

Criminal Justice and Health Impacts in Addiction

Ricardo Cruz, MD, MPH

CRIT/FIT/CFS Presentation
April 29, 2024



Disclosures

- No financial conflicts to disclose



Learning Objectives

- 1. Review the correctional system**
- 2. Review the epidemiology and demographics of mass incarceration.**
- 3. Recognize health impacts and disparities faced by individuals with addiction and criminal justice involvement.**
- 4. Discuss clinical efforts to reach this vulnerable population.**
- 5. Review the drug court model**



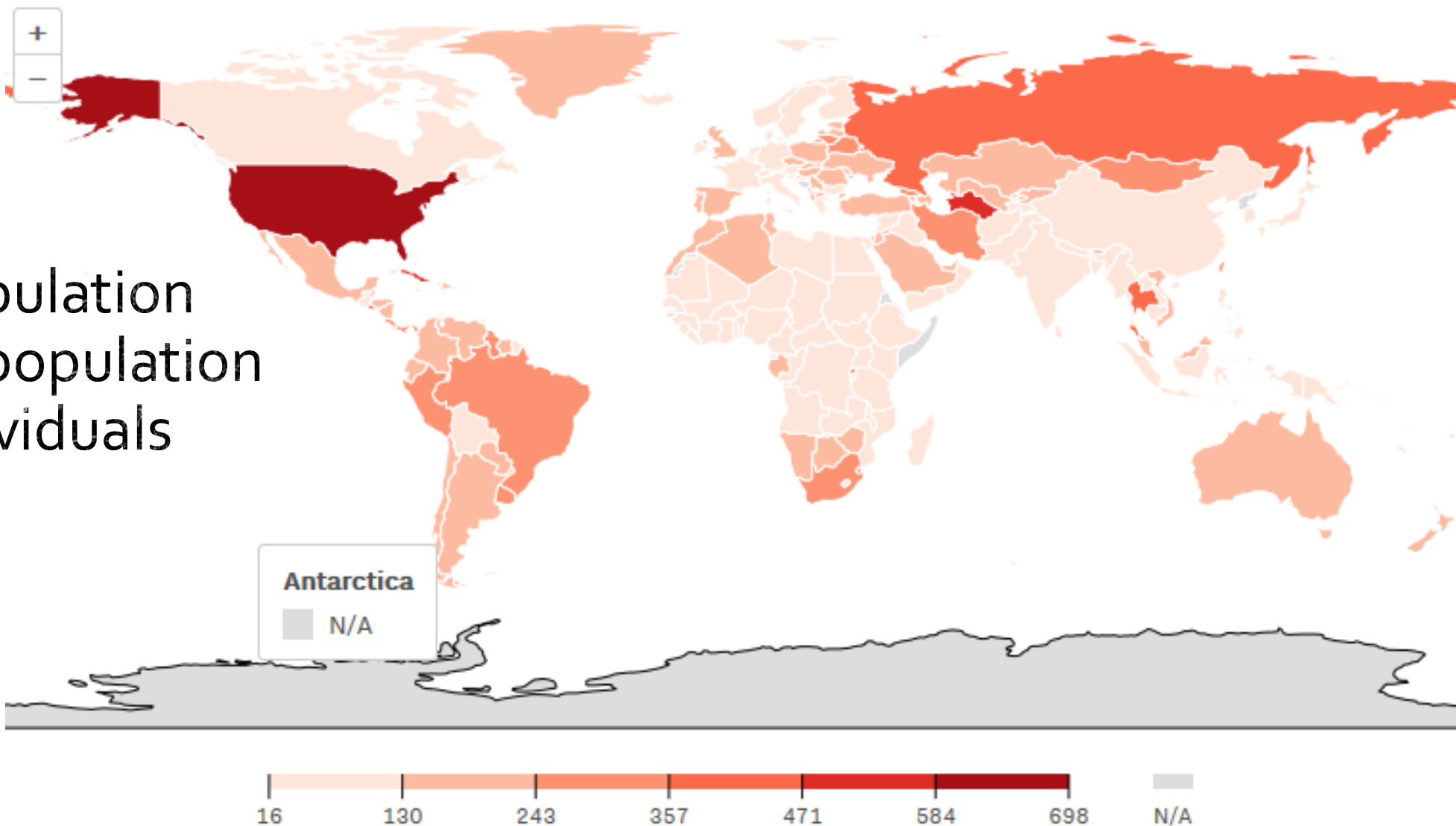
Definitions:

- **Jail:**
 - short term incarceration facilities
 - overseen by local law enforcement agency-county or town.
- **Prison:**
 - long term incarceration facilities
 - overseen by state and federal correctional authorities
- **Probation:**
 - period of supervision in lieu of spending time in a correctional setting
 - sentenced to community based supervision-Probation officer
- **Parole:**
 - period of supervision after spending time in correctional institution
 - conditionally released from prison to serve remaining portion of their sentence in the community-supervised by Parole officer



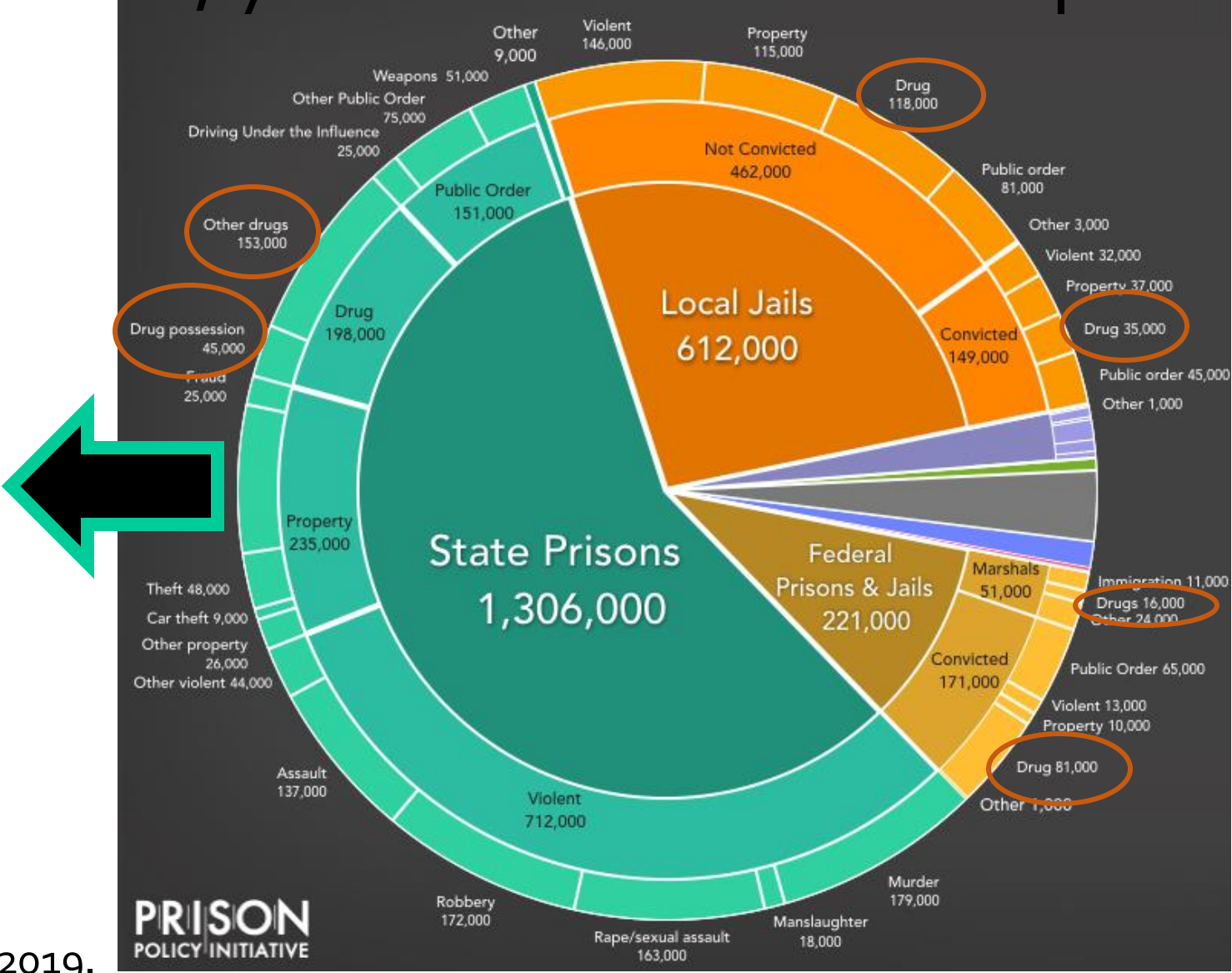
We Beat Every Country

Global incarceration rates, per 100,000 people



Even if you never provide care within the System, you will care for these patients

