

Unlocking the Gates to Health: Peer Health Mentor Program for Women Leaving Correctional Centres

October, 2018

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Book sales - support educational awards for women & children

Arresting Hope Education Fund

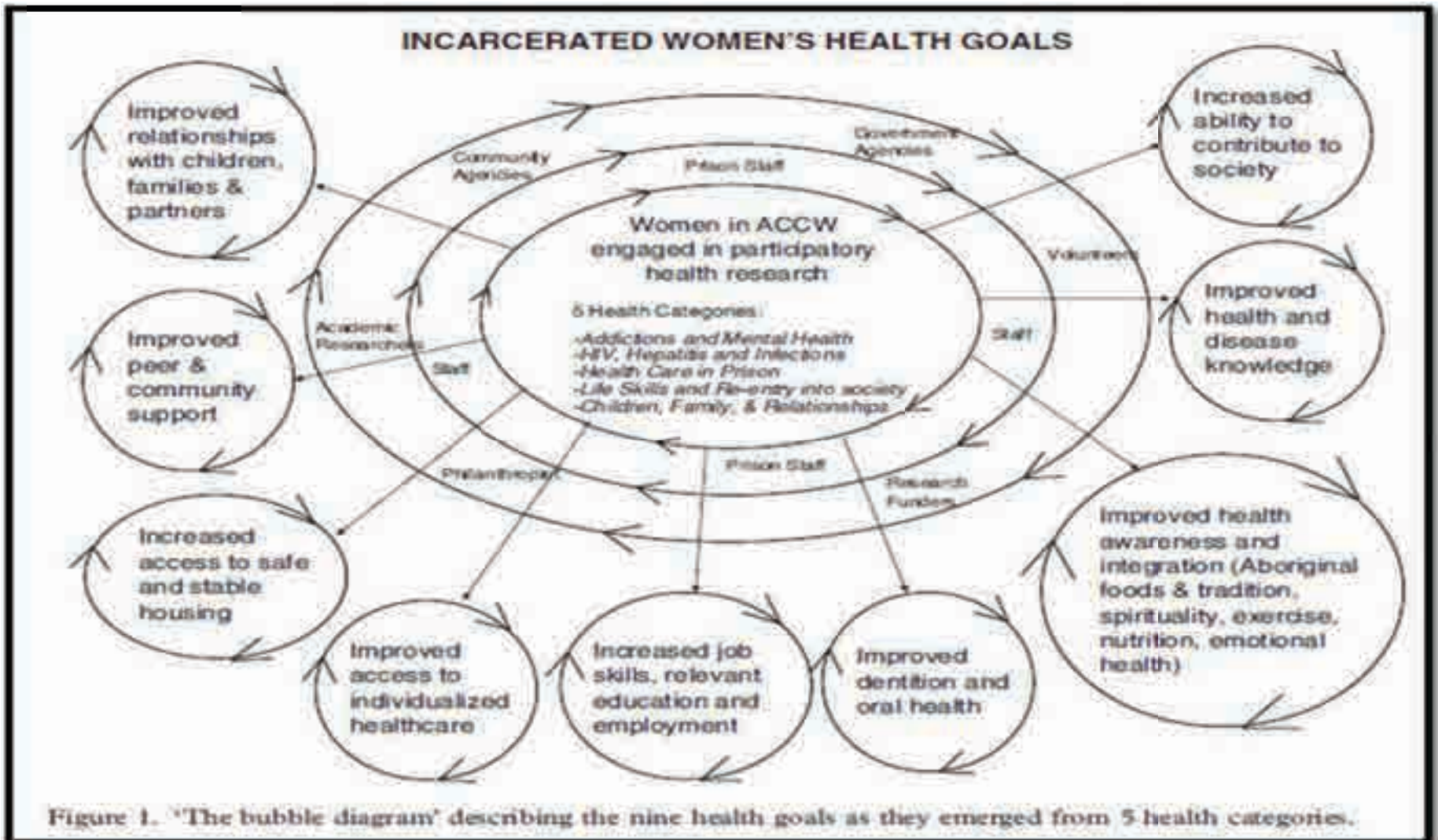


van^ou^ever
foundation

Outline

1. Background
2. UTG: what we do
3. UTG: evaluation findings
4. Next steps

Background: Participatory Health Research with incarcerated women



Martin RE, Murphy K, Hanson D, et al. *The development of participatory health research among incarcerated women in a Canadian prison.* Int J of Prisoner Health. 2009; 5.2: 95 –107

