



INDIGENOUS COMMUNITY DIALOGUES SUMMARY REPORT

PRISONS





LAND ACKNOWLEDGEMENT

CAAN and the HIV Legal Network are located across this land now called Canada on treaty lands, stolen lands, and unceded territories of many different Indigenous groups and communities who have respected and cared for this land since time immemorial.

Together, we work to address the ongoing injustices and resulting health inequities faced by Indigenous Peoples, which contribute to the disproportionate impact of the HIV epidemic on Indigenous communities. We are committed to learning to work in solidarity and to dismantling and decolonizing practices and institutions to respect Indigenous Peoples and Indigenous ways of knowing and being.

OTHER SUMMARY REPORTS IN THIS SERIES:



Sex Work



Drug Policy



Other Major Findings

Context and purpose

This summary report presents findings related to prisons from six Indigenous community dialogues conducted across Canada from 2023-2025. The dialogues were organized by the HIV Legal Network and CAAN Communities, Alliances & Networks as part of a broader project examining Indigenous Peoples' lived experiences with HIV, hepatitis C (HCV), and other sexually transmitted and blood-borne infections (STBBIs).

The dialogues were designed to gather community feedback on a **policy brief** jointly produced by the HIV Legal Network and CAAN, which outlines legal and policy reforms aimed at improving HIV, HCV, and STBBI outcomes for Indigenous Peoples, specifically in relation to drug policy, sex work, and prisons. Participants were invited to reflect on the brief's recommendations and to share their own experiences, priorities, and concerns.

Community dialogues took place in Winnipeg, Prince George, Montreal, Halifax, and Sudbury as well as through a virtual dialogue with CAAN staff. Participants included Indigenous people with diverse lived experiences (including drug use, sex work, and incarceration) as well as people living with HIV or HCV, service providers, and community advocates.¹

This report summarizes how dialogue participants understood, supported, nuanced, or challenged the policy brief's recommendations on prison policy, and highlights additional considerations raised through lived experience that can inform future policy development.

¹ Community dialogues took place on the following dates: Virtual CAAN, July 11, 2023; Winnipeg, July 14, 2023; Prince George, April 17-18, 2024; Montreal, July 12, 2024; Halifax, November 20, 2024; Sudbury, March 31, April 3, April 29, 2025.

Prison policy recommendations in the policy brief

The policy brief identifies the mass incarceration of Indigenous people in Canada as a central structural driver of HIV and HCV risk. Its core prison-related recommendations include:

- Improve socioeconomic conditions and address racial profiling and other policing patterns that lead Indigenous people to increased interactions with the criminal legal system;
- Reduce Indigenous overrepresentation through diversion, restorative justice approaches, and alternatives to incarceration;
- Ensure all Indigenous people in prison have access to HIV, HCV, and STBBI testing and treatment;
- Implement harm reduction policies and programs in all Canadian prisons; and
- Ensure trauma-informed, culturally sensitive, and culturally appropriate care for Indigenous people in prison, and harm reduction services specifically.

What we heard

Mass incarceration and its community impacts

Across all regions, participants described **Indigenous over-incarceration as producing harms that extend far beyond prison walls, affecting families and communities, and lasting for generations.**

Participants in the CAAN and Halifax sessions emphasized how incarceration stigmatizes entire families in small communities, leading to social withdrawal and loss of connection to culture and ceremony. For instance, one participant described how family members' incarceration related to substance use resulted in lasting community stigma and disengagement from traditional practices.

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Prisons just make Indigenous communities in Canada smaller. It hurts. – HALIFAX DIALOGUE

Another participant described how the consequences of colonialism function as a pipeline into incarceration. This imagery echoed comparisons between prisons, residential schools, and reservations that were raised in Prince George and Montreal.

Participants across multiple dialogues explicitly described incarceration as cyclical and self-reinforcing. There was a recurring perception that incarceration does not resolve underlying issues like intergenerational trauma or substance use, but instead normalizes repeated return to prison. Across dialogues, this cycle was understood as rooted in colonial systems that criminalize poverty, trauma, substance use, and survival, rather than addressing their causes.

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In the provincial system, there are no programs. In provincial, they do not want to help you; it is just a revolving door. They will save your bed for you. – PRINCE GEORGE DIALOGUE

Systemic bias in the legal system

Participants widely agreed that discrimination and stigma perpetuated by the court system plays a central role in accentuating Indigenous mass incarceration. Many individuals expressed disillusionment with the legal system and felt that the process was unfair and stacked against them.

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An Indigenous person caught for the same crime will get twice as much time as a white person. All you have to do is say what your last name is and that will inform how long your sentence is.

– PRINCE GEORGE DIALOGUE

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Indigenous people plead guilty because it is expected of them. People don't know what they are pleading to and often face jail time. Sometimes clients would plead guilty in the fall, so they would have a warm place to stay over winter months where they would get fed. – PRINCE GEORGE DIALOGUE

There were mixed feelings about the effectiveness of Gladue reports for Indigenous people. While some saw them as essential in accounting for the impacts of intergenerational trauma, others described their inconsistent or even punitive application. One participant in Winnipeg explained that when courts perceived her as having a “white” or colonized background, her Indigenous identity and intergenerational trauma were discounted, resulting in harsher judgment rather than mitigation.

In Montreal, participants expressed deep ambivalence about Gladue. While some acknowledged positive outcomes such as mitigated sentencing, others described the process as invasive and reported being advised against pursuing a report for fear of exposing painful family histories or reinforcing stigma.