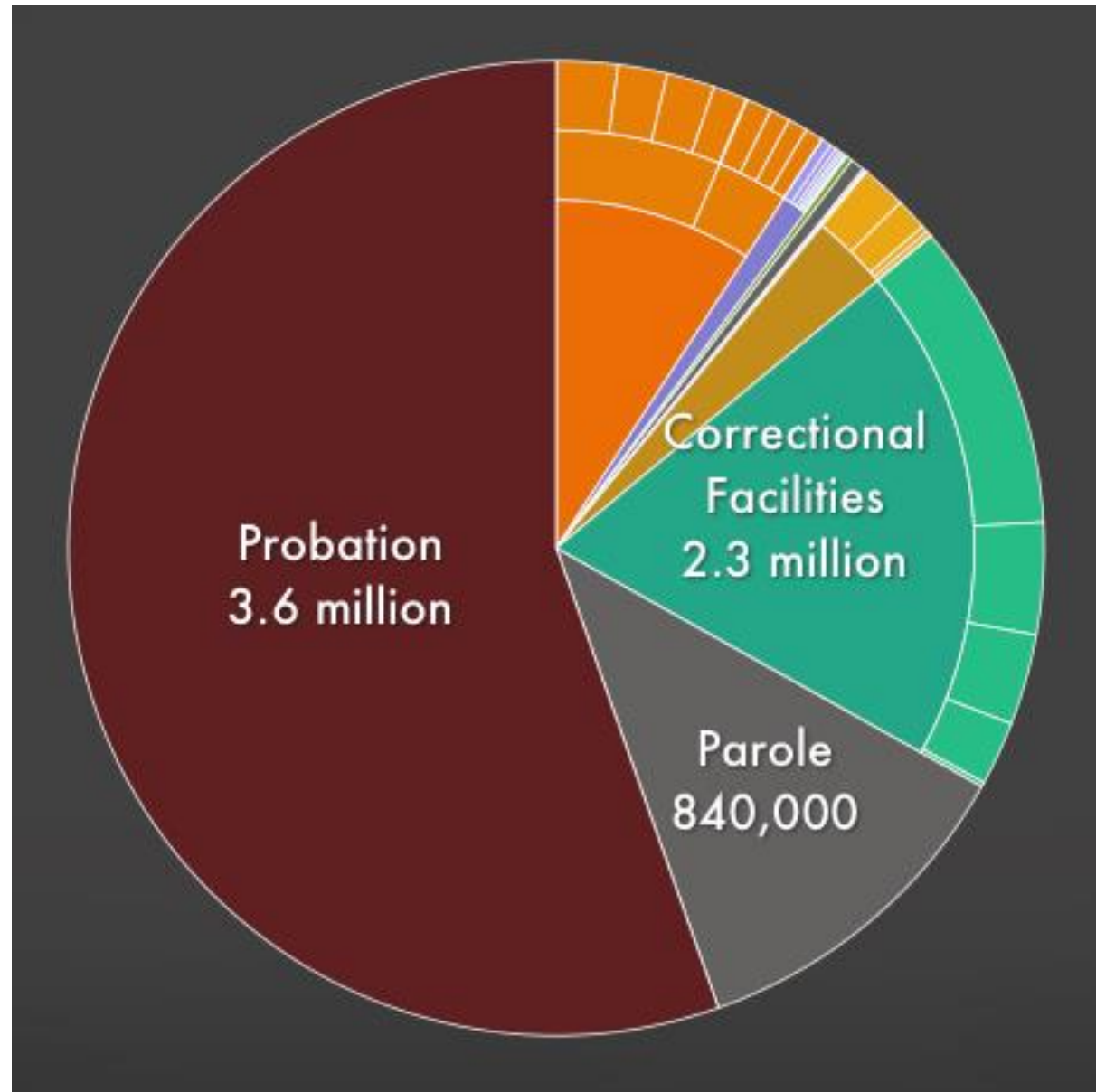
Prison
650k released



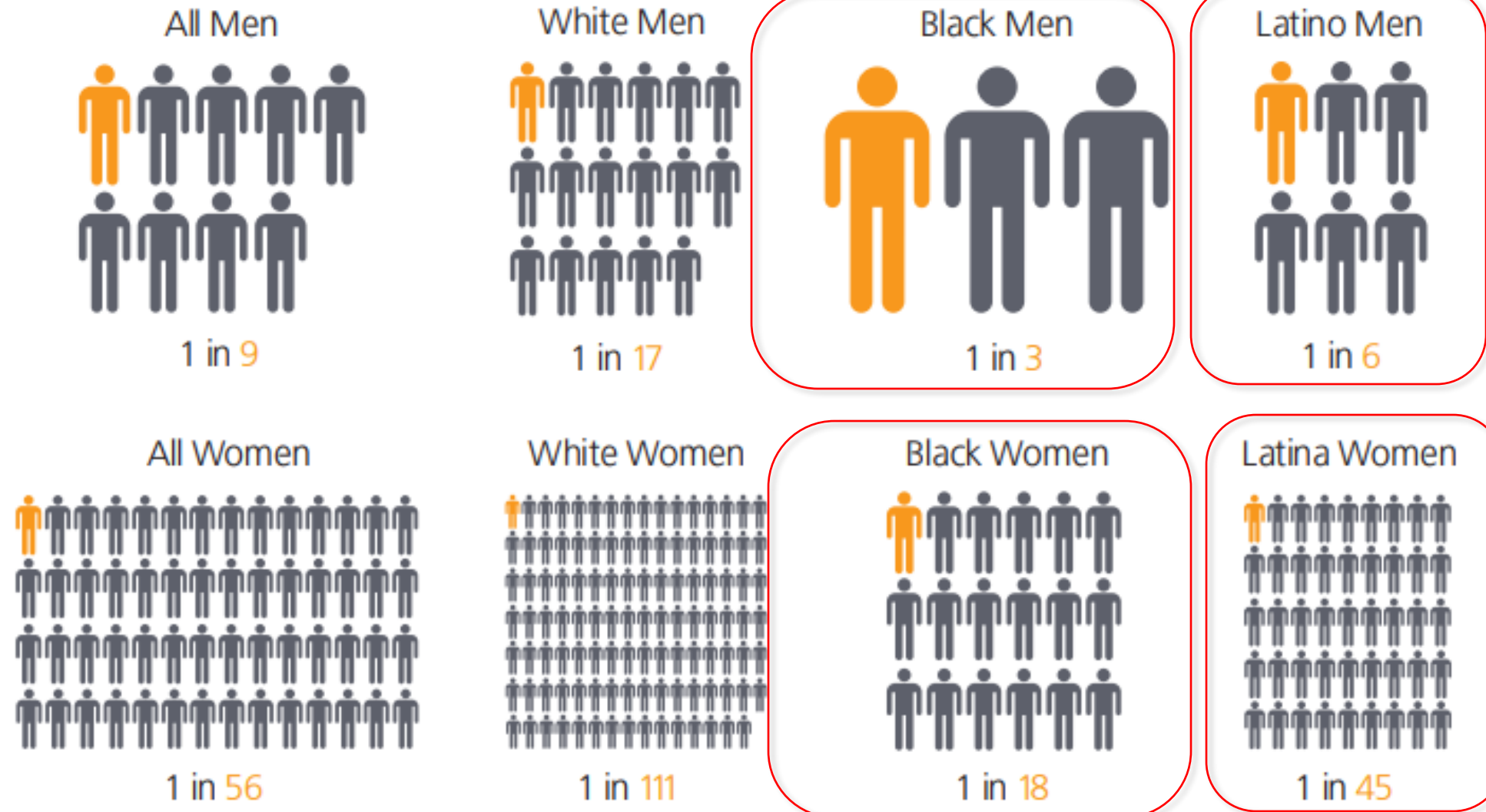
Jail
10.6M go a year



It's more than just confinement within the system



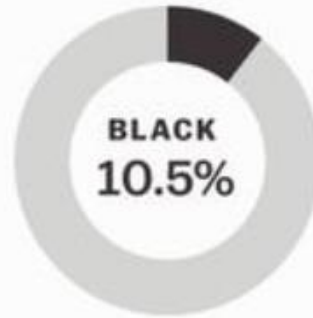
Lifetime Likelihood of Imprisonment of U.S. Residents Born in 2001



Source: Bonczar, T. (2003). *Prevalence of Imprisonment in the U.S. Population, 1974-2001*. Washington, DC: Bureau of Justice Statistics.

