CORRECTIONAL SERVICE CANADA

CHANGING LIVES, PROTECTING CANADIANS.



RESEARCH REPORT

Overdose Incidents in Federal Custody 2017/2018

2019 Nº SR-19-02

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Executive Summary

Key words: prison overdose incidents; substance misuse; prison drug use; deaths in custody; offender health; opioids

This report builds on a five-year analysis of overdose incidents in federal custody (McKendy, Biro & Keown, 2019), providing an overview of fatal and non-fatal overdose incidents that occurred in federal institutions in the 2017/18 fiscal year period. Information is presented regarding the prevalence and nature of overdose incidents, the circumstances under which overdose incidents occur, patterns in the nature of staff and medical responses, and the characteristics of offenders involved in overdose incidents.

In 2017/2018, 88 overdose incidents were identified for analysis; this figure is the same as that in the previous fiscal year, although more than double that in 2012/2013 (n=40). As in previous years, overdose incidents were typically non-intentional and non-fatal (80%). Intentional non-fatal overdose incidents accounted for 16% (n=14) of incidents, while overdose deaths accounted for 5% (n=4). In terms of regional distribution, a disproportionate number of overdose incidents occurred in the Prairie region (44%, n=39), consistent with previous years. While overdose incidents are generally trending upward, there were slight declines in the number of incidents in the Prairie, Pacific and Atlantic regions.

As in previous years, opioids were the most common substance identified in overdose incidents, suspected or confirmed as either a standalone or contributing substance in 61% (n=54) of cases. Fentanyl was suspected or confirmed in 48% (n=42) of incidents overall, and was particularly common in relation to incidents in the Prairie region (59%, n=23). The use of naloxone, a medication that can temporarily reverse the effects of an opioid overdose (Pant & Severn, 2018), continues to increase both in raw numbers and in relation to the number of overdose incidents; the medication was used in 65% (n=57) of cases in 2017/2018 compared to 45% (n=18) in 2012/2013. As in previous years, non-opioid prescription medications were most common when it came to intentional overdose incidents, suspected or confirmed in 86% (n=12) of cases.

Offenders involved in overdose incidents in 2017/2018 had profiles consistent with those in the previous five years. More specifically, they tended to be male (92%, n=81), medium security offenders (72%, n=63), who were White (60%, n=53) or Indigenous (32%, n=28), often in their 20s or 30s (76%, n=67), serving time for violent offences, such as homicide (22%, n=19) or robbery (21%, n=18). At the time of the incident, offenders involved in overdose incidents had served an average of 4.7 years (median=1.8) of their sentence. In terms of risk/need measures, offenders tended to have medium accountability (72%, n=63), medium motivation (75%, n=66) and low reintegration potential (60%, n=53). A majority (77%, n=68) were engaged with their correctional plan, while 14% (n=12) had responsivity issues. Offenders tended to have high static risk (67%, n=59) and high overall dynamic need (86%, n=76). Many had mental health conditions (74%, n=65) and nearly all had histories of substance misuse (96%, n=84). Offenders involved in overdose incidents also tended to have problematic institutional histories, as measured by previous segregation placements, institutional incidents, and institutional charges.

This report contributes to CSC's knowledge base on trends in overdose incidents as well as the profile of offenders involved in such incidents. In an effort to respond to offender health needs and reduce the harms associated with substance misuse, CSC continues to undertake a variety of initiatives, including correctional programs targeting substance abuse, health supports for those with substance use disorders, and harm reduction measures aimed at improving the safety and security of offenders under our custody and care.

Table of Contents

Acknowledgements	ii
Executive Summary	. iii
List of Tables	v
List of Figures	. vi
Introduction	1
Methodology	2
Results	4
Overdose Incidents in Federal Custody, 2017/2018	4
Incident Details of Overdose Incidents in Federal Custody, 2017/2018	5
Profile of Offenders Involved in Overdose Incidents in Federal Custody, 2017/2018	7
Conclusion	13
References	14
Appendix A	15
Appendix B – One Page Summary	28
Overdose Incidents in Federal Custody, 2017/2018 – Trends	28
Appendix C – One Page Summary	29
Overdose Incidents in Federal Custody, 2017/2018 – Profile	29

List of Tables

Table 1 Type of Incident by Region for Overdose Incidents in Federal Custody, 2017/2018	15
Table 2 Overdose Incidents by Region and Fiscal Year for Overdose Incidents in Federal	
Custody, 2012/2013 – 2017/2018	15
Table 3 Type of Incident by Fiscal Year for Overdose Incidents In Federal Custody, 2012/2013	
	16
Table 4 Incident Details by Region for Overdose Incidents in Federal Custody, 2017/2018	17
Table 5 Incident Details by Fiscal Year for Overdose Incidents in Federal Custody, 2012/2013-	-
2017/2018	18
Table 6 Medical Response by Fiscal Year for Overdose Incidents in Federal Custody,	
2012/2013 – 2017/2018	19
Table 7 Profile of Offenders Involved in Overdose Incidents in 2017/2018 by Region	20
Table 8 Sentence Information for Offenders in Federal Custody Involved in Overdose Incidents	;
in 2017/2018, by Region	21
Table 9 Mental Health and Substance Use History Information for Federal Offenders Involved	Į.
in Overdose Incidents in Custody in 2017/2018, by Region	22
Table 10 Criminal Profile of Federal Offenders Involved in Overdose Incidents in Custody in	
2017/2018, by Region	23
Table 11 Risk/Need Measures for Federal Offenders Involved in Overdose Incidents in Custody	V
in 2017/2018, by Region	24
Table 12 Dynamic Factor Need Level for Federal Offenders Involved in Overdose Incidents in	
Custody in 2017/2018, by Region	25
Table 13 Institutional History of Federal Offenders Involved in Overdose Incidents in Custody	,
in 2017/2018, by Region	26

List of Figures

Figure 1. Overdose Incidents in Federal Custody, 2012/2013 – 2017/2018
Figure 2. Overdose Incidents in Federal Custody 2012/2013 – 2017/2018 by Region and Fiscal
Year
Figure 3. Use of Naloxone in Response to Overdose Incidents in Federal Custody by Fiscal year
Figure 4. Accountability, Motivation and Engagement Measures for Offenders Involved in
Overdose Incidents in 2017/2018 and a Comparison Group.
Figure 5. Dynamic Needs for Offenders Involved in Overdose Incidents in 2017/2018 and a
Comparison Group

Introduction

In light of the continuing opioid-related drug crisis in Canada (Health Canada, 2017), this report seeks to further knowledge on the topic of overdose incidents in federal custody. Building on a five-year analysis of overdose incidents (McKendy, Biro & Keown, 2019), the report provides an overview of fatal and non-fatal overdose incidents that occurred in federal custody in the 2017/2018 fiscal year period.

