

LOUISIANA DEATHS BEHIND BARS 2015-2021



Incarceration Transparency

JUNE 2023

CONTENTS

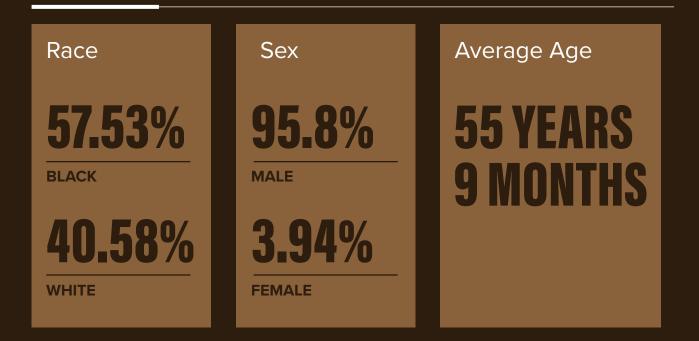
Report Highlights				
Inti	roduction Incarceration in Louisiana Methodology Changes in Federal Data Collection	7 8 10 11		
I.	Who is dying? Race Sex Age Trial Status	13 13 15 17 20		
II.	Where are they dying? Type of Facility Location Within Facility	23 23 25		
III.	When are they dying?	28		
IV.	Why are they dying? Medical COVID-19 Suicide Drugs Accident Violence	31 32 40 46 51 55 57		
Conclusion				
About the project Author Project Participants				
Appendix List of Tables List of facilities with deaths by year				

REPORT HIGHLIGHTS

From 2015 to 2021, at least 1,168 incarcerated people died behind bars in prisons, jails, and youth detention centers across Louisiana. Since our last report analyzing deaths 2015-2019, an additional 375 incarcerated people have died behind bars.

Approximately 86% of known deaths behind bars were of people serving a sentence for conviction of a crime. Deaths of people being held pre-trial, i.e. had not yet had a trial on their criminal charges, constituted 13.44% of all known deaths.

Demographics



The most impacted group of people who died behind bars were Black males, age 55 or older, serving sentences post-conviction.

Causes:

Medical

- Medical conditions were the primary cause of death for all known deaths 2015-2021 (81%).
- Heart disease and cancer were the leading medical causes of death.
- People held pre-trial were 8% of medical deaths and people serving convictions (regardless of the type of facility) were 91% of deaths.

COVID-19

- COVID-19 was recorded as a contributing cause of death for 48 individuals by facility officials and were approximately 18% of the 272 medical deaths from January 2020 to December 2021.
- The average age at time of death for COVID-related deaths skewed older and was 66 years old.
- Of all respiratory deaths 2015-2021, almost half (46%) occurred in 2020 and 2021.
- COVID-related deaths were overwhelmingly recorded in prisons (85%) compared to parish jails (14.58%) and almost 96% of COVID-related deaths were of people serving convictions. However, these data points would benefit from additional investigation and analysis due to the higher number of deaths recorded as "unknown" in 2020 and 2021 for both prisons and jails compared to prior years and the lack of uniform guidance for facility officials on identifying COVID-19 on death records.

Suicide

- Suicides were 6.68% of all known deaths 2015-2021.
- The number of suicides in 2021 is the highest of all years 2015-2021. Suicides were 8.29% of all deaths in 2021.
- Two-thirds of all known suicides occurred in segregation.
- 42% of jail suicides occurred within the first four weeks of admission.
- People held pre-trial were 46% of suicides and people serving convictions (regardless of the type of facility) were 51% of suicides.

Drugs

- Drug overdoses were 5.39% of all known deaths 2015-2021.
- The number of drug overdoses in 2021 is the highest of all years 2015-2021. Drug overdoses were 11.29% of all deaths in 2021.
- People held pre-trial were 30% of drug overdoses and people serving convictions (regardless of the type of facility) were 68% of drug related deaths.

Accidental

- Accidental deaths were 1.46% of all known deaths 2015-2021.
- The number of accidental deaths was highest in 2018.
- People held pre-trial were approximately 18% of accidental deaths and people serving convictions (regardless of the type of facility) were 82% of accidental deaths.

Violence

- Violent deaths were 2.14% of all known deaths 2015-2021.
- The number of violent deaths was highest in 2020. Violent deaths were 3.3% of all deaths in 2020.
- People held pre-trial were 24% of violent deaths and people serving convictions (regardless of the type of facility) were approximately 72% of violent deaths.

Facility Type:

Parish jails accounted for 25% of all known deaths 2015-2021. The majority of accidental, suicide, and drug overdose deaths occurred in parish jails, which house both convicted and pre-trial populations.

- 61% of suicides
- 54% of drug overdoses
- 53% of accidental deaths

State-operated prisons accounted for almost 71% of all known deaths 2015-2021. Over 79% of all medical deaths occurred in a prison. Prisons recorded fewer deaths due to unknown

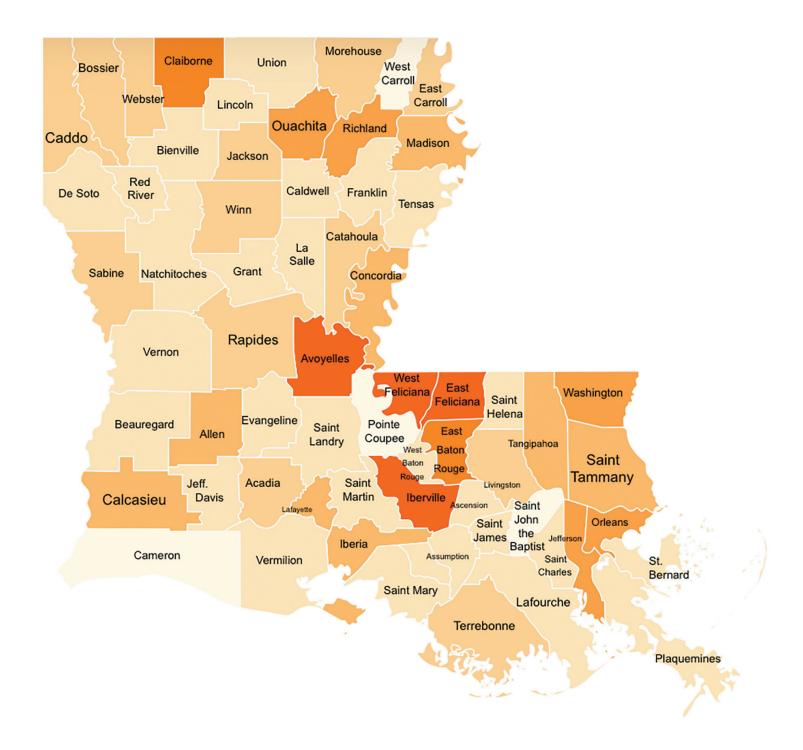
medical causes (0.27%) than jails (24%) and private facilities (21%). For drug overdoses that occurred in prisons, over 90% occurred after five years of incarceration. Both types of facilities – prisons and jails – had substantial increases in mortality rates for convicted populations in 2021. For state prisons, the convicted mortality rate in 2021 is 1.6 times higher than in 2015 and for jails, the 2021 rate is 2.2 times higher.

About:

Since Fall 2019, students at Loyola University New Orleans College of Law have collected records created by local and state authorities for submission under the federal Death in Custody Reporting Act. Several changes in federal data collection have reduced the specificity of data collected. The federal government no longer collects information on pre-existing conditions or incident locations, thus analysis for these data points is limited.

Ninety-five percent of all facilities responded to our public records requests at least once since the project began in Fall 2019.

Heat Map of Known Deaths Behind Bars 2015-2021



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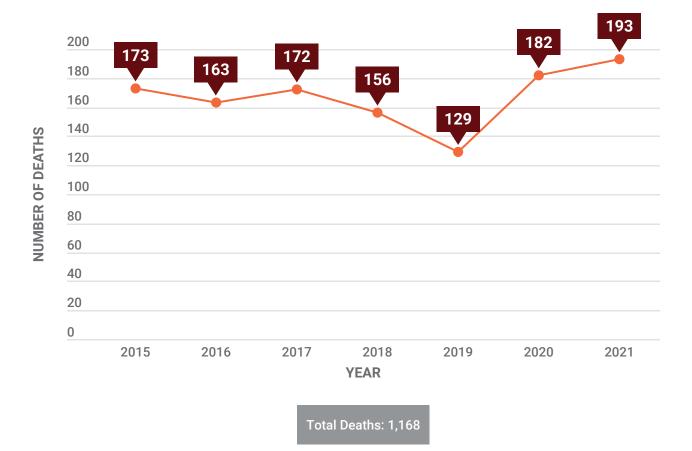
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INTRODUCTION

From 2015 to 2021, at least 1,168 incarcerated people died behind bars in prisons, jails, and youth detention centers across Louisiana. This report is the second comprehensive collection and analysis of deaths behind bars in Louisiana, based on public records requests filed with 122 facilities across the state and six coroners. This is also the first report to include deaths related to COVID-19.

Since our last report analyzing deaths 2015-2019, an additional 375 incarcerated people have died behind bars. Our public records requests also produced documents on an additional 7 deaths that occurred 2015-2019. The most impacted group of people who died behind bars were Black males, age 55 or older, serving sentences post-conviction.



DEATHS BY YEAR

None of the 1,168 known deaths were judicially sentenced to death row. All were either detained before their trial, serving a judicially determined sentence for a set number of years or life, or were detained for a parole or probation violation. The overwhelming majority of people died of medical causes, with the highest rates for heart disease and cancer.

Both Louisiana and the federal government are constitutionally obligated to provide safe and humane conditions for incarcerated people, including constitutionally adequate healthcare.¹ These obligations arise from the Fifth, Eighth, and Fourteenth Amendments to the U.S. Constitution and Article I §§ 2 and 20 of the Louisiana State Constitution.

At the same time, prisons, jails, and detention centers in Louisiana operate without independent oversight, mandatory standards, or public transparency. Parish jails are only required to report deaths of people detained pending trial to their local coroner. Prisons, parish jails, and privately operated facilities are only required to report deaths of people serving sentences to the Louisiana Department of Public Safety and Corrections (DOC) headquarters and the local coroner. Some facilities, but not all, will issue individual press releases when a death behind bars occurs. DOC publishes limited and generalized data on causes of death for incarcerated people convicted of a crime in its quarterly Briefing Book, but does not provide demographic or facility information. Though federal law requires state and local facilities to report deaths to the U.S. Department of Justice, compliance has been inconsistent² and federal analysis based on these death in custody reports do not provide facility level information or disaggregate state data by race, age, or length of stay.

This project, through collecting and publishing data on deaths behind bars, aims to increase transparency of these public institutions and better understand how and why people die behind bars. However, the data presented in this report is likely incomplete due to a lack of responses from certain facilities. As such, this report presents a snapshot of known deaths behind bars.

Incarceration in Louisiana

As of December 2021, the Department of Public Safety and Corrections (DOC) was responsible for 26,377 people serving state sentences for convictions, of which 13,286

¹ The U.S. Supreme Court has held that the U.S. Constitution requires the provision of medical and mental healthcare to incarcerated people consistent with the level of care provided in community. See e.g. Estelle v. Gamble, 429 U.S. 97 (1976); Farmer v. Brennan, 511 U.S. 825 (1994); Brown v. Plata, 563 US 493 (2011).

