

Patients with a History of Foster Care are at Higher Risk for Drug Overdose

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Background

- History of foster care (HoFC) is associated with poorer mental health and increased substance use and overdose^{1,2}
- Little is known about this in individuals with co-occurring mental health and substance use conditions (concurrent disorder; CD)
- Individuals with CD have the highest rate of overdoses compared to any other drug-using group
- Imperative for development of overdose prevention strategies to examine indicators of overdose risk

Aim: Investigate substance use and overdose history in CD inpatients with and without a history of foster care

Methods

- 131 male and female inpatients with concurrent disorders
- Drug use assessed using the Maudsley Addiction Profile
- Overdose history assessed using self-reported drug overdoses
- Demographics and psychiatric diagnoses were retrieved through patient medical charts
- Data were compared between individuals with and without HoFC.

Demographic Characteristics

	HoFC (N = 21)	No HoFC (N = 109)
Sex (%female) ^a	21 (43%)	109 (34%)
Age	39 ± 11*	29 ± 10*
First Nations or Aboriginal	2	3
White/Black/Asian/Other	14/0/1/2	70/3/9/12
Overdoses	1.45 ± 1.4	1.17 ± 1.7

Note: Data reflect frequency or means and standard deviation, unless otherwise specified
p < .05

Results

1. Substance Use Before Treatment

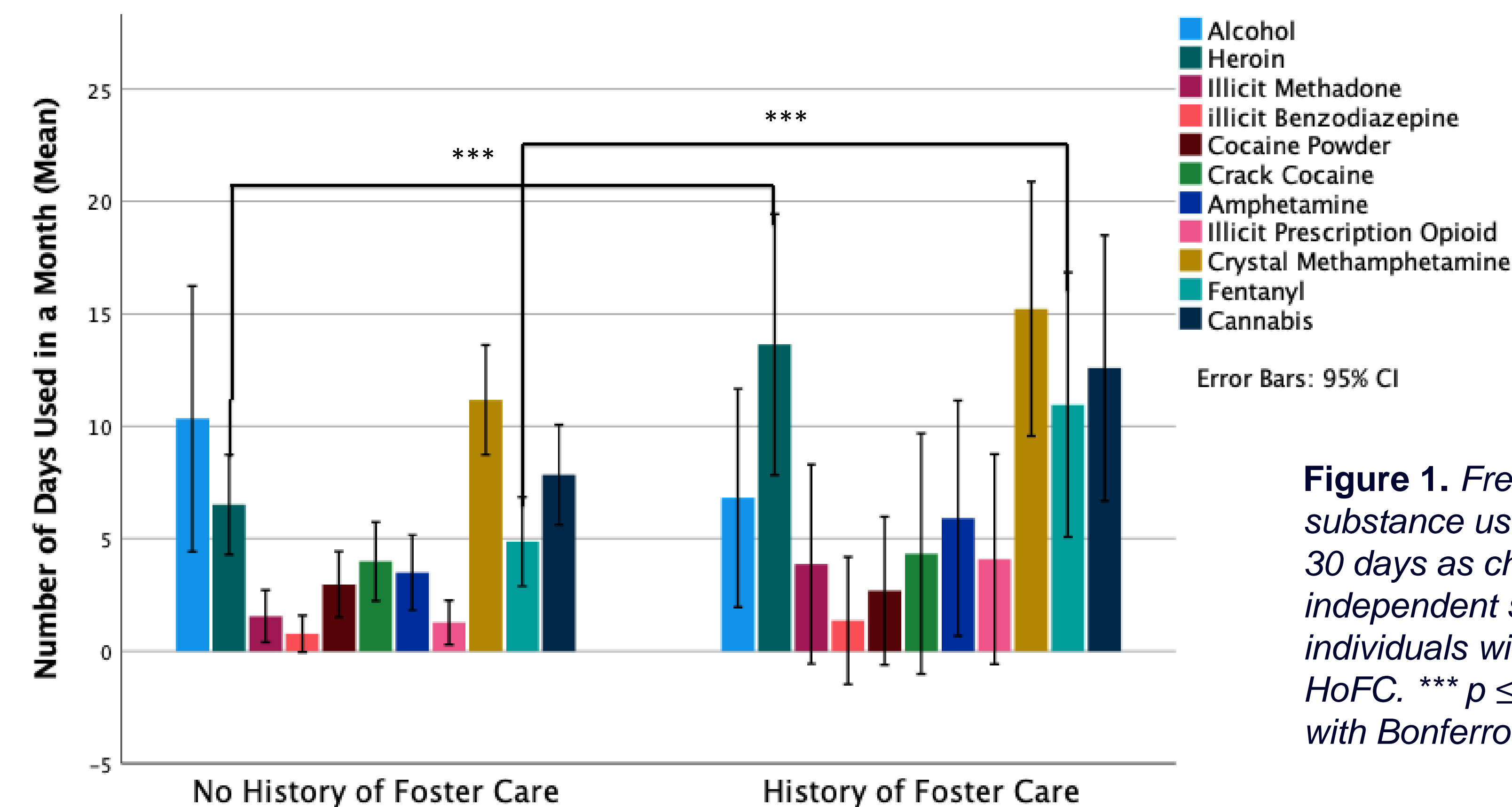


Figure 1. Frequency of substance use within the past 30 days as characterized by independent substances for individuals with and without a HoFC. *** $p \leq .001$ (corrected with Bonferroni Correction)

