Addictions programming: A perspective on corrections in Nova Scotia

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This article provides a snapshot of a research initiative that has been underway in Nova Scotia and examines challenges faced by Nova Scotia Correctional Services with respect to addiction, recidivism, programming and evaluation.

A large majority of crime for which adult offenders are provincially incarcerated in Nova Scotia is drug or alcohol related, and these offenders report strong interest in taking substance abuse programming, should it be made available to them.

Independent research conducted with the co-operation of Nova Scotia Correctional Services examined strategies by which to secure independent funding for an evidence-based substance abuse pilot initiative, with an eye toward sustainability. At the time that the research was conducted in 2002/03, the provincial corrections budget did not support such an initiative. Department of Justice administrators were, however, exploring the feasibility of introducing evidence-based programming but were concerned with issues around continuity of piloted programming.

Facts of crime and provincial corrections in Nova Scotia

Nova Scotia now has the highest crime rate of all four Atlantic provinces, with an overall 1.7% rate increase reported in 2004. In both 2003 and 2004, the Province of Ontario recorded an overall lower crime rate than did Nova Scotia. In 2004, 82,116 criminal code offences were reported for Nova Scotia (not including traffic offences), showing a rate of 8,764 per 100,000 population. As to violent crime, a total of 11,152 violent crimes were reported for Nova Scotia in 2004, giving way to a rate of 1,190 per 100,000 population.

The rate of incarceration in Nova Scotia for 2003/04 was 26%, lower than Ontario’s 41% and Prince Edward Island’s 58%, but higher than Saskatchewan’s 24%. The average count of persons in provincial correctional facilities across the Province of Nova Scotia in 2003/04 was 153, up 2% from 2002/03.

The average daily number of remanded adults in custody virtually doubled from 1991/92 to 2000/01, going from 56 to 109. This put Nova Scotia among the jurisdictions with the largest percentage increase of remanded offenders, along with New Brunswick, Manitoba and British Columbia. Despite being faced with increasing remand counts since 1991/92 up to 2000/01, Nova Scotia reportedly saw a 5% decrease in the number of remanded offenders for the period 2002/03 to 2003/04.

As of 2001, persons of Aboriginal ancestry represented 7% of all provincially incarcerated adult inmates in Nova Scotia, significantly higher than their 1.87% representation in the general Nova Scotia population.

Nationally, remand admissions have increased from 1986/87 to 2000/01, while sentenced admissions have dropped. Similarly, this trend holds true for Nova Scotia. In 1991/92, 14% of all incarcerated persons in Nova Scotia were persons on remand. By 2000/01, this had increased to 33%, with remand accounting for half or more of all admissions to custody.

Higher remand counts mean that increasingly there are more offenders in custody for shorter periods of time, presenting additional challenges for Nova Scotia Corrections. For example, as noted by Beattie, high volume turnover, combined with frequent movements, creates additional burdens for correctional staff when handling inmates. Despite the added stress and possible unaddressed mental health issues experienced by remanded offenders, however, there have been no suicides reported as occurring in Nova Scotia provincial correctional facilities over the years 2001/02, 2002/03 and 2003/04.

Nova Scotia’s provincial forensic-psychiatry service’s hospital – the Capital District Health Authority – and one of the province’s adult offender correctional facilities – the Central Nova Scotia Correctional Facility – are now housed in co-located facilities on the same campus in Dartmouth, Nova Scotia. The Capital District Health Authority operates and delivers primary care and mental health services to offenders, including methadone therapy, while the Central Nova Scotia Correctional Facility provides security for both facilities. In terms of correctional programming, correctional workers offer some
basic psycho-educational programming (e.g., life skills, anger management) for offenders on the corrections side of the campus. (In order to be provided with methadone therapy, offenders must have been registered in an approved methadone program in the community prior to sentencing.)

While Nova Scotia Corrections has an official policy to provide program opportunities to offenders, thus far none of the programs are accredited. Moreover, though some basic programming is available, it is not consistently provided across the province. Programs offered at the Cape Breton Correctional Centre, for example, may be very different in nature and delivery than those offered at the Central Nova Scotia Correctional Facility in Dartmouth.

Substance abuse among provincially incarcerated adults in Nova Scotia

Head (2001) argues that “all correctional jurisdictions within Canada have been grappling with the issue of alcohol and drug use.” Certainly, this is the case with the Province of Nova Scotia, where Correctional Services has been involved in an initiative with a view towards piloting accredited substance abuse programming for offenders housed under its authority. Until 2002 there had been no empirical research conducted in the Province of Nova Scotia to examine the correlation between substance abuse and adult offender crime across the province; nor had there been empirical work to explore the effects of addiction on adult offenders across the province.