² See U.S. Senate, Permanent Subcommittee on Investigations, Comm. on Homeland Security & Gov. Affairs, Staff Report: Uncounted Deaths in America's Jails and Prisons (Sept. 20, 2022).

people (50%) served their sentences in a local jail.³ There is no current statewide data on the number of people held pre-trial in Louisiana. The latest available data (mid year 2019) indicated local jails in Louisiana held approximately 16,000 additional people pre-trial.⁴

Since 1989 to present, Louisiana been one of five states leading the nation in both incarceration and violent crime. The state's prison population has more than doubled in the last 30 years. In 2020, Louisiana had one of the highest state incarceration rates per capita and the highest per capita percentage of people (16.6%) serving natural life without the possibility of parole.⁵ Louisiana's incarceration rate is the result of "excessively long or mandatory sentences, limited releases through parole, and multi-billing practices in several parishes."⁶

Louisiana is relatively unique in the U.S. for using local jails to house approximately 50% of people serving their state sentence. Jails are traditionally operated by local sheriffs and are primarily for people detained pre-trial. They are designed for short-term housing and therefore often lack more robust services essential for people serving long-term sentences, including appropriate healthcare, recidivism prevention programming, and skills training. Prisons, on the other hand, are operated by the state and are primarily for people serving a judicially determined sentence after being convicted of a crime. As a result of this bifurcated system, the DOC prioritizes state prison beds for people with longer sentences or serious health needs. Local jails and private operators, such as LaSalle Corrections, house the remaining state population of 50%, in addition to their traditional pre-trial populations. Jails and private operators receive payments per person per day, which was budgeted to cost the state approximately \$166 million for fiscal year 2021-2022.⁷ The daily rate paid by the state during the time period of this study - 2015 to 2021 – increased from \$24.39 to \$26.39.⁸

Beyond jails and prisons, there are also four "secure custody" juvenile detention centers operated by the state Office of Juvenile Justice, as well as thirteen locally operated "nonsecure custody" juvenile detention centers.

Immigration detention facilities are not included in this study. However, Louisiana also has a growing immigration detention population, housed in federally or privately operated facilities

³ La. Dep't Pub. Safety & Corr., Briefing Book, 19 (Jan 2022).

⁴ Bur. of Just. Stat., U.S. Dep't of Justice, Census of Jails, 2005-2019 – Statistical Tables, 20 tbl.8.

⁵ Andrea Armstrong & Marcus Kondkar, Louisiana Justice: Pre-Trial, Incarceration, and Reentry, 11 (Public Welfare Foundation, 2022). ⁶ Id.

⁷ La. Dep't Pub. Safety & Corr., Briefing Book, 102 (Jan. 2023).

⁸ This rate was increased for fiscal year 2019-2020 to \$25.39 and for fiscal year 2020-2021 and thereafter to \$26.39. Act No. 245, La. Reg. Session (2019) (codified as amended at La. Rev. Stat. 15:824(B)(1)(a)).

Methodology

Since Fall 2019, Loyola Law students have filed annual public records requests with all prisons, jails, juvenile detention centers (state and locally operated) in Louisiana. Law students requested records of deaths in custody, including any records prepared and submitted to the U.S. Department of Justice's Bureau of Justice Statistics (BJS)¹⁰ and beginning in Fall 2021, submitted to the U.S. Department of Justice's Bureau of Justice's Bureau of Justice Assistance (BJA) or the Louisiana Commission on Law Enforcement.¹¹ For non-responsive jurisdictions, students also requested reports from six parish coroners under La R.S. 44:19. Students also reviewed news and litigation databases to identify additional unreported deaths.

Our database is admittedly incomplete, but compliance with public records requests under Louisiana Public Records Act § 44:1 *et seq.* has increased since Fall 2019. A facility is recorded as responsive if they provided records for deaths that occurred between 2015-2021. Between Fall 2019 and Fall 2022, the project has now received records from 95% of the 122 facilities surveyed at least once. This is an improvement from 69% in Fall 2020. Students continue to encounter difficulties obtaining records from facilities operated by LaSalle Corrections, a private corporation that manages several parish jails on behalf of the parish sheriff or law enforcement district.

Public records compliance is not uniform across years. Some facilities have provided responses every other year, while others provided responses once after years of noncompliance. The Louisiana Department of Public Safety and Corrections, which administers eight state prisons, has fully responded to each public records request and also sent responses for people legally under their custody but serving their sentence in local jails. The project no longer files public records requests for federal criminal or immigration detention in Louisiana, as responses to those requests often takes several years.

⁹ See Laila Hlass & Mary Yanik, No End in Sight: Prolonged and Punitive Detention of Immigrants in Louisiana, Tul. Univ. Immigr. L. Clinic (May 2021).

¹⁰ Forms collected include CJ-9/CJ-9A (jails), NPS-4/NPS-4A (prisons), CJ-10/CJ-10A (private facilities) and NPS-5/NPS-5A (juveniles) and data submitted/ uploaded to the following websites: <u>https://ojpsso.ojp.gov</u>, <u>https://bjapmt.ojp.gov</u>. Students also received correspondence from some facilities indicating there were zero deaths in that facility.

¹¹Both of these agencies collect information electronically. To review the information collected, see the Bureau of Justice Assistance, Death in Custody Reporting Act, Performance Measures Questionnaire at <u>https://bja.ojp.gov/sites/g/files/xyckuh186/files/media/document/</u> <u>DCRA-Performance-Measure-Questionnaire_508.pdf</u> and Louisiana Commission on Law Enforcement <u>https://lclelsac.com/deathincustody/</u>

The data analyzed in this report is based on the reporting agency's coding and categorization. We do not generally investigate or change the agency coding for the cause of death. If the cause of death is changed by our project due to news reports or litigation documents, that change is noted in the database field "cause of death description." Our project does not have the resources or documents necessary to independently assess the causes of death or other data received. All data utilized in this report, including documents actually received, is available for download and more refined analysis at www.incarcerationtransparency.org

Changes in Federal Data Collection

The federal Death in Custody Reporting Act (2013) requires states receiving federal law enforcement grants to quarterly report specific information on the death of any person incarcerated in a state, local, or contracted facility.¹² In 2020, federal data collection efforts changed significantly. The U.S. Department of Justice changed the bureau responsible for data collection and the new collecting bureau revised the survey, significantly limiting the specificity of data collected.

From 2000-2019, the Bureau of Justice Statistics (BJS) annually collected data directly from facilities via a standard survey. Facility officials completed the survey regardless of whether or not a death occurred. BJS episodically published separate mortality reports for jails and prisons, with their latest reports for each (December 2021) analyzing data from 2000-2019.

The reports and data released by BJS, however, did not provide for analysis by facility and state data is not disaggregated by race, age, or length of stay. Moreover, it was impossible to determine the completeness of the BJS data, particularly for jails, without a facility-level accounting of reporting institutions. Nevertheless, as the sole source of national and comparative data, the data collected by BJS through 2019 is critically important, and in our experience, superior to data subsequently collected since 2020.

In 2020, the Bureau of Justice Assistance (BJA) assumed responsibility for federal data collection. As part of the transition, facilities were required to report deaths in custody to a central state office, which would collect the responses and submit them to federal authorities online. Facilities with zero deaths were not required to report, however, under the new law, BJA could (hypothetically) sanction states that failed to fully report deaths in

¹² 42 U.S.C. 3750 & 3791 (2014) (P.L. 113-242). This law was enacted to address facility compliance issues that arose in implementation of the Death in Custody Reporting Act of 2000. 42 U.S.C. 13704 (2000) (P.L. 106-297).

custody. BJA significantly changed the survey instrument. Some information will not be collected at all under BJA and even when it is collected, it provides less specificity than the BJS data collection 2000-2019.

The following types of important information are no longer available under the new BJA data collection efforts:

Facility population and admissions information

This data is required to calculate mortality rates for local and state jurisdictions.

• Facilities with zero deaths

This data is important for prison and jail administrators to identify best practices, promote cross-facility learning, and replicate implementation.

• Decedent specific data, including trial status, location of deaths and incidents leading to deaths, & pre-existing conditions, among others

This data is essential for facilities to review their existing policies, procedures, and operations to identify areas for improvement, including in security, medical, facility layout, and housing assignments. Trial status is particularly significant for states like Louisiana, which houses people convicted of state offenses in local jails.

Specific illnesses for medical-related causes of death

This data is critical for understanding the healthcare challenges for prisons, jails, and detention centers, as well as for statistical comparisons to causes of death for non-incarcerated populations.

The transition from BJS to BJA has negatively impacted data collection efforts. An investigation by the Permanent Subcommittee on Investigations in the U.S. Senate found that over 1,000 deaths behind bars nationally were not reported in 2020.¹³ For example, the Louisiana Commission on Law Enforcement (LCLE), the central state agency responsible for BJA reporting, submitted a total of 6 deaths in custody for the state of Louisiana, the majority of which were from one parish.¹⁴ In contrast, Loyola Law students, through public records requests and media searches, identified 182 deaths in Louisiana prisons and jails that occurred in 2020. Multiple sheriffs also informed our students that they were no longer required to report deaths in custody for federal data collection.

¹³ See U.S. Senate, Permanent Subcommittee on Investigations, Comm. on Homeland Security & Gov. Affairs, Staff Report: Uncounted Deaths in America's Jails and Prisons (Sept. 20, 2022).

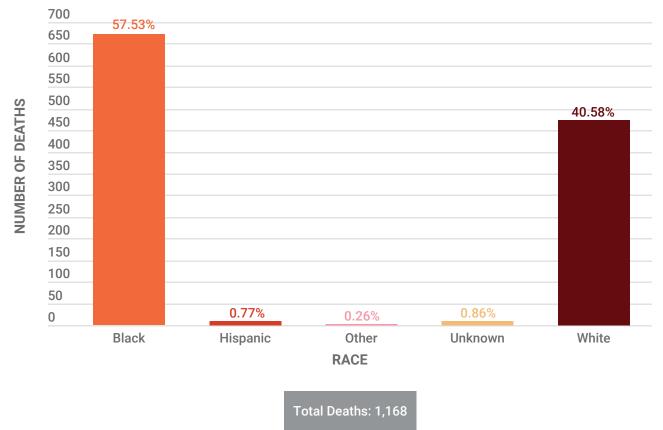
¹⁴ Correspondence with Bob Wertz, Law Enforcement Training Manager, Louisiana Commission on Law Enforcement (Apr. 12, 2022) with excel file attachment "Copy of Death-in-Custody-Reporting-Act-2022-04-12-Request" received via email pursuant to public records request with names redacted.

I. WHO IS DYING?

Race

Deaths behind bars in Louisiana reflect our broader patterns of race in incarceration, with overrepresentation of African-Americans given their share of the state population. As of December 2021, African-Americans were 65.6% of people committed to state custody after conviction, compared to Whites at 34%.¹⁵ In juvenile settings, 83% of youth in secure custody were African-American and 73% in non-secure custody.¹⁶ Demographic data by race for people held pre-trial in local jails is not available by facility or statewide.

Of the 1,168 known deaths from 2015 to 2021, Black people were 57.53% (672) of deaths and White people were 40.58% (474) of deaths. Of the remaining 22 deaths, nine were listed as Hispanic¹⁷ and the remaining were either listed as "other" or "unknown."



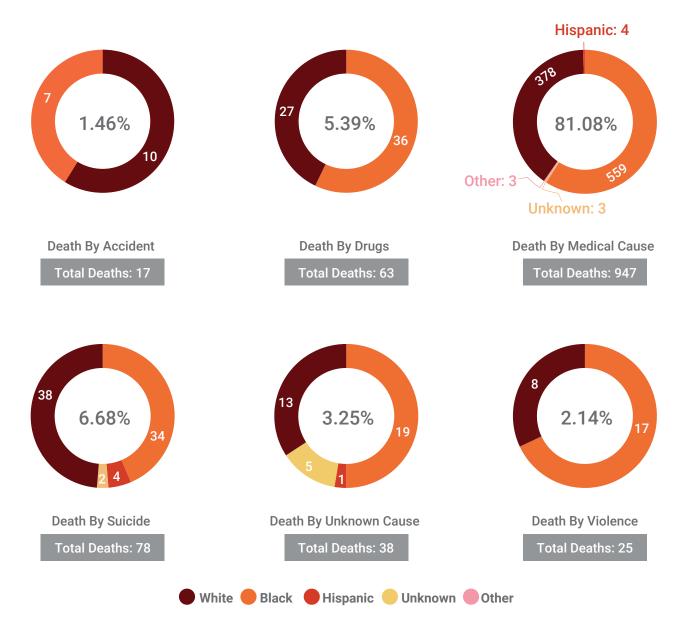
DEATHS BY RACE

¹⁵ La. Dep't Pub. Safety & Corr., Briefing Book, 19 (Jan. 2022).

