inform the public health crisis pertaining to the over-incarceration of First Nations, Inuit and Métis people in Canada's criminal legal system. It also explores avenues to decarceration through community-based justice alternatives, including diversion programs, Indigenous courts, and Indigenous-lead healing lodges.



Over incarceration has both immediate and far-reaching negative health impacts, and is a determinant of health. This podcast mini-series is an opportunity to listen and learn from experts in the field and those with lived experiences working in the criminal legal system, about what changes are needed, and how Indigenous laws and legal principles can be respected and upheld to support Indigenous-led and distinct justice systems.

I am incredibly thankful to Andrea, who graciously agreed to support the NCCIH by leading and guiding this mini-series; for sharing her knowledge, legal expertise, and passion for this topic. It is an honour to have you here, Andrea.

Andrea Menard: No problem, Denise. It's a pleasure to be here co-hosting with you as we both interview some fantastic people involved in breaking down systemic barriers, and leading transformative changes within the criminal legal spheres that are not well understood or known of right now.

So, I appreciate the space that the NCCIH has given to this important podcast. My aim is to build momentum through learning what others are doing, and moving things forward in a good way.

-Music-

Denise Webb: In today's episode, we'll hear from Dr. Justin Tetrault, a Métis criminologist and Assistant Professor of Sociology and Criminology at the University of Alberta. We'll learn about Dr. Tetrault's research in prison environments and the importance of Indigenous programming in prisons, as well as the critical issues affecting health and well-being for Indigenous people in prison. We'll also learn about what is needed and being done to spark policy change, and support Indigenous people's self-determination over justice and healing.

Andrea Menard: So welcome, Dr. Tetrault. Can you please introduce yourself to the listeners and tell us about your background?

Dr. Justin Tetrault: Sure, yeah. Hi everyone. I'm an Assistant Professor of Sociology and Criminology at the University of Alberta, Augustana Campus. And I guess I'm a new professor; I was hired a few years ago, going up for tenure soon I think. And I study, broadly speaking, prisons, social movements; I also do work on Canadian nationalism and what that means. And I, as we'll kind of talk about today, do research on Indigenous issues, which will be the focus, presumably, for much of this conversation.

I'm also Red River Métis, originally from Treaty One Territory in Winnipeg, Manitoba. So my dad is a child of the 60's Scoop. If listeners aren't sure what that is, it's basically when the Canadian



government made changes to child services policy in the 1950s in this effort to assimilate Indigenous kids into Euro-Canadian or, “white culture”. The idea was kind of like, “What's the best way to do that? Well, let's get them away from their Indigenous families when they're young, put them with child services, get them with white families.” So, social workers came to my dad's family farm and abducted him and his brothers and sisters, and separated them across the country.

So, I don't know most of my paternal family. I do know what happened to a few people though. So, for example, one of my dad's siblings was relocated to a remote northern community and was forced to look after a bunch of kids and later ended their life. I have other family members who've been incarcerated, struggle with substance use, etc.

Why I'm expanding on this is because it is relevant for today's conversation, because this kind of thing is unfortunately pretty common for Indigenous peoples and families – how these policies affected people's lives tangibly, and concretely. We interviewed, as we'll talk about, many people in the prison who went through child services and had very similar experiences.

Denise Webb: Thank you, Justin. So, we can touch more on that research and what you've been doing with interviewing Indigenous folks in prison, and what is maybe known as the University of Alberta Prison Project. I'm wondering if you can tell us more about your role within that project and the research that you're doing?

Dr. Justin Tetrault: Sure, yeah. So this is part of a bigger team. We've been doing this work since 2016. I was actually a grad student, a PhD student when I started on the University of Alberta Prison Project. I was doing my own separate dissertation work on political extremism in Canada, and my supervisor, Dr. Kevin Haggerty and his colleague Dr. Sandra Bucerius – who I'm friends and colleagues with now – they were starting this study, this big study on prisons, and essentially asked me if I wanted to be involved as a grad student, considering my interests in race, Indigenous issues, and extremism. They were basically like, “Hey, we're going to go inside of prisons and interview people and inmates and staff and incarcerated people, and this hasn't really been done before, at least not at this large of scale in Canada. And we're not really sure what to expect going inside, and we want to learn about everything. Do you want to join us and do some interviews with us?” And as a starry-eyed grad student, I'm like, “Yeah, of course I want to do this.” – obviously, I said, “Yes, I'd really be interested in that.”

So long story short, we ended up interviewing around 800 incarcerated men and women, and over 100 staff I think, and that happened from 2016 to 2020. The pandemic kind of put a halt on our work, and I don't have to talk about the pandemic, but essentially we're continuing this work



now on re-entry, which maybe we can talk about towards the end. And so, but for the initial study – the 2016 to 2020 study – my work or my side of things focused on incarcerated people, the inmates, and Indigenous issues in particular, and we were frankly stunned at the enthusiasm about our study among people inside.

So essentially what we did is we went inside the prisons, we put up sign-up sheets on the living units, and people just signed up. [The] interviews were about 90 minutes. [...] I remember interviewing a guy over two days. That was three hours each day. We interviewed every type of person you can think of, convicted of all different crimes you can think of, and we asked about everything under the sun; We talked about gangs, drugs, food, boredom, mental and physical health, as we'll talk about, asked about staff, asked about programming, release.

And so far, I've published on racialized prison gangs in western Canada, and more recently how incarcerated people experience cultural programming, which just came out a few years ago or recently. So cultural prison resources, which we'll talk about eventually. And I guess it's also important to mention the overrepresentation of Indigenous Peoples in prison. Indigenous Peoples make up only 5% of the general population of Canada, but account for roughly 30% of the prison population. For women, it's half in the federal system; half of federally incarcerated women are Indigenous, which is an astounding statistic. And this was reflected in our sample as well, like our sample of participants. So 40% of our participants roughly identified as Indigenous, I think 70% of the women we interviewed were Indigenous, seven-zero.

And the question, of course that listeners might have is, “Why does this huge disparity exist?” and we can trace this directly to Canada's colonial policies. I mean for most of Canada's history, it was the explicit goal of the Canadian government to extinguish Indigenous cultures and undermine communities using various policies from forced relocation to reserves, using the Indian Act – Indian Act is this overtly racist piece of legislation that forced First Nations groups to register, defined illegally what a “Indian” was. It took complete control and sovereignty away from First Nations communities. The government also introduced something called the Pass System to prevent First Nations peoples from leaving reserves, and Residential schools, I'm sure people have heard about, assimilating kids into white culture, undermining families and cultures. And the 60's Scoop, which happened to my dad and many other people, which removed kids from their families. And now today, because of these Scoop policies among other things, 50% of kids in child services are Indigenous.

Anyway, what does this all have to do with crime? Well, people often say that people choose to commit crime, but our choices are always dependent on the circumstances we find ourselves in, or the environment that we're living in. And Indigenous Peoples are just far more likely than the



average Canadian to find themselves, frankly, living in harsher, more stressful circumstances, due to all this history that I kind of – I did blitz through it, but it's important to mention. And so Indigenous Peoples are just altogether more likely to be living in extreme poverty or homelessness. Half of Indigenous kids live in poverty. Indigenous Peoples are more likely to be struggling with mental health and related to that, in some cases more likely to use substances. And so all of these things compounding can lead to criminalized behaviours and entry into the system, and that kind of thing. These policies that were designed to destroy families undermine mental health, undermine cultures, etc.