2. Foster Care History Predicts Greater Likelihood of Having Overdosed

Parameter	df	Estimate	SE	Odd Ratio
Foster Care History	1	1.32	0.59	.27

Note: Independent of polysubstance use, fentanyl use, heroin use, and age, history of foster care predicts a greater likelihood of overdose.

3. Number of Substance Types Used (Polysubstance Use)

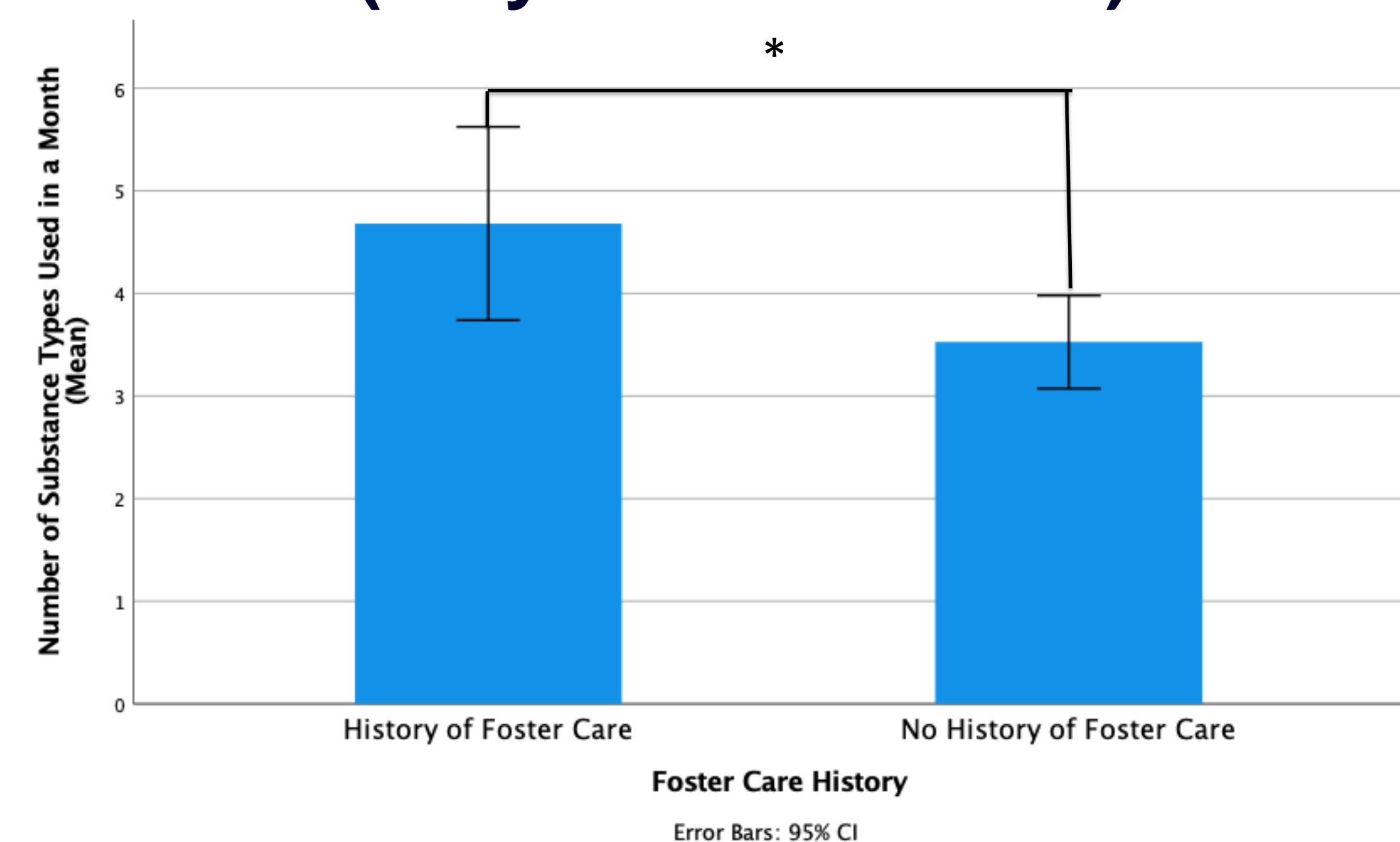


Figure 3. The total number of substances used within 30 days (polysubstance use) for individuals with and without a HoFC and overdose. * $p \leq .05$