¹⁶ Office of Juv. Justice, Louisiana Quarterly Juvenile Justice Indicators: 4th Quarter 2021, 4-5 (2021).

¹⁷ Although Hispanic is treated as an ethnicity on the data questionnaire, facility responses treat Hispanic as a racial category.

There appear to be differences among races depending on the cause of death. Over 58% of deaths coded "accidental" by facility administrators were of White people, in contrast to their overall share of deaths at 40.58%. Black people were 68% of all violent deaths, but only 57.53% of all deaths 2015-2021.



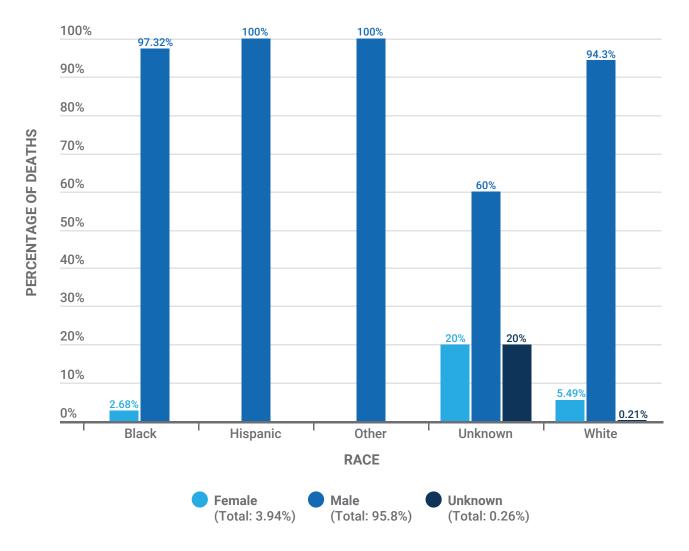
DEATHS BY RACE & CAUSE

Sex

Similar to race, known deaths by sex reflected broader incarceration patterns. Excluding people held pretrial, adult men comprised 95.3% of people serving their sentence after conviction.¹⁸ In juvenile settings, boys were 94% of youth held in secure custody and 91% of youth held in non-secure custody at the end of 2021.¹⁹

Of the 1,168 death records reviewed, 95.80% were for men (1119) versus almost 4% for women (46). 2017 was the deadliest year for women, with a peak of 12 deaths.

The percentage of deaths for White women was higher than that of Black women. Black women were 2.68% of all Black deaths and White women were 5.49% of all White deaths. All Hispanic deaths were male.

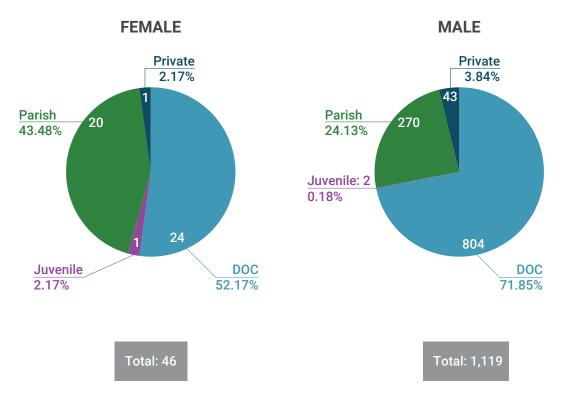


DEATHS BY RACE & SEX

¹⁸ La. Dep't Pub. Safety & Corr., Briefing Book, 19 (Jan 2022).

¹⁹ Office of Juv. Justice, Louisiana Quarterly Juvenile Justice Indicators: 4th Quarter 2021, 4-5 (2021).

Women serving sentences are overwhelmingly housed in local jails after the 2016 flooding of the women's prison in St. Gabriel. At the end of 2021, 65% of the female prison population was housed in a local jail.²⁰ Approximately 43% of deaths of women occurred in a parish jail, compared to 24% of men.



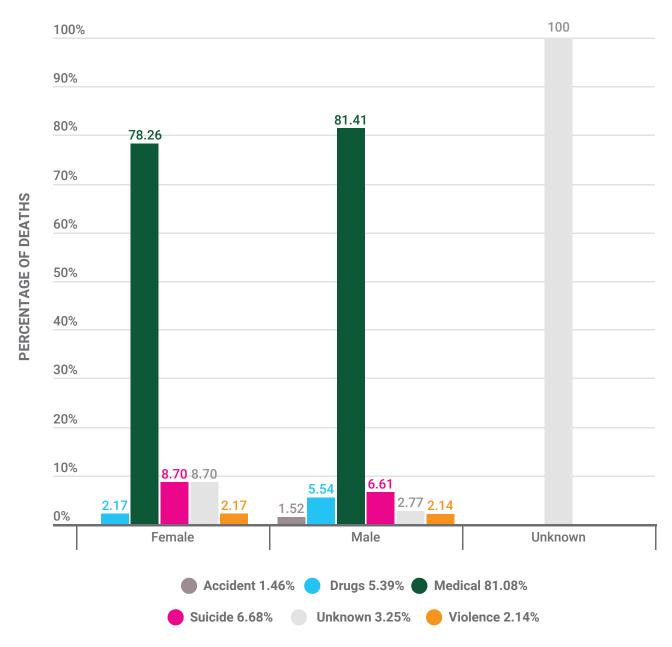
DEATHS BY SEX & FACILITY TYPE

In absolute numbers, there were large differences in the number of women versus the number of men who died by a particular cause of death. However, if the number of deaths is adjusted for the total number of deaths by sex, the differences are less apparent. For example, the share of female deaths caused by violence was 2.17% and 2.14% for men.

Some small differences remain. Accidental deaths were exclusively male with zero female deaths. Suicide was a larger share of female deaths (8.70%) than of male deaths (6.61%) and there were more unknown female deaths, as a share of all female deaths, than for men. Drug related deaths were a larger share of male deaths.

²⁰ La. Dep't Pub. Safety & Corr., Briefing Book, 19 (Jan 2022).

DEATHS BY SEX & CAUSE

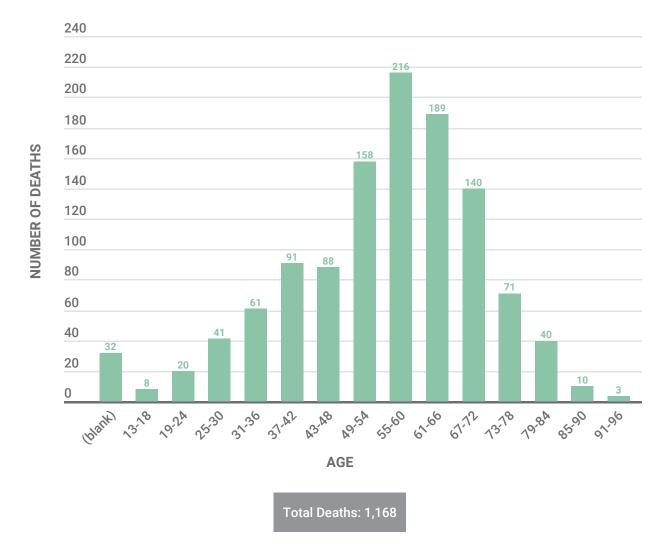


Age

Louisiana has one of the oldest prison populations in the nation due to mandatory minimum and multi-bill sentencing law. Approximately 26% of people serving sentences in Louisiana were over 50 years old at the end of 2021. For fiscal year 2020-2021, over 10% of the convicted population was over 60 years old and the average age was 40.5 years for people serving sentences.²¹

²¹ La. House Committee on Appropriations, House Fiscal Division, Fiscal Year 2023 Executive Budget Review: Department of Corrections, 35 (March 21, 2022).

Known deaths behind bars in Louisiana 2015-2021 range in age from 13-96 years old. Overall, people aged 55-60 years old made up 18.49% of deaths, with people aged 61-66 at 16.18% and 49-54 at 13.53%. The average age at time of death was approximately 55 years, 9 months old.

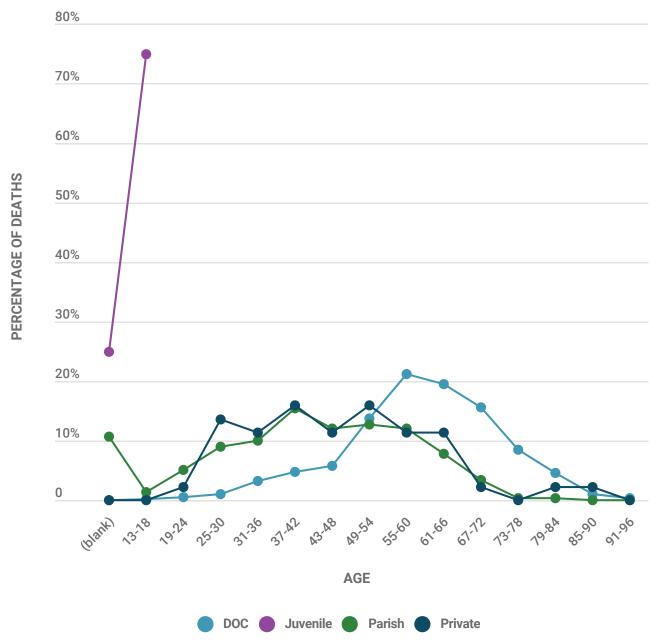


DEATHS BY AGE

When we examine age at death by the type of facility, we see the same pattern for DOC, with the highest percentage of deaths for people aged 55-60 (21.26%), followed by 61-66 years old (19.44%) and 67-72 (15.58%).

Deaths in parish jails and private facilities skewed younger. People aged 37-42 years old had the highest incidence of death in parish jails (15.41%) and in private facilities, people aged 37-42 and 49-54 tied for highest incidences of death (15.91%).

DEATHS BY AGE & FACILITY TYPE



Examining cause of death by age is helpful for understanding which populations are at the highest risk for particular causes of death. For accidental deaths, 29.41% occurred for men aged 61-66. Three out of five of these accidental deaths ages 61-66 involved traumatic brain injuries. Both drug related deaths and suicides skewed younger (aged 37-42) than the overall average age at death and for all other causes of death. Deaths caused by violence were highest for those aged 43-48 years old.