I guess it's also worth mentioning, for the people we interviewed, almost all of these people are victims of violent crimes themselves. We kind of think of criminals as the bad people who do the committing of crimes, but almost always these are extremely marginalized people – not almost always, but very oftentimes these are very marginalized people who are victims of violence and also sexual violence themselves. And this was reflected in our statistics.

We also did victimization surveys with our participants. So, after we talked to them for as much as they wanted to say, at the end we would walk through their history and some things that may or may not have happened to them and get demographic information. And part of that was understanding people's victimization history: Have you ever been a victim of a violent crime? How frequently? And we found Indigenous, and all across the board, it was very high rates of violent victimization. I think 80% of our sample experienced violent victimization at some point in their lives, and the rates were higher and more frequent for Indigenous Peoples, and the violence also happened at younger ages for Indigenous Peoples.

So, I'm rambling a little bit, but that's kind of the foundation of what I've been doing for the last, almost I guess 10 years now focusing on this topic. And only recently has our research – as the publication process goes, it's quite slow – we're just kind of starting to publish on what we found all those years ago.

Denise Webb: You mentioned just now, surprisingly there was a lot of enthusiasm to participate in the study. I'm wondering if there's anything in the research that led you to kind of understand why that may have been? Was it a matter of maybe people wanted to have their stories heard, or maybe it was just something to do, but maybe just a little more context if you can?

Dr. Justin Tetrault: Sure, it's definitely both of those things – all of those things. I was going to talk about this with health, but, boredom is huge. I mean, this is not the only reason, but boredom is a huge thing.



Think about if you went to prison tomorrow and there's not much programming available. There's one TV in the unit that you get to use for a few hours a day. You're sitting around. There's frankly just not much to do to begin with, so anything that happens on the unit, at least for the prisons we went to, is very exciting. And it's like, "Oh, people are coming to talk to us...I want to sign up for this thing." There's a lot of desire, and the people we interviewed thought of our project almost like a program. It's like this new program they're bringing in where you get to talk to someone. It's very exciting for, again, some people who don't have access to any programs, and prisons are not providing people with mental health resources – or at least not very robust ones, or broader supports – so anything that people can do to get off the unit or talk to someone or not look at the same wall, or go to a different room because you have to think about that as well. You're in a prison all day, you're in the same room all day. It's nice to see different faces, go to different places. It's just kind of a natural human tendency, to escape confinement at some level and just experience something different.

So that's definitely part of it as well. And like you mentioned, a lot of these folks – it was mostly men we interviewed, but women as well – we had lots of interviews where guys and women too were like, "I've never been asked this before. No one ever asked me where am I from." Or, "No one ever asked me about my family," or "No one ever asked me what do I think about prison," or "No one ever asked me: do I like the food here?"[...] We asked about all this stuff – "No one ever asked me what I think about the staff."

So, we did get a lot of positive feedback just from the perspective of people just wanting to open up, again, kind of a natural human inclination. Like, "I want to talk about myself and my experiences. This is an incredibly difficult situation I'm in." It's a horrible place, right? It's a prison. It is cathartic and there's that therapeutic element just being able to express, "I had such a bad week," or, "This has been so challenging for me," or "It's hard not to think about my kids."[...] It's hard to speak generally about this because we had so many diverse people telling us so many diverse experiences. It's hard for me to encapsulate this into a sound bite or anything like that. But yeah, just the general sense of being able to tell one story was very important for folks who have never been asked some of these questions in their whole lives, even outside of the prison.

Andrea Menard: So who is in your group? Who's in your study group – how many professors are there? Do you oversee students in the group?

Dr. Justin Tetrault: Yeah, it kind of depends on what point in the project we're at, because we've been doing this since 2016 – I'm just thinking aloud here. It initially started with Drs. Bucerius and Haggerty as the P.Is, the Principal Investigators, and then it was their grad students under that, kind of doing the work. We did this since we started in 2015-16, around there. It's almost 10 years



later, so people like me have become professors. Another colleague of mine, Luca Berardi; he was a grad student doing interviews, and now he's a professor at McMaster. Initially it was just the two professors and six to maybe 10 grad students, and now it's maybe four or more professors and twice as many grad students, so it's almost doubled in size.

So, it's a mixture of professors and grad students. And the grad students, if they're ready, we let them inside and interview. I was a grad student when I started doing interviews. It's an immensely challenging thing to do prison interviews. You need – I don't know how to phrase it, but you need the right type of person. Someone who cannot judge people when you talk to them. If someone tells you that, "I've been struggling with meth addiction for three years," you have to be able to talk to that person without judging them. And just being able to talk to street-involved people; being able to adapt and laugh at the right times and know when not to laugh. And, anyway, it is challenging to find people to do interviews and do them well, and it's very challenging work, but I think we've been lucky to have a pretty good group as we've kind of gone along.

Andrea Menard: So not only do you go into the jails, but you also educate or train the students that are part of your group. So, I want to get back to that, because that's more like a human connection. So you're kind of educating them I guess on how to be trauma informed, and how to gain a connection with other humans?

Dr. Justin Tetrault: Yeah, this is super important. Just building on what you said, I mean almost every 80% or 90% of the people we're talking to have had traumatic experiences. This is another kind of skill set that interviewers need to bring into these conversations because you have to know that you're going to be talking to people who have experienced, frankly, the worst traumas you could imagine. We've heard the worst stories you can think of. I'm not going to get into it, but all the worst stuff you can think of, and so you're going to be talking to people who have experienced that. And so, as an interviewer, you need to be aware of that at all points and know how to navigate a conversation, and also let the participant lead the conversation. That's kind of why we left our initial study very open-ended.

So, we would just go into the room with the sign-up sheets, and we would let the participants talk about whatever they wanted. We had things we wanted to touch on obviously, like programming, staff, maybe a bit about if they struggle with drugs or mental health, physical health, that sort of thing. So we have things you wanted to touch on – very– very broad things, but we did let our participants lead the conversation and take that where they wanted to. It does require the interviewer sometimes to pull, not pull, but direct, if the participant starts to get into darker places and you can tell that they're getting upset. It does take a skilled interviewer to



direct them into something else: “Well, how's the food here?” if you could tell that they're getting frustrated.

[...] This was all kind of a new experience to us, so we kind of learned very quickly how to navigate these conversations and how to train people, how to talk and that sort of thing. Also our P.I. had worked in mental health institutions and she had experience speaking to people in these kinds of situations. Dr. Bucerius was very good at explaining to us how to do these conversations.

Andrea Menard: You talked a little bit about this in the intro, but what led you to this field of research?

Dr. Justin Tetrault: I've always just kind of been interested in race issues in Canada generally because, frankly, a lot of Canadians think racism is not a problem in this country, or that we're nothing like the USA when it comes to racial inequality, which is absolutely not the case. So that always has been an interest of mine, especially with what happened to my background and all that stuff.