Our recent research study (McKendy, Biro & Keown, 2019), which examined overdose incidents in federal custody between 2012/2013 and 2016/2017, found a notable increase in the number of overdose incidents in custody, particularly in the Prairie region. Over three-quarters of non-fatal overdose incidents were non-intentional and most involved opioids. Intentional overdose incidents, in contrast, seldom involved opioids and most often involved prescription medications. In terms of the profile of offenders involved in overdose incidents, the study found that they tended to be male, White or Indigenous, aged 25-34, classified as medium security, serving relatively short (under four-year) sentences, often for violent offences (e.g. robbery, homicide). Regarding potential risk and need factors, offenders involved in overdose incidents often had histories of substance misuse and mental illness, as well as patterns of poor institutional adjustment.

The current follow-up study presents an overview of overdose incidents in the subsequent period (2017/2018) and includes additional information on the risk and need profiles of offenders involved in overdose incidents. For this report, both fatal and non-fatal overdose incidents that occurred within a federal institution were analyzed, with the goal of understanding trends in overdose incidents, the circumstances under which overdoses occur, and the profile of offenders involved.

Methodology

For this report, all fatal and non-fatal overdose incidents that occurred in 2017/2018 with sufficient information for analysis were included. A **non-fatal overdose** was defined as an incident where the consumption of drugs necessitated life-saving medical intervention (e.g., the administration of naloxone or cardiopulmonary resuscitation). **Fatal overdose** incidents were those determined as such in official medical reports.

In order to identify all cases meeting these criteria, a data extraction of CSC's offender database, the Offender Management System (OMS), was conducted to identify all potential cases. Incidents falling under the categories of "overdose interrupted", "suspected overdose interrupted", "suicide attempt", "medical emergency", "under the influence" and "other" were extracted and manually screened to identify cases for inclusion. All cases that met the above-noted definitions were included. Data were recorded on the circumstances and details of the overdose incident as well as the characteristics of the offenders involved.

Based on relevant information, cases were identified as one of four sub-types of overdose incidents. **Unintentional non-fatal overdose incidents** were those that did not result in death and in which no indicators of suicidal intent were present. **Intentional non-fatal overdose incidents** were those that did not result in death, but an indication of suicidal intent was present (such as the presence of a suicide note). **Fatal overdoses** were those that resulted in death and may have been intentional or unintentional. **Other types of overdose incidents** included accidental overdose incidents caused by health issues (e.g., non-absorption of medication) or an error on the part of healthcare staff (e.g., incorrect medication dosage), although no such incidents occurred in 2017/2018.

Substances identified in analysis include those that were confirmed or suspected in incidents. Confirmed substances were those that were identified in laboratory tests using bodily samples from the offender, whereas suspected substances were those identified: (1) through tests taken from substances seized from the offender's cell or person; (2) in statements provided by the offender involved in the incident and/or; (3) through intelligence-gathering by staff.

¹ The incident numbers reported herein may be higher than those reported elsewhere due to the expanded scope of this study.

² Given that overdose incidents were assumed to be unintentional unless a clear indication of suicidal intent was present, it is possible that the number of intentional cases is underestimated in this report.

³ Fatal overdose incidents were not distinguished as intentional or non-intentional due to low numbers as well as a lack of information regarding intentionality.

Data were collected for each unique offender incident using information from investigations, incident reports, and OMS. Cases were entered into survey software and subsequently exported into statistical software (SPSS) for analysis. Frequency distributions were run to determine the variables containing enough information for analysis; further statistical analysis was conducted where appropriate.

Results

Overdose Incidents in Federal Custody, 2017/2018

During the 2017/2018 fiscal year period, there were 88 overdose incidents identified for analysis. As in previous years, the most common category was unintentional non-fatal overdose (80%, n=70). Intentional non-fatal overdose incidents accounted for 16% (n=14) of incidents, while overdose deaths accounted for 5% (n=4) 4 . In terms of regional distribution, a disproportionate number of overdose incidents occurred in the Prairie region (44%, n=39), consistent with previous years, while the Atlantic region had the fewest incidents (5%, n=4). The number of overdose incidents in 2017/2018 was more than double that in 2012/2013, however was the same as that in the fiscal year prior (2016/2017).

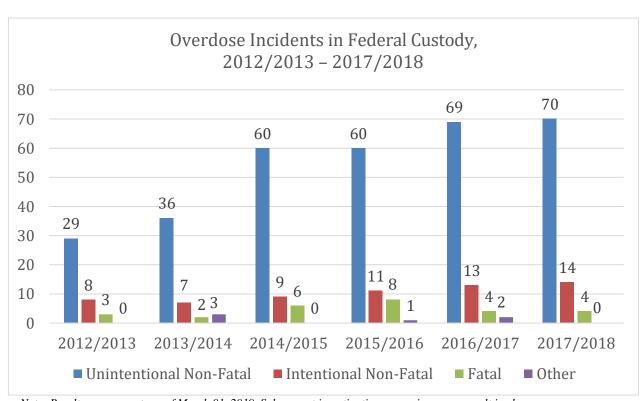


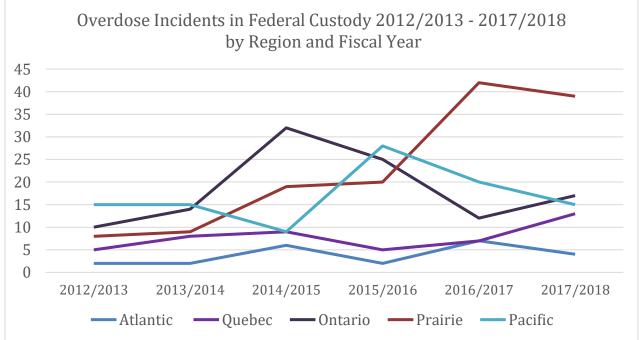
Figure 1. Overdose Incidents in Federal Custody, 2012/2013 – 2017/2018

⁴ Following the writing of this report, information emerged indicating that one additional overdose death occurred in 2017/2018. This case will be included in subsequent reports.

While overdose incidents have trended upward over the last six years, there was a slight decline in the number of incidents in 2017/2018 in three of the five regions, while there was an increase in the Quebec and Ontario regions. Institutions with the highest number of overdose incidents included Drumheller Institution (n=14) and Stony Mountain Institution (n=11), both located in the Prairie region.

Figure 2. Overdose Incidents in Federal Custody 2012/2013 – 2017/2018 by Region and Fiscal Year.

Overdose Incidents in Federal Custody 2012/2013 - 2017/2018



Note: Results are accurate as of March 01, 2019. Subsequent investigations or reviews may result in changes.