Past-month illicit drug use

2013 National Survey on Drug Use and Health



Drug-related arrests per 100,000 residents of each race

2013 FBI Uniform Crime Reports / US Census Bureau

WHITE 332



BLACK 879



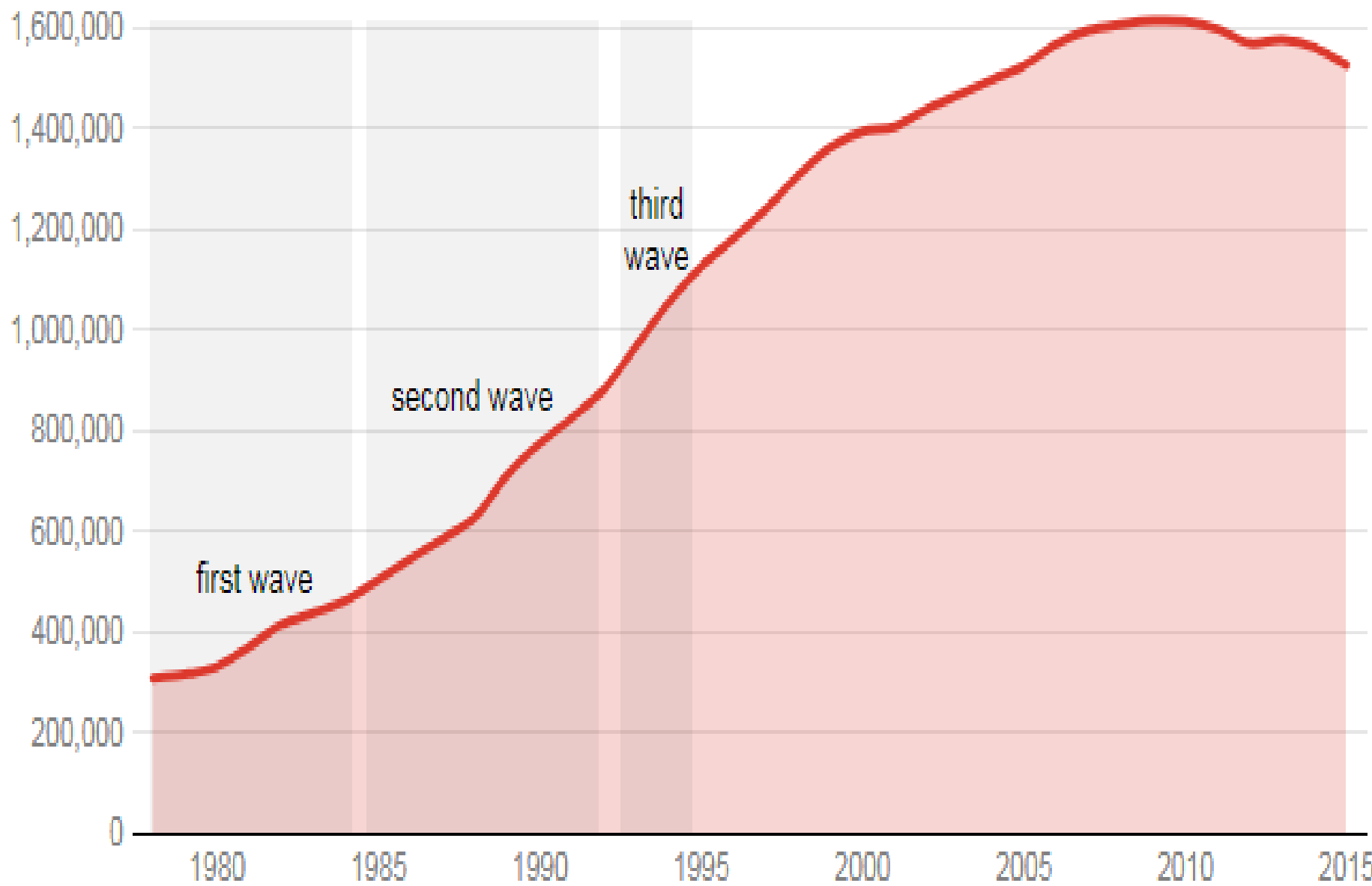
Vox

History of Mass Incarceration



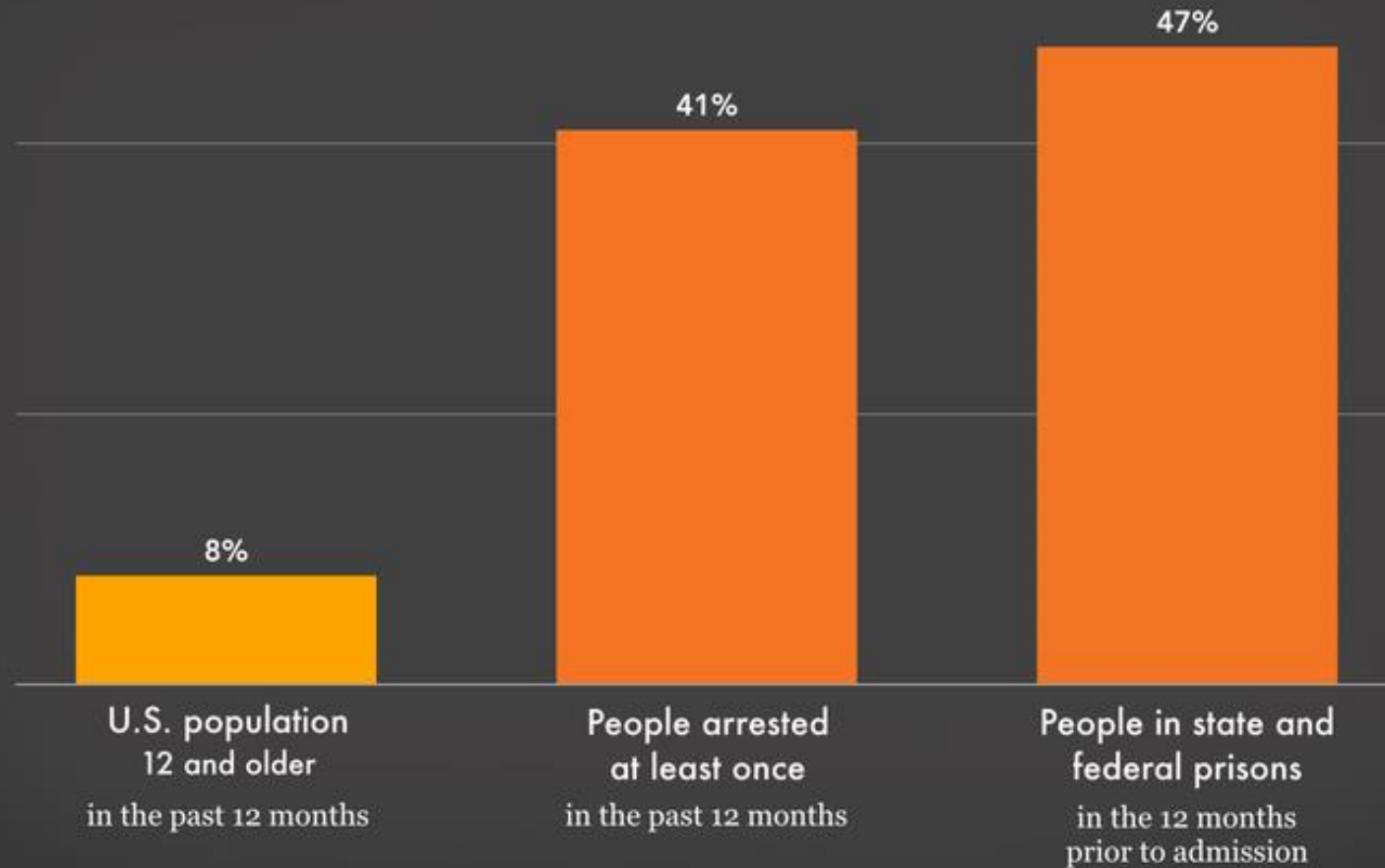
Mass incarceration has been driven by policy changes

1950s – Deinstitutionalization
1970s – War on Drugs
1980s – Mandatory sentencing
1990s – 3-strike policy



People who have been arrested or incarcerated have higher rates of substance use disorder than the nation at large