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Gladue does not work – they just dig up old bones. – MONTREAL DIALOGUE

Across dialogues, participants emphasized that Gladue alone is insufficient without broader changes to the culture of the legal system. Some individuals advocated for a parallel Indigenous court system as a potential solution to these problems, one that is rooted in healing rather than punishment.

Healthcare, privacy, and HIV/HCV risk in prison

Participants consistently identified prisons as environments of heightened HIV and HCV risk, shaped by inadequate healthcare and pervasive stigma.

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I have a good friend who does tats in prison to make his money. But there's no way to ensure you're not spreading infections. – HALIFAX DIALOGUE

Privacy rights were described as routinely disregarded in prison, with disclosure of HIV status sometimes occurring indirectly through food orders or medication routines, exposing individuals to stigma and discrimination. Several dialogue participants raised concerns about frequent treatment interruptions while incarcerated, including during transport, court appearances, and weekends. One individual noted that some people commit low-level offences specifically to access healthcare unavailable in the community, highlighting profound systemic inequities.

Participants across dialogues stressed that correctional healthcare frequently lacks trauma-informed, culturally safe, and gender-appropriate providers, particularly for Indigenous women.

Harm reduction in prisons: alignment and resistance

There was strong support for expanding harm reduction in prisons, including access to sterile injection equipment, overdose prevention, and HIV prevention tools.

Participants in Prince George and Halifax described widespread sharing of needles and other injection equipment in prisons. While some participants noted emerging access to overdose prevention and sterile injection supplies in certain institutions, these measures were often described as stigmatizing, inconsistently implemented, or paired with surveillance.

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The overdose prevention service at Drumheller was sketchy because guards would know that you're using drugs. They wouldn't be allowed to hit you when you're leaving the OPS, but they would hit your cell later. Not many people used it because of that. – PRINCE GEORGE DIALOGUE

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When you do these programs, they use it against you. – MONTREAL DIALOGUE

Participants repeatedly emphasized that withdrawal in prison is poorly managed and can be life-threatening. Accounts of people dying during detox without medical oversight were shared in the Prince George dialogue. Some questioned the logic of denying harm reduction on the basis that drugs are “not supposed” to be present in prison, despite the widely acknowledged reality that substances remain readily available in prisons.



We need to hold CSC accountable. ‘We don’t have needle exchange because there’s no drugs there,’ is what they say. Meanwhile, there are 200 men and one needle. I remember people using a horse tranquilizer needle to inject. – HALIFAX DIALOGUE

There was also discussion of emerging prevention tool, including injectable PrEP for incarcerated populations, though participants raised questions about accessibility, funding responsibility, and potential disparities between provincial and federal institutions.

Culture, healing, and institutional limits

Participants broadly agreed that access to Elders, ceremony, and cultural programming in prison can be meaningful and in some cases transformative, particularly for Indigenous people reconnecting with culture for the first time.

In Prince George, participants described positive experiences in federal institutions offering Indigenous-specific programming, healing lodges, and Elder-led initiatives. At the same time, many cautioned that these programs prioritize abstinence and remain constrained by prison rules and security priorities.

Several participants expressed concern that Indigenous-run prisons or parallel systems could risk reproducing residential school dynamics if not grounded in genuine self-determination. This ambivalence underscored a recurring theme: **culture cannot meaningfully transform fundamentally punitive structures.**



Healing lodges seem to work well as an alternative to prisons, but we should not have these healing lodges abiding by the rules of prison centres. – MONTREAL DIALOGUE



Issues around release and reintegration

Across all dialogues, release from prison was described as a critical failure point. Participants in Halifax emphasized that people are frequently released on Fridays without a plan and without any access to organizational support, housing, healthcare, or follow-up care. Lack of support upon release from prison, sometimes far from home communities, was described as directly contributing to precarity, reincarceration, and poorer health outcomes.

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One thing that happens is that people are being released that may still be experiencing mental health issues, but then they are sent out the door without follow-up in place for them in the community. Once they're back on the street, mental health struggles begin again. It's a cycle.

– HALIFAX DIALOGUE

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When you get out of jail though, they don't help you with jobs, housing... I got the info I needed from other women in jail. – WINNIPEG DIALOGUE

Participants across regions highlighted the absence of Indigenous-run halfway houses, transitional housing, and coordinated reintegration planning or support. Parole board processes were criticized as lacking cultural competence, and probation conditions were called out by some participants for being unrealistic and punitive.

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Prisons are built for you to fail. Look at the cycle of probation, curfew, house arrest. They give you just enough rope to hang yourself. – HALIFAX DIALOGUE

Community-identified gaps and additional considerations

Participants identified several areas that warrant stronger emphasis or inclusion in future prison policy work:

- **Accountability measures are needed within correctional systems**, including oversight of correctional officers, healthcare delivery, and harm reduction implementation;
- **Emphasis must be put on continuity of care**, ensuring uninterrupted access to HIV, HCV, mental health, and substance use treatment during incarceration, transfer, and release;
- **Greater resources need to be allocated to alternatives to incarceration**, including diversion, Indigenous courts, restorative justice circles, and community-based rehabilitation;
- **Need for a national Indigenous organization advocating for Indigenous people** in provincial and federal prisons; and
- **Indigenous people who experience incarceration need holistic reintegration supports**, including housing and income support, cultural connection, family reunification, and peer navigation.



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