Martin RE, Murphy K, Chan R, Ramsden VR, Granger-Brown A, Macaulay AC, Kahlon R, Ogilvie G, Hislop TG. *Primary health care: applying the principles within a community-based participatory health research project that began in a Canadian women's prison.* Global Health Promotion. 2009; 16: 4: 43-53

Factors that support successful transition to the community among women leaving prison in British Columbia: a prospective cohort study using participatory action research

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Abstract

Background: In Canada, the number of women sentenced to prison has almost doubled since 1985. In British Columbia, the rate of reincarceration is 70% within 2 years. Our aim was to identify factors associated with recidivism among women in British Columbia.

Methods: We prospectively followed women after discharge from provincial corrections centres in British Columbia. We defined recidivism as participation in criminal activity disclosed by participants during the year following release. To identify predictive factors, we carried out a repeated-measures analysis using a logistic mixed-effect model.

Results: Four hundred women completed a baseline interview, of whom 207 completed additional interviews during the subsequent year, contributing 395 interviews in total. Factors significantly associated in univariate analysis with recidivism included not having a family doctor or dentist, depression, not having children, less than high school education, index charge of drug offences or theft under \$5000, poor general health, hepatitis C treatment, poor nutritional or spiritual health, and use of cannabis or cocaine. In multivariate analysis, good nutritional health (odds ratio [OR] 0.52 [95% confidence interval (CI) 0.28–0.76]), good spiritual health (OR 0.61 [95% CI 0.44–0.83]), high school education (OR 0.44 [95% CI 0.22–0.87]) and incarceration for a drug offence versus other crimes (OR 0.30 [95% CI 0.12–0.78]) were protective against recidivism.

Interpretation: Our findings emphasize the relevance of health-related strategies as drivers of recidivism among women released from prison. Health assessment on admission followed by treatment for trauma and associated psychiatric disorders and for chronic medical and dental problems deserve consideration as priority approaches to reduce rates of reincarceration.

In British Columbia, the number of women incarcerated each year rose from 1670 in 2017 to 1989 in 2013, an increase of 20%.¹ The rate of reincarceration is 40% within 1 year of release and 70% within 2 years.² Women in provincial facilities have received sentences less than 2 years. In the federal system, there are over 300 women incarcerated, with another 550 under community release supervision. In the last 10 years, the number of women sentenced to federal institutions has increased by almost

health-related factors has not been examined.^{3,4} We followed a cohort of women for 1 year after discharge from incarceration in a provincial corrections centre to understand factors that supported their successful reentry into society, that is, without reported reengagement in criminal activity.

Methods

Our research was a prospective, longitudinal, multi-site, multi-

Peer Health Mentoring



UTG: on-line court registry

The screenshot shows the website for the Provincial Court of British Columbia Criminal Court Lists. The header includes the British Columbia logo and navigation icons for search and menu. The breadcrumb trail is: Home > Law, Crime, & Justice > Courthouse Services > Daily Court Lists >. The left sidebar contains links for Federal Legislation Abbreviation Codes, Provincial Legislation Abbreviation Codes, and JUSTIN Code Table Abbreviations (XLS). The main content area is titled "Provincial Court of British Columbia Criminal Court Lists" and explains that the page provides links to court lists: Adult Court Lists and Adult Supreme Court Lists (today's appearances), and Adult Completed Court Lists (Provincial and Supreme) (past five days). It also includes a section "Finding a Name on the Criminal Court List" which states that proceedings are listed alphabetically by the last name of the Accused or Applicant. It provides steps to find a name: select the city, click on binoculars, enter the name, and press Enter or click Find. A note at the bottom states that files with access restrictions will not display names and will only be listed by file number.

BRITISH COLUMBIA

Home > Law, Crime, & Justice > Courthouse Services > Daily Court Lists >

Federal Legislation Abbreviation Codes

Provincial Legislation Abbreviation Codes

JUSTIN Code Table Abbreviations (XLS)

Provincial Court of British Columbia Criminal Court Lists

This page provides links to the following court lists:

- ▶ [Adult Court Lists](#) and [Adult Supreme Court Lists](#) which show scheduled court appearances for today.
- ▶ [Adult Completed Court Lists \(Provincial\)](#) and [Adult Completed Court Lists \(Supreme\)](#) which list results of Court from the past five days.