Incident Details of Overdose Incidents in Federal Custody, 2017/2018

In 2017/2018, opioids were the most common substance identified in overdose incidents, suspected or confirmed as either a standalone or contributing substance in 61% (n=54) of cases. This represents a slight increase from the year prior (i.e., 57%, n=50). When it came to overdose deaths, opioids were evident in all four cases. Fentanyl was suspected or confirmed in 48% (n=42) of incidents overall (including all four deaths), and was particularly common in relation to incidents in the Prairie region (59%, n=23). The number of incidents involving fentanyl was

considerably higher in 2017/2018 (n=42) compared to that in the year prior (n=23).⁵ Overall, fentanyl has become the most common substance involved in overdose incidents in federal custody.

Other categories of substances involved in overdose incidents include prescription medications (e.g., antidepressants, anticonvulsants and cardiovascular medications; 30%, n=26), stimulants (e.g., cocaine, amphetamines, methamphetamines; 17%, n=15) and cannabis (e.g., synthetic cannabis; 19%, n=17). Consistent with previous years, non-opioid prescription medications were most common when it came to intentional overdose incidents, suspected or confirmed in 86% (n=12) of cases.

The majority of overdose incidents (71%, n=62) occurred in the offender's cell, while 9% (n=8) occurred in a segregation unit cell. There was considerable variation as to when overdose incidents occurred; however, incidents were most common on Fridays and Saturdays, when 40% (n=35) of incidents occurred, and during the day period (i.e., between 7:00 AM and 9:00 PM; 73%, n=64). Substances were seized in 38% (n=33) of incidents, while drug paraphernalia (i.e. items used to make, store or consume drugs) were seized in 43% (n=38) of cases.

In response to overdose incidents, internal medical intervention by institutional healthcare staff was provided in 59% (n=52) of cases, and external hospital attention was provided in 92% (n=81) of cases. In the case of offenders sent to an external hospital, the majority (72%, n=63) were released within 24 hours. In terms of specific interventions, Cardiopulmonary Resuscitation (CPR) was administered in 18% (n=16) of cases and an Automated External Defibrillator (AED) was employed in 14% (n=12) of cases. Naloxone, a harm reduction intervention used to reverse the effects of an opioid overdose, was administered in 65% (n=57) of cases. When intentional overdose incidents are excluded (which typically involve non-opioid prescription medications), the percentage was 73% (n=54). Naloxone was most often administered by correctional staff (47%, n=27), and/or CSC medical staff (32%, n=18). In terms of outcome, the medication was reported to be medically effective (i.e., reversed the effects of the overdose) in 56% (n=32) of cases in which it was administered.

⁵ It is important to note that the recent increase in fentanyl cases may be magnified by changes in drug identification and reporting practices.

⁶The personnel responsible for naloxone administration was not identified in 29% of cases; therefore, these figures are likely underestimates.

⁷ Naloxone is only effective in response to opioid-related overdoses; however, in cases where it is administered with null effect (e.g. where opioids are not present in the patient's system), research suggests there are no adverse health consequences. For an overview of existing research, see: Rzasa & Galinkin (2018).

⁸ In 30% (*n*=17) of cases in which naloxone was used, the efficacy of the medication was not noted.

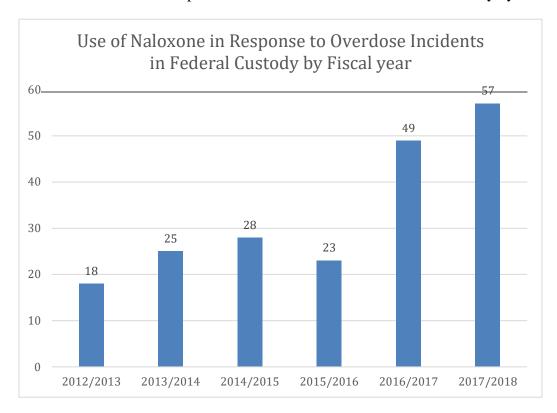


Figure 3. Use of Naloxone in Response to Overdose Incidents in Federal Custody by Fiscal year.

Narcan[™] nasal spray is a pre-filled ready-to-use medication that can temporarily reverse the effects of opioid overdose. Policy changes in September 2016 made the nasal version of naloxone (Narcan[™]) available for use by non-medical staff within CSC institutions (Correctional Service of Canada, 2016a). Narcan[™] is now located in the Correctional Manager's office to be easily accessed by correctional officers in the event of a suspected overdose.

Profile of Offenders Involved in Overdose Incidents in Federal Custody, 2017/2018

Those involved in overdose incidents in 2017/2018 had profiles similar to those in the five years prior. More specifically, they tended to be male (92%, n=81), medium security offenders (72%, n=63), who were White (60%, n=53) or Indigenous (32%, n=28), often in their 20s or 30s (76%, n=67), with less than a high school education (64%, n=56). Offenders tended to be serving time for violent major index offences, such as homicide (22%, n=19) and robbery (21%, n=18).

At the time of the incident, offenders had served an average of 4.7 years (median=1.8), with an average of 3 years (median=1.4) between the most recent admission date⁹ and incident date.

Further profile information suggests that offenders involved in overdose incidents are a high risk/need group. As in previous years, many had mental health conditions; more specifically, 74% (n=65) had at least one mental health condition, with common conditions including mood disorders (51%, n=34), anxiety disorders (48%, n=32), personality disorders (43%, n=29), and neurocognitive/neurodevelopmental conditions (42%, n=28). In 43% (n=38) of cases, the offender had a history of suicidal/self-injurious behaviour. Substance misuse histories were also prevalent, with 96% (n=84) of offenders having previous issues with alcohol and/or drugs. In over three-quarters (77%, n=68) of cases, there was a link between the offender's substance use and criminal offending. Many offenders also had drug-related convictions; 26% (n=23) had a drug-related offence on their current sentence, while 55% (n=48) had previous drug-related convictions. Overall, offenders tended to have high static risk¹⁰ (67% n=59), a measure related to criminal history. Excluding their current offences, 92% (n=81) had prior criminal convictions as an adult, while 67% (n=59) had a youth criminal record. Over one-quarter (30% n=26) had a Security Threat Group (STG) flag, which denotes affiliation with an offender group, gang or other criminal organization or association (Correctional Service Canada, 2016b).

Measures relating to accountability, motivation and engagement (AME), which pertain to readiness for treatment (Mathias & Wormith, 2017), were also examined. Offenders involved in overdose incidents tended to be medium in accountability (72% n=63), a measure used to assess the extent to which the offender is involved in addressing problematic behaviours as identified in their correctional plan (Correctional Service Canada, 2018). Compared to the general offender population¹¹, they were somewhat less likely to score high on the accountability measure (8% versus 14%). On the motivation scale, a measure indicating an offender's desire and willingness to change (Correctional Service Canada, 2018), offenders involved in overdose incidents tended to score medium (75%, n=66). On this measure, offenders were less likely than the general offender population to score high (7% versus 17%). In terms of engagement, over three-quarters

⁹ Most recent admission date refers to the most recent admission to federal custody; this may be the offender's initial admission at intake, or, where applicable, re-admission following release on statutory release or parole.