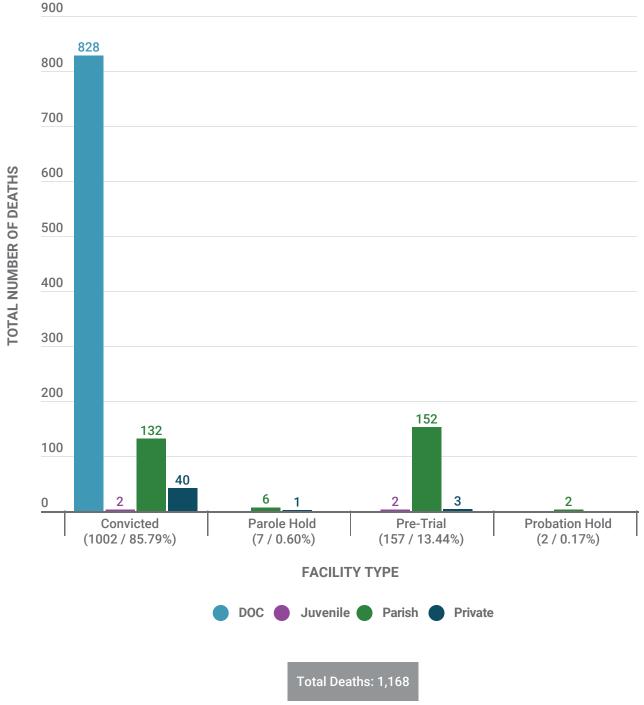
	Accident	Drugs	Medical	Suicide	Unknown	Violence
(blank)	5.88%	6.35%	1.37%	5.13%	21.05%	8.00%
13-18	0.00%	1.59%	0.00%	5.13%	5.26%	4.00%
19-24	5.88%	3.17%	0.84%	7.69%	2.63%	8.00%
25-30	5.88%	12.70%	1.80%	14.10%	5.26%	8.00%
31-36	5.88%	14.29%	3.70%	15.38%	0.00%	16.00%
37-42	17.65%	26.98%	5.39%	19.23%	7.89%	8.00%
43-48	11.76%	15.87%	6.02%	15.38%	5.26%	20.00%
49-54	17.65%	7.94%	14.36%	10.26%	10.53%	8.00%
55-60	0.00%	7.94%	20.59%	5.13%	23.68%	12.00%
61-66	29.41%	3.17%	18.27%	2.56%	13.16%	8.00%
67-72	0.00%	0.00%	14.68%	0.00%	2.63%	0.00%
73-78	0.00%	0.00%	7.39%	0.00%	2.63%	0.00%
79-84	0.00%	0.00%	4.22%	0.00%	0.00%	0.00%
85-90	0.00%	0.00%	1.06%	0.00%	0.00%	0.00%
91-96	0.00%	0.00%	0.32%	0.00%	0.00%	0.00%
Total	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

DEATHS BY AGE & CAUSE OF DEATH

Trial status

Approximately 86% of known deaths behind bars were of people serving a sentence for conviction of a crime. Deaths of people being held pre-trial, i.e. had not yet had a trial on their criminal charges, constituted 13.44% of all known deaths.

DEATHS BY TRIAL STATUS & FACILITY TYPE



Deaths for people serving convictions occurred primarily within DOC prisons (828 deaths for 70.89% of total deaths), but people with convictions also died serving their sentence in parish jails (132 for 11.3% of deaths), private facilities (40 deaths or 3.42%), and juvenile facilities (2 deaths).

For convicted populations, the mortality rate substantially increased regardless of which type of facility (parish or state) the person died in. DOC officials have indicated they

generally assign older people and those with serious medical conditions to serve their sentence in a state-operated prison, with the remaining younger and/or healthier population housed in local jails.

Both types of facilities – prisons and jails – had substantial increases in mortality rates for convicted populations in 2021. For state prisons, the convicted mortality rate in 2021 is 1.6 times higher than in 2015 and for jails, the 2021 rate is 2.2 times higher.

Year (Dec.)	Total convicted population	Convicted mortality rate per 100k (all facilities)	DOC Housed per 100k	DOC Mortality Rate per 100k	Parish Housed (Incl. TWP) per 100k	Parish Mortality Rate per 100k
2015	36,377	407	18,430	646	17,947	117
2016	35,682	395	15,162	765	20,520	63
2017	33,739	406	15,152	779	18,587	91
2018	32,397	417	14,880	739	17,517	103
2019	31,609	345	15,042	632	16,567	72
2020	26,770	586	13,903	964	12,867	124
2021	26,377	663	13,091	1039	13,286	256

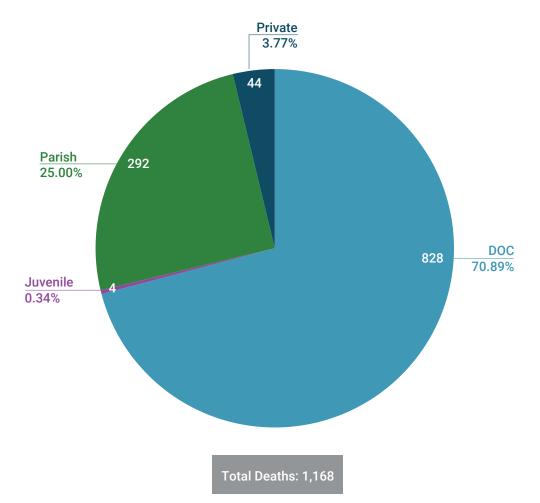
MORTALITY RATE - CONVICTED POPULATION

* Mortality rate is based on convicted population for DOC or parish respectively

II. WHERE ARE THEY DYING?

Type of Facility

Louisiana has several different types of incarceration and detention settings, including state operated prisons and youth detention centers, locally operated jails and youth detention centers, as well as privately managed jails and transitional work programs. Of the 1,168 known deaths, the majority occurred within state operated prisons, though deaths occurred in all types of facilities during the 2015-2021 period of review.

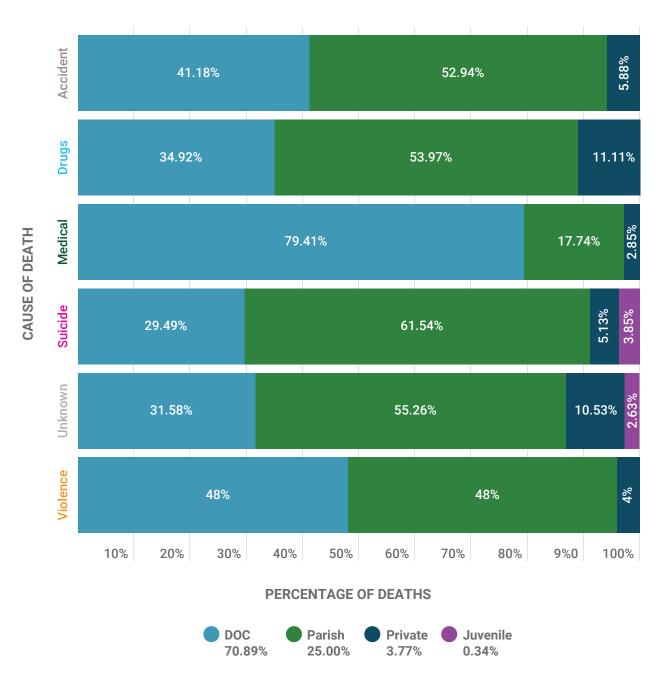


DEATHS BY FACILITY TYPE

Parish jails had the largest shares of unnatural deaths, which includes deaths coded as accidental, suicide, drug overdose, and violence. For example, of all suicides, over 61% occurred in parish jails, compared to 29% in state prisons and five percent in private facilities. Similarly, for drug-related deaths, almost 54% occurred in a parish jail. Jails also

reported the majority of deaths due to unknown causes. Jails and prisons were tied for percentages of violent deaths.

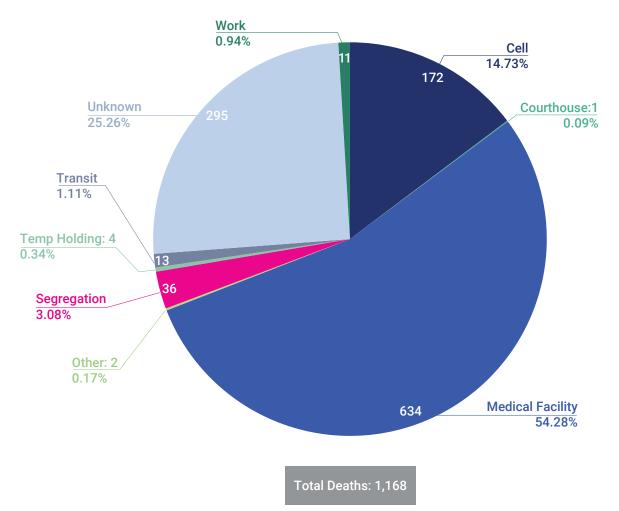
The overwhelming majority of medical deaths (79%) occurred in state prisons.



DEATHS BY FACILITY TYPE & CAUSE

Location within facility

Analyzing the incident location is critical for identifying particular areas within a facility where deaths are occurring and adopting improved policies and practices to reduce preventable deaths in those location. The majority of deaths (54%) occurred in medical spaces either within the facility or in a few cases, death was pronounced at an external facility. However, deaths occurred in a variety of other spaces within prisons, jails, and youth detention centers, including cells (almost 15%), segregation (3%), and in transit (1%).

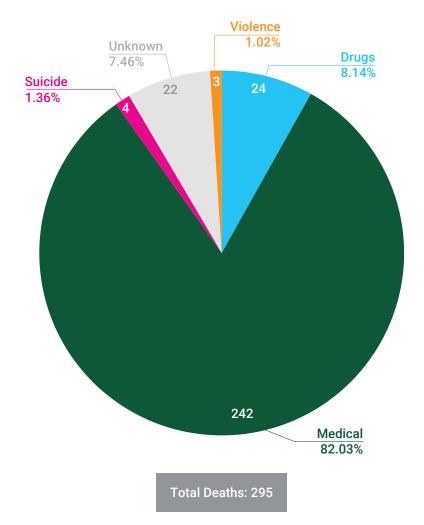


DEATHS BY INCIDENT LOCATION

The change in federal data collection has negatively impacted this data point as this information is no longer collected. In the first report analyzing deaths 2015-2019, only 65 death locations (approximately 8%) were unknown. In this report, there were 295 unknown death locations, which was approximately 25% of all deaths 2015-2021.

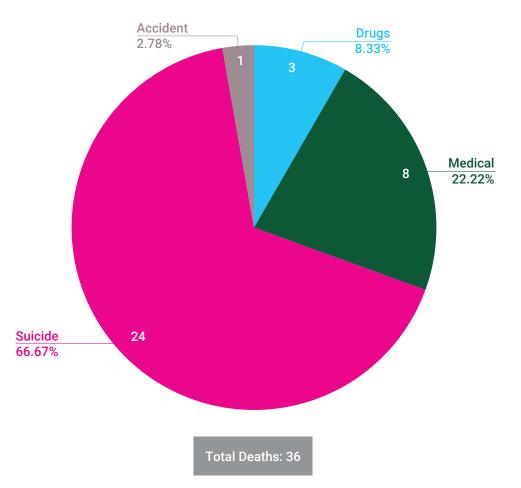
Of the 295 unknown incident locations, 82% of deaths were due to medical causes. To the extent that these deaths may have occurred in cells or segregation, these deaths would

raise questions about whether the deaths may have been preventable if they had occurred in a medical setting. The unknown location for drug-related deaths (8.14%) is also troubling, since these unnatural deaths are generally considered preventable with proper treatment and observation.



DEATHS IN UNKNOWN LOCATIONS BY CAUSE

Deaths in segregation may indicate challenges for custodial supervision and/or reflect the unique isolation of segregation cells. Segregation, more commonly known as solitary confinement, is usually employed for discipline for rule violations or for close observation/ suicide watch. In segregation, a person is typically allowed out of their 6x9 foot cell for 1-2 hours each day, but may otherwise be isolated from human interaction, denied visitation or programming, as well as other privileges.²² Unnatural deaths in segregation are particularly concerning, since many facilities have additional restrictions on items that are allowed in segregation cells. Suicides were 2/3 of all known deaths occurring in segregation. Deaths due to drug overdoses were eight percent of all segregation deaths.

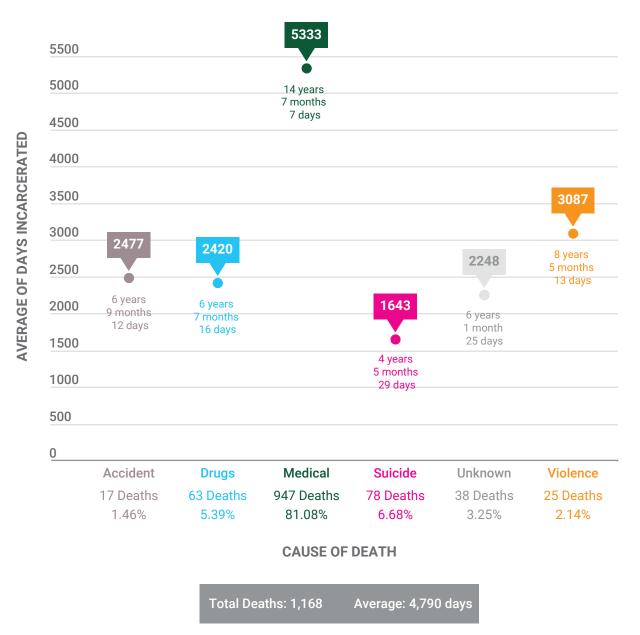


DEATHS IN SEGREGATION BY CAUSE

Since incident location is no longer documented in federal data collections after 2019, the potential for coding and data errors increases with more minute analysis on incident location by cause of death and type of facility.