Finding a Name on the Criminal Court List

Proceedings are listed alphabetically by the last name of the:

- ▶ Accused (the person charged with a crime) in criminal court cases.
- ▶ Applicant (the person who brought the proceeding to court) in civil court cases.

To find a name, follow these steps:

- ▶ Select the city where the proceeding will occur - the court list for that location will open as a PDF file.
- ▶ Click on the image of the binoculars
- ▶ In the field that pops up, enter the name of the person you are looking for
- ▶ Press "Enter", or click "Find"

Note: Files with access restrictions (such as those for divorce or family law cases that involve minors) will not display any names and will only be listed by the file number.

UTG: invitation letters

H!

Are you getting released soon and need help with your release planning? We have been in your shoes and know how hard it is to leave prison with only the clothes on your back and no idea what to do next or where to go to start to rebuild your life. We can help you before you get released just call us at our office and talk with us about how we can help you. We can pick you up at the ACCW gate the day you are released and we can help find you a recovery house or treatment or can find you a safe place to sleep. Do you need help to arrive safely to where you are going and want someone to support you we can help you.

We work on a project called Unlocking the Gates peer mentor program. We would like to provide you with a peer mentor for up to the first 72hrs after you are released. We will connect you with a woman who has been in prison and has been successful at maintaining her sobriety while beating the revolving door of the justice system. If you phone our office number below to do a telephone interview this will give the peer mentor an idea of what services you would like to access upon your release.

The person we have chose for you will meet you the day you are released will help you access those resources or meet your needs in the community. They can help you find shelter, a doctor, clothing etc...or go to your probation appointment or just sit and have coffee. We know how difficult it is getting out and making it to all of your appointments, so our peer mentor will meet you each day for the first 3 days after you are released to help get you on your feet. But you do not have to commit to the full three days if you don't want to. Were more than happy to assist you however we can.

If you know anyone else getting out could you please let other women know about this program. Call us collect at our office of Women In 2 Healing office (604) 875 3658.

We are taking calls on Monday and Wednesday from 9am to 3pm any other time call Mo Korchinski (778) 938 2584 or call Pam Young at (604) 518 3261 (sorry we can't accept collect calls on our cell phones) to connect with the program. We are more than happy to take your call. If there is no answer please keep calling back! And please call us as soon as possible the sooner we know the day of your release the better we can serve you.

If our program is not for you but if you would like to hook up with Women In 2 Healing. We are a group of about 300 women from ACCW who are now in the community who support each other. Look for us on facebook Women In 2 Healing / ACCW Alumni or call the office.

Hope to hear from you.
Sincerely Mo Korchinski and Pam Young

UTG: flyers on living units

The Unlocking the Gates Peer Mentorship Program

Are you just about to be released from prison?

Are you looking for help to connect with?

Treatment * Safe and stable housing * Peer and community support * A Doctor or dentist!

Peer Mentorship Program can help you with your release planning and help you connect with resources in your community.

Do you want to relocate to a new community? We can help.

We provide you with a peer mentor to walk with you during your first 72 hours upon your release.



Please call us as soon as you know your release date, so we can help set up a mentor and resources for you upon your release.

Call us collect at 604 875-3658

Monday and Wednesday 9-4 to complete a phone intake

After Hours Call **Mo Korchinski** at 778 938-2584 or

Pam Young at 604 518-3261

Sorry no collect calls to after hour numbers

UTG: phone intake interview



Name: _____

Tell me a little bit about you. _____

What city/town are you going when you get released? _____

Who are you staying with? _____

What are you looking forward to when you get out? _____

What is challenging about getting out? _____

What supports do you need?
 Rank the three choices in order of importance: 1, 2, 3, (1 being the most important)

Employment for outreach worker	Welfare office	Immediate family contact
Safe place to sleep	AA, NA, Al-Anon (etc)	Food
Drug and alcohol counselor	Clothing	Medical
Prescription for OAT	Friendship Centre	Education

What is one word that best describes you? _____

Example - Ready Strong Assertive Caring Helpful Loved

People living in Canada come from many different ethnic ancestries. How do you define your ethnicity?