Also, with Indigenous Programming – I guess I should explain what it is. Indigenous Programming is basically cultural resources they provide in the prison. So Indigenous aspects, such as providing prisoners with ceremonial materials, drums, smudging, sometimes beading; inviting Elders into the prison, or hiring Elders. The Elder situation is complicated, I won't get into it too much. But as you would have like a Christian pastor come in and talk to people, having an Elder come in and talk to folks and serve a bit of a therapeutic role. And then they also do courses on – courses is even a strong word, sometimes these are very loosely organized – bringing someone in to teach about colonial history, the local Indigenous cultures' healing practices, spirituality, that kind of thing.

So, I've been writing about that in recent years. What drew me to that is well our participants, as we'll maybe talk about later, really found those things valuable. And also what drew me to writing about it is that how these things were written about in popular academic discourse and popular culture, was that these are not good things – I guess I should say they're controversial. Cultural prison programs are controversial. From the liberal perspective, the people writing on this are the more progressive or left-wing kind of criticism of these programs, is that this is like the new residential schools; you're just bringing in a bunch of Indigenous peoples into a classroom and teaching them how to be, “like good Indians” and that sort of thing. And these programs are just watered down versions of Indigenous culture and that sort of thing. Then you have the more right-wing or conservative perspective, which is like, “Well, these people don't need cultural



programs because we shouldn't do ethnic favoritism in the prison. And we know prisons are for punishment," that sort of thing.

So, everything written on this topic was disparaging essentially of these programs, and our findings, when we would go in and talk to people, they found them completely invaluable. Like, "I'm so thankful that we're doing a pipe ceremony next Wednesday," or "I'm so glad I have sweetgrass on the unit to help me with when I have traumatic memories." Or even residential schools – we've interviewed some residential school survivors. So that inspired me to write about it as well, because I just vehemently disagreed with everything pretty much being written on it, because it was just not reflected in our findings. And it's not to say that these programs are the answer to all of our problems, but I just thought it was important to write about what our participants had to say because, again, this is one of the first studies of its kind at least in this country, at least at this scale, and I think people were making very strong statements about cultural programming that were not founded on actually talking to people and getting their experiences on how people actually experience these programs.

Also, if you look at the TRC (the Truth and Reconciliation Commission), and the National Inquiry into Missing and Murdered Indigenous Women and Girls – both of these reports called for better programming. So I was kind of also interested in what those reports had to say about prisons generally, and what we can do for incarcerated people and people being released. And so those things also kind of influence my penchant to write on this stuff.

Denise Webb: I'm wondering if you can speak more on what your research can tell us about the needs and interests of Indigenous people in prison with regards to health, and if there's anything that you found between Indigenous women and Indigenous men, if there's any kind of differences there as well?

Dr. Justin Tetrault: Sure. I mean, there's a lot to say about this topic. I'll talk about Indigenous health first and then we can get into broader issues related to health and prison. But for Indigenous health – I guess, before, I have to preface this by saying Indigenous understandings of health tend to view health in a more holistic way. So, I guess what I'm saying is from a westernized perspective, we tend to view health as physical health, right, your body. And in more recent decades, we're finally starting to talk about mental health, emotional health. We're starting to take these things way more seriously. For Indigenous Peoples – and not to generalize, of course, and lots of Indigenous cultures are different but generally speaking for Indigenous Peoples – health is also spiritual and relational, or in other words, related to our relationships, our relationships to other people or relationships to our self, our relationships to our land, our community. If listeners are familiar and have heard of the Medicine Wheel, the four realms



related to health, they're: physical, mental, emotional, spiritual. And if you don't consider yourself a spiritual person or a religious person, you can kind of think of spirituality as your relationship or your responsibility to other people and the land, or again your home in your community, and also your relationship to yourself. So, I guess what I'm saying is we need to start there when we think about Indigenous health and these programs, the ones I kind of walked through, attempt to be oriented around those Indigenous ideas about healing as a holistic thing that addresses relationships and thinking about the self and empowerment and that sort of thing.

Another thing to keep in mind as I kind of walk through this is that Indigenous Peoples, and especially incarcerated Indigenous Peoples, again, suffer from higher rates of trauma and intergenerational trauma. Intergenerational trauma just meaning, if people aren't sure, every generation of Indigenous Peoples have experienced colonial policies in different ways; you have the forced relocation to reserves, the Indian Act, the Pass System, residential schools, the 60's Scoop, policies that are happening today – every generation has been passed down these different traumas. So, incarcerated people are already marginalized and within that population, Indigenous Peoples are even more vulnerable and marginalized, higher rates of victimization – this is not just me saying this, this is reflected in our data as well.

And so, where I'm going with this is that the consequences of intergenerational trauma is struggling more with confidence and self-worth and disempowerment. So a lot of these Indigenous programs are meant to empower people, help people feel proud of themselves, feel proud of their communities and their cultures. And there's an irony, or tension here because these programs are kind of designed, or tried to be designed, around empowering people inside of a prison. Prisons, of course, are these places designed to dehumanize people, disempower people, and there is an immediate contradiction with these programs. So, as I go through, as I kind of say that these programs are good, there are contradictions and they're far, far, far from perfect. I just don't want listeners to think, “Oh, this is the answer to all of our problems.” But, so keeping that in mind, there's always this tension of the decolonial process inside of the prison that's attempting to empower people, and the colonial aspect of the prison that's attempting to silence and disempower and dehumanize people.

So, with these programs, learning is a big part of healing and health. Learning about relationships, in particular learning about colonialism and what intergenerational trauma is, what it means to be Indigenous in Canada, learning about how colonialism impacted our communities and our families – this is related to learning about yourself. If you want to heal as an individual, if I'm struggling with drugs or aggression or family issues, it really helps to know and understand how I arrived at this point in my life, and how my community or culture arrived at this point, where they're struggling. And these programs, when done right, help provide people with the context,



like, “Your community is struggling because we can connect this to colonial things that happened in the past.”

Related to this, like back to the earlier point about marginalization, is that the people we interviewed, they're rarely college educated – you know, a lot of listeners presumably are college educated and all that sort of things – for the people we interviewed, they may have never heard of how colonial policies impacted their communities. They may have never heard of the word ‘colonialism’ before, which may be striking to some people, but what we found talking to folks about this is that many incarcerated Indigenous Peoples – these programs taught them their history and culture, often for the first time. You might be asking, “Why have people not encountered cultural teachings before?” So our participants tended to cite their lifestyle, their circumstances, as the primary reason for not engaging with their culture before being incarcerated. So, people would be surrounded by maybe drugs or violence, or gangs, or being homeless, conditions typically related to extreme poverty. The Scoops are another thing to think about, so child services. A lot of folks we interviewed, I think 30% were in the child services system. So they were removed from their culture. And then going to the prison, perhaps ironically, again this strange colonial, deeply colonial institution, they would take these programs and learn, “Oh, this is what happened to me. I'm Indigenous, but I don't know who my parents are, I don't know what my background is, but I sat down with this Elder and we walked through where I might be from,” and this kind of thing.