III. WHEN ARE THEY DYING?

The average number of days incarcerated for all causes of death and all facilities was 4,790 days, or approximately 13 years. The longest average length of incarceration prior to death was for medical-related causes of death, constituting 81% of all deaths 2015-2021. People died of medical related causes on average after 14 and a half years. The shortest average length of incarceration was for deaths due to suicide.



DEATHS BY CAUSE & AVERAGE DAYS INCARCERATED

The cause of death and the average number of days incarcerated varied significantly when examined by type of facility.

Over seventy percent of all deaths behind bars 2015-2021 were in state-operated prisons and on average occurred after being incarcerated for 17 years, 3 months, and 12 days. For medical-related deaths in state prisons – which were over 90% of all deaths in state custody – the average time served was 6,442 days or over 17 and a half years. For state prisons, accidents had the shortest average days incarcerated at 11 years.

	# of deaths	% of deaths	Average days incarcerated	Days in Years/Months/Days
DOC	828	70.89%	6312.18	17 years, 3 months, 12 days
Accident	7	0.85%	4163.86	11 years, 4 months, 25 days
Drugs	22	2.66%	5912.59	16 years, 2 months, 8 days
Medical	752	90.82%	6442.29	17 years, 7 months, 20 days
Suicide	23	2.78%	4306.61	11 years, 9 months, 15 days
Unknown	12	1.45%	4615.80	12 years, 7 months, 19 days
Violence	12	1.45%	5467.42	14 years, 11 months, 19 days
Juvenile	4	0.34%	26.00	26 days
Suicide	3	75.00%	26.00	26 days
Unknown	1	25.00%		
Parish	292	25.00%	556.83	1 year, 6 months, 9 days
Accident	9	3.08%	455.00	1 year, 2 months, 30 days
Drugs	34	11.64%	184.59	6 months, 2 days
Medical	168	57.53%	722.76	1 year, 11 months, 22 days
Suicide	48	16.44%	257.72	8 months, 13 days
Unknown	21	7.19%	645.58	1 year, 9 months, 6 days
Violence	12	4.11%	370.80	1 year, 4 days
Private	44	3.77%	1845.68	5 years, 18 days
Accident	1	2.27%	6848.00	18 years, 8 months, 30 days
Drugs	7	15.91%	1536.17	4 years, 2 months, 15 days
Medical	27	61.36%	1843.81	5 years, 16 days
Suicide	4	9.09%	2022.25	5 years, 6 months, 14 days
Unknown	4	9.09%	26.00	26 days
Violence	1	2.27%	1684.00	4 years, 7 months, 10 days
Total	1168	100.00%	4790.35	13 years, 1 month, 10 days

DEATHS BY CAUSE, AVERAGE DAYS INCARCERATED & FACILITY TYPE

Jails, which are primarily operated by local parishes, had lower average days incarcerated prior to death than both state and privately operated facilities. The average length of incarceration for all jail deaths was approximately a year and a half. The longest average period of incarceration before death, similar to state prisons, was for medical-related deaths. The average length of incarceration prior to a medical-related death in a jail was almost two years. Deaths due to violence occurred on average at one year of incarceration and drug-related deaths on average at six months. Suicides, on average, occurred within the first year.

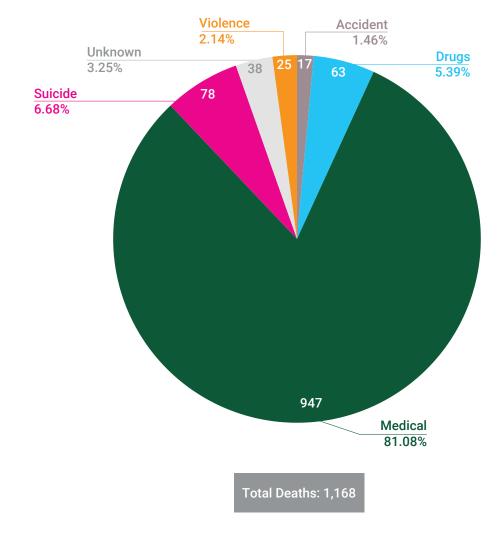
Privately operated facilities had an average incarceration length of five years prior to death for all causes. Records for two of the four deaths due to unknown causes do not indicate the length of incarceration. Accordingly, the 26 average days for deaths due to unknown causes is likely inaccurate.

Juvenile prisons had four deaths from 2015-2021, three of which occurred in the first month of incarceration.

IV. WHY ARE THEY DYING?

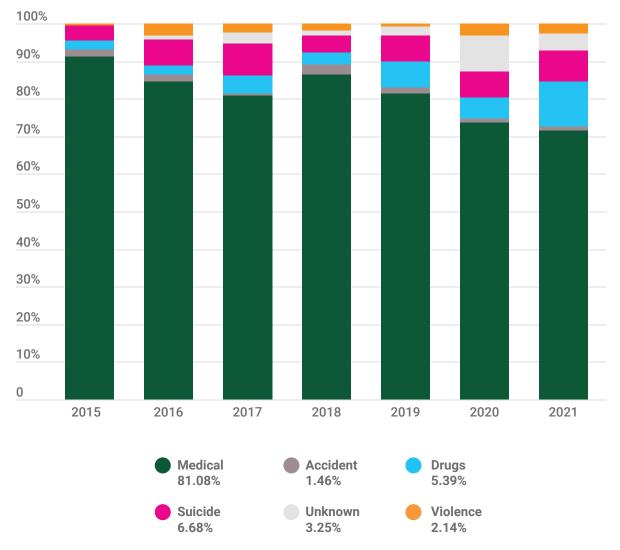
Over three quarters of known deaths 2015-2021 (81.08%) were related to medical illness according to agency records. The second leading cause of death at 6.68% was completed suicides. Drug overdoses were third at 5.39%. In comparison to the first report analyzing deaths 2015-2019, the percentage of deaths due to medical illness decreased (from 85.75%) and the share of deaths due to drugs (from 3.56%) and suicide (from 6.23%) both increased.

It is important to note that several categories of death may be interrelated. For example, a person's cause of death may be recorded as accidental, suicide or violent, however in some cases, advocates report that drugs may have played a role in those deaths as well. In addition, deaths may be coded medical by facility, but drugs may have precipitated the medical condition that caused death.



DEATHS BY CAUSE

When examined by year, there was a substantial increase in percentage of deaths due to drugs and suicide since 2015. The percentage of deaths caused by drugs rose steeply in 2021 to 11.92% of deaths that year. After several years with lower percentages, violent deaths were a higher share of deaths in 2020 (3.3%) and 2021 (2.59%). The percentage of deaths due to suicide in 2021 (8.29%) is approaching the 2017 peak (8.72%).

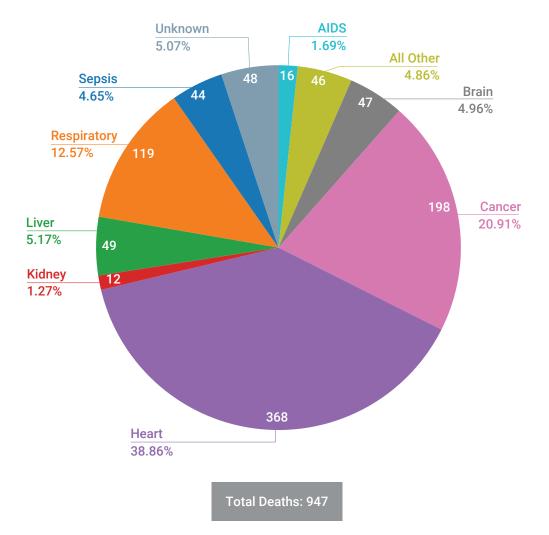


DEATHS BY CAUSE & YEAR

Medical

Since 2015, 947 people have died of medical causes behind bars, including 272 people in 2020-2021 alone. People held pre-trial were 8% of medical deaths and people serving convictions (regardless of the type of facility) were 91% of deaths. The leading causes of medical-related deaths behind bars 2015-2021 identified by facility officials were cancer and heart attacks. These percentages are roughly consistent with the 2015-2019 report.

The deaths listed as "unknown" concern deaths at facilities that either redacted the medical cause of death, failed to provide descriptive details on the cause of death, or described the deaths as the result of "natural causes" without additional details. Deaths listed under "all other" include deaths due to sickle cell, complications from hernia surgery, Alzheimer's, bowel torsion, and gastric ulcers, among others.



DEATHS BY MEDICAL CAUSE

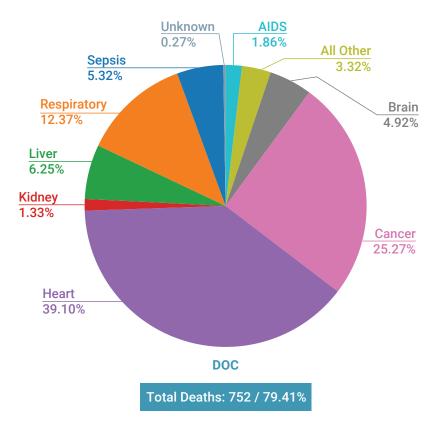
Approximately 13% of known medical deaths from 2015 to 2021 were due to respiratory illness, an increase of 2% from the 2015-2019 percentages. This increase in respiratory deaths as a percentage of all medical deaths was likely the result of COVID-19 (discussed in more detail in the next section).

Of the known medical deaths, almost 80% of reported deaths 2015-2021 occurred in state-operated prisons. These percentages are consistent with the distribution of deaths 2015-2019.

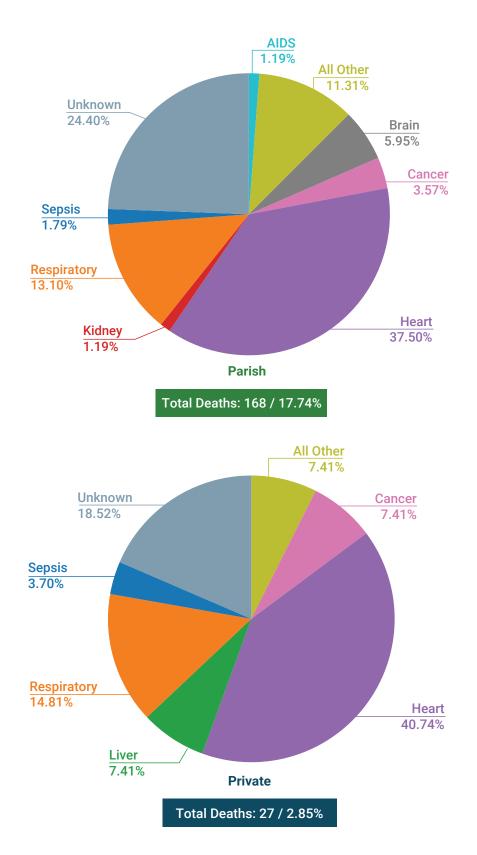
For all types of facilities (state, parish jails, and private) except juvenile, heart disease was the leading medical cause of death. However, the second and third leading medical causes of death by the type of facility differ significantly. For state prisons, approximately 25% of medical deaths were due to cancer and approximately 13% were due to respiratory causes.

For parish jails, the second leading cause of medical deaths (24%) was unknown. The third leading cause of death in parish jails was respiratory (13%). Privately-operated facilities were similar to jails. In these facilities, unknown causes (18.52%) was second, and respiratory causes (14.81%) were third.

Prisons (0.27%) have fewer deaths due to unknown medical causes than jails (24%) and private facilities (18.52%).

