

The Prison Outcomes Study (POST) – Causes of mortality after release from incarceration in NSW

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In the two years after leaving custody, people died at more than four times the rate of other people in NSW. The first week was the most dangerous, and the cause depended on the type of custody left: drug-induced death after a sentence, suicide after remand.

4.6×	12×	20×	2×	1 in 10
the NSW death rate in the two years after release	the NSW death rate in the first week after release	drug-induced death: amphetamines 27×, opioids 23×, benzodiazepines 21×	women’s relative mortality vs men’s (SMR 8.6 vs 4.3)	of all deaths fell within three months of a release

WHY
People face a markedly increased risk of death after release from prison, particularly from drug-related causes. However, few studies have followed all people released from an entire prison system, compared deaths after release from remand versus sentenced custody, or identified the specific drugs involved.

AIM
How many people die after release from custody in NSW, from what, when, and for whom.

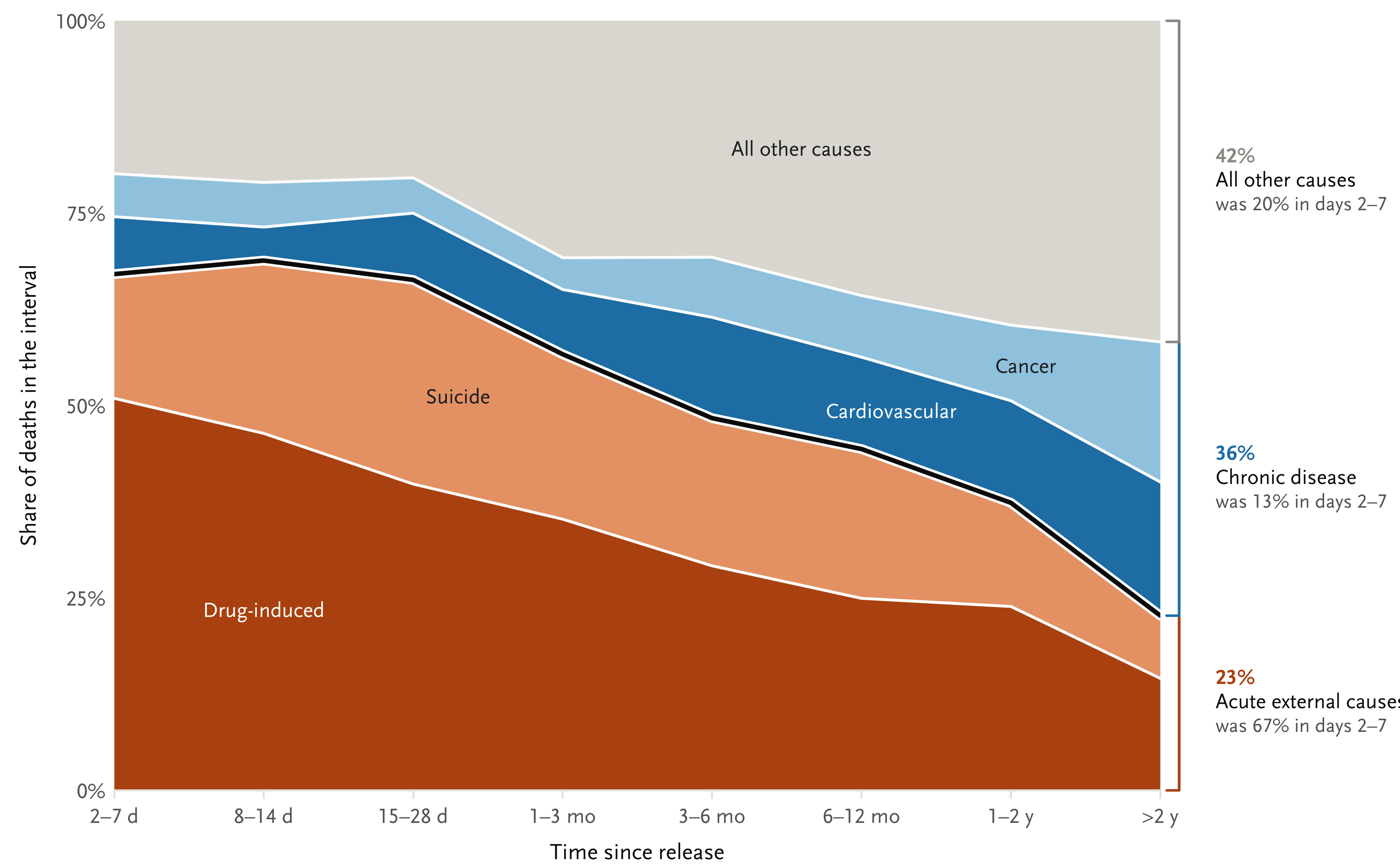
WHO AND HOW

- Every adult held in full-time custody in NSW from 2000 to 2021
- Custody records linked to the NSW death registry and coded causes of death
- Deaths from the day after each release compared with the NSW population of the same age, sex and year (standardised mortality ratios, SMRs)