¹⁰ The Static Factors Assessment (SFA), a component of the Offender Intake Assessment (OIA), measures criminal history, offence severity and sex offence history.

¹¹ For a description of the comparison group, please refer to: Mathias & Wormith (2017).

(77%, n=68) were noted to be engaged with their correctional plan, a percentage similar to that of the general offender population (76%).

Figure 4. Accountability, Motivation and Engagement Measures for Offenders Involved in Overdose Incidents in 2017/2018 and a Comparison Group.

	Offenders Involved in Overdose Incidents (2017/2018)	Comparison Group*
Accountability		
High	8%	14%
Medium	72%	64%
Low	19%	22%
Not indicated	1%	-
Motivation		
High	7%	17%
Medium	75%	69%
Low	17%	13%
Not indicated	1%	-
Engaged with correctional plan	77%	76%

Note: Results are accurate as of March 01, 2019. Subsequent investigations or reviews may result in changes.

A relatively small percentage (14%, n=12) of offenders involved in overdose incidents in federal custody in 2017/2018 had responsivity issues, i.e., factors that may impede their ability to benefit from correctional programming (e.g., language barriers, literacy problems, intellectual disabilities, personal/emotional issues; Correctional Service Canada, 2018). When it came to reintegration potential¹², a majority of offenders (60%, n=53) involved in overdose incidents were ranked as low.

Dynamic Factor Identification and Assessment-Revised (DFIA-R) information was also examined for offenders involved in overdose incidents in custody. The DFIA-R is used at intake

^{*}For a description of the comparison group, please refer to: Mathias & Wormith (2017).

¹² Reintegration potential for non-Indigenous men is based on results from the Custody Rating Scale, the Revised Statistical Information on Recidivism and the Static Factor Rating. For women and Indigenous offenders, reintegration potential is based on results from the Custody Rating Scale, the Static Factor Rating and the Dynamic Factor Rating.

to identify criminogenic needs in relation to seven risk areas (employment and education, marital/family, associates, substance abuse, community functioning, personal/emotional and attitude) (Correctional Service Canada, 2018). In terms of factors contributing to their offending, a majority of offenders involved in overdose incidents had personal/emotional (85%, n=75), substance abuse (69%, n=61), attitude (83%, n=73), and associates (52%, n=46) domains identified.

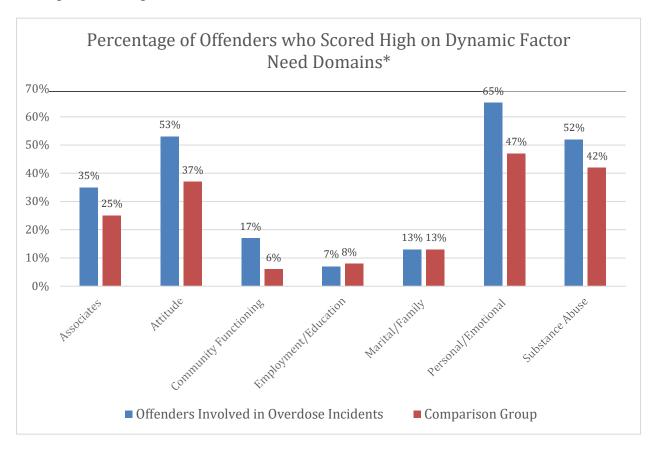
DFIA-R information was also analyzed in relation to the identified level of domain need. In overall dynamic need, offenders tended to score high (86%, n=76). On particular domains, offenders tended to have: high need in substance abuse (52%, n=46), attitude (53%, n=47), and personal/emotional (65%, n=57), moderate need in education/employment (67%, n=59) and associates (40%, n=35), low or no need in community functioning (57%, n= 50) and low need, no need or asset in marital/family (56%, n=49).

When compared to the general offender population¹³, offenders involved in overdose incidents were more likely to be high need in five of the seven dynamic need domains. Most notably, offenders involved in overdose incidents were more likely be high need in the personal/emotional (65%) and attitude (53%) domains relative to the general offender population (47% and 37% respectively).

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¹³ For a description of the comparison group, please refer to: Stewart et al. (2017).

Figure 5. Dynamic Needs for Offenders Involved in Overdose Incidents in 2017/2018 and a Comparison Group.



Note: Results are accurate as of March 01, 2019. Subsequent investigations or reviews may result in changes. *For a description of the comparison group, please refer to: Stewart et al. (2017).

To better understand the institutional experiences of offenders involved in overdose incidents in 2017/2018, an analysis of correctional plan progress and institutional records was conducted. In all cases, offenders had completed core correctional programming. In terms of non-correctional programming, 44% (n=39) of offenders had completed educational programs while 84% (n=74) had held institutional employment.

Case records indicate that offenders tended to have problematic institutional histories. Over three-quarters (77%, n=68) of offenders involved in overdose incidents had histories of segregation, while 67% (n=59) had been involved in over five institutional incidents. In terms of substance-related incidents during federal incarceration, 22% (n=19) of offenders had incidents related to being under the influence of substances, and 16% (n=14) had previous overdose interrupted incidents. Among offenders involved in non-intentional non-fatal overdose incidents, over one-quarter (26%, n=18) had positive urinallysis test results within the year prior to the incident.

Offenders also tended to have multiple institutional charges (median=11) listed on their record, often related to disobedience, unauthorized items/contraband, substance use and/or property. Common charges included: "Disobey Written Rule" (71%, n=62); "Possess Unauthorized Item" (68%, n=60); "Possess/Deals in Contraband" (57%, n=50); "Disobey Order" (47%, n=41); "Fails/Refuses Urine Sample" (41%, n=36); "Fights/Assaults/Threatens" (41%, n=36); "Takes Intoxicant Into Body" (40%, n=35); "Jeopardize Security" (30%, n=26); Disrespect/Abusive to Staff (28%, n=25); and "Damage/Destroy Property" (25%, n=22).

Conclusion

The findings in this report indicate that the number of opioid-related overdose incidents in federal custody has increased over the past six years, paralleling Canada's larger opioid crisis (Belzak & Halverson, 2018). While the change in the last two years was relatively small, the number of opioid-related overdose incidents has more than doubled since 2012/2013. Over the past two years in particular, overdose incidents involving fentanyl have become increasingly common, and in 2017/2018, fentanyl was the most common substance identified in overdose incidents.