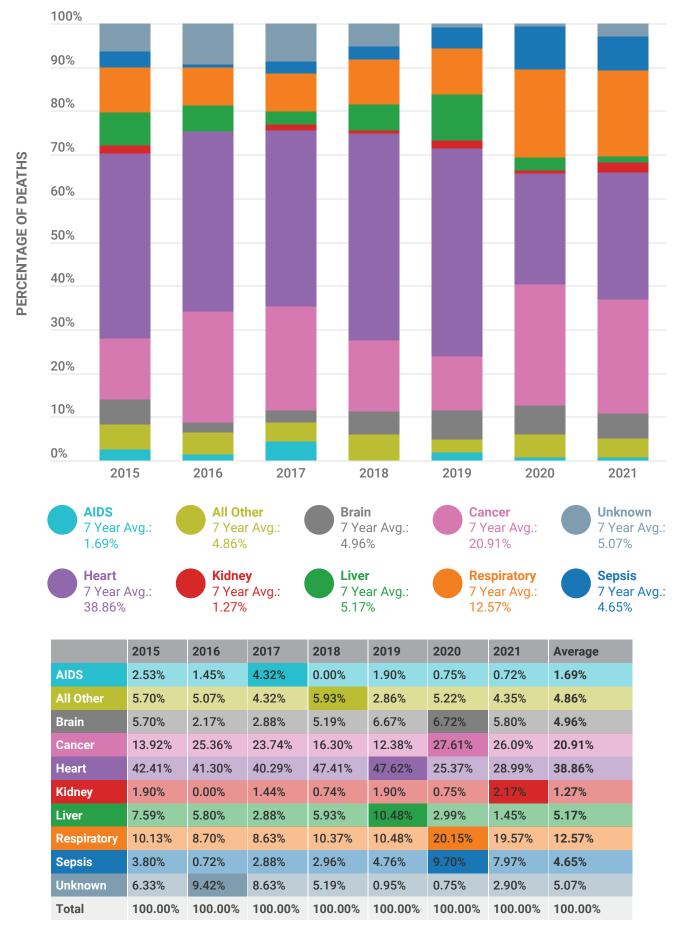


MEDICAL DEATHS BY CAUSE & FACILITY TYPE



Examining deaths by year indicates several categories of medical cause were the highest percentages of deaths for a given year in 2020, including deaths due to brain diseases, cancer, respiratory causes and sepsis. Deaths due to complications from HIV/AIDS appear to be decreasing as a percentage of yearly deaths after a highpoint in 2017. Deaths due to liver and heart disease were highest in 2019 as a percentage of yearly deaths.

MEDICAL CAUSE OF DEATH BY YEAR



In general, the leading causes of medical-related deaths across race appear to be consistent, with heart disease and cancer the most common cause of death regardless of race. Black people, who are overrepresented behind bars, were also the clear majority of deaths for medical causes of death. While Black people were 57.53% of all known deaths 2015-2021, they were 59.03% of medical deaths.

Cause of Death	Black	Hispanic	Other	Unknown	White	Total
AIDS	1.16%	0.00%	0.00%	0.00%	0.53%	1.69%
All Other	3.27%	0.00%	0.11%	0.00%	1.48%	4.86%
Brain	2.85%	0.00%	0.00%	0.00%	2.11%	4.96%
Cancer	11.51%	0.11%	0.00%	0.00%	9.29%	20.91%
Heart	23.65%	0.11%	0.11%	0.32%	14.68%	38.86%
Kidney	0.95%	0.00%	0.00%	0.00%	0.32%	1.27%
Liver	2.32%	0.00%	0.11%	0.00%	2.75%	5.17%
Respiratory	7.81%	0.00%	0.00%	0.00%	4.75%	12.57%
Sepsis	2.53%	0.00%	0.00%	0.00%	2.11%	4.65%
Unknown	2.96%	0.21%	0.00%	0.00%	1.90%	5.07%
Total	59.03%	0.42%	0.32%	0.32%	39.92%	100.00%

MEDICAL DEATHS BY RACE

The average number of days incarcerated prior to medical death was longer for 2015-2021 (5,333 days) than it was for 2015-2019 (5,170 days). It was longest for state prisons (approximately 17 and a half years), compared to privately operated facilities (almost 5 years) and parish jails (almost 2 years).

Deaths due to sepsis, which is caused when a person's response to fighting infection damages internal tissues and organs, in two parish jail cases occurred within two months of admission, with the remaining jail sepsis death occurring after 6 years. Forty out of 44 sepsis deaths occurred in state prisons. Early intervention, through antibiotics, is critical as the incidence of death from sepsis increases quickly and sharply.

	DOC	Parish	Private	Total
AIDS	5483.57	420.50	-	4850.69
All Other	6713.28	144.44	3572.50	3946.16
Brain	6850.25	2560.20	-	5917.63
Cancer	5603.02	348.67	2261.50	5408.07
Heart	7013.42	558.72	1235.82	5803.68
Kidney	6681.20	69.00	-	5579.17
Liver	3574.96	-	27.50	3430.16
Respiratory	7760.55	1228.50	2561.75	6354.56
Sepsis	6514.10	818.33	6603.00	6127.77
Unknown	2414.50	572.58	1523.20	760.07
Average	6442.29	722.76	1843.81	5333.32
	17 years, 7 months, 20 days	1 year, 11 months, 22 days	5 years, 16 days	14 years, 7 months, 7 days

MEDICAL DEATHS, FACILITY TYPE & AVERAGE DAYS INCARCERATED

People serving convictions died earlier in jails than in state prisons for the same category of medical deaths. On average, people serving convictions in prisons died on average 17 and a half years after admission, compared to people serving convictions in jails, who died on average three years and five months after admission. For example, people serving convictions died of cancer on average at 15 years and four months in state prisons and in local jails at eleven months. Similarly for heart-related deaths, people serving convictions in state prisons died on average at 19 years, but died in local jails at one year and six months.

There are several potential explanations for this disparity in time served prior to death for convicted populations. First, state corrections officials house people serving longer convictions or those with more serious medical needs in state prisons. Thus the people serving convictions in a local jail are generally serving shorter sentences overall. Second, when reporting deaths, jails may be listing the date of admission for people serving convictions as the date of admission *to their specific facility* instead of the *date of admission to custody more generally*. Accordingly, people who are serving convictions may have

been in custody longer, but housed in another facility. Last, healthcare systems in jails are generally less robust than those available in prisons, thus jail-based healthcare systems may be less equipped to detect, diagnose, and treat serious medical conditions.

	DOC Convicted	Parish Convicted	Private Convicted	Total
AIDS	5483.57	-	-	5483.57
All Other	6713.28	268.67	3572.50	5351.18
Brain	6850.25	3623.57	-	6324.98
Cancer	5603.02	543.00	2261.50	5541.53
Heart	7013.42	1016.22	1235.82	6332.22
Kidney	6681.20	15.00	-	6075.18
Liver	3574.96	-	27.50	3430.16
Respiratory	7760.55	1375.59	3291.00	6661.87
Sepsis	6514.10	2370.00	6603.00	6417.55
Unknown	2414.50	946.95	1523.2	1154.68
Average	6442.29	1242.15	1900.35	5810.05
	17 years, 7 months, 20 days	3 years, 4 months, 26 days	5 years, 2 months, 14 days	15 years, 10 months, 27 days

MEDICAL DEATHS, FACILITY TYPE & AVERAGE DAYS INCARCERATED FOR CONVICTED POPULATIONS

Unlike our first report analyzing deaths 2015-2019, it is now impossible to determine if a death is caused by a medical condition that pre-existed the person's incarceration. In 2020, the U.S. Department of Justice revised the survey of prison, jail, and detention deaths and eliminated this question from data collection. This information is one critical element for understanding the quality of healthcare services behind bars.

The Department of Public Safety and Corrections does identify whether a death is "expected" or "unexpected." However, a death may be "expected" regardless of whether the medical condition developed before or after the person's admission to the facility. In only a few cases, facility officials noted a pre-existing condition in describing the cause of death. As these designations are not evenly applied, we can no longer determine whether or not a death was due to a pre-existing condition for deaths after 2019.

For deaths 2015-2019, at least 53% of medical deaths were **not** due to a preexisting medical condition. These deaths were exclusively detected, diagnosed, and treated by the prison or jail healthcare providers. Only medical deaths due to three diseases (HIV/AIDS, liver, and kidney diseases) were more likely to be due to a pre-existing condition prior to incarceration. The development of - and death from - other diseases during incarceration is likely related to the length of sentences in Louisiana and may implicate the general lack of preventative health care for incarcerated adults under the age of 50 years old.²³

The average age at time of death for medical-related deaths was almost 59 years old. The average age in prisons was 61 years old, in jails almost 49 years old, and in private facilities 51 and a half years old.

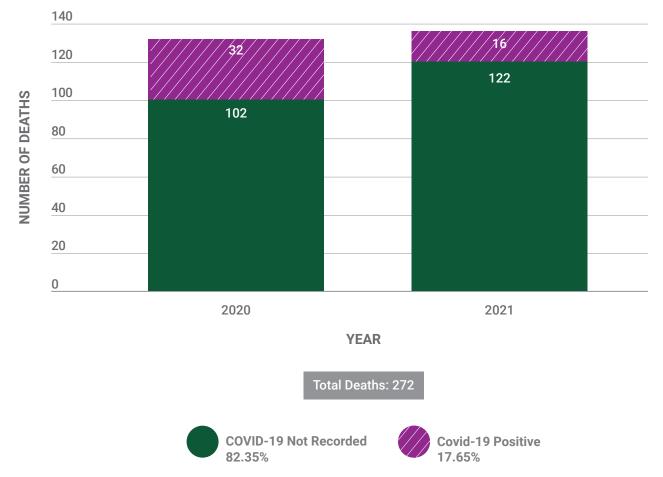
COVID-19

On March 11, 2020, Governor John Bel Edwards of Louisiana issued his first emergency order related to COVID-19, which was closely followed by the March 20, 2020 statewide stay-at-home order.²⁴

²³ For more discussion of preventative health care policies in state prisons in Louisiana, see Andrea Armstrong, Bruce Reilly, & Ashley Wennerstrom, Study Brief: Adequacy of Healthcare Provided in Louisiana State Prisons, 4-5 (May 2021) at <u>https://www.loyno.edu/sites/default/files/2021-05/DPSC_Healthcare_Brief.pdf</u>

²⁴ Governor Edwards, <u>Emergency Proclamation 25</u> (March 11, 2020); Governor Edwards, <u>Emergency Proclamation 33</u> (March 20, 2020).

MEDICAL DEATHS RELATED TO COVID-19



From January 2020 to December 2021, at least 272 people died behind bars due to medical causes according to administrators of these facilities. Of these 272 people, facility administrators noted COVID-19 in the cause of death descriptions for 48 individuals (approximately 18%). The first officially identified COVID-related death in a Louisiana-operated prison or jail in our dataset occurred on April 18, 2020 in Louisiana State Penitentiary (Angola).

COVID-related deaths were overwhelmingly recorded in prisons (85%) compared to parish jails (14.58%) and almost 96% of COVID-related deaths were of people serving convictions. However, these data points would benefit from additional investigation and analysis due to the higher number of deaths recorded as "unknown" in 2020 and 2021 for both prisons and jails compared to prior years and the lack of uniform guidance for facility officials on identifying COVID-19 on death records.

