



Information Release

The CFPC calls for improved access to opioid agonist treatment for all incarcerated individuals

(March 5, 2020, Mississauga, ON) The College of Family Physicians of Canada (CFPC) has released a [position statement](#) advocating for equal access to opioid agonist treatment (OAT) for all incarcerated individuals who require care for opioid use disorder.

“The opioid overdose crisis is a serious public health problem that disproportionately affects individuals who are incarcerated in provincial, territorial, and federal correctional institutions,” says Dr. Claire Bodkin, Vice Chair of the CFPC’s Prison Health Member Interest Group Committee. “While some incarcerated people with opioid use disorders are receiving treatment, it is often fragmented and barriers within the system have led to inconsistent access to treatment programs. Those who are incarcerated should receive the same level of care as others in our communities who experience opioid-related substance use disorders.”

In addition to reducing the symptoms of opioid withdrawal and reducing injection drug use, OAT is an effective intervention that is associated with inmates having earlier release from incarceration and lower rates of re-offending.^{1,2} The CFPC’s position statement offers four recommendations to improve access to OAT:

1. All people in detention who meet the criteria for evidence-based OAT and who consent to receiving treatment should have access to OAT without delay.
2. All people receiving OAT in the community should continue, without interruption, an appropriate OAT upon admission to detention.
3. Anyone receiving OAT in detention should be connected with community-based addiction treatment to ensure uninterrupted continuity of care upon release. Preparations for this transition should be started well before the person’s release date.
4. OAT should be used as one treatment in a suite of evidence-informed interventions to:
 - Engage patients in opioid use disorder care
 - Reduce or eliminate opioid-related morbidity and mortality in people who experience incarceration

Evidence-based therapy for opioid misuse is available to all people in Canada and should include those who experience incarceration. The CFPC has contacted Bill Blair, the Minister of Public Safety and Emergency Preparedness to advocate for the adoption of these recommendations.

¹ Russolillo A, Moniruzzaman A, McCandless LC, Patterson M, Somers JM. Associations between methadone maintenance treatment and crime: a 17-year longitudinal cohort study of Canadian provincial offenders. *Addiction*. 2018;113(4):656-667.

² MacSwain M, Farrell MacDonald F, Cheverie M. *Post-release Outcomes of Methadone Maintenance Treatment Program (MMTP) Participants: A comparative study* (Research Report R-322). Ottawa, ON: Correctional Service Canada; 2014.

About the College of Family Physicians of Canada

The College of Family Physicians of Canada (CFPC) is the professional organization that represents more than 38,000 members across the country. The College establishes the standards for and accredits postgraduate family medicine training in Canada's 17 medical schools. It reviews and certifies continuing professional development programs and materials that enable family physicians to meet certification and licensing requirements. The CFPC provides high-quality services, supports family medicine teaching and research, and advocates on behalf of the specialty of family medicine, family physicians, and the patients they serve.

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