Are you a member of one of the indigenous groups in Canada? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know <input type="radio"/> Prefer not to say	If you are one: <input type="radio"/> First Nations <input type="radio"/> Métis <input type="radio"/> Inuit <input type="radio"/> Don't know <input type="radio"/> Prefer not to say	2) Do you want to identify with your culture? Yes ___ No ___ Your nation/people? Yes ___ No ___ Your community? Yes ___ No ___ (Other Comments) _____ _____
Are you born in Canada? Yes ___ No ___ Non Status? Yes ___ No ___ Don't know _____ Do you know how to get your status card? Yes ___ No ___	Do you speak your indigenous language? Yes ___ No ___ Would you like to learn your indigenous language? Yes ___ No ___	Are you going back home (in future)? Yes ___ No ___ Are there reasons to doubt? Yes ___ No ___ Missing away from home? Yes ___ No ___
Today's date: _____	Release date: _____	Status: _____

UTG: consent for evaluation research

THE UNIVERSITY OF BRITISH COLUMBIA

School of Population and Public Health
2206 East Mall
Vancouver B.C. V6T1Z3



FACULTY OF ARTS
AND SOCIAL SCIENCES | SCHOOL OF
COMMUNICATIONS



CONSENT FORM

Dong Time: Unlocking the Gates to Health
Peer Health Mentoring Program

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Co-Investigator(s)

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Dr. Maria Buchanan (UBC Dept of Counseling Psychology) Phone: (604) 822-4625

Dr. Cori Leggo (UBC Language and Literacy Education) Phone: (604) 822-4640

Dr. Vivian R. Ramsden (Medicine, University of Saskatchewan) Phone: (306) 306-455-4895

Dr. Lynn Fels (SFU Arts Education) Phone:

Lara-Lisa Condello (NVI-Criminology) Phone: (604) 602-3427

Dr. Patti Jansen (UBC School of Population and Public Health) Phone: (604) 875-2424 X 3415

Dr. Alison Granger-Brown, (University of the Fraser Valley) Phone: (778) 638-0701

Veronika Macavan (VM Stats) Phone: (416) 317-1648

Program Coordinator: Mo Korchinski

Study phone numbers: 604 875 3658 or 1-877 8-4WOMAN

Program Staff: Pam Young, Tammy Milkovich, Sandra Davies, Christine Hemingway

Funding Partner: First Nations Health Authority

UTG: surveys – intake, demographics, substance use, ACE, THN, etc

THE

Unlocking the

Participant ID: _____

Interviewer: _____

Today's Date: _____

Date of Prison Release: _____

1. How old are you? _____

2. Are you a member of _____

Yes

No

Don't know

Prefer not to say

2.A. If yes to #2, are _____

First Nations

Métis

Inuit

Don't know

Prefer not to say

2.B. If yes to #2, are _____

Status

Non Status

2.C. If yes to #2, do _____

3. People living in Canada _____
define your ethnicity? _____

Demographic Survey, V#3

While you were _____

1. Did a parent or _____
Swear at _____

Act in a _____

2. Did a parent or _____
often _____
something _____

Ever hit _____

3. Did an adult or _____
Touch or _____

Try to or _____

4. Did you often _____
No one _____

Your fan _____

UTG Peer Mentors

Take home naloxone and Good Samaritan Drug Overdose Act questionnaire

1. Are you at risk of an overdose?
Yes ___ No ___

2. Do you own a cell phone?
Yes ___ No ___

3. If No do you intend to get a cell phone?
Yes ___ No ___

4. Did you receive Naloxone training before you were released?
Yes ___ No ___

5. Were you offered a Take Home Naloxone kit upon release?
Yes ___ No ___

6. Do you have a Take Home Naloxone kit with you?
Yes ___ No ___

7. Have you heard about the Good Samaritan Drug Overdose Act?
Yes ___ No ___

8. If you saw someone overdose in the future, would you call 9-1-1?
Yes ___ No ___

*If No – why not:
Don't have a phone _____
Worried about the police _____
 Specify why: _____
Other: _____

UTG Peer Health Mentor THN/GSDOA, version 1, September 21, 2018

UTG: evaluation survey at end of mentor period

Unlocking the Gates (UTG) Peer Health Mentor Program Evaluation Survey

In an effort to evaluate and monitor the effectiveness of the UTG Peer Health Mentor program, it would be helpful if you answer the following survey questions. The survey is completely confidential; at no time will any information that could identify you be included in study reports.