4. Substance-Specific Overdoses

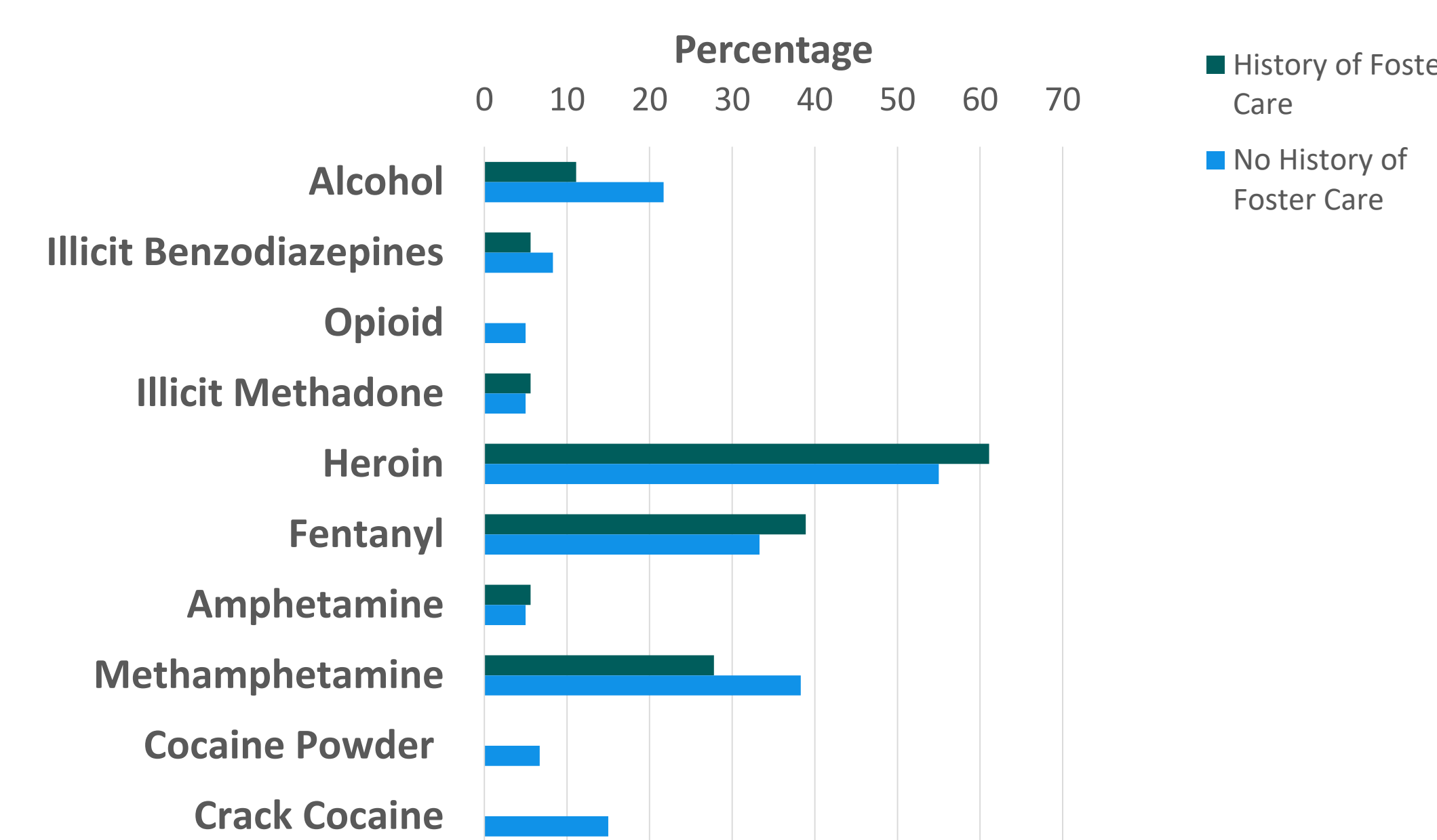


Figure 4. The percentage of individuals who indicated using the substance when they last overdosed, in those with and without a HoFC.

Summary

Patients with HoFC:

- Greater likelihood of overdose
- Greater likelihood of fentanyl, heroin, and polysubstance use
- No differential frequency of opioid-specific (fentanyl, heroin) overdoses or with any other substances

Conclusion

- Findings suggest concurrent disorder patients with a HoFC are at higher risk for overdose, fentanyl, and heroin use.
- The etiology of increased drug overdoses among individuals with a HoFC cannot be ascertained, given the cross-sectional nature of this study.
- Longitudinal studies investigating the potential problems contributing to stimulant use and other drugs linked to foster care are warranted.

Reference / Bibliography

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