The profile of offenders involved in overdose incidents remained similar in 2017/2018 to that noted in previous years; typically, offenders were male, White or Indigenous, medium security, and had violent index offences. Substance use and mental illness were notably high among this group, as were dynamic needs, particularly in relation to the personal/emotional and attitude domains. Offenders involved in overdose incidents also appeared to have poor institutional adjustment, as measured by segregation placements, institutional incidents and institutional charges.

This analysis contributes to CSC's knowledge base on trends in overdose incidents as well as the profile of offenders involved in these incidents. In an effort to respond to offender health needs and reduce the harms associated with substance misuse, CSC continues to undertake a variety of initiatives, including correctional programs, health supports for those with substance use disorders, such as opiate agonist therapy (Cheverie, MacSwain, Farrell MacDonald, & Johnson, 2014), and harm reduction measures aimed at improving the safety and security of offenders under our care, such as the availability of naloxone in institutions, take-home naloxone kits (Pant & Severn, 2018), and the Prison Needle Exchange Program (PNEP). CSC continues to track overdose incidents in custody in an effort to provide up-to-date knowledge on trends and themes related to this key health matter.

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Appendix A

Table 1

Type of Incident by Region for Overdose Incidents in Federal Custody, 2017/2018

Incident Type		Totals				
	Atlantic	Quebec	Ontario	Prairie	Pacific	
Unintentional Overdose Interrupted	2	10	12	33	13	70 (80%)
Intentional Overdose Interrupted	2	3	4	3	2	14 (16%)
Death	-	-	1	3	-	4 (5%)
Total	4	13	17	39	15	88 (100%)

Note: Results are accurate as of March 01, 2019. Subsequent investigations or reviews may result in changes.

Table 2

Overdose Incidents by Region and Fiscal Year for Overdose Incidents in Federal Custody,

2012/2013 – 2017/2018

Region		Totals					
	12/13	13/14	14/15	15/16	16/17	17/18	_
Atlantic	2	2	6	2	7	4	23 (5%)
Quebec	5	8	9	5	7	13	47 (11%)
Ontario	10	14	32	25	12	17	110 (26%)
Prairie	8	9	19	20	42	39	137 (33%)
Pacific	15	15	9	28	20	15	102 (24%)
Total	40	48	75	80	88	88	419 (100%)

Table 3

Type of Incident by Fiscal Year for Overdose Incidents In Federal Custody, 2012/2013 – 2017/2018

Incident Type	Fiscal Year						Totals
	12/13	13/14	14/15	15/16	16/17	17/18	
Unintentional Overdose Interrupted	29	36	60	60	69	70	324 (77%)
Intentional Overdose Interrupted	8	7	9	11	13	14	62 (15%)
Death	3	2	6	8	4	4	27 (6%)
Other	-	3	-	1	2	-	6 (1%)
Total	40	48	75	80	88	88	419 (100%)

Table 4

Incident Details by Region for Overdose Incidents in Federal Custody, 2017/2018

Detail			Region			Totals
	Atlantic	Quebec	Ontario	Prairie	Pacific	
Count	4	13	17	39	15	88
Location of incident						
Offender's cell	2	8	11	29	12	62 (71%)
Offender's segregation cell	-	1	2	5	-	8 (9%)
Other	2	4	4	5	2	17 (19%)
Not indicated	-	=	-	_	1	1 (1%)
Time of incident						
12:00 AM - 06:00 AM	-	1	1	4	1	7 (8%)
6:01 AM - 12:00 PM	2	3	5	10	4	24 (27%)
12:01 PM - 6:00 PM	-	8	6	10	4	28 (32%)
6:01 PM - 11:59 PM	2	1	5	15	5	28 (32%)
Not indicated	-	=	-	-	1	1 (1%)
Day of week						
Sunday	-	3	2	4	1	10 (11%)
Monday	1	-	1	9	2	13 (15%)
Tuesday	1	2	3	5	1	12 (14%)
Wednesday	1	2	2	4	2	11 (13%)
Thursday	-	-	3	3	1	7 (8%)
Friday	-	4	2	5	7	18 (21%)
Saturday	1	2	4	9	1	17 (19%)
Month						
DecFeb.	-	-	8	13	3	24 (27%)
March-May	1	3	2	9	3	18 (21%)
June-Aug.	3	6	3	13	5	30 (34%)
SeptNov.	-	4	4	4	4	16 (18%)
Substance involved (all that apply) a						
Opioid ^b	1	10	10	25	8	54 (61%)
Fentanyl	-	8	6	23	5	42 (48%)
Heroin	-	2	6	2	1	11 (13%)
Methadone/Suboxone	1	1	2	2	2	8 (9%)
Stimulant	1	1	1	9	3	15 (17%)
Prescription medication	3	3	6	9	5	26 (30%)
Cannabis	-	5	3	6	3	17 (19%)
Unsure	1	1	-	2	1	5 (6%)
Substances seized	1	-	5	20	7	33 (38%)
Drug paraphernalia seized	-	1	7	22	8	38 (43%)
Events following incident						
Offender transferred	2	4	7	8	4	25 (28%)
Change in offender security level	-	1	5	6	4	16 (18%)
Offender institutionally charged	1	9	4	20	6	40 (46%)

^aSubstances identified include those that were confirmed through tests administered to the offender or otherwise suspected (e.g., based on tests of seized substances or intelligence information). As all substances identified are included, column totals may exceed the total number of cases.

^bOnly the three most common opioid substances are identified in this table.

Table 5
Incident Details by Fiscal Year for Overdose Incidents in Federal Custody, 2012/2013-2017/2018

Detail		Totals					
	12/13	13/14	14/15	15/16	16/17	17/18	
Count	40	48	75	80	88	88	419
Time of incident							
12:00 AM - 06:00 AM	2	2	6	10	3	7	30 (7%)
6:01 AM - 12:00 PM	15	17	16	18	27	24	117 (28%)
12:01 PM - 6:00 PM	13	11	24	32	31	28	139 (33%)
6:01 PM - 11:59 PM	10	18	29	20	27	28	132 (32%)
Not indicated	-		-	-	-	1	1 (<1%)
Day of week							
Sunday	6	6	10	10	11	10	53 (13%)
Monday	5	4	9	10	14	13	55 (13%)
Tuesday	2	9	6	12	5	12	46 (11%)
Wednesday	7	8	10	16	12	11	64 (15%)
Thursday	7	11	15	11	23	7	74 (18%)
Friday	8	5	14	11	12	18	68 (16%)
Saturday	5	5	11	10	11	17	59 (14%)
Substance involved (all that apply) ^a							
Opioid ^b	19	25	39	39	50	54	226 (54%)
Fentanyl	1	3	4	12	23	42	85 (20%)
Heroin	10	12	_	15	11	11	59 (14%)
Methadone/Suboxone	5	9	_	10	12	8	44 (11%)
Stimulant	4	8	5	9	10	15	51 (12%)
Prescription medication	20	17	31	34	27	26	155 (37%)
Cannabis	2	4	6	6	5	17	40 (10%)
Unsure	2	3	6	10	13	5	39 (9%)
Substances seized	7	14	16	16	38	33	124 (30%)
Drug paraphernalia seized	11	6	14	10	27	38	106 (25%)
Events following incident							` ,
Offender transferred	12	16	21	16	22	25	112 (27%)
Change in offender security level	5	7	6	9	12	16	55 (13%)
Offender institutionally charged	10	16	18	26	36	40	146 (35%)

^aSubstances identified include those that were confirmed through tests administered to the offender or otherwise suspected (e.g., based on tests of seized substances or intelligence information). As all substances identified are included, column totals may exceed the total number of cases.