Today's date: D ____/M ____/Y ____

What date were you released from prison: D ____/M ____/Y ____

Which town are you in now? _____

1. Did you connect with community resources? Yes _____ No _____


2. What community resources did you connect with?

Community resources	Response you received	Mentor go with you	
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No


3. How many days did you connect with your mentor? _____

4. Did your peer health mentor assist you with your support you identified in your telephone intake/ or intake? Yes _____ No _____


UTG: PHMs – training, checking in, boundaries, field notes



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First Nations Health Authority
Health through wellness



Unlocking The Gates Peer Mentor field Note Questionnaire

Client name _____ Date _____

1. What stood out most working with your client? _____

2. How did mentoring this client make you feel? _____

3. What was the response you got from community residents? _____

4. What resources did you access?

Connect to outreach worker	Welfare office	Immediate health concerns
Safe place to sleep	AA/12a Meeting times	Food
Drug and alcohol cessation	Childing	Denial
Prescription for OAT	Friendship center	graduation

5. What was the most challenging/surprising? _____

6. Anything else you want to add? _____

Please return form to UTG office and thank you for all what you do.

UTG: what we do



UTG: evaluation quantitative findings

TABLE 1: Demographic factors of women who participated in a peer health mentor program for up to 3 days following their release from a provincial correctional centre

		#	%
Indigenous Identity (self-identified, data from intake form) (n=174)	Self-identify as Indigenous	92	53%
	Not Indigenous	77	44%
	Don't know	2	1%
	Missing Data	3	2%
Age (n=66)	16-30	19	29%
	31-50	43	65%
	51-70	2	3%
	Missing Data	2	3%
Sexual Orientation (n=66)	Straight/heterosexual	54	82%
	LGBTQ2+	10	15%
	Prefer not to say	2	3%
Marital Status	Single, Never Married	46	70%
Highest Educational Attainment	Grade 8 or lower	7	11%
	Grade 9-10	27	41%
	Grade 11-13	26	39%
	Some Post-Secondary	12	18%
	Don't Know/Prefer not to say	3	5%
Homeless at time of intake interview		16	24%
How do you support yourself?*			
	Accessing Social Assistance/Disability at time of intake interview	57	86%
Have Children		53	80%

*Respondents could select more than one answer. Only one of the women interviewed reported being employed at the time of intake.

UTG: evaluation quantitative findings

TABLE 2: Types of needed supports identified by program participants during intake interview N=172

	Priority 1	Priority 2	Priority 3	Priority 4	Priority 5	Priority 6	Total	% of women identifying need
Housing	43	12	6				61	37%
Healthcare	6	18	19	4	1		48	29%
Clothing	16	28	43	3	2		92	56%
Welfare	61	39	12				112	69%
Drug & Alcohol Counsellor	14	17	12	1			44	27%
Food	4	9	13	5		1	32	20%
Dentist	2	7	14	1	4		28	17%
Meeting Times	2	11	12				25	15%
Outreach Worker	15	13	12				40	25%
Probation			1				1	1%
Total responses	163	154	144	14	7	1		

*Outreach worker – meet people in community, homeless camps, help get to a doctor, most have a relationship with outreach worker- employed by community organization, e.g. addictions services, BC housing, mental health has outreach worker. Meet people where they're at, camps etc.

** AA and NA meeting times.

UTG: evaluation quantitative findings

TABLE 3: Resources accessed during peer mentoring & Peer mentoring support self-reported by program participants in three-day evaluation interview. (n=105)

		#	%
Connected with any community resource during first 72 hours after release	Yes	89	85%
	No	15	14%
	Answer Missing	1	1%
Accessed a family doctor during the first 72 hours after release	Yes	49	47%
	No*	52	50%
	Answer Missing	4	4%
Did your peer mentor assist you in accessing community resources	Yes	98	93%
	No	5	5%
	Answer Missing	2	2%
Women requiring access to income assistance		66	63%
Of the women who required access to income assistance (n=66), women reporting that their peer mentor accompanied them to obtain income assistance		55	83%
Did your peer mentors assisted you to achieve the goals you had identified for yourself prior to your release?	Yes	94	90%
	No	6	6%
	Answer Missing	5	5%

* among the 52 women who answered No, 31 (60%) reported that they received information from their peer mentor with respect to how to access a family doctor