Percent of people in each category that met the criteria for substance use disorder



PRISON
POLICY INITIATIVE

Sources: Data on the U.S. population and people arrested at least once are from the National Survey of Drug Use and Health (NSDUH), SAMHSA, 2019. Data regarding people in state and federal prisons are from the Bureau of Justice Statistics' Survey of Prison Inmates, 2016.



Health Impacts

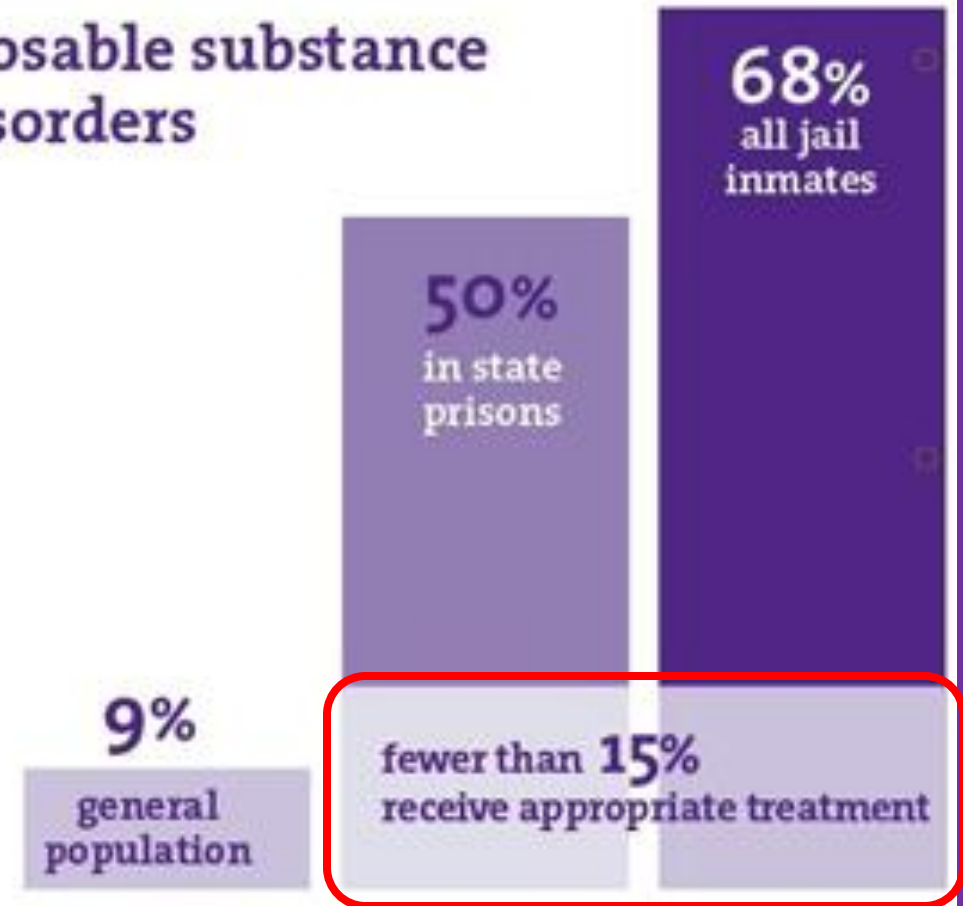


Behavioral Health Disorders Prevalent

Serious mental illnesses in jails



Diagnosable substance use disorders



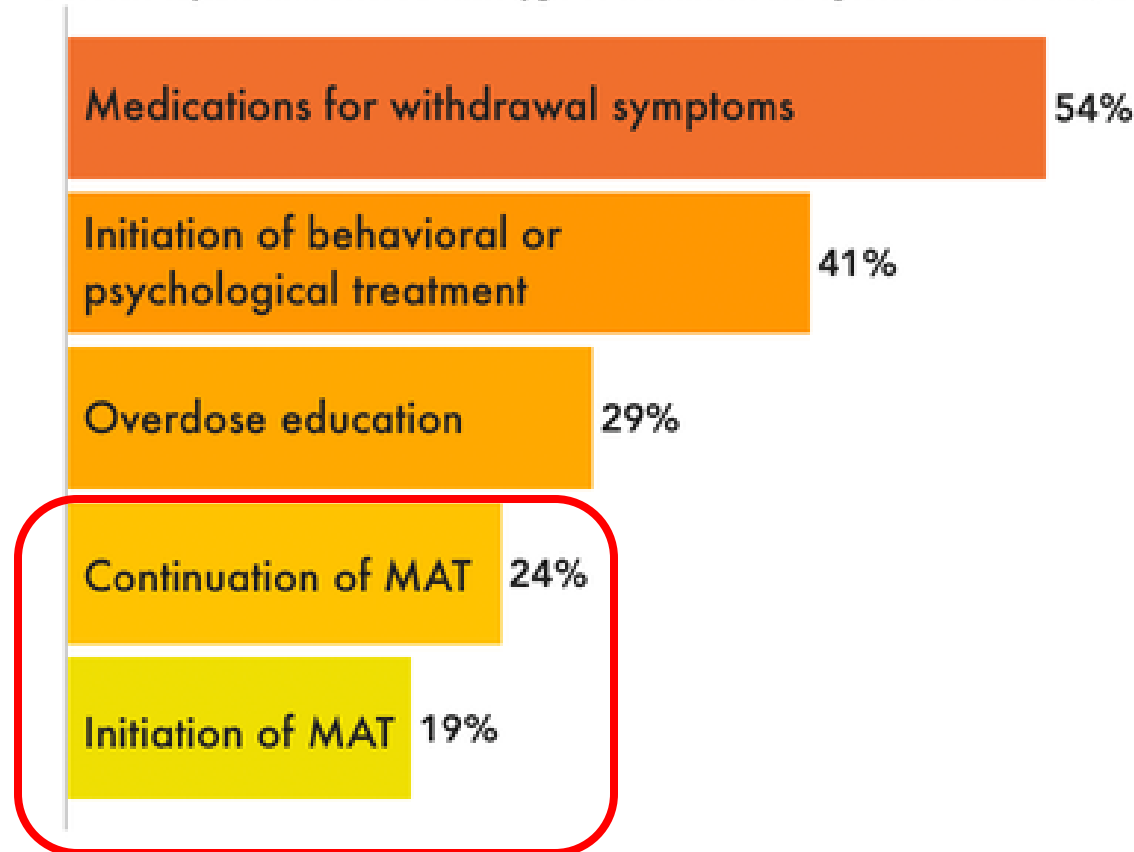
Benefits of MOUD in Correctional Facilities