To assess the level of substance abuse problems and related needs among the provincially incarcerated population, a study was carried out from 2002 to 2003 across the Province of Nova Scotia by an independent researcher with the co-operation of Nova Scotia Justice, Correctional Services. This research showed that, as reported elsewhere, incarcerated adult offenders in Nova Scotia are challenged by a variety of addictions, including substance abuse and gaming, and that offenders report to be motivated to participate in programming and related treatment services, should they be made available during incarceration.

In Nova Scotia, close to 77% of adult provincial inmates are challenged by substance abuse, and 85.5% of surveyed offenders revealed that substances were related to their crimes.

Surveyed respondents across all five provincial correctional sites reported alcohol to be the substance most highly correlated to crime. And as reported elsewhere, repeat offences are more frequent in cases where substances are reported to be related to crime.

Of the 168 respondents surveyed across the province of Nova Scotia, 129 reported a problem with drugs and/or alcohol. Of note, all offenders reporting a problem with drugs or alcohol also reported having had sought help for addiction prior to incarceration, evidencing that they had already made attempts to address personal problems with substances. Importantly, then, provincially incarcerated offenders in Nova Scotia appear to be motivated to engage in substance abuse programming.

Indeed, all 129 surveyed respondents identifying a problem with substances reported a desire to participate in addictions programming while serving their sentence. Frequently, respondents provided comments on the survey expressing frustration with their addiction and a desire to “have a better life.”

Motivation for programming was also evidenced when six of seven invited inmates agreed to participate in a research forum through which the researcher sought to explore several issues that surfaced through the surveyed responses to questions around programming and its administration. Only offenders who had participated earlier in the survey component of the research were invited to participate in the focus group. The focus group was held several months after the running of the survey, once the data had been analyzed and specific questions were developed for further examination. By the time the focus group was held, it was determined through a check of Corrections’ internal records that only eight offenders who had completed the survey remained in custody. Of those eight, one inmate was denied participation due to an administratively determined security risk. Of the seven remaining, only one chose not to attend the forum.

Research initiative

Independent research was conducted with the co-operation of Nova Scotia Correctional Services in an attempt to address: (a) issues of addiction; (b) the relationship between addiction and recidivism; and (c) programming needs. As Head (2001) observed earlier of Saskatchewan, programming needs for incarcerated adult offenders in Nova Scotia are holistic and diverse, and corresponding substance abuse programming must recognize all aspects of the problem and be “multi-faceted.”

Researchers and collaborators involved in the initiative in Nova Scotia applied for funding to a
The lead researcher had cultivated collaborative partnerships with community organizations and departments of the provincial government and still seeks to offer an integrated approach to programming delivery.

This initiative also involved a knowledge transfer project conducted with Ontario Corrections over 2003/04, through which discharge planning, case management and programming strategies were examined with an eye to the pilot project in Nova Scotia. Indeed, at the time that the pilot research initiative was underway, the design of the accredited programming hoped to be adopted in Nova Scotia for incarcerated offenders was the one that was then newly introduced by the Ministry of Community Safety and Correctional Services in Ontario. Two facilities in Nova Scotia offered no internal substance abuse programming to offenders. Through the pilot initiative, however, eligible incarcerated offenders who were to be brought to the Central Nova Scotia Correctional Facility would have been able to receive accredited substance abuse programming.

The practice in Nova Scotia Corrections is for frontline correctional workers to deliver programming to offenders. When considering the needs of incarcerated populations, however, it may be more conducive to offenders’ feelings of safety to have programs delivered by one or more counselling specialists from outside of corrections. Other research has shown that offenders express a general lack of trust for correctional officers, especially in settings that require intimate disclosure and vulnerability on the part of program participants.24

A further independent initiative examining another form of addiction is now underway in Nova Scotia. This initiative is exploring the links between problem, or pathological, gambling and crime, and assessing the need for gaming education, programming or treatment among provincially incarcerated adults in Nova Scotia. This overlapping study on gambling and crime thus far shows that 45% of surveyed offenders at the Central Nova Scotia Correctional Facility self-identified problems with gambling, and all 45% reported problems with video lottery terminals (VLTs). In addition, 20% of respondents reported having committed crime for reasons related to gambling.25

Conclusion

The research initiative discussed in this paper has been unfolding for more than three years. The project is proposed to unfold in three primary stages: (1) measuring re-incarceration rates for the Province of Nova Scotia over the years 2000 to 2005; (2) piloting accredited substance abuse programming, with an eye to sustainability; and (3) evaluating accredited programming put into place.

In the future, with external funding, the lead investigator hopes to develop a longitudinal study to follow program participants over the long term, assessing outcomes of accredited substance abuse programming in terms of programming success, recidivism and questions for subsequent research.26