^bOnly the three most common opioid substances are identified in this table.

Table 6

Medical Response by Fiscal Year for Overdose Incidents in Federal Custody, 2012/2013 – 2017/2018

Detail		Totals					
	12/13	13/14	14/15	15/16	16/17	17/18	_
Count	40	48	75	80	88	88	419
Medical response							
CPR was used	6	5	13	15	17	16	72 (17%)
AED was used	4	4	9	12	11	12	52 (12%)
Naloxone was used	18	25	28	23	49	57	200 (48%)
Ambulance called	34	40	63	72	74	78	361 (86%)
Internal medical care	26	28	49	52	45	52	252 (60%)
External medical care	35	43	72	74	75	81	380 (91%)

Table 7

Profile of Offenders Involved in Overdose Incidents in 2017/2018 by Region

Characteristic		Totals				
	Atlantic	Quebec	Ontario	Prairie	Pacific	
Count	4	13	17	39	15	88
Age						
18-24	-	2	3	3	2	10 (11%)
25-34	2	3	6	18	5	34 (39%)
35-44	1	4	2	14	7	28 (32%)
45-54	-	3	3	4	-	10 (11%)
55+	1	1	3	-	1	6 (7%)
Ethnicity						
White	4	11	11	22	5	53 (60%)
Indigenous	-	2	2	16	8	28 (32%)
Other	-	-	4	1	2	7 (8%)
Marital Status						
Non-Partnered	1	6	9	24	9	49 (56%)
Partnered	3	7	5	13	6	34 (39%)
Not indicated	-	-	3	2	-	5 (6%)
Level of education						
Less than high school	2	9	8	27	10	56 (64%)
High school	1	1	7	11	5	25 (28%)
More than high school	1	2	2	1	-	6 (7%)
Not indicated	-	1	-	-	-	1 (1%)
Security level						
Minimum	-	-	3	1	1	5 (6%)
Medium	2	3	13	34	11	63 (72%)
Maximum	2	10	1	3	3	19 (22%)
Not yet determined	_	_	_	1	-	1 (1%)

Table 8
Sentence Information for Offenders in Federal Custody Involved in Overdose Incidents in 2017/2018, by Region

Sentence information	ntence information		Region	Region				
	Atlantic	Quebec	Ontario	Prairie	Pacific			
Count	4	13	17	39	15	88		
First time federal offender?	1	6	8	21	9	45 (51%)		
Sentence length								
2 – less than 4 years	1	3	6	24	7	41 (47%)		
4 – less than 6 years	3	2	5	3	1	14 (16%)		
6 – less than 10 years	-	3	-	8	5	16 (18%)		
Over 10 years	-	3	2	1	2	8 (9%)		
Indeterminate	-	2	4	3	-	9 (10%)		
Major index offence								
Homicide-related	-	4	5	5	5	19 (22%)		
Sexual	-	-	1	3	-	4 (5%)		
Assault	-	3	3	6	1	13 (15%)		
Robbery	1	2	4	8	3	18 (21%)		
Other violent	1	-	2	7	3	13 (15%)		
Property	-	3	1	3	-	7 (8%)		
Drug	1	-	1	4	1	7 (8%)		
Other non-violent	1	1	-	3	2	7 (8%)		
Current Offences - All								
Homicide-related	-	4	5	6	4	19 (22%)		
Sexual	-	1	2	3	1	7 (8%)		
Assault	-	7	5	14	6	32 (36%)		
Robbery	2	5	5	9	4	25 (28%)		
Other violent	2	6	6	20	7	41 (47%)		
Property	3	10	4	14	5	36 (41%)		
Drug	2	6	1	10	4	23 (26%)		
Other non-violent	4	11	6	22	7	50 (57%)		
Time served								
Less than 1 year	2	2	2	7	4	17 (19%)		
1 year – 4 years	2	4	9	25	6	46 (52%)		
Over 4 years	-	7	6	7	5	25 (28%)		
Time between most recent								
admission and incident	2	4	4	1.4		20 (242)		
Less than 1 year	2	4	4	14	6	30 (34%)		
1 year – 4 years	2	5	9	19	7	42 (48%)		
Over 4 years	-	4	4	6	2	16 (18%)		

Table 9

Mental Health and Substance Use History Information for Federal Offenders Involved in Overdose Incidents in Custody in 2017/2018, by Region

Factor			Region		Pacific 15 12 6 2 4 3 6 7 15 8 12 10 5	Totals
	Atlantic	Quebec	Ontario	Prairie	Pacific	_
Count	4	13	17	39	15	88
At least one mental health disorder identified Mental health disorder(s) identified	3	10	8	32	12	65 (74%)
Mood disorder	1	5	8	14	6	34 (51%)
Psychotic disorder	-	-	-	6	2	8 (12%)
Anxiety disorder	1	4	6	17	4	32 (48%)
Personality disorder	3	7	3	13	3	29 (43%)
Neurocognitive/ neurodevelopmental	1	4	4	13	6	28 (42%)
History of self-harm / suicide	3	5	8	15	7	38 (43%)
History of substance abuse	3	12	16	38	15	84 (96%)
Opiates	2	6	8	19	8	43 (51%)
Stimulants	1	8	8	36	12	65 (77%)
Cannabis	1	7	9	30	10	57 (68%)
Hallucinogens	-	4	-	10	5	19 (23%)
Depressants/ downers	-	2	1	3	3	9 (11%)
Link between offending and substance misuse	3	12	12	28	13	68 (77%)

Table 10

Criminal Profile of Federal Offenders Involved in Overdose Incidents in Custody in 2017/2018, by Region

