

Ashley Smith's requests for help ignored



Ashley Smith's private prison files, obtained by a prisoner advocacy group, reveal the Moncton native desperately wanted to find help for her mental health issues.

FAMILY HANDOUT

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During her year in federal custody, teen prisoner Ashley Smith was trying to turn her life around — seeking counseling and medical support to stop the downward slide that led to her death while guards watched, correctional documents reveal.

Smith's prison records — released to Kim Pate, executive director of the Canadian Association for Elizabeth Fry Societies through a request made on the teen's behalf before

she died — include thousands of documents and paint a far different picture of the young Maritimer than the one presented by the Correctional Service.

“There are at least 90 instances where she was trying to seek the assistance or support of staff,” Pate told the *Star*. “She was requesting access to programs, phone calls to her family, hospital visits.”

Pate said from her review of the records Smith’s requests for assistance were ignored.

Smith was 19 in October 2007 when she choked herself to death with a strip of cloth inside a segregation cell at Kitchener’s Grand Valley Institution. Correctional officers had been instructed by management not to enter the teen’s cell so long as she appeared to be breathing. The order was an attempt to reduce paperwork.

Prison managers classified Smith as a problem inmate because she had taken to tying ligatures around her neck and would count on staff to remove them. A federal report that looked into her death said correction officials were primarily “security-focused” when dealing with the troubled teen.

Pate says the documents show Smith’s attempts at self-harm escalated when prison officials responded to her calls for help by isolating her in segregation cells and drugging her.

Five months before she died, Smith asked Pate to review her prison files to find out why she had been confined to a windowless room 23 hours a day, for months on end wearing nothing but a padded suicide gown and shackles.

Last April, Federal Court Justice Michael Kelen said the Correctional Service of Canada broke the law by not releasing Smith’s records while she was still alive.

“We didn’t know the degree to which the law had been violated,” said Pate, “but these documents clearly show (the Correctional Service of Canada) violated its own policies.”

Pate’s organization obtained the information in two batches over the past few months but has not publicly discussed the contents until now.

The records, Pate says, reveal more than 170 “use of force” incidents — where Smith was involuntarily injected with drugs or pepper sprayed to manage her behaviour. The count also includes at least 10 cases of involuntary body cavity searches.

There are at least 60 cases where Smith's signature should have appeared on personal documents such as psychological assessments but did not because she wasn't allowed to use a pen or her hands were handcuffed behind her back.

Smith landed behind bars at age 15 for breaching probation after an original incident in which she threw crab apples at a mailman in her hometown of Moncton, N.B. As a young offender, she racked up additional institutional charges that saw her time in custody continually extended.

Despite the family's objections, Smith was shunted into federal custody at age 18 and bounced through a series of institutions within the Maritimes, Quebec, the Prairies and Ontario.

An inquest into her death is scheduled to begin in January. Ontario's Deputy Chief Coroner Dr. Bonita Porter is expected to issue a ruling by Monday on the inquest's scope. The family has argued that the jury should hear about the "abhorrent" conditions spanning Smith's entire time in custody. Porter had initially planned to consider only the few months leading up to the teen's death, spent primarily in Ontario.

Pate hopes Smith's personal prison documents and the recommendations stemming from the inquest will "prevent this from happening to other women.

"We're still a long way away from people with mental health issues getting appropriate care."