

Non-Fatal Overdose Incidents in Federal Custody, 2021/2022

Despite non-fatal overdose incidents in federal custody decreasing, and fewer opioid-related overdose cases, fentanyl remains the most commonly identified opioid.

Why we did this study

As part of ongoing monitoring efforts, the current study provides a summary of non-fatal overdose incidents that occurred within Canadian federal institutions in fiscal year (FY) 2021/2022.

What we did

An incident search was conducted of CSC's administrative database to identify all reported non-fatal overdose incidents in FY 2021/2022 (April 1st, 2021, to March 31st, 2022). Overdose incidents were included when the consumption of illicit substances led to medical intervention (e.g., administration of Naloxone) and/or resulted in a designation of Serious Bodily Injury. Incident reports were then coded for information pertaining to the incident itself, preceding events, and offenders' profile/demographic data.

What we found

In 2021/2022, there were 123 non-fatal overdoses among 115 federally incarcerated offenders. This marks a 6.1% decrease from FY 2020/2021, and the second consecutive reporting period in which non-fatal overdoses have decreased (see Table 1). Compared to FY 2020/2021, the regional distribution of the incidents changed the most in the Atlantic, Ontario, and Prairie Regions, and remained relatively stable in the Quebec and Pacific Regions. Interestingly, among the non-fatal overdoses that occurred in the Pacific region in 2021/2022, 71.4% ($n = 20/28$) occurred at Kent Institution.

A small proportion (11.4%) of overdose incidents included no information regarding suspected or confirmed substances¹. However, 64.2% involved non-opioid, non-stimulant substances; 25.2% involved opioids; and 14.6% involved stimulants². This is another noticeable difference from previous reporting periods, as opioid-involved overdoses were most common in FY 2020/2021. Note that 47.2% of the overdoses involved some form of prescription medication. Among the opioid-related overdoses specifically, fentanyl was the most frequently identified substance (45.2%, $n = 14/31$), followed by suboxone (38.7%, $n = 12/31$), and/or methadone (12.9%, $n = 4/31$).

Many different stressors/events occurred before the overdose incidents, including but not limited to (1) general mental health issues, including other recent drug overdoses/suicide attempts (25.2%), (2) interpersonal issues with family, romantic partners, and/or other offenders (25.2%), and (3) issues relating to release to the community (e.g., recent revocation or denial of release, anxiety about upcoming release, etc.; 14.6%)³.

The profile of offenders involved in overdose incidents in 2021/2022 was similar to previous years. Specifically, offenders tended to be White (49.6%) or Indigenous (42.3%) men (87.0%) in their mid-to-late thirties ($M = 37$ years old). Just over half (55.3%) were medium-security offenders, and the largest proportion were serving a sentence for a homicide-related offence (39.0%) or robbery (15.4%). Just over two-thirds (65.9%) of offenders who had a non-fatal overdose incident had a history of self-harm and/or suicide attempts.

Table 1. Number of Non-Fatal Overdose Incidents in Federal Custody, FY 2018/2019 - FY 2021/2022 by Region.

Region	Fiscal Year			
	2018/19	2019/20	2020/21	2021/22
Atlantic	2	12	21	6
Quebec	23	23	23	25
Ontario	35	74	28	37
Prairie	34	29	34	27
Pacific	16	36	25	28
Total	110	174	131	123

What it means

The pattern of non-fatal overdoses that occur in federal institutions continues to evolve. For example, non-opioid, non-stimulant-related overdoses were the most prevalent type of overdose in FY 2021/2022, whereas opioid-related overdoses were most prevalent in FY 2020/2021. Nevertheless, fentanyl remains the most common opioid, followed by suboxone/methadone. Ongoing reporting of non-fatal overdose incidents remains crucial for minimizing substance-use-related harms, and for improving offender health and overall institutional safety.

For more information

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¹ Due to limited and/or vague information pertaining to substances involved in the overdose incidents, findings are reported for both suspected and confirmed substances together and may differ from findings reported elsewhere within CSC.

² The categories of (1) non-opioid, non-stimulant-involved, (2) opioid-involved, and (3) stimulant-involved will not equally add up to 123/100%, as 4.1% of overdose incidents ($n = 5$) were both opioid- and stimulant-involved.

³ These categories will not equally add up to 123/100%, as 19.6% ($n = 18$) of overdose incidents fell into two or more categories. Additionally, 37.4% of cases ($n = 46$) had no information regarding precipitating factors.