

Criminal Justice Involvement Among Overdose Decedents in New Orleans

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INTRODUCTION:

Understanding how prior criminal record differs among overdose decedents can help determine if current systems of surveillance, intervention, and support are reaching populations in need, especially those who are facing the most inequities. New Orleans had 282 total overdose decedents in 2025. This study will analyze demographic data and criminal histories of these decedents to determine potential disparities in criminal justice involvement. The goal of this study is to find ways to incorporate more equitable approaches to overdose prevention and interventions in New Orleans.

METHODS:

Court records and coroner's reports were obtained for each of the 282 decedents. Demographic (race, sex, age), mental illness history, and criminal/civil histories were collected for each decedent.

Publicly available court records were accessed in Orleans and Jefferson Parishes. Decedents were coded based on 3 categories:

- **Violent crime or sex work** (includes battery, assault, arson, armed robbery and other armed crime, rape, murder, kidnapping, manslaughter, strangulation, crimes against children, prostitution, solicitation)
- **Nonviolent crime only** (theft, robbery, possession, distribution, breaking and entering, grave desecration, other misdemeanors), excludes sex-related crimes
- **No criminal history**

Data was organized based on types of crime and different demographic data. X² tests and then pairwise associations were conducted on factors deemed significant.

RESULTS:

Among the 282 documented overdose decedents:

- 33.69% had a history of violent crime and/or sex work
- 26.95% had histories of only nonviolent crime
- 39.36% had no criminal record

There was a significant association between race/sex group and criminal history ($p < 0.001$). Pairwise comparisons were then conducted, and significant findings were found when race was the differentiating factor, for both males ($p = 0.00014$) and females ($p = 0.0028$).

DISCUSSION:

Analysis of criminal justice involvement by race and sex demonstrated a significant association between race and prior criminal charges. Despite all decedents having a history of illicit substance use, White decedents had significantly lower rates of identifiable criminal charges than Black decedents (overall $p < 0.001$). Of all overdose deaths, White females made up 16%, Black females made up 13%, Black males made up 46.1%, and White males made up 22.7%. Of those percentages, 38% of White females had identifiable charges, whereas 75% of Black females had identifiable charges ($p = 0.0028$). For males, 74% of Black males had identifiable charges compared to 43.75% of White males ($p = 0.00014$). These differences are all statistically significant and are highly unlikely to be due to chance alone. These results also must be interpreted while keeping in mind the context of systemic racism within the criminal justice system.

Previous research has suggested a history of law enforcement concentration in predominately Black neighborhoods within New Orleans, which may contribute to disproportionate legal repercussions.⁴ Although overdose occurrence did not differ significantly by race in this study, substantial racial differences were found in documented criminal histories. Black decedents were more likely to have a criminal history than White decedents, and these findings must be considered within the broader context of racial disparities when it comes to policing and law enforcement.

In terms of recommendations thus far, law enforcement should prioritize connecting individuals who use illicit substances towards treatment and rehabilitation pathways instead of correctional facilities. Studies have shown that treatment of underlying substance use problems can reduce subsequent drug use and criminal recidivism.⁵ Law enforcement agencies and prosecution offices should also periodically evaluate policing, charging, and prosecution practices for racial disparities and use these findings to create more equitable strategies.

Future directions regarding this research will involve a more comprehensive analysis of decedent data by utilizing medical records and incarceration records to determine any additional similarities and differences among decedents. These would include medical diagnoses, psychiatric conditions, a more in-depth substance use history, time and location of incarceration, and any treatments or services previously accessed. This further analysis may help identify potential points of intervention to target with preventative and rehabilitative services moving forward.

Limitations:

- Civil records were only available for Jefferson Parish, and few were included due to verification difficulty.
- Some decedents had out-of-state warrants and charges which were inaccessible.
- Mental illness statistics were likely underreported as official medical records were not utilized.
- Rates of violence victimization could not be assessed.

SIGNIFICANCE/CLINICAL RELEVANCE:

Identifying disparities in criminal justice involvement among individuals with a history of illicit substance use may uncover inequities and points of intervention that can be addressed in future approaches to substance use treatment, prevention, and rehabilitation.

REFERENCES:

(Sources 1-3 will be included in the Introduction of the poster to provide additional background information)

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