It is possible that the number of COVID-related deaths is higher than reported. For example, one person died at Lafourche Parish jail on March 5, 2020 with administration officials noting that his oxygen levels were low immediately prior to his death. Another person at Angola prison died of a pulmonary thromboembolism – which has been linked to

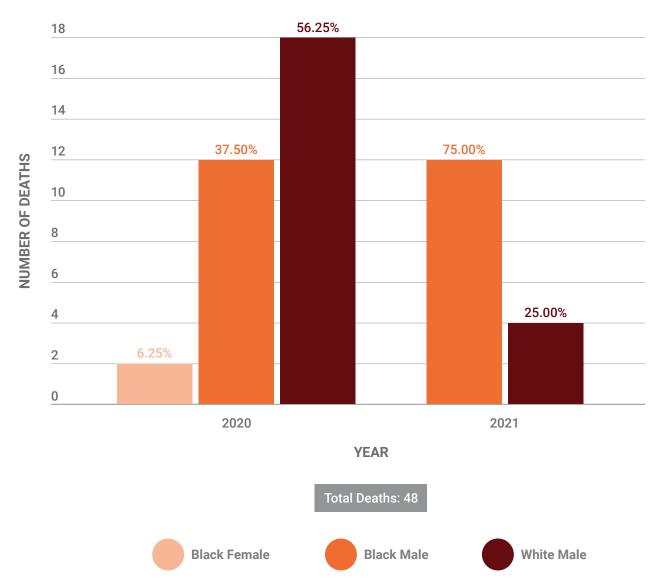
COVID-19²⁵ - on March 9, 2020. Neither of these death records noted COVID-19 in the cause of death descriptions and both pre-dated the governor's first emergency proclamation.

In addition, this analysis of the impact of COVID-19 on deaths behind bars does not include deaths due to suicide, violence, drugs, or accidents. In response to the pandemic, prisons and jails limited or suspended visitation and educational / vocational programming while also increasing the use of isolation within the prison to limit transmission of COVID-19. Facilities also had fewer staff on site due to COVID-19 infections and deaths. These pandemic-related changes in the prison and jail environment may have played a role in the higher numbers of death in 2020 and 2021 for non-medical causes.

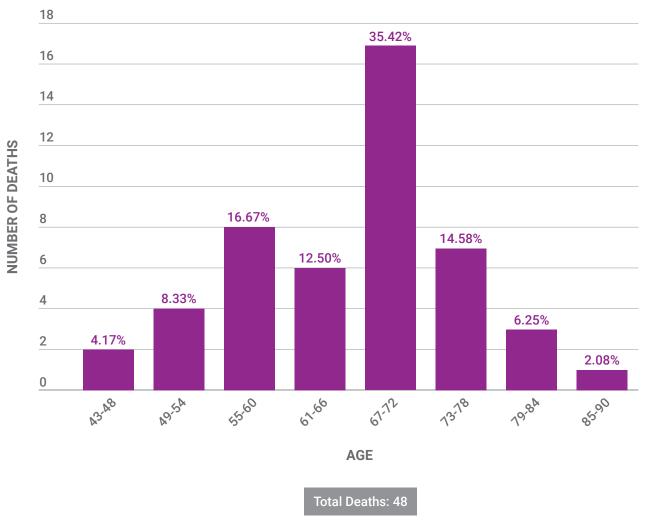
COVID-related deaths appear different than overall death percentages by race and gender. Black people were approximately 54% of these deaths, compared to approximately 58% overall. White people were 46% of COVID-related deaths, compared to approximately 41% of overall deaths. The only female deaths (2) were Black.

²⁵ Angeliki Mouzarou et al., <u>Pulmonary Embolism in Post-COVID-19 Patients, a Literature Review: Red Flag for Increased Awareness?</u> 4 Springer Nature Compr Clin Med. 190 (Aug. 19 2022).





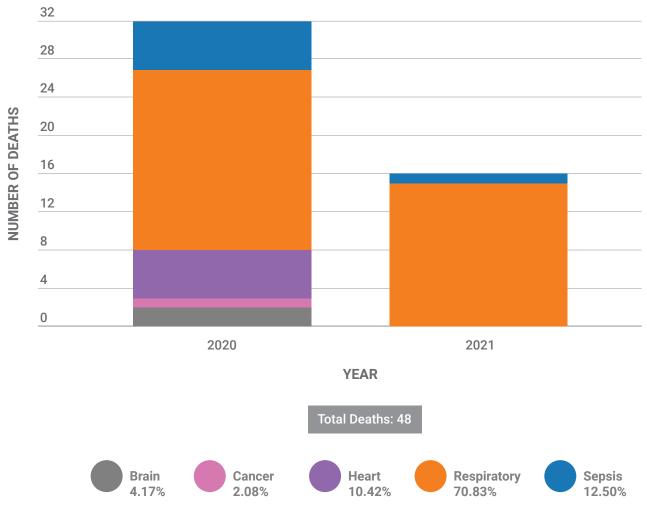
The age at the time of death skewed higher for COVID-related deaths than for overall deaths, with 35% of deaths occurring in the 67-72 years age group. The average age for COVID-related deaths is 66 years old, with the youngest death at age 47 and the oldest death at 85 years old.



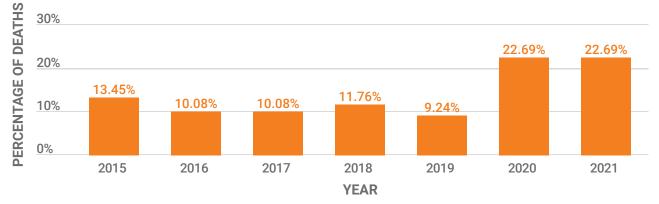
COVID-19 DEATHS & AGE

For the 48 identified COVID-related medical deaths, administration officials reported respiratory causes of death for 34 individuals, approximately 71%. Sepsis and heart disease were the second and third leading causes of death for COVID-related deaths.





Of all respiratory deaths 2015-2021, almost half (45.38%) occurred in 2020 and 2021.



RESPIRATORY DEATHS 2015-2021

However, not all respiratory deaths during 2020-2021 were identified as COVID-related. Sixty-three percent of all respiratory deaths in 2020-2021 were identified as COVID-related. In 2020, approximately 70% of respiratory deaths were COVID-related. In 2021, perhaps due to vaccine access, better understanding of COVID-19, and improved treatment protocols, that number was reduced to approximately 56% of respiratory deaths.

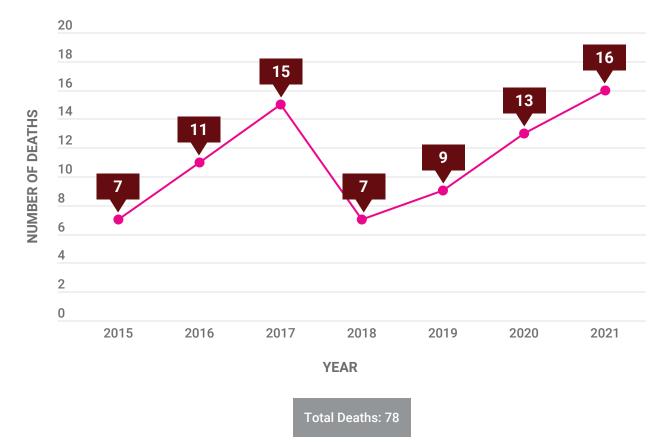


RESPIRATORY DEATHS RELATED TO COVID-19

Suicide

Known suicide deaths were highest in 2021, comprising 20.51% of all suicide deaths 2015-2021. The lowest number of suicides by year was seven in 2015 and 2018.

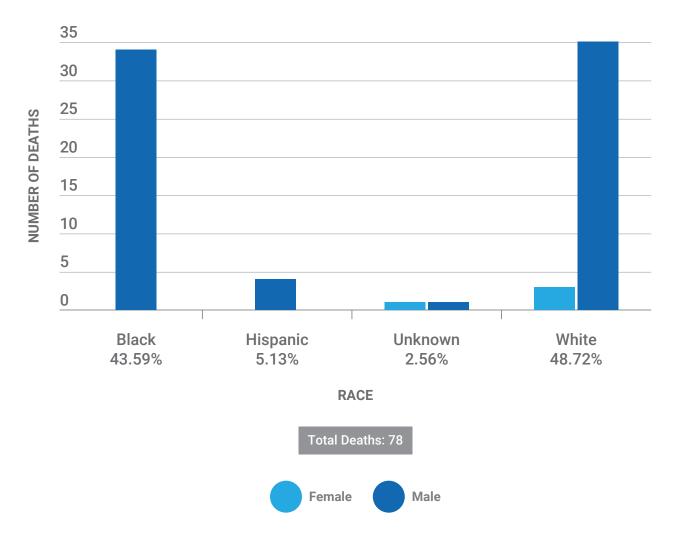
SUICIDE DEATHS BY YEAR



Suicide deaths were overwhelmingly male, with only 4 female suicides out of a total of 78 deaths 2015-2021. One female's race is unknown and the other three female suicides were White.

White people were 49% of all suicide deaths, compared to Black people (44%), Hispanic (5%) and people of an unknown race (3%).

SUICIDE DEATHS BY RACE & SEX



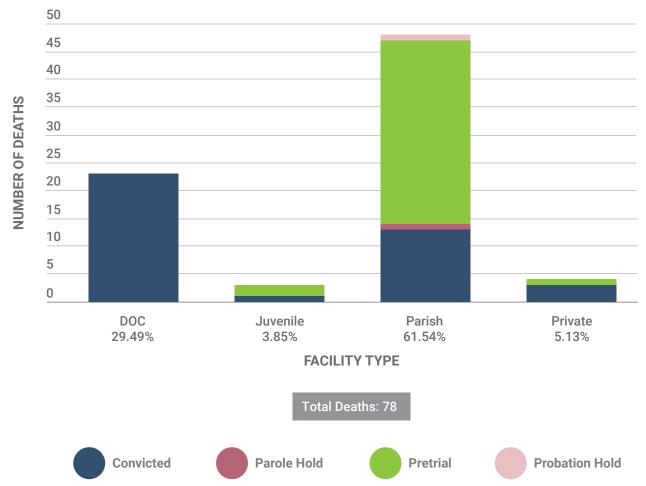
The average age at the time of suicide was 15 years old in juvenile facilities. For suicides in jails and private facilities, the average age was approximately 37 years old. Suicides in prisons skewed older, with an average age of almost 42 years old.

The majority of suicide deaths were of people serving convictions (51%), including convicted people in jails, prisons, and private facilities. People held pre-trial were approximately 46% of suicide deaths.

Suicides occurred more frequently in parish jails, contrary to the pattern of medical deaths occurring primarily in state prisons. Over 60% of all known suicides occurred in parish jails. Suicide was also the leading cause of death for youth held in detention. Three of the four deaths in youth detention centers were due to suicide, with details on the cause of death for the fourth child unknown.

The vast majority of suicide deaths at all facilities were completed by hanging, though records indicate officials classified two drug related deaths as suicides. Some of the

identified materials for the hangings included bedding, clothing, a trash bag, and a towel. Other rarer forms of suicide included a person who set himself on fire, self-inflicted head or stab wounds, and asphyxiations due to other materials (pica eating disorder, plastic bag).



SUICIDE DEATHS BY FACILITY TYPE & TRIAL STATUS

Due to federal data collection changes, data from 2020 and 2021 for all facility types no longer includes data on incident location. This missing data is critical for reducing suicides. Suicides in segregation are of particular concern, since segregation settings usually entail a higher level of individual supervision/observation than general shared cell or dorm settings combined with more restrictive policies on items allowed in a segregation cell.

Data from 2015-2019 indicated that suicides in segregation were more common in parish jails and youth detention centers. Forty-three percent of all parish suicides occurred in segregation. Two out of three youth suicides occurred in segregation. These two youth suicides occurred (or were discovered) during the evening hours, when there is less probability of educational or rehabilitative programming occurring.

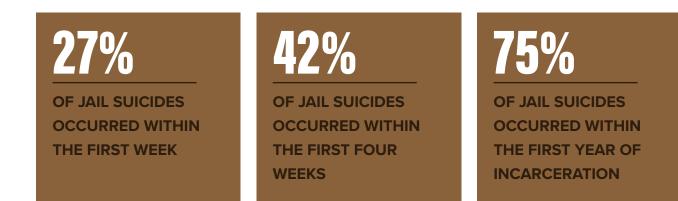
For state prisons, the time of the incident was not provided for 2020-2021 and therefore is listed as unknown. However, in parish jails, suicides occurred (or were discovered) during every period of the day, with the most prevalent times being morning (27%) and afternoon (25%). This timing raises questions about supervision/observation and perhaps the lack of other activities, such as programming or outdoor recreation, during the day. For private facilities, suicides were more likely to occur (or be discovered) between noon and 6pm.