Criminal factor			Region			Total
	Atlantic	Quebec	Ontario	Prairie	Pacific	
Count	4	13	17	39	15	88
Security threat group (STG) affiliation	-	1	1	19	5	26 (30%)
Young offender record	1	8	12	29	9	59 (67%)
Prior adult criminal record	4	13	13	38	13	81 (92%)
Previous offences (all that apply)						
Property	2	11	11	33	11	68 (77%)
Homicide-related	-	1	1	1	-	3 (3%)
Assault	2	8	10	29	7	56 (64%)
Sexual	-	1	3	4	4	12 (14%)
Robbery	1	3	10	12	5	31 (35%)
Drug	1	7	10	23	7	48 (55%)
Other non-violent	4	8	12	39	12	75 (85%)
Other violent	2	9	7	23	6	47 (53%)
None	-	-	2	-	2	4 (5%)

Table 11

Risk/Need Measures for Federal Offenders Involved in Overdose Incidents in Custody in 2017/2018, by Region

Factor		Region							
	Atlantic	Quebec	Ontario	Prairie	Pacific	_			
Count	4	13	17	39	15	88			
Static Factor Rating									
High	1	11	13	24	10	59 (67%)			
Medium	3	2	4	13	4	26 (30%)			
Low	-	-	-	1	1	2 (2%)			
Not indicated	-	-	-	1	-	1 (1%)			
Accountability									
High	-	-	3	4	-	7 (8%)			
Medium	3	8	13	28	11	63 (72%)			
Low	1	5	1	6	4	17 (19%)			
Not indicated	-	-	-	1	-	1 (1%)			
Motivation									
High	-	-	3	2	1	6 (7%)			
Medium	2	7	12	33	12	66 (75%)			
Low	2	6	2	3	2	15 (17%)			
Not indicated	-	-	-	1	-	1 (1%)			
Responsivity									
Yes	1	-	2	6	3	12 (14%)			
No	3	13	15	32	12	75 (85%)			
Not indicated	-	-	-	1	-	1 (1%)			
Engagement									
Yes	2	6	14	32	14	68 (77%)			
No	2	7	3	9	1	19 (22%)			
Not indicated	-	-	-	1	-	1 (1%)			
Reintegration potential									
High	-	-	-	3	-	3 (3%)			
Medium	3	1	7	14	6	31 (35%)			
Low	1	12	10	21	9	53 (60%)			
Not indicated	-	-	_	1	-	1 (1%)			

Table 12

Dynamic Factor Need Level for Federal Offenders Involved in Overdose Incidents in Custody in 2017/2018, by Region

Factor		Region							
	Atlantic	Quebec	Ontario	Prairie	Pacific	_			
Count	4	13	17	39	15	88			
Overall Dynamic Need									
High	3	13	13	33	14	76 (86%)			
Moderate	1	-	4	5	1	11 (13%)			
Low	-	_	_	_	-	-			
Not indicated	-	-	_	1	-	1 (1%)			
Education/Employment						, ,			
High	-	1	1	2	2	6 (7%)			
Moderate	3	8	11	25	12	59 (67%)			
Low/no/asset	1	4	5	11	1	22 (25%			
Not indicated	-	-	-	1	-	1 (1%)			
Personal/Emotional						` ,			
High	2	12	9	24	10	57 (65%)			
Moderate	2	_	7	14	5	28 (32%)			
Low/no	-	1	1	_	-	2 (2%)			
Not indicated	-	_	-	1	-	1 (1%)			
Substance Abuse						- (-,-)			
High	2	8	4	21	11	46 (52%)			
Moderate	1	4	7	8	3	23 (26%)			
Low/no	1	i	6	9	1	18 (21%)			
Not indicated	-	-	-	1	-	1 (1%)			
Marital/Family				-		1 (170)			
High	1	3	_	4	3	11 (13%)			
Moderate	1	3	4	14	5	27 (31%)			
Low/No/Asset	2	7	13	20	7	49 (56%)			
Not indicated	-	, -	-	1	-	1 (1%)			
Attitude				•		1 (170)			
High	2	8	9	18	10	47 (53%)			
Moderate	2	5	5	15	3	30 (34%)			
Low/no/asset	-	-	3	5	2	10 (11%)			
Not indicated	_	_	-	1	-	1 (1%)			
Associates				•		1 (170)			
High	2	4	4	14	7	31 (35%)			
Moderate	-	4	8	16	7	35 (40%)			
Low/no/asset	2	5	5	8	1	21 (24%)			
Not indicated	_	<i>-</i>	-	1	-	1 (1%)			
Community Functioning				1		1 (1/0)			
High	_	1	4	4	6	15 (17%)			
Moderate	1	1	5	11	4	22 (25%)			
Low/no/asset	3	11	8	23	5	50 (57%)			
Not indicated	<i>-</i>	-	-	1	<i>-</i>	1 (1%)			

Table 13
Institutional History of Federal Offenders Involved in Overdose Incidents in Custody in 2017/2018, by Region

Factor			Region			Totals
	Atlantic	Quebec	Ontario	Prairie	Pacific	
Count	4	13	17	39	15	88
Completed core programming	4	13	17	39	15	88 (100%)
Completed educational programming	1	7	4	20	7	39 (44%)
Previously held institutional employment	2	11	13	34	14	74 (84%)
History of segregation	2	13	14	27	12	68 (77%)
Positive urinalysis in year prior to incident	1	4	3	10	1	19 (22%)
Refused urinalysis in year prior	-	1	-	5	2	8 (9%)
Involvement in institutional incidents (any role)						
Fight/assault	3	10	11	30	13	67 (76%)
Disciplinary problems	1	8	11	17	13	50 (58%)
Contraband/unauthorized item	3	11	14	35	13	76 (86%)
Institutional charges						
Participate in disturbance	-	3	2	3	2	10 (11%)
Jeopardize security	1	6	4	8	7	26 (30%)
Damage/destroy property	-	7	5	6	4	22 (25%)
Disobey order	2	10	9	13	7	41 (47%)
Disobey written rule	2	11	12	23	14	62 (71%)
Disrespect or provoke violence toward staff	1	8	3	6	4	22 (25%)
Disrespect/Abusive to staff	1	8	5	8	3	25 (28%)
Fails/refuses urine sample	1	8	4	17	6	36 (41%)
Fights/assault/threatens	1	9	7	12	7	36 (41%)
Possess unauthorized item	2	11	12	25	10	60 (68%)
Possess/deals in contraband	1	10	8	23	8	50 (57%)
Prohibited area	-	6	3	1	2	12 (14%)
Refuses/leaves work	-	4	1	4	1	10 (11%)
Takes intoxicant into body	1	9	7	13	5	35 (40%)
Institutional Charges						
Mean	14.5	56.6	23.5	10.9	22.3	22.1
Median	2.5	53.0	10.0	7.0	9.0	11.0

Appendix B – One Page Summary

Overdose Incidents in Federal Custody, 2017/2018 – Trends

Research Highlights: Overdose incidents in federal custody have increased over the past six years; most involve opioids and are non-fatal.

