

Perinatal Health and Parenting in Corrections

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Women’s Wellness Within

Perinatal health and parenting support for women in corrections in Nova Scotia

Introduction

The Women’s Wellness Within project began in reaction to the 2012 unassisted footling breech birth of Gionni Garlow to mother Julie Bilotta, who at the time was on remand at the Ottawa Carleton Detention Centre. Our organization includes criminalized women, nurses, doulas, midwives, social workers, lawyers and students in these fields. WWW is an interdisciplinary health services partnership to serve criminalized women facing poverty, addiction, isolation and mental illness in pregnancy and while parenting.

Process

Women’s Wellness Within is coordinated by a student nurse at Dalhousie. We began discussions with health care providers and administrators at the Central Nova Correctional Facility in Dartmouth (a provincial jail, with the only women’s unit in the province) and the Nova Institute in Truro (the only federal prison for women in Atlantic Canada) to bring perinatal and parenting support services we provided “outside” to women “inside”. We sought clearance at each correctional institution and received required volunteer training. In summer 2014, we began serving individual clients at Burnside. In spring 2015, we conducted a needs assessment with the women inside Burnside to determine their interests for monthly health workshops. We developed certificates of completion for all workshop participants. In fall 2015, we began serving individual clients at Nova Institute. Women in corrections advise and support the work of this group.

Services

- 1. One on one support and companionship for:
 - Parenting
 - Abortion, Miscarriage
 - Prenatal education, labour and delivery, postpartum and breastfeeding
 - Infant NICU admissions
- 2. Referrals to Public Health, parenting programs, etc.
- 3. Monthly women’s health workshops on topics determined by the women:
 - Contraception and prevention of STIs
 - Fertility awareness
 - Coping with stress
 - Doula and midwifery services
 - Hygiene and vaccinations
- 4. Advocacy and support for women to live with and breastfeed their infants and children while incarcerated.

Mothers & Children Together



Julie Bilotta and her son Gionni Garlow, who was born in custody in Ottawa in 2012 and died a year later. Photo used with permission.

Results

- In 2015, WWW served five individual women in pregnancy and several women seeking parenting support
- Approximately 75 women have participated in WWW workshops
- We participated in the November 2015 Nova Institute Health Fair
- In partnership with Pro Bono Students Canada and through consultation with women inside, we developed a community resource guide for women released in Halifax. To request a copy email Halifax@leaf.ca
- In October 2015 we hosted Julie Bilotta for a NS speaking tour. Bilotta spoke at a doula inservice, a Schulich School of Law Health Law Seminar, and a Keynote Address for the LEAF Persons Day Breakfast. A film of Bilotta’s keynote is now used as a health practitioner teaching tool. Contact us at Halifax@leaf.ca if you wish to view it or host a screening.
- The Dalhousie School of Nursing is currently exploring formal practical clinical learning opportunities for students to train with women in corrections.
- In February 2016, the Nova Institute was awarded the Breastfeeding Community of Practice Breastfeeding Champion Award for supporting women in breastfeeding, pumping, and parenting their infants.

Health Inequities in Corrections

Isolation: Women come from across NS to the provincial jail in Dartmouth, and from across Atlantic Canada to the federal jail in Truro. They have few visitors and sparse connections to local resources. A large portion are on remand awaiting trial.

Children: 2/3 of federally-sentenced women have children. Incarceration results in separation, often permanently. Separation impacts children’s health.

Addiction: The disease of opioid addiction is prevalent. Many women in corrections are part of methadone harm reduction programs. Their infants may experience neonatal abstinence syndrome (NAS). Infant recovery from NAS improves with skin-to-skin contact, breastfeeding and rooming in with mom.

Poverty and homelessness are pervasive for women in prison. Lack of housing for women on release, particularly women with children, is a critical concern.

Literacy, education, employment: 40% are illiterate; 35% have less than grade 9 education; 80% are unemployed.

Violence: 82% have experienced physical or sexual abuse.

Aboriginal: 1/3 of the women in prison in Canada are Aboriginal.

Infection and disease: Women in prison experience higher rates of hepatitis C, HIV and other sexually transmitted infections

While incarcerated, women are vulnerable to infectious diseases, violence, mental illness, inactivity, malnutrition, and suicide.

Partners

- The individuals involved in the development of WWW are connected to community organizations including:
- The Chebucto Family Centre, a community centre offering volunteer doula services; group programs; childcare; individual counselling; and physical resources such as baby items and bus tickets.
 - The Halifax Women’s Legal Education Action Fund (LEAF), the local branch of a national organization that advocates for substantive equality for women and girls under Section 15 of the Canadian Charter of Rights and Freedoms
 - The IWK Midwives, who provide primary maternity care through pregnancy, labour, birth and the postpartum period to families in Halifax.
 - The Elizabeth Fry Society of Cape Breton. The society works with and on behalf of women in conflict with the law.
- WWW has also received the support of:
- Pro Bono Students Canada, which provides legal services to organizations without charge
 - NSPIRG, the Nova Scotia Public Interest Research Group

Conclusion and Future Directions

- Women are the fastest growing prison population in Canada. There are approx. 600 women in prison and 6000 in provincial jails in the country.
- Correctional centre operations were not designed to meet the health needs of growing populations of reproductive-aged women.
- Women in corrections experience health histories of astonishing poverty, violence and addiction. They need comprehensive support and services. As providers of perinatal and parenting support and care, it is an ethical imperative to serve these women and their children.
- WWW is being incorporated as a non-profit entity. We are solidifying partnerships and building our coalition with community stakeholders.
- Future areas of advocacy include housing for criminalized women and their children, fostering continuity of care, and improving transitions to community living
- Future areas of education include reproductive justice and consent

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