So that that's something to keep in mind as well. These programs teach the colonial aspects. So it's not just like “this is what it means to be Indigenous.” It's also “this is what Canada did to you. And this is what Canada did to your communities.” And some listeners might be wondering, “how are these programs developed?” and frankly, we don't really know. The government is not very transparent about how we actually Indigenize these programs. But to be clear, people fought for these programs, this is not the Canadian government coming in and being like, “Oh, there's lots of Indigenous Peoples in prisons, so we're going to provide you with stuff that you might like.” Indigenous Peoples fought for these programs since the 1950s, which is why I get frustrated when people are very dismissive of them, as though this has not been the decolonial movement, because, in my opinion, it has been for half a century where Indigenous Peoples have fought to have smudging in the prisons. They fought to have Elders come inside, they pressured the prisons to teach people about how colonialism affected incarcerated people's communities, especially when a lot of incarcerated people are coming from the same community, in some cases. So this is the product of decades of struggle. This is not the Canadian government just deciding to introduce this. Again, that doesn't mean these programs are perfect, but it does come out of this history of resistance, and that's important to keep in mind.



I guess some other things: these programs help people cope with colonial traumas broadly and just empower them, and help them feel proud about their culture and heritage. Because what would happen a lot of times is for some incarcerated folks, they would come to believe in racist stereotypes about Indigenous Peoples, like not knowing any of the history of how we got here – they would just kind of be like, “Well, all Indigenous Peoples, they drink too much,” or, “They're inclined to commit crime,” or that sort of thing. Or, “They're more aggressive.” And then through these programs they would learn, “Oh well, like now I understand why my dad was maybe violent with me because he was in residential schools for his whole life. Or he was in residential schools, then went through the foster system. Now I'm in the foster system.”

So they would start to understand themselves better, start to understand their communities better, start to understand their families better. Because a lot of these especially more marginalized folks – as one participant put it, she kind of said, “I've never learned anything in my life.” This one person named Jamie, as a pseudonym, she was in a group home when she was 14. She was abused in the group home. She ran away, became homeless, and when we asked her about the programs, that was her response: “I've never learned anything in my life. And I finally get to learn a little bit, someone can teach me something. I want to get better, I want to do better. I want to have relationships.” So, this is really important for many folks who struggle with confidence and never had support.

And the other part of this is these programs do try to encourage relationship-building, like a support network. So it's not [...] when I say ‘programming,’ people probably think of a classroom or a teacher talking at people, almost like a residential school, which is, I think what some critics think of. But it actually doesn't really work that way, at least not from what we found. It's more about creating a support network between Elders and fellow prisoners, rather than being this coercive and top-down thing. Many participants that we talked to just did not have support networks throughout their lives, especially people who struggle with homelessness and all that stuff, and then coming into the prison again, ironically, there is an irony in all of this; coming into the prison and having these programs that try to create a support network, asking people to support each other, because with Indigenous healing, it's not just about you as an individual. You should help the person next to you, that person should help you, we should help each other and create bonds and relationships to grow, even in an informal community inside of the prison.

And I guess the last thing to say – I mean there's lots to say here – but the last thing important to mention is these programs are necessary to basic religious and spiritual accommodation in prison, even from a legal argument. So, what I mean is that, if you go to prison tomorrow, the government, under the Charter is supposed to provide you with religious accommodation. And for Indigenous Peoples, religion, spirituality, and culture are kind of the same thing. It's kind of a



western idea, or colonial idea that religion and spirituality are separate from culture. For Indigenous folks, culture is spirituality, at least generally speaking. So, I would argue, and I'm not the first to argue, that it is a human and Indigenous right to have spiritual and cultural accommodation in these prisons. So, from the Indigenous rights perspective is how I try to frame cultural programming in the prison.

And yeah, if we are serious about public safety – if you're maybe more of a conservative person and conservative over public safety: if you want people to get better and get out of the prison, becoming a more so-called “productive” or “law abiding” citizen – whatever phrase you want to use – we should be providing people with these healing supports. We just found them to be incredibly invaluable for the people who use them. The biggest issue they told us about the programs was that there wasn't enough of it. It's like, “I get a smudge once a week, if I submit some paperwork. I mean it's great when I get to do it, but let's be real, I have to submit paperwork to smudge.” It'd be like a Christian submitting paperwork to do a prayer, right. The biggest issue is not the content of the programming, it's just there's not enough of it: “I don't get to see the Elder enough,” “I don't get enough time to sit in my circles with my support network and talk about these things,” “The prison doesn't do enough to facilitate spirituality and cultural healing.”

So, those were the biggest issues. Just to reiterate, is that programming is of course not a solution to overrepresentation. This is just a very small, but I think crucial part of a bigger project of undoing mass incarceration. I think we need to meet the urgent needs of people who are struggling inside, and these programs, they're not going to, again, solve the problem, but people need help now and I think this is just a very obvious way that we can help people get better. And if we care about public safety and people getting better mentally and physically, spiritually, emotionally when they get out, these programs are essential for them.

-Music-

Andrea Menard: Broadly speaking, and based on your research, what is known about the health issues within prison?

Dr. Justin Tetrault: So, I kind of walked through the Indigenous issues and yeah, I can speak more broadly about what is known about physical and mental health. So, to be clear, to preface this, I haven't published on health specifically, but I can speak to broader things like I did the interviews, and I can speak to some of these things.

I mean the first thing is diet. You're not going to be eating well in a prison, at least for the average person. The prisons we studied by and large – it's all processed food, factory made frozen food.



You heat it up in a steamer, oftentimes. It depends on the prison. A lot of bread, because bread is high in energy and cheap. I remember interviewing some of the guys and they said, “We eat like half a loaf of bread a day because it's cheap. It's high calories.” The prison can claim that it's giving the so-called nutrition benefits by meeting the threshold of whatever legally they can do. There's also been studies now linking longer prison stays to increased risk of cancer and part of this is related to consuming so much processed food. So [...] this is particularly devastating with longer sentences; if you're in prison for a decade, when you come out, your health is probably going to be worse. Prisoners also face higher risk of foodborne illness because sometimes the food goes bad or it's not prepared properly, and then you just served it to 100 people at once. So, diet is something to think about with health of course.

Stress is probably another big one. This is probably obvious, but prison is a stressful environment. This is related to mental health as well, but also impacts physical health at the very basic level. When you go to prison, it is a system shock. There's stress because you're removed from your family and your loved ones. In many cases, you don't know what's going to happen to you. You're probably going to lose a lot of sleep. You're probably worried you're going to lose your job. You probably will lose your job. And if you lose your job, especially if you have kids or whatever – you'd probably be thinking about, “How am I going to support my family, how I'm going to put food on the table.” So you can picture if you went to prison tomorrow, how much stress that would impact for you as an individual. And yeah, obviously stress is not good for your physical health as well.

A lack of physical activity is another one. This one is pretty straightforward. I mean, essentially, you're in your tiny cell for most of the day, and then you're led out into a bigger community area for – depending on the prison, it could be eight hours, could be 10 hours, some prisons only like one or two hours. But otherwise, you're trapped in a tiny room for most of the time, and, I guess, you know that's not going to be conducive to much movement and physical activity. If you're a maximum higher-risk security prisoner, you're not going to be going to the gym at all. You're not going to have any access to physical activity or the basketball court, if there even is a basketball court. I guess I should emphasize as we go through this: every prison is so different. It is meaningfully different if you have a basketball court or a treadmill, or whatever the case might be. Some units have gyms, some do not. So, it's hard to speak again very generally about a lot of this stuff, because every prison is so different.