Benefits	Evidence
Reduces illicit opioid use post-incarceration	Mattick, et al., 2009
Reduces criminal behavior post-incarceration	Deck, et al., 2009
Reduces mortality and overdose risk post-incarceration	Degenhardt et al., 2011; Kerr, et al., 2007 Chatterjee et al., 2023
Reduces HIV risk behaviors post-incarceration	MacArthur et al., 2012
Additional social, medical, and economic benefits	Rich et al., 2015; Zaller et al., 2013; McKenzie et al., 2012; Heimer et al., 2006; Dolan et al., 2003



In jails, the most effective treatment options are the least accessible for people with opioid use disorder

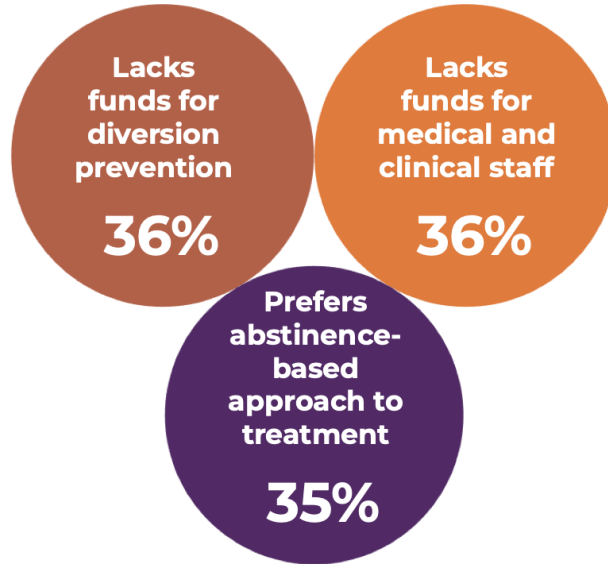
Percent of jails that offered each type of treatment for opioid use disorder, 2019



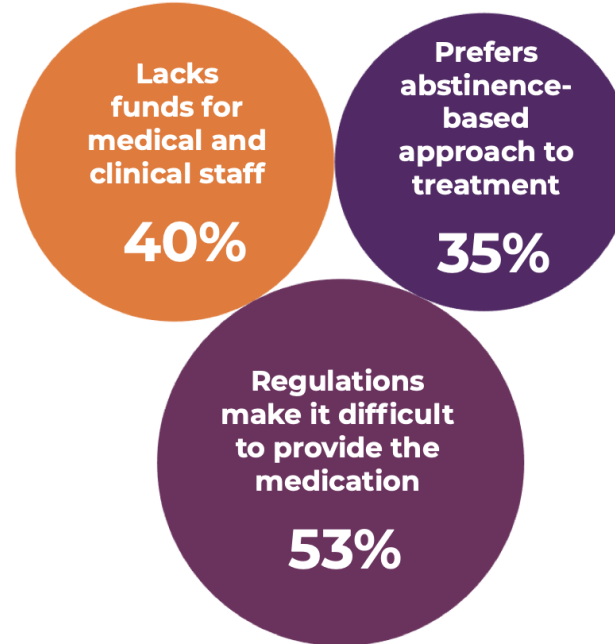
Source: Bureau of Justice Statistics,
Opioid Use Disorder Screening and Treatment in Local Jails, 2019, Table 5.