THE COHORT

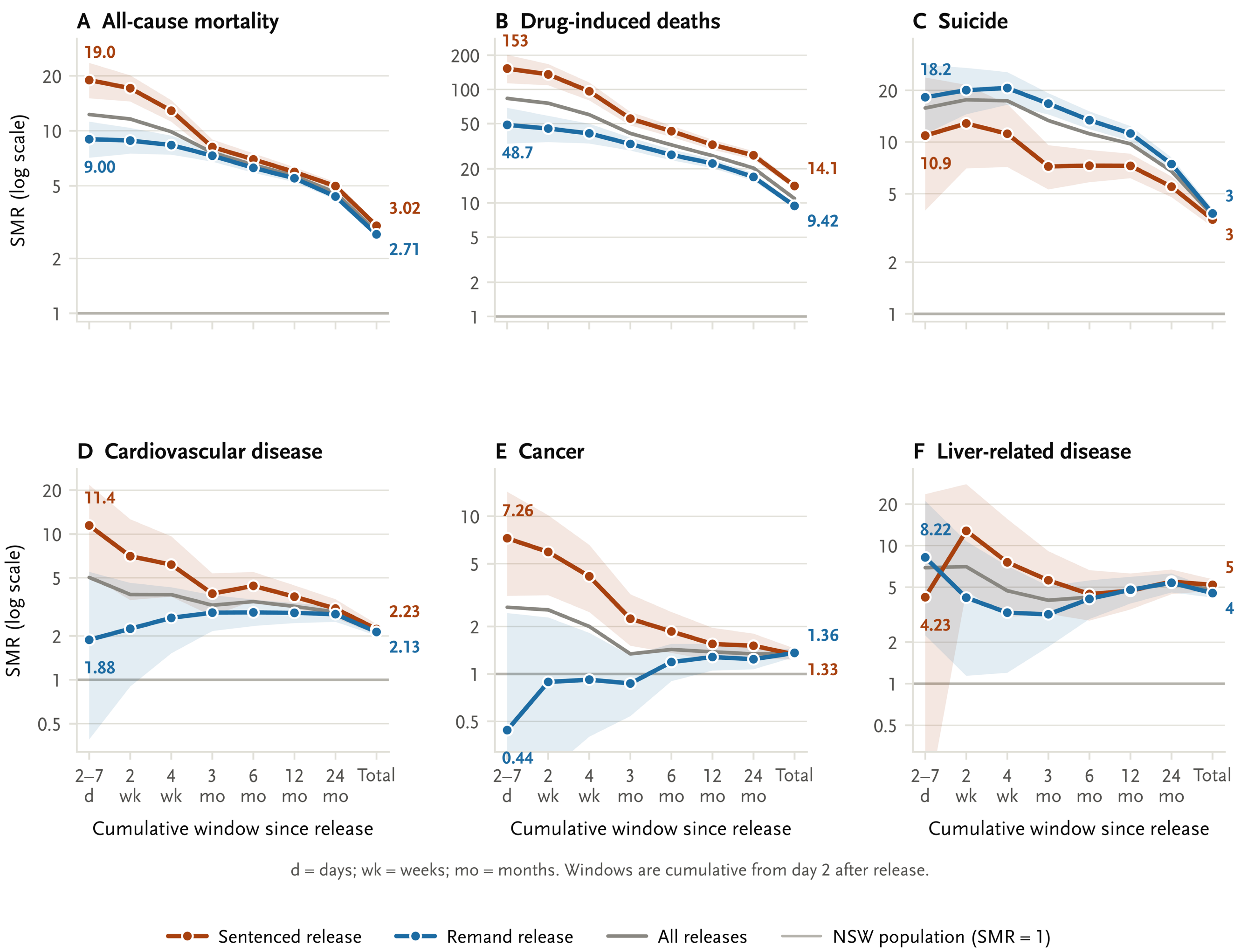
200,486	adults
54%	only ever on remand
2 million	person-years followed
11,606	deaths after release

Causes shift from drugs and suicide in the first weeks to heart disease and cancer in later years



Share of deaths by cause: drug-induced death and suicide were two thirds of deaths in the first week; cardiovascular disease and cancer more than a third beyond two years.

After a sentence and after remand: what people died of, and when



SMR (log scale) by time since release: release from a sentence in dark orange, from remand in blue, all releases in grey. Drug-induced death was highest after a sentence (153 times the population rate in the first week, against 49 after remand); suicide was higher after remand at every window.

Conclusions

- 1 Transitional care must reach people leaving remand as well as those finishing a sentence: mental health follow-up after remand, drug treatment and take-home naloxone after a sentence.
- 2 Overdose prevention has to cover amphetamines and benzodiazepines, not only opioids.
- 3 Mortality stays almost three times the population rate for two decades: primary care, hepatitis C treatment and cardiovascular care are the second phase.