Violence is another thing to think about. Violence is common in the prison. Of course this is related to physical health. There's gang violence, of course, and that sort of thing, but the most common form of violence is just prisoners governing one another. So, what do I mean by that? Well, you have 80 people living on a unit together in a small space. And when you have that many



people, you're going to have conflicts, you're going to have disagreements. How do you solve these disagreements if you can't do it verbally? Well, if it can't be resolved, you resolve it through physical fights. You also have to make rules among your community living on a prison unit, and so if people break the rules on your unit, if you snitch on someone or whatever the case might be, that results in violence. So, there is a lot of violence, and it is used to govern people and punish people and live as a community, as unfortunate as that is. And of course, violence is tied to physical health.

There's also mental health issues in prison. I mean, I mentioned stress, anxiety, depression, these are probably obvious. Boredom, I mentioned towards the beginning of our conversation is a big one. I really can't emphasize that enough. If you can't keep people busy, oftentimes, people will dwell on things that are wrong in their lives, or how they're missing their friends or their families, missing birthdays, missing holidays. People described Christmas as one of the hardest days to be inside for perhaps obvious reasons. And without things to do – this is all another reason why programming is so important. Without things to do – you can think of yourself as well – without things to occupy your mind, especially when you're in a stressful or depressing situation, you'll just – not everybody, of course – but people will tend to think just only about the depressing things. So, they'll become more stressed, maybe more violent, or turn to drugs. Our interviewees kind of told us that boredom also increases fights. And I guess you can kind of think of, like, if someone annoys you, for us on the outside, if it's your partner or your friend or whatever, you can be like, “Well, I'm going to go to the coffee shop,” or, “I'm going to watch a movie,” or, “I have to go to work.” But for prisoners, you're stuck with that person for the rest of the day, right? It's like you're in that room and can be in the open space or in your cell with that person. There's nowhere to go. You can't walk away from that person, and so you can imagine if someone irritates you, it's not like us where, “OK, well, I'm just going to go to the coffee shop,” or “I'm going to go to work.” So, you can picture the kind of powder keg for conflict, right?

Another thing to think about is overcrowding, which is a less obvious one. If you're living in a prison – and I guess privacy is related to this – if you're living in a prison, you almost have no privacy. There are people around you at all times, and for most people there's no really time of day where you can unwind and just have some alone time. So, for example, this one guy who we interviewed: his father died and he basically said, “My dad was the only person I had left while I was in here. I talked to him on the phone every day. Then he died, and I couldn't grieve because I'm just constantly surrounded by people at all times, staff, other prisoners. And you have to constantly act tough. You constantly have to show no emotion.” And this guy's like, “I just wanted to have alone time. I wanted to cry.” And so he actually, in a very strange situation, made a request to go to solitary confinement, to administrative segregation, to be alone in a cell. And they did do that.



And with overcrowding, I don't think I mentioned this yet, but most of the prisons we went to are overcrowded. This is a huge problem across not just Canada, [but] the world with prisons, especially with these anti-science, tough on crime policies that we've introduced where we just think locking everyone up is a great idea for some reason, despite how expensive and ineffective it is. We went to prisons where three people were living in a cell, and it's hard to explain it without visuals, but it's like the size of a small bathroom. You have two bunk beds, the toilet is right next to the bed and the sink, and then you have the third person sleeping on the floor. It's hard to believe – this is something you would think of in a stereotypical “bad country” or whatever phrase you want to use – where you would have three people in the tiny room, and we're seeing this in Canada. You can kind of picture how that would affect your mental health, and ideas about privacy and all that. Going to the bathroom with two other people less than a foot away from you and all that stuff.

Related to mental health institutionalization: so people kind of say like, “I've been to prison my whole life, and I feel like I'm institutionalized.” Basically, what people mean by that is that prison life is intensely micromanaged. I mean, you can think of it, right. Your prison tells you when to wake up. They tell you when to eat. They tell you when to go to bed. They tell you when to go to work. And so, people will say, “I've been institutionalized, I've been dependent my whole life – for the last 10 years I've been in prison. People telling me what to do.” And you can imagine how that would affect people when they get out of the prison, their relationships, or their friendships, or in some cases with older guys, they've never used a credit card before, they've never used the Internet, and then they're released. And the prison tells them how to do everything. And then it's like you're expected to learn how to take the bus, navigate the city, learn to use the internet, learn to do banking. And we expect people to leave the prison and get a job, and figure out all these things, when they've been institutionalized for the last 10 or 15 years.

I guess there's also differences between men and women. Women also have higher health needs. For example, there's women child units. So, I'm just thinking about how much I can say, but some of the prisons we went to, maybe one of the prisons, I should say, there is a mother-child unit. So, women have the opportunity to have a child inside the prison with them on a living unit. And when I say a living unit, it's actually a house. Like the unit is a house, so it's not like a bars and all that, as you might think of from the movies. I don't think there's too many differences between men and women with healthcare apart from, like reproductive needs and that sort of thing.

But kind of moving into the conversation about healthcare, I guess, is you're not getting great healthcare in prison. Maybe that's obvious. There are huge wait lists to see doctors. Basically, unless it's an emergency, you could be waiting multiple months, and in some cases a year or more to see the doctor, and to my knowledge, the prison prioritizes seeing people based on need or



urgency. So, the doctor and nurses are seeing people every day in the prison based on the seriousness of the case – and it's kind of disturbing, but it's worth saying: according to our participants, sometimes people will literally mutilate themselves to see a doctor faster. So, for example, if you have a toothache, and the toothache is driving you crazy, and the prison will say, “Well, it's just a toothache. It's not that serious, you can wait a few months to get in (or sometimes a year).” People will pull out their own tooth or they'll hurt themselves, or make that injury or that condition worse, so that they get the healthcare faster. And again, it's an unsettling detail, but it's worth mentioning.

With dental, people told us, unless it's an emergency the wait for the prison dentist was multiple years. Medications are also an important part of all this. Of course, prisons do have pharmacies, and they give you medications every day. But in our study, we heard endless reports of issues with medications not being given or not enough doses or the prison runs out.

It's also worth mentioning the aging prison population, where prisoners are getting older. Prisons are not designed to be nursing facilities, and thanks to various government decisions with longer sentences, we have people that are very old in the prison. The prison population is aging. You have older folks that obviously require higher healthcare needs. It's more expensive. I mean, again, if you're coming at it from a conservative or [...] standpoint – this is incredibly expensive, keeping old folks inside of a prison who are frankly probably not a threat to public safety. So, you know, is that the best way to manage that situation?