TOP THREE BARRIERS TO MOUD ACCESS BY TYPE OF MEDICATION

Buprenorphine



Methadone



Naltrexone

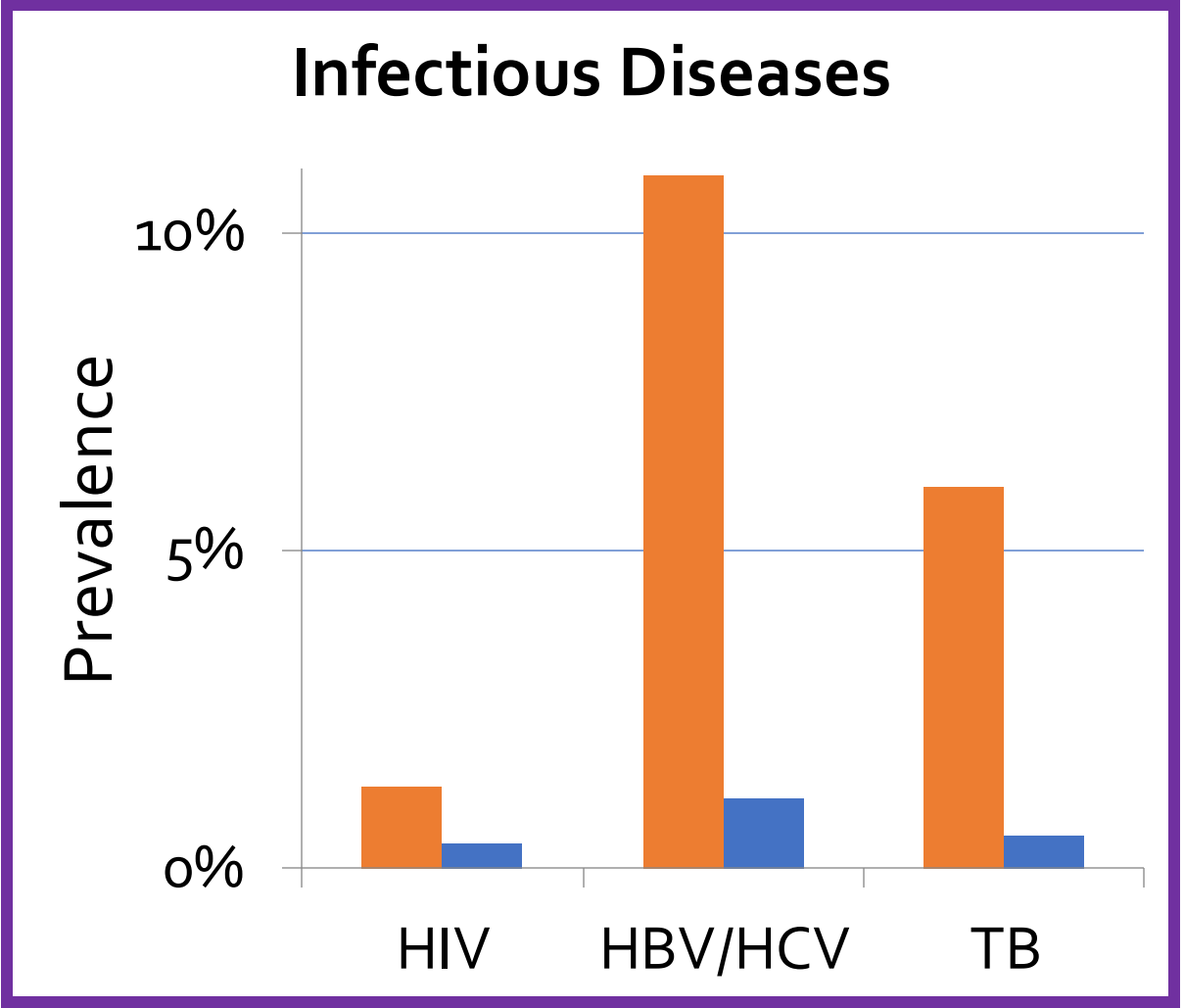
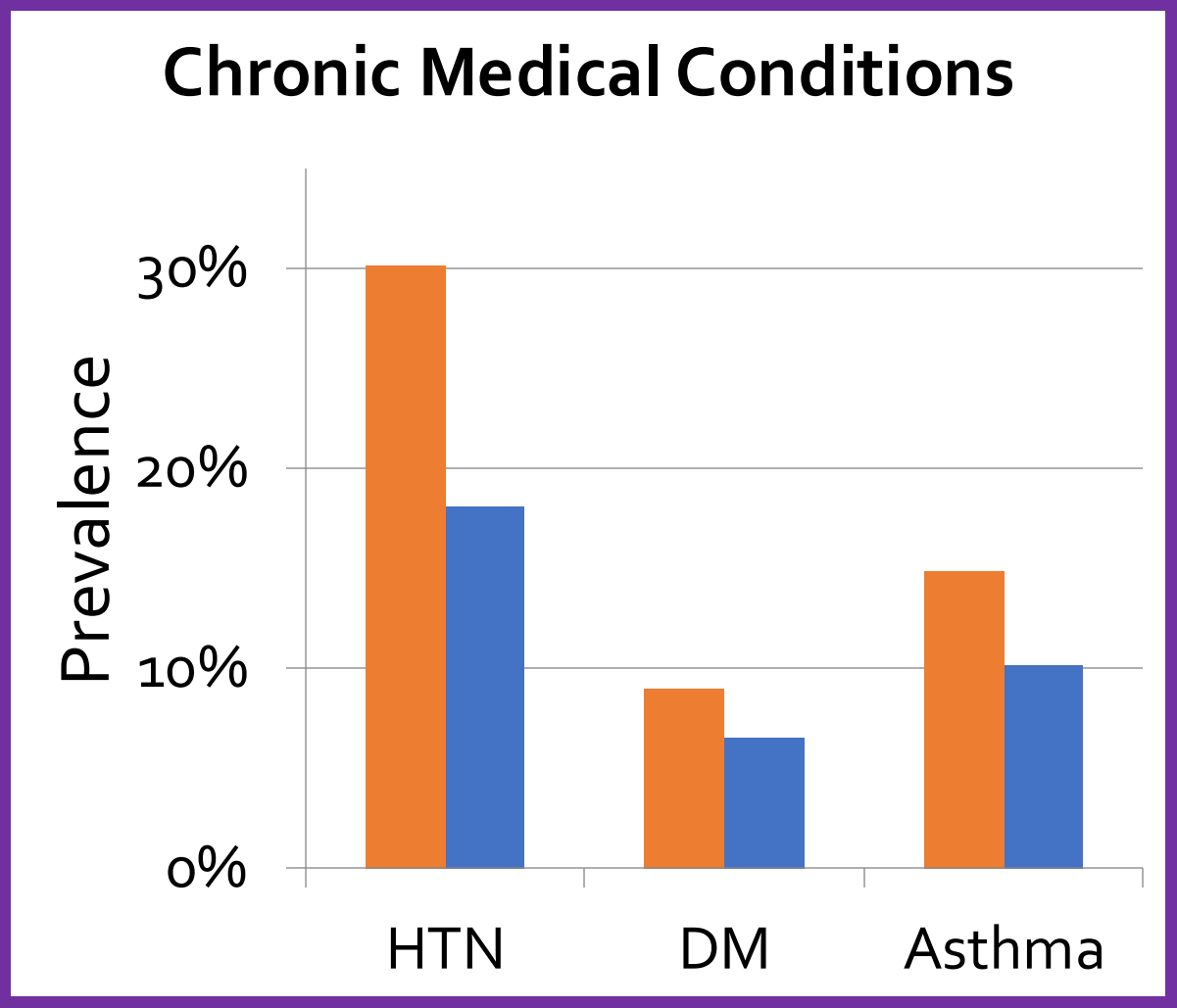


**NIH
HEAL
INITIATIVE**

NIH HEAL Initiative and Helping to End Addiction Long-term are service marks of the U.S. Department of Health and Human Services.



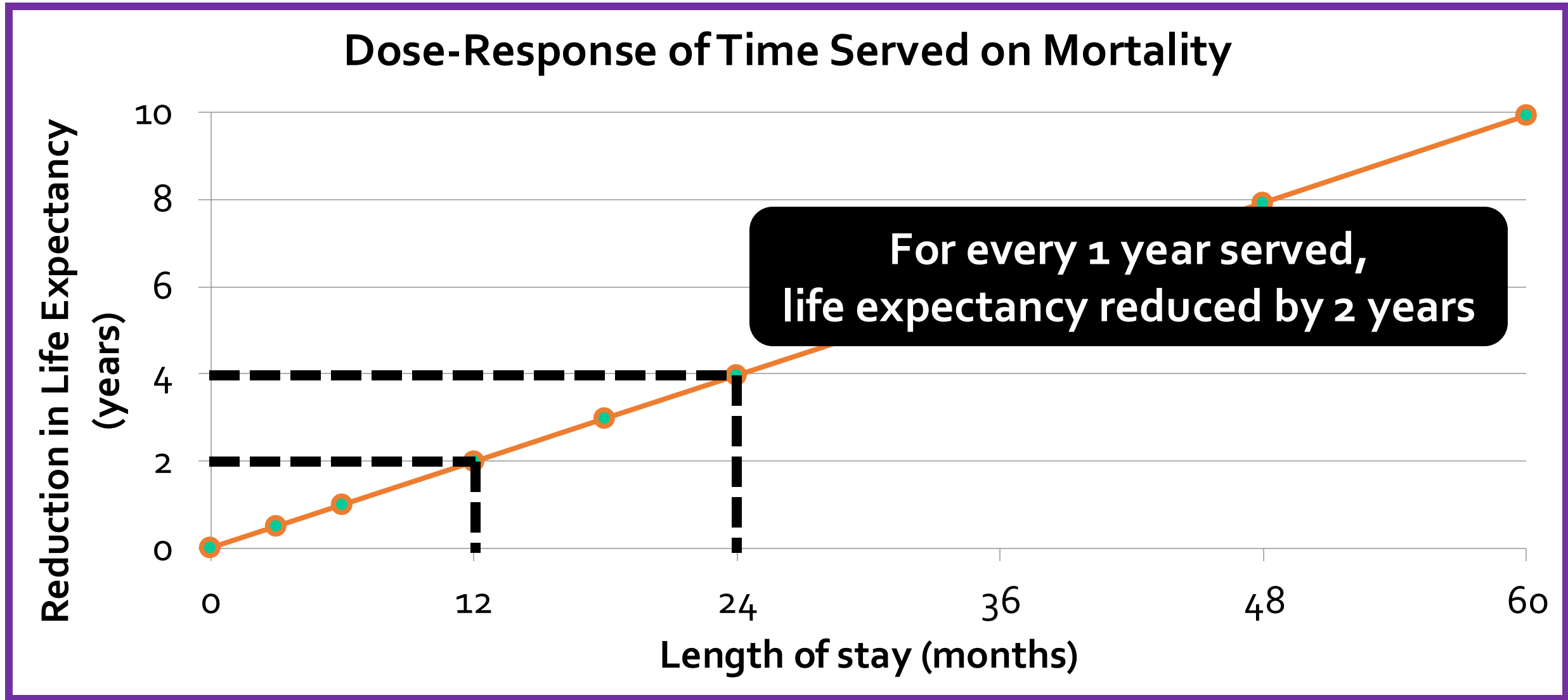
Chronic Medical Conditions & Infectious Diseases