Why we did this study

In light of the opioid crisis in Canada (Health Canada, 2017), it is important to understand trends in overdose-related incidents in federal custody. Building on a five-year analysis of overdose incidents (McKendy, Biro & Keown, 2019), the current study examined all overdose incidents that occurred in a federal institution in the 2017/2018 fiscal year period.

What we did

A data extraction of CSC's offender database, the Offender Management System (OMS), was conducted to identify all potential overdose incidents. A non-fatal overdose was defined as an incident where the consumption of drugs necessitated life-saving medical intervention (e.g., the administration of naloxone or cardiopulmonary resuscitation). Fatal overdose incidents were those officially determined as such in medical reports.

Data were collected for each unique offender incident using information from OMS. Sub-types of overdose incidents included unintentional non-fatal overdose incidents (no indicators of suicidal intent were present), intentional non-fatal overdose incidents (a clear indicator of suicidal intent was present), and fatal incidents.

What we found

During the 2017/2018 fiscal year period, there were 88 overdose incidents identified for analysis. This number is the same as that in the fiscal year prior, though more than double that in 2012/2013 (40). As in previous years, overdose incidents were typically non-fatal and non-intentional (80%, n = 70), and disproportionately occurred in the Prairie region (44%, n = 39).

Opioids were the most common substance identified in overdose incidents, suspected or confirmed as either a standalone or a contributing substance in 61% (n = 54) of cases, including all four fatal incidents. Fentanyl was suspected or confirmed in 48% of incidents overall, and was particularly common in the Prairie region, noted in 59% (n = 23) of incidents. Other categories of substances involved in overdose incidents included prescription medications (e.g., antidepressants, anticonvulsants and cardiovascular medications; 30%, n = 26), stimulants (e.g., cocaine, amphetamines,

methamphetamines, ecstasy; 17%, n = 15), and cannabis (e.g., synthetic THC; 19%, n = 17).

As a response to overdose situations, there has been in an increase in the use of naloxone, a harm reduction intervention used for the prevention of opioid overdose deaths. Naloxone was used in 45% (n=18) of cases in 2012/2013, compared to 65% of cases (n=57) in 2017/2018. This increase is likely tied to the increased availability of naloxone within federal institutions, brought about by policy changes in 2016 that made the nasal version of naloxone (NarcanTM) available for use by correctional officers.

What it means

Findings indicate that the community opioid crisis remains mirrored in federal institutions. CSC continues to pursue various measures intended to prevent incidents of overdose in custody, reduce the harms associated with substance use and treat substance use disorders among federal offenders (see: McKendy, Biro, & Keown, 2019).

References

McKendy, L., Biro, S. & Keown, L.A. (2019). Overdose Incidents in Federal Custody, 2012/2013 – 2016/2017 (Research Report SR-18-02). Ottawa, Ontario: Correctional Service of Canada.

Health Canada. (2017). Government of Canada actions on opioids 2016 and 2017. Ottawa, ON: Her Majesty the Queen in Right of Canada, as represented by the Minister of Health

For more information

McKendy, L., Biro, S., Keown, L.A., Miron, M., & Baglole, S. (2019). *Overdose Incidents in Federal Custody:* 2017-2018 (Special Report SR-19-02). Ottawa, Ontario: Correctional Service of Canada.

You can also visit the <u>Research Publications</u> section for a full list of reports and one-page summaries.

Appendix C – One Page Summary

Overdose Incidents in Federal Custody, 2017/2018 – Profile

Research Highlights: Offenders involved in overdose incidents in federal custody tend to have high dynamic need, histories of substance use and mental health issues.

Why we did this study

Federal offenders involved in overdose incidents in Given the documented increase in drug-related overdoses in federal custody (McKendy, Biro, & Keown, 2019), it is important to understand the profile of federal offenders involved in overdose incidents in order to devise proper correctional interventions and security protocols.

What we did

Overdose incidents were identified through a data extraction of CSC's offender database, the Offender Management System (OMS). Data were collected for each unique offender incident using information from OMS. In total, 88 overdose incidents were identified for inclusion.

What we found

Federal offenders involved in overdose incidents in 2017/2018 tended to be male (92%), medium security offenders (72%), who were White (60%) or Indigenous (32%), often in their 20s and 30s (76%). They tended to be serving time for violent offences, including homicide (22%) and robbery (21%). At the time of the incident, offenders had served an average of 4.7 years of their sentence (median = 1.8).

Nearly three-quarters (74%) of offenders involved in an overdose incident had at least one mental health condition, with common conditions including mood disorders (51%), anxiety disorders (48%), personality disorders (43%), and neurocognitive/neurodevelopmental conditions (42%). In 43% of cases, the offender had a documented history of suicidal/self-injurious behaviour. Substance misuse histories were also prevalent, with 96% of offenders having previous issues with alcohol and/or drugs. In over three-quarters (77%) of cases, there was a link between the offender's substance use and criminal offending.

When it came to dynamic need, offenders involved in overdose incidents tended to be high (86%). When compared to the general offender population, offenders involved in overdose incidents were more likely to score high on five of the seven dynamic need domains (see Stewart et al., 2017 for a description of the comparison group). Most notably, offenders involved in overdose incidents were more likely be high need

in the in Personal/Emotional (65% versus 47%) and Attitude (53% versus 37%) domains.

Offenders involved in overdose incidents also tended to have problematic institutional histories. For example, over three-quarters (77%) had histories of segregation, while 22% had incidents related to substance use. Offenders also tended to have multiple institutional charges listed on their record (median = 11). Charges were often related to disobedience, unauthorized items/contraband, substance use, and property.

What it means

Findings suggest that offenders involved in overdose incidents are a high needs group; substance use and mental illness are particular areas of concern. Furthermore, offenders involved in overdose incidents tend to have poor institutional adjustment, as measured by segregation placements, institutional incidents, and institutional charges.

CSC continues to pursue various measures to reduce the risks associated with drug use and provide health supports to federal offenders with substance use issues (see: McKendy, Biro, & Keown, 2019). This study contributes to such efforts by enhancing current knowledge on the profile of offenders involved in overdose incidents.

References

McKendy, L., Biro, S. & Keown, L.A. (2019). Overdose Incidents in Federal Custody, 2012/2013 – 2016/2017 (Research Report SR-18-02). Ottawa, Ontario: Correctional Service of Canada.

Stewart, L. A., Wardrop, K., Wilton, G., Thompson, J., Derkzen, D., & Motiuk, L. (2017). Reliability and validity of the dynamic factors identification and Analysis-Revised (Research Report R-395). Ottawa, ON: Correctional Service of Canada.

For more information

McKendy, L., Biro, S., Keown, L.A., Miron, M., & Baglole, S. (2019). Overdose Incidents in Federal Custody, 2017-2018 (Special Report SR-19-02). Ottawa, Ontario: Correctional Service of Canada.

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