So that's kind of a quick summary of like things I can think of off-hand that are related to health. There are some caveats to add though, just because everyone's a little different. I'm speaking super broadly, but security restrictions matter. So if you're higher risk, you're not getting as much programming, even with the Indigenous programming, probably. If you're considered a higher risk to staff, you might be considered a higher risk to healthcare staff as well. You might not be able to see certain healthcare staff. The irony here is that typically with medium and maximum security prisoners, they're the ones who are typically most often in need of these health care and services. And they can't often access them because the prison is worried that they'll act out violently or aggressively, or whatever the case might be, while these are the people who ironically need these mental health supports the most.

Illicit drugs are another thing to think about. I mean, they could do a whole podcast just on drugs, like illicit drug use alone. They're widely available in the prison. Maybe that's surprising to some people, but some people told us they're easier to get inside the prison than the outside. Prisoners bring them in, staff bring them in. It's a huge, huge business. And the gangs thrive on drug prison business, and they mark up all the prices because they know that people in prison are often



desperate. People rack up debt in the prison, and that creates conditions for violence. It's also just harder and more risky to transport drugs, making them more expensive to move inside the prison, so again jacking up the prices. There's also more growing evidence that people who never use drugs are more likely to use drugs while in the prison for reasons we talked about, right: stress, loneliness, depression, boredom. Also, to help sleep. Some of the sleeping pills, depending on the prison, are very popular. Sometimes the prison will prescribe them. But if you can't get them prescribed, you might find other ways to get them. For our study, we went inside in 2016 when the opioids were kind of overtaking the drug trade, and fentanyl became the drug of choice because it's easy and cheap to make. It's extremely potent. I think it was used to tranquilize horses and that sort of thing. And so that was the drug, and I think continues to be it to today. There were overdoses and all that stuff.

I guess the last few things to mention with health: there are programs in prison that, you know, help people with mental health, assuming you're not maximum security. Typically, minimum security prisoners have better access to programming. And again, there's an irony there, in that the people who sometimes may not need it as much as the people in maximum, [the] medium get all the access. But long story short, these programs are very scarce, and there's long waiting lists to get inside of these programs. There are also prison psychologists as well, but you're not going to be seeing the psychologist every week in prison or anything like that. You'll be lucky if it's every few months or a few times a year, unless there's special circumstances.

The final thing to mention with health – and this is an important point – is I've been speaking quite broadly about these issues. But there is one big finding that we had, which we call “prison as refuge”. This is kind of one of the most tragic findings of our work in prison, and this is also related to Indigenous issues. One of the most tragic findings is that many of the [...] – now I'm talking like the most marginalized people in our sample, people who are homeless, experiencing extreme violence on the outside, often Indigenous – a subset of our participants expressed that prison was a place of refuge from their life outside or on the streets. So sometimes for them, prison was a place they could potentially sleep relatively safely for the first time in a long time, because they told us shelters are not necessarily safe. There was just an Edmonton Journal article that just came out about this as well, for women especially. People also use prison to escape the cold. The Canadian prairies get as cold as -40oC every year, and when that happens, frankly, people die in the streets.

Prisons served as a place where people could escape abusive partners. So for others, particularly women, they would escape abusive partners [by] going to prison, as strange as that sounds. For others, they could get meals on a regular basis. Right, food and shelter, get cleaned from potentially lethal drugs they were using on the streets. They essentially use the prison as a social



service provider, which is a disturbing finding. And again, this is not the average person in prison, of course. Like if any of us went to prison tomorrow we would definitely not have that experience. But again, we're talking about the most marginalized people.

I guess other things: some found that the medical and dental attention in the prison was actually more accessible for them on the outside. And that's after me kind of walking us through how bad it is in the prison. For a lot of people, they didn't have to worry about what their next meal would be, when they were going to sleep at night, if you're homeless and that sort of thing. To be clear, this is not me or our project saying, "Prisons are a good place to be," of course, but rather, what this speaks to is just how dramatically other institutions and society have failed: police, the child services, the courts, shelters, medical counseling services, and the government, of course, have just so dramatically failed these people.

So that's kind of a summary of our big points related to health. I probably missed a few things, but it's hard to speak of all these things in a very general way, but that's kind of the big points.

Andrea Menard: Thanks, Justin. So based on your research, what changes do you think are needed to address the needs and interests of Indigenous people in prison?

Dr. Justin Tetrault: Yeah, that's a good question. I mean, the long and short of it is we need more transparency about how Indigenization works for bringing these programs into the prison: who's involved, what communities are involved, are these actually Indigenized appropriately? So, for example, Indigenous peoples are very diverse, right? An Inuit person does not have the same cultural needs as a Métis person necessarily, even though there might be overlap and their experiences with colonial policies in some level. But these programs are typically pan-Indigenous, meaning that they appeal to broadly Indigenous peoples, which is good and bad. It's good in the sense of, "OK, we can all sit together and we can learn about how Canadian policies affected us and our families," but smudging may not be relevant to this culture, or this practice may not be relevant to that culture. And so ideally what you would want to have are programs that are tailored as best they can be to local people who are incarcerated, which is a hard thing to do. But it's worth considering these things as we kind of move forward giving communities control over these programs. This is why I call for transparency, because we don't really know how much, or if any, control communities have or over these initiatives. We know that they help, we know that they're important. We know that we should keep, I think, investing in them at some level, but we do need to have transparency about who is involved in the Indigenization process, and giving communities more control over these processes.



Related to that, I haven't really talked about healing lodges yet, but healing lodges are still prisons, but they're organized around Indigenization – aspects of Indigenous cultures –so they tend to focus more on rehabilitation, and all of the programs I mentioned are kind of built into these institutions. There's I think 10 – I might be wrong in the numbers, but I think there's 10 healing lodges in Canada. I think six of them are run by the government and four of them are run by communities or nations. Or maybe the inverse of that, but the numbers don't really matter I guess for the purposes of what I'm trying to say. So basically, we have four-ish prisons that are run by Indigenous communities, like Stan Daniels here in Edmonton, Buffalo Sage Women's Prison is run by Native Counseling Services of Alberta, I think. And so, these are community-run prisons, and they're not like a traditional prison. So, they're not bars on the walls, they look like a community cCentre. They have art on the walls. They encourage people to bead every day, they bring in Elders. They try to build a community that eases people back into society [...] I mean, ideally if we think about prisons at a basic level, we should be trying to get people back into the community and better headspace. How can we do that when we're having people overcrowded in these terrible institutions that are bars on the walls, there's nothing to do, there's no programs, there's no resources. People are looking for things to do. There's fights, there's violence, there's drugs. How are we really going to expect people to leave these places any better and reintegrate to the community, and be so-called “law-abiding” citizens, or again whatever phrase you want to use? Healing lodges are an attempt to create a community environment that empowers people. The western colonial prison model is, again, disempowerment, dehumanization, retribution. The Indigenous prison model, again, it's still a prison, so there's still issues, but the Indigenizing healing lodges model is more about empowerment and building that community, building that relationship, using those Indigenous healing models.