Incarcerated population

General population

Impact on Mortality




Transitions



Mortality Rates Spike During Re-entry Period

Relative risk of death among formerly incarcerated compared with other Washington state residents	
<u>Cause of death</u>	<u>RR (95% CI)</u>
Overdose	12.2 (10.2–14.9)
Homicide	10.4 (8.0–13.6)
Liver disease	4.7 (3.2–7.2)
Suicide	3.4 (2.5–4.7)
Motor vehicle accident	3.4 (2.4–4.8)
Cardiovascular disease	2.1 (1.6–2.7)
Cancer	1.67 (1.2–2.2)

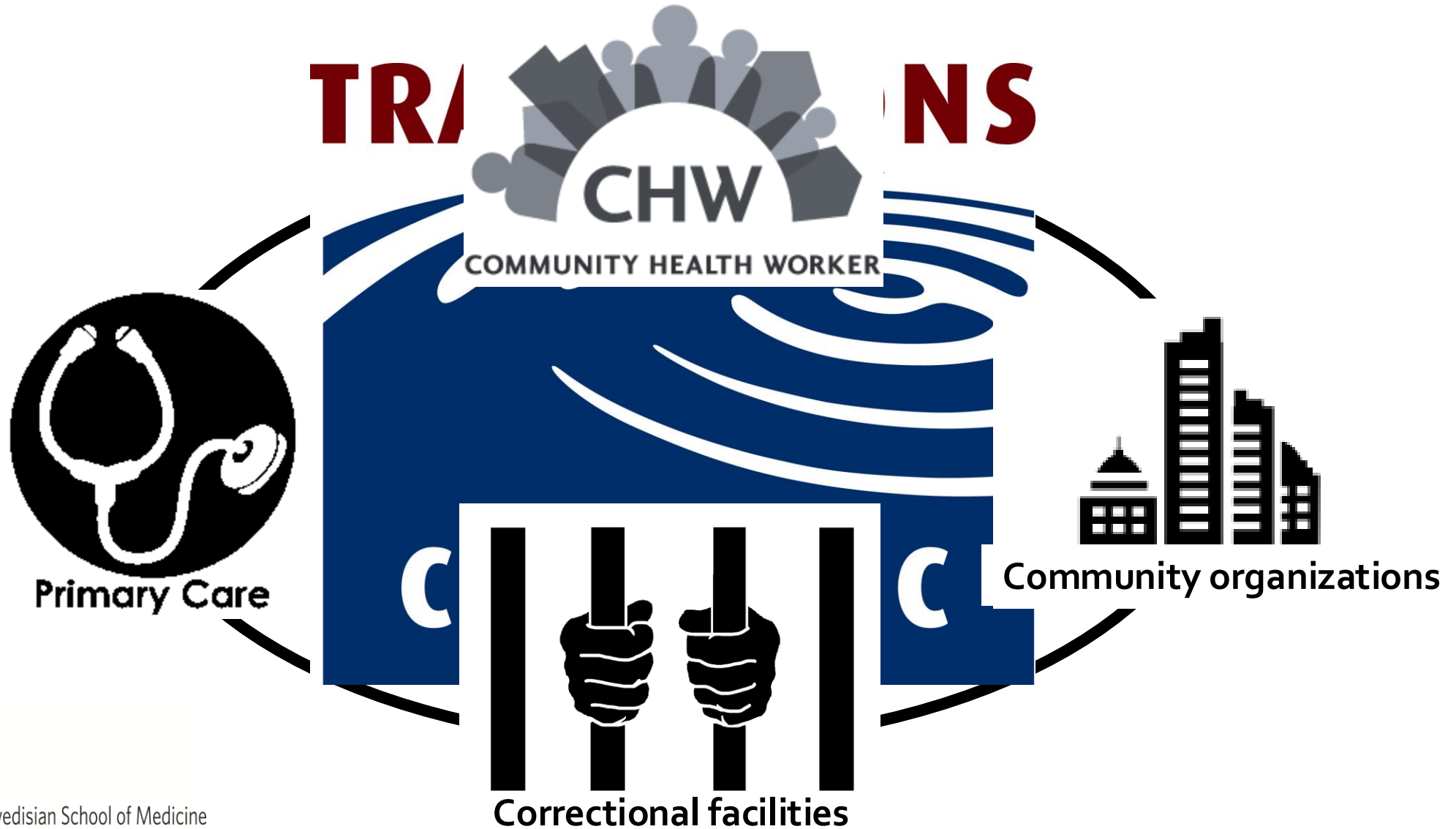


**Within first 2 weeks,
aRR is 129
(95% CI 89 to 186)**

Clinical Innovations

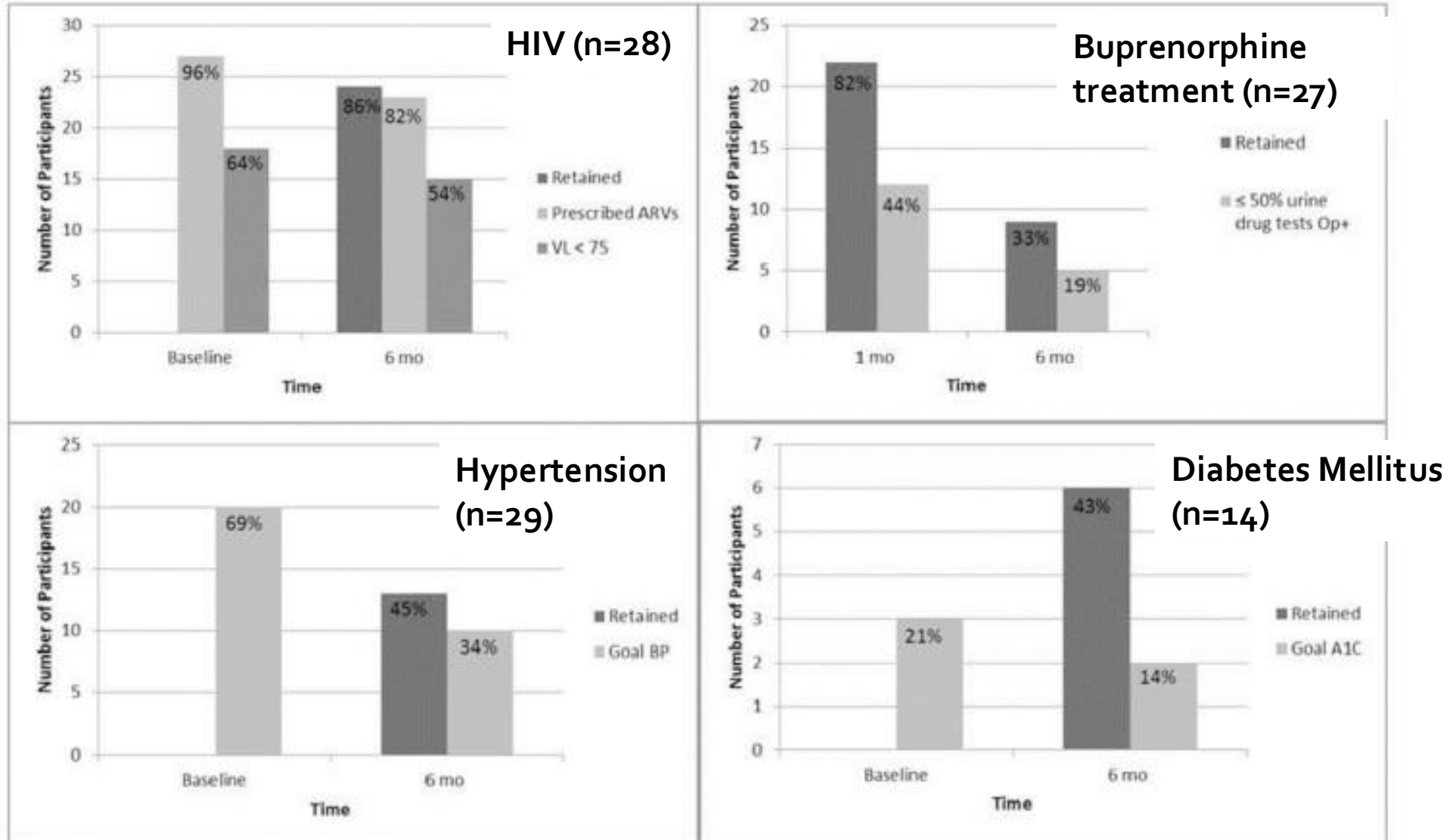


Transitions Clinics Target High-Risk Window



Bronx Transitions Clinic

Retention in medical care and health outcomes (n=135)



Drug Courts



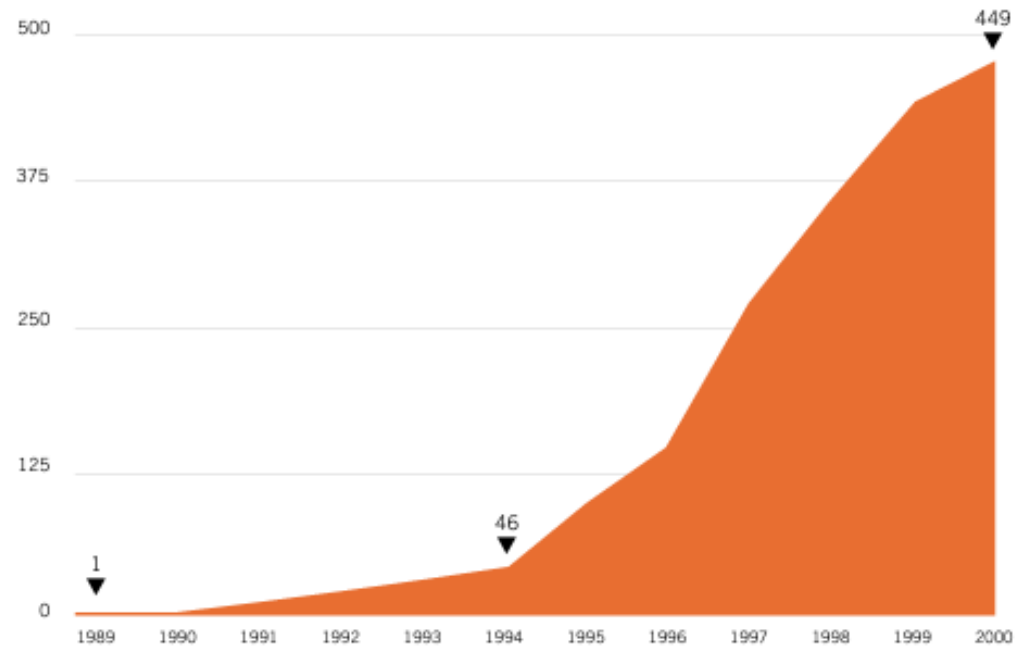
Drug Courts: Definition

- Specialized court designed to handle cases involving non-violent substance use offenses
- Comprehensive approach
 - Treatment (linked to long-term treatment)
 - Judicial supervision
 - Drug testing/monitoring
 - Sanctions/incentives
- Individuals may be diverted before conviction or placed in drug court after sentenced
- Primary goal:
 - Promote rehabilitation and reduce recidivism in individuals with SUD.
 - Divert them from traditional criminal justice pathways (incarceration)

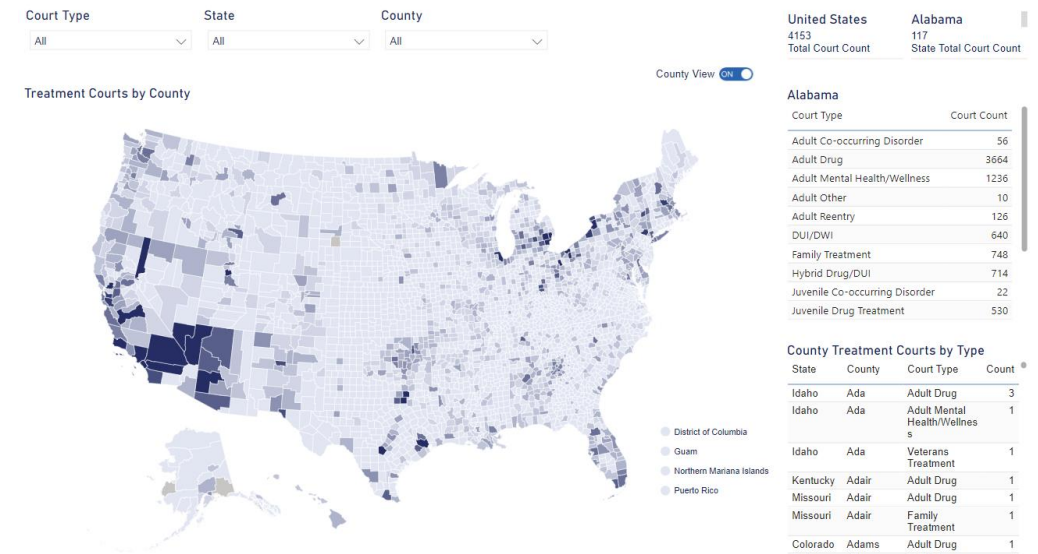


Drug Court Distribution

Growth of Drug Courts, 1989 – January 10, 2000



Source: Drug Court Clearinghouse and Technical Assistance Project



Drug Courts: Evidence

- Reduce Recidivism:
Participants who completed drug court program less likely to re-offend (one study reduction of 26%)