UTG: evaluation quantitative findings

TABLE 4: Women who answered 'Yes' to the question "it would make a difference in my life if I had..." (n=105)

	#	%
Money to buy necessities	91	87%
Someone to talk to about the things that worry me	90	86%
Housing	89	85%
Medical care	89	85%
A real friend	89	85%
Dependable transportation	84	80%
Someone to hassle with agencies when I can't	83	79%
More education	82	78%
Healthy food to eat	81	77%
Drug or alcohol treatment	79	75%
A good job	79	75%
More control of my life	78	74%
Personal safety	78	74%
Enough clothes	77	73%
Food	76	72%
Freedom from abuse	72	69%
Time for fun	71	68%
Somewhere else to live	67	64%
A good partner	65	62%
A dependable relationship	64	61%
Legal help	63	60%
Someone to lend me money	63	60%
A telephone or access to a phone	62	59%
Help with child custody problem	61	58%
Time to get enough sleep	58	55%
Time to be by myself	58	55%
Birth control	46	44%

UTG: evaluation quantitative findings

TABLE 5: Types of needed supports identified by program participants during telephone interview. Answer missing for 2 telephone interviews, (n=344)

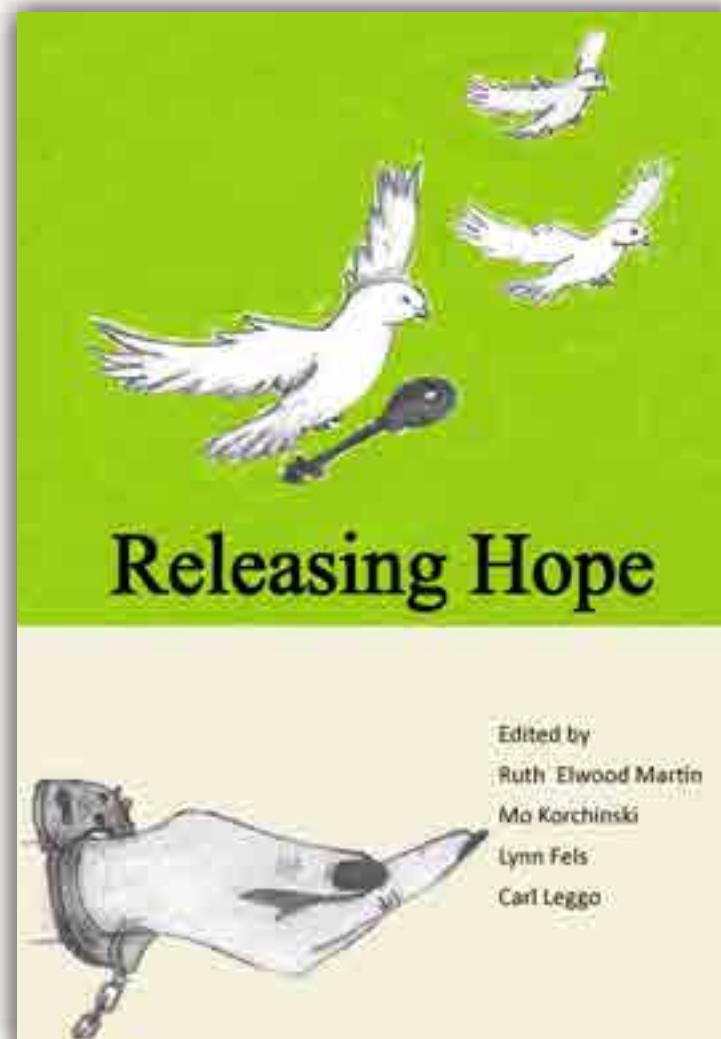
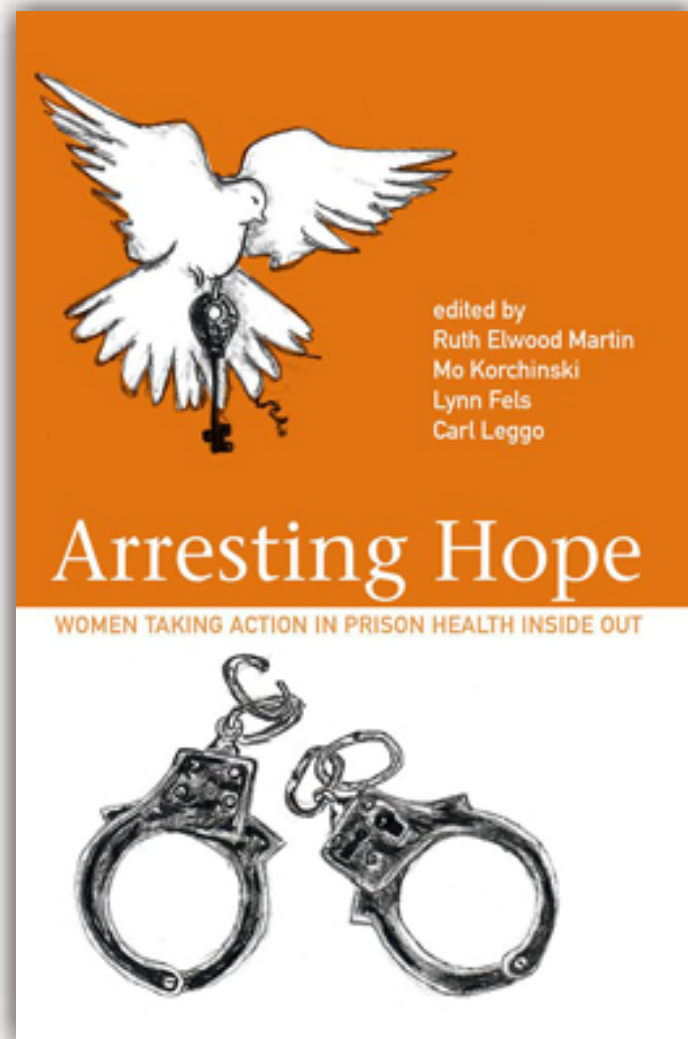
	#	%
Housing	179	52%
Healthcare	64	19%
Clothing	219	64%
Welfare	209	61%
Drug & Alcohol Counsellor	96	28%
Food	2	1%
Dentist	17	5%
Meeting Times	68	20%
Outreach Worker	87	25%
Probation	110	32%
Ride	45	13%
Treatment	25	7%
Bail	13	4%
Mental Health	8	2%
Other	28	8%