And from my perspective, I think that's what we need to invest in. We need to invest in more holistic approaches to healing and understanding behaviour and rule breaking, and how people arrived at this point in their lives. It's a hard sell for the public because you basically have to tell the public, “We need to invest in people who may have harmed other people.” It's a hard thing to do. People in prison are the last group of people that anyone cares about, right? It's like if the government's going to cut anything, it's going to be, “Well, no one cares about the people in prison. So, let's cut that.” But that has ramifications; this affects public safety, it affects families, it affects Indigenous communities. Long story short, I guess if it were to be immediate changes, it would be to invest in these Indigenization initiatives, invest in Section 81 healing lodges (that's what they're called). Those are the community run healing lodges. The government healing lodges are out there too, and they're definitely preferable to the traditional western style prison, but they're still run by CSC1, which is the government. And I would call for transitioning those healing lodges into Indigenous-led healing lodges.



I guess the kind of broader theme here is just self-determination for Indigenous Peoples. If we're talking about the TRC or the National Inquiry, these documents ask us, or you know, encourage Indigenous control over our lives and our communities. There's Indigenous fights right now to re-gain control over child services, and the various nations have been starting to do that, and this is very exciting for a lot of us. And I would like to see the similar things with justice and healing: gaining control over the courts, gaining control over sentencing, gaining control over the re-entry process. So it's like Indigenous Peoples working with Indigenous Peoples to reintegrate Indigenous Peoples into their communities. If we're just talking about Indigenous Peoples. I guess I should also say Indigenous Peoples don't, at least from my experience, they don't think of like, this is just for Indigenous Peoples – we're all human, as kind of corny as it maybe sounds. We're all human; these things help everybody. Non-Indigenous peoples can also participate in these programs. They can also go to healing lodges. They can also find value in cultural practices, as long as you're not appropriating it or doing the pretendian thing and that sort of thing. These things are valuable for everybody. And I think this is not just a model for Indigenous Peoples, but a model for re-entry and healing more broadly that we need to be more considerate of and invest more into.

Denise Webb: Thank you. Can you share some examples of how your research has informed policy changes in the prison system?

Dr. Justin Tetrault: So, I guess to preface this, just to say this is all kind of new. We've been doing this work since 2016 and that data collection has been happening. I guess it went into the pandemic, then we stopped for a little bit, and we just started publishing off of those first four years of data collection. So, we published a piece on victimization data, which has probably been the biggest contribution that policymakers are interested in. The government speaks the language of policy and data points. So, they were interested in our statistics related to victimization and people's experiences with violent crime and sexual victimization. So that data has been used to develop a victim services program in prisons. I do believe also EPS (Edmonton Police Services) used our victimization data to develop trauma-informed policing or something like that, I'm not sure of the details of that one. But that has probably been because it's in the most, I would say, government language that has been mobilized for policy developments.

Related to the work that I do, government is much less interested in narrative criminology. For example, in my publications, that victimization data is there, but how people experience programming is more narrative driven. So it's people explaining, "This is my experience with this. This is how it helped me." Government's not really interested in these stories, because it's not a number, it's not something you can really put into a number. With our new study, we're trying to make the new study on re-entry into government language that they're interested in, that the



government will listen to. Because I can [...] write my paper about how everyone appreciated cultural programming, but that doesn't do enough for policymakers to listen and be like, "Oh, we should invest in this and that sort of thing," because they would want to hear, "Well, did they stop doing crimes when they got out? What numbers can you tell me related to how this Elder visit connected to recidivism?" and that sort of thing.

So, we're kind of also learning as we do this project, how do we do research that has impact? Based on our 2016-2020 study, the victimization statistics were the most impactful and that's great, but if I were to go back and redesign the study, I would have included probably more survey-type questions about – I'm not sure I'm thinking out loud here – but something that would translate better into policy decisions. Again, narrativizing people telling their stories of trauma; again, the government's not particularly interested in stories.

I don't know if that answers your question, but maybe I can explain more with what our new study is doing, where we're trying to be more tuned to what will people listen to that will make a difference.

Denise Webb: Yes, I think that's exactly our next question. Are you able to comment on where this research is going, this new re-entry study, and the unknowns that are going to be explored?

Dr. Justin Tetrault: Sure. Yeah. Essentially, when did we start this? So right now we're doing a seven-year study. It's been over a year now and it's about, as I said, re-entry into the community. So, our first study, the 2016-2020 study, was about people's experiences inside the prison. It was exploratory, we didn't pick one specific issue to focus on, it was kind of open-ended. So with that study, we're were just like, "What is going on in these places." We don't really know. "What are the gangs like? What is the drug situation like? What is the mental health like? What is the programming like?" So it was just kind of open-ended and exploratory.

This new study that we started eyes on re-entry. So, people released from prison, what are their experiences like? In short, we're basically interviewing incarcerated people about to be released, and then we're interviewing them again on the outside about their re-entry experiences. We're doing a longitudinal study, which means that we're interviewing that same person up to five times over the course of a year post-release, and so questions could be like, "Has that person been re-incarcerated? How is that person defining successful re-entry? What supports does that person have? Do they have ID? What transportation do they have?" And we have it more organized, as I've kind of said, in this policy language.



So, it's more of a survey type of study rather than – we do include interview open-ended elements, but it's more structured in the language of policy, right? Because now we can go when we finally have the findings of the study and be like, “OK, so 70% of our sample did not have a driver's license when they were released. Therefore, we should introduce a program that gets people re-entering society access to a driver's license, because that would help 70% of the prisoners.” You know what I mean? So we can easily put it into a language that policymakers will understand, or that they can attach numbers to. And so far we've interviewed about 500 people, so we're halfway through the study, or at least halfway through the initial interviews because we're interviewing people, if you remember, for a year after the release. So we're doing a lot of interviews, and we're shooting for a representative sample of 1,000 people; and 1,000 people is roughly 30% of the Alberta provincial prison population.

So those findings, in other words, should be meaningful for making evidence-based changes and developing supports, which is really what we're interested in with this study. Will this research have an impact? We're pretty confident, especially we've had a really enthusiastic, again, participation rate, and so we're really happy with that. Because we were worried – even though we had really good success with the first study – we're always worried going into the prison. Like, “Oh, is anyone going to sign up? Is anyone going to even want to talk to us?” And we found that we've had a lot of enthusiasm.

So that's kind of the gist of this new study. It's not just about driver's license, ID, and that sort of thing (transportation), it's about all sorts of stuff, like how do people define their successful re-entry? Because the government defines successful re-entry as, has this person committed a crime again? So successful re-entry is the person has been released, and it doesn't matter if they're homeless and struggling with drugs – if they haven't committed a crime, that's successful re-entry. But obviously what is successful varies on who you talk to. So, we asked our participants, “What do you think a successful re-entry is?” And they'll be like, “Oh well, I want to see my kids, I want to get off opioids,” or, “I want to get a job. I want to have a consistent household,” that sort of thing. So, it's about how people define their success and how they experience – or not – their success, and also the barriers to success.

So that's kind of the gist of it. And I'm obviously focused on Indigenous issues, again, not just that, but that's my area, right? So, people returning to reserves, people having cultural supports when they're out, you know, do what we call “through care.” So what we kind of see is like a lot of, not just Indigenous folks, [but] a lot of folks, they'll have mental health supports in the prison, or they'll have those cultural spiritual supports in the prison. They'll be able to smudge, see an Elder. Then they're released into downtown Edmonton and they have none of that. It's all gone. “Who do I go see to get help with an Elder?” Or, “Who do I go see to get help with drugs [...] I had this



little bit of support in the prison, wasn't much. But then I was released and I have nothing." So we're kind of interested in that. What we call "through care." Is there care that goes from the prison through into the community?