- Lower rates of substance use
- Cost Effectiveness:
Avoiding criminal justice detainment save tax payers 2-3 dollars for every dollar spent on drug courts
- Outcomes for participants:
Increase rate of employment
Stable housing
Improved family relationship
- Public safety benefits:
Reduction in drug related crimes

Bhati, A. S. (2006). The impact of drug courts. *Journal of Contemporary Criminal Justice*, 22(1), 55-73.

Aos, S., Miller, M. G., & Drake, E. (2006). Evidence-based public policy options to reduce crime and criminal justice costs: Implications in Washington State. *Victims and Offenders*, 1(2), 139-160.

Carey, S. M., Finigan, M. W., & Pukstas, K. (2008). Blueprint for implementation: The Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders. US Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention

Gottfredson, D. C., Kearley, B., Najaka, S. S., & Rocha, C. M. (2007). How drug treatment courts work: An analysis of mediators. *Journal of Research in Crime and Delinquency*, 44(1), 3-35.



Take Home Points

- Criminal justice involvement negatively impacts health
- Mass incarceration disproportionately impacts Black and Latinx communities
- There is a strong intersection of addiction and correctional involvement
- Transition period carries high mortality risk
- Evidence supports effective transition care models
- Drug courts have been a successful model to divert individuals from correctional institutions for drug offenses
- As Educators, we must teach future physicians how to care for people with a history of incarceration and addiction