UTG: evaluation quantitative findings

TABLE 6: Comparison – health goals at telephone intake and intake interview

	Telephone Intake (n=344)		Intake interview (n=172)	
	#	%	#	%
Housing	179	52%	61	37%
Healthcare	64	19%	48	29%
Clothing	219	64%	92	56%
Welfare	209	61%	112	69%
D & A Counsellor	96	28%	44	27%
Food	2	1%	32	20%
Dentist	17	5%	28	17%
Meeting Times	68	20%	25	15%
Outreach Worker	87	25%	40	25%
Probation	110	32%	1	1%
Ride	45	13%	-	-
Treatment	25	7%		
Bail	13	4%		
Mental Health	8	2%		
Other	28	8%		

UTG: evaluation qualitative findings – ‘found poems’



Found Poem—*What do you want people to know about women leaving prison?*

Listening to the Women

we are not stereotypes

it is possible
to turn your life around

it is possible
we like having jobs
going shopping

we have nowhere to go
and no means to go anywhere

we should not be judged

jail sucks
a shitty place
we are scared
life is hard

we need somewhere safe to go
we need resources

we need support
we need skills
we need love

we deserve the same
chances as others

we aren't bad people

just because we made
a few mistakes

doesn't make
us bad people
we aren't bad people

just because we
did a little time

we made some bad choices

we're not monsters
we're people
we're women
we're human

we can recover
we can change

life after jail
new meaning
we aren't alone

shit happens
there is hope!

'Found Poems' were created by Carl Leggo, as he lingers and listens to data, selecting and gathering extracts from interview responses of women who are being mentored and from field notes written by women who are mentors

Next Steps: expand UTG...



First Nations Health Authority Health through wellness

Demonstrate Excellence in PHM programs for First Nation men and women leaving prison (Target - 100 men with complete a minimum of 1 health goal; 100 women will complete a minimum of 1 health goal)

Report quantitative data (e.g. # FN men and women served; # connections to a doctor post-release; # applications to income support post-release; # connections to community resources (food, clothing, temporary housing); # people housed; # people connected with a FNH PHM)

Collaborate with Research Branch, BC Corrections, and Provincial Health Services Authority, to explore association(s) with recidivism and healthcare data.

Thank you for listening.....

QUESTIONS?

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