We're waiting to hear back about a grant for Indigenous Community Corrections Initiative, is what the grant is called for Public Safety Canada. But we're hoping to, if we get the funding, develop an Indigenous-led re-entry center in downtown Edmonton. It's called tentatively – it might not be called this – the Edmonton Healing and Integration Center (or EHIC). We have some community partners, a couple of Elders that are working with us, who would be our in-house cultural support for people re-entering society. And essentially using the funding, we would provide – we can't provide shelter and housing and everything for people – but in the sense of if you're released from prison, you come to our centre, and we can direct you to resources. These things exist in the community in various ways, but we're kind of thinking of making it a hub, Indigenous-led, and also using our research to develop the centre. And so, this would help people develop a re-entry plan. Then we would have our in-house cultural support through our Elders who would work with people and help them reintegrate. And for our cultural partners, they're like, "Hey, we work with unhoused people all the time, we work with street involved people. We know that when they leave the prison, they're struggling in all these ways. They don't have resources, and we want to develop some kind of thing to help them, but we're just community workers. We don't have the expertise, the knowledge, or the data to develop something like this." And so this is where, as researchers – this is why research is important of course – we can come in and work with them and be like, "OK, we interviewed 1,000 people (I'm just making numbers up here) and 800 of them said this is what their needs are." Or, "100 of them said this is what the needs," or, "People from reserves said this is what their needs are," or, "Young people from this part of the city..." You know what I mean? We can parse out what the needs of each individual group is with this new study, [that's] what we're hoping to do.

If I were to add one more thing about supporting Indigenous peoples and the previous question: a lot of the support for this is temporary. I guess what I mean by that is that you'll have a lot of Indigenous-led housing initiatives, or Indigenous-led re-entry initiatives, or community corrections, or the Indigenous Justice Strategy, but these are always temporary deals. It's like, "Here's five years of funding and then after the five years, well, you'll have to apply again and maybe you'll get funding. Maybe you'll have to turn over your entire staff and you never get to do this program again." I've gone to the regional meeting of the Indigenous Justice Strategy, and this was one big issue that came up is, you have these really great programs with dedicated people and really passionate people doing good work, and then the program runs out in two years. The funding is done and you either have to apply and you fail, or maybe you don't have the resources to apply, or you don't have the sustainability. And so, the government seems to



just be doing these Band-Aid initiatives right? Where it's like these short-term programs, meanwhile the prison, of course, has super consistent, obviously massive, billions of dollars of funding. And so, I would like to see, again, investing in people. That's really I think where I see we need to go.

Andrea Menard: OK, so this is the last question: how might this work connect to restorative justice and other community-based justice initiatives and alternatives?

Dr. Justin Tetrault: Yeah, I guess I would kind of just connect this to the previous point. There's lots of good work being done. I always try to, whenever I talk to students or teach this topic or whatever or even just, you know, do stuff like this, is try to be optimistic. It often feels working in this area that nothing good ever happens ever, no progress is being made, everything is getting worse and terrible. And, yeah, I get, I understand why people come to these conclusions. But doing this work, I also see how much work people are doing, and how much effort people inside the system and outside of it are putting into helping system-involved people. Like at the Indigenous Justice Strategy meeting – it's stuff I've never heard of being done before. I'm speaking vaguely, but things are happening. There's Indigenous housing initiatives, NiGiNan Housing Ventures. I just have this card here that I was given the other day of an Indigenous-led housing initiative in Edmonton that people are doing. So that's something that's happening. I know Justice Anna Loparco, and Sandra Christensen-Moore are doing really good restorative justice work.

Restorative justice is not exactly what I study, but it's adjacent, obviously, when talking about healing relationships and that sort of thing. I'm just starting to do some research on restorative justice, and there's efforts among practitioners and people working in the system to build that up as well. So restorative justice is another, I think, positive initiative. Again, it's not the solution to all of our problems, but there are people that are developing things. And I feel like we're kind of impatient sometimes, because it feels like nothing changes, but there are things moving. The National Indigenous Justice Strategy is another one that I mentioned that I've tried to get involved with. And when our re-entry centre gets up and running, that's another thing that we hope to connect with other groups. We've had a lot of interest among people – we're working with the United Way, Bent Arrow, Native Counseling Services; Métis Nation of Alberta have expressed a lot of interest in our re-entry project, and things are moving.

And I guess also for listeners, there are ways you can get involved as well, even if you're not an expert. For example, there are youth restorative justice committees across the province. Youth restorative justice committees are basically used to divert youth away from prison, frankly, and a criminal record. So, I've been doing some work with the local community in Camrose. These are



volunteer organizations, you don't need to be a criminal justice expert. Essentially what they do is the police will charge a kid and the officer – I don't know if it's the discretion of the officer or not, I don't know all the details, it could officer or the courts – will say, “OK, this child has charges. Instead of sending that child to prison, or putting the charges on their record, we will direct them to a restorative justice committee run by volunteers.” And together, as the committee, you can decide, “OK, this person is going to do community service. They're going to write an essay. They're going to tell us what they want to do in life and why they want to go to university, or college, or whatever.” I've sat on these committees and again, they're not perfect either, but it's definitely preferable to sending a kid into the system that drastically changes someone's life course, with a criminal record, or especially if you go to prison.

So, youth restorative justice committees are volunteer organizations, you can join. There's probably one local to you. There was a Ministry of Justice person that went to one of our meetings and she said that 10 years ago there were 140 committees in Alberta. In 2024, there are 40. I don't know the reason as to why they've diminished, but we need community people doing community work and community supports. I think that is the answer to all of this, we can't delegate everything to the prisons. As much as it is nice and easy to blame prisons for everything, this is a bigger problem than prisons, I think is a kind of a good note to end on. It's like yes, the prison is a terrible place to be. It has all these issues, it's not getting people better, and it's also not the problem of just the prisons [...] when it comes to mass incarceration of Indigenous peoples, when it comes to public safety and health and the issues with drugs and society, this is a much, much, much bigger problem than prisons. We can't just blame the prisons for everything, even though there's a lot of issues with them. This is an issue with mental health services in the country. This is an issue with education in the country. It's an issue with child services in the country. This is not just a prison problem.

Denise Webb: Well, thank you for that, and I appreciate the positive note at the end, and just finding some direction for people who are interested in putting in their own effort and being involved. That's something that I'm going to be looking at, the restorative justice committee around me.

So, thank you, Justin. Thank you so much for joining in on this podcast episode, and for sharing your expertise and knowledge and research, and just highlighting what needs to be done on this critical issue.

Dr. Justin Tetrault: Yeah, of course. Thanks so much for having me.



-Music-

Denise Webb: To hear more podcasts in this series, head to *Voices from the Field* on the National Collaborating Centre for Indigenous Health’s website nccih.ca. Music on this podcast is by Blue Dot Sessions. It appears under a Creative Commons license. Learn more at sessions.blue.

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