	DOC	Juvenile	Parish	Private
Afternoon (noon to 6pm)	17.39%	0.00%	25.00%	50.00%
Evening (6pm to midnight)	4.35%	66.67%	20.83%	0.00%
Morning (6am to noon)	26.09%	0.00%	27.08%	0.00%
Overnight (midnight to 6am)	8.70%	0.00%	16.67%	25.00%
Unknown	43.48%	33.33%	10.42%	25.00%
Total	100.00%	100.00%	100.00%	100.00%

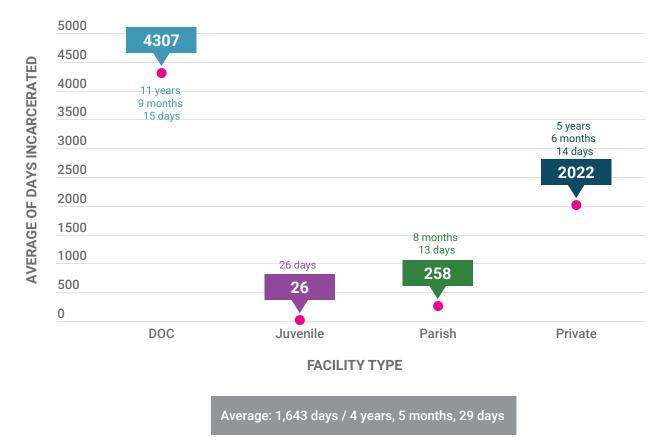
SUICIDE DEATHS BY FACILITY TYPE & INCIDENT TIME

The average number of days incarcerated prior to death by suicide indicates that suicides occurred relatively early in juvenile detention. One of the youth suicides happened within 9 days, the second at 43 days, while records for the third suicide did not indicate length of stay.

The average length of incarceration for completed known suicides in parish jails was eight months. Days incarcerated ranged from the first day of incarceration to one year and eight months (3,819 days).



Both privately operated and state prisons had on average longer lengths of incarceration prior to suicide, ranging from 30 days to 32 years prior to death.

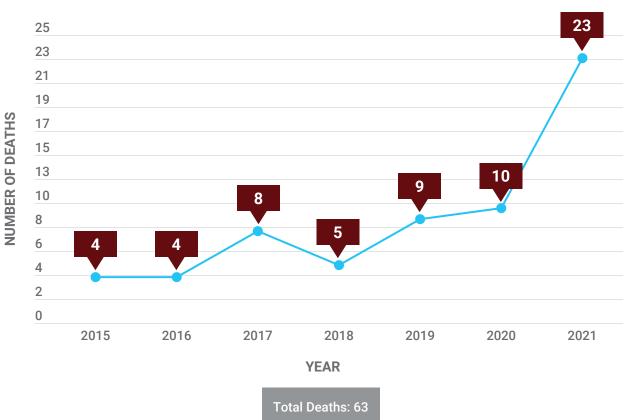


SUICIDE DEATHS BY AVERAGE DAYS INCARCERATED & FACILITY TYPE

Drugs

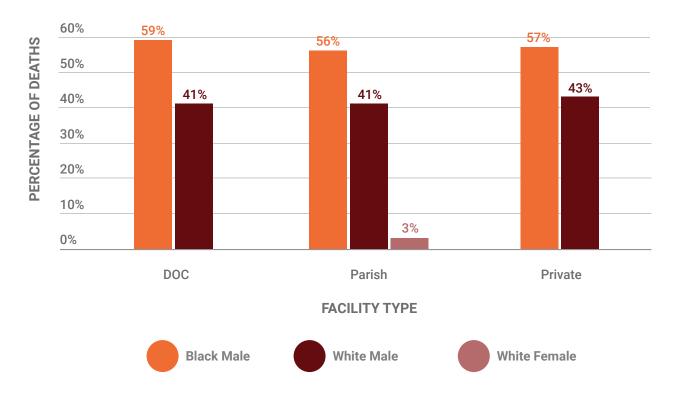
Drug related deaths jumped to their highest known levels in 2021, with 23 drug-related deaths comprising almost 37% of all known drug related deaths 2015-2021. Drug-related deaths were 11.92% of all known deaths in 2021. This is a steep increase from 2015, which included 4 drug related deaths comprising 2.31% of all known deaths that year.

Drugs causing death included cocaine, heroin, methamphetamines, fentanyl, ibuprofen, synthetic cannabinoids, and inhaled hydrocarbons. Not all records specified the drug causing death, however, where listed, methamphetamines, heroin, and fentanyl appeared most common.



DRUG DEATHS BY YEAR

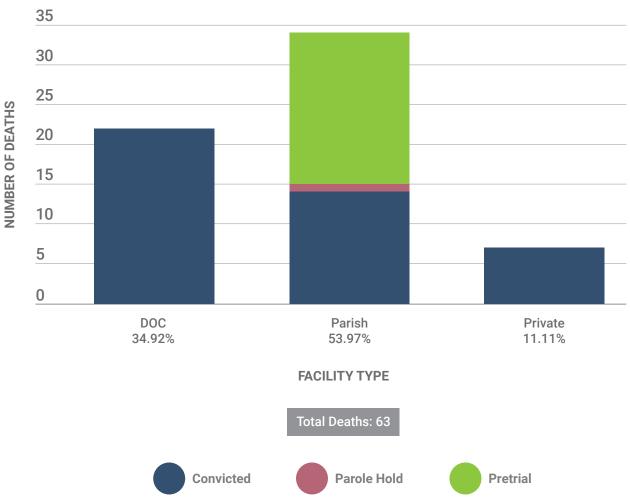
Drug related deaths were – except for a single death – exclusively male. Only one female died of a facility-identified drug overdose and she died on the date of her admission to a parish jail. Drug related deaths were 57% Black and 43% White.



DRUG DEATHS BY RACE & SEX & FACILITY TYPE

The average age for a drug related death was over 40 years old, with private facility and jail deaths skewing younger (34 years and almost 36 years old respectively). Drug-related deaths in prison skewed older, with an average age of 49 years old.

The majority of drug-related deaths occurred in parish jails (54%), impacting people held pre-trial (30%), people serving convictions (22%) and one person held for an alleged parole violation. People held for a conviction (regardless of the type of facility) were 68% of drug related deaths.



DRUG DEATHS BY TRIAL STATUS & FACILITY TYPE

Similar to suicides, the available data under the new federal survey does not indicate where within the facility drug overdoses actually occurred. From 2015-2019, facility administrators indicated primarily cells and medical facilities for drug-related deaths. There were two drug-related deaths in segregation in parish jails and one at work.

Drug overdoses occurring close to admission implicate policies on hospital transfers for medical distress. Drug overdoses occurring later in a person's incarceration implicate the

ability of staff to limit the introduction of contraband behind bars. The average number of days incarcerated prior to a drug related death was lowest in jails at approximately 6 months, while the average for private facilities was approximately 4 years and 16 years for state prisons.

Over 90% of drug-related deaths in prisons occurred after five years of incarceration. The shortest incarceration prior to a person's drug-related death was 179 days and the longest was over 37 years.

In contrast, 44% of drug-related deaths in jails occurred within the first three weeks of incarceration. Five deaths occurred on the date of admission to the jail; an additional five deaths occurred within the first four days of admission. The longest length of incarceration for a drug-related death was almost three years (1062 days).

Private facilities had seven drug related deaths, ranging from over six months (204 days) incarcerated to over six and a half years (2456 days).

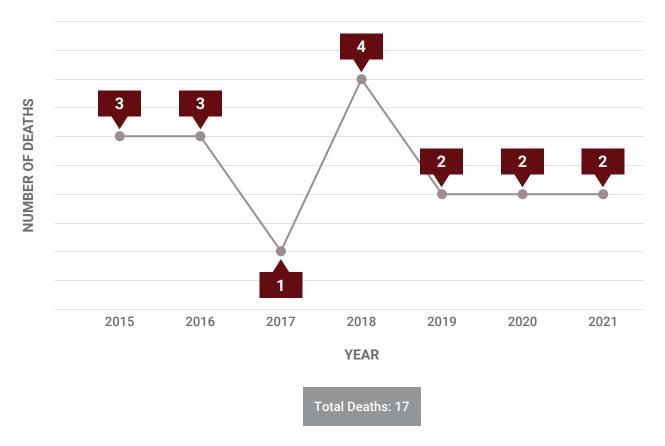


DRUG DEATHS BY AVERAGE DAYS INCARCERATED

It is impossible to tell which times were most risky for drug overdoses in this dataset. Seventyeight percent of drug deaths were recorded as "unknown" for the time of the incident.

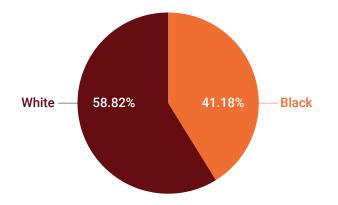
Accident

Deaths due to accidents behind bars primarily involved head injuries leading to traumatic brain injuries. Two of the accidental deaths involved drowning. One involved a person in a work-release program who died from injuries in a car accident.



ACCIDENTAL DEATHS BY YEAR

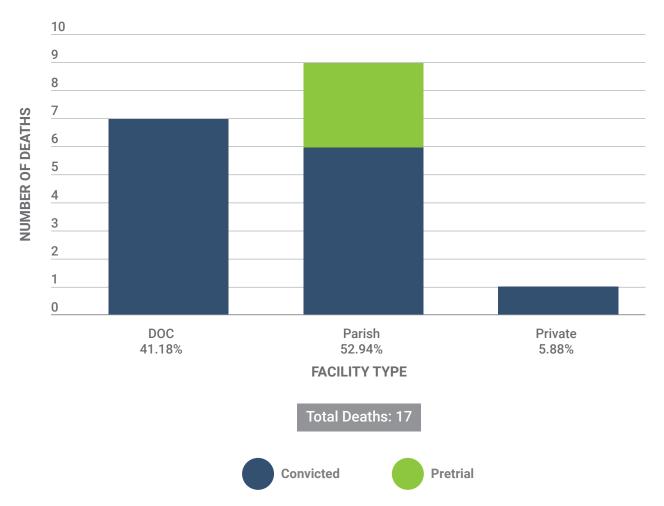
All of the known accidental deaths were male. In contrast to all other categories of death, White men were the majority of deaths by accident (59%) compared to Black men (41%).



ACCIDENTAL DEATHS BY RACE

The average age for deaths due to accidents was 48 years old. In jails, the average age at time of death was 42 years old and record notations indicate several accidents at work sites. The average age for accidental deaths was older for both state prisons (52 years old) and private facilities (62 years old).

People serving convictions were 82% of accidental deaths 2015-2021. However, the majority of deaths due to accidents occurred in parish jails (53%) including both convicted and pretrial populations, compared to state or private facilities. Some of the deaths in parish jails were related to work-related injuries sustained outside of the facility.



ACCIDENTAL DEATHS BY FACILITY TYPE & TRIAL STATUS

The average number of days incarcerated was lower in parish jails than state or private prisons. The length of time a person was incarcerated prior to death by accident ranged from 5 days to almost 32 years. Only one accidental death occurred in a private facility. One of the parish deaths occurred after 10 days incarcerated at the facility where they died, but records indicate the death occurred as part of work-release and therefore it is likely the person was previously incarcerated at a different facility.

ACCIDENTAL DEATHS BY FACILITY TYPE & AVERAGE DAYS INCARCERATED



Federal data collection changes effective 2020 no longer require data on where within the facility the death occurred. Data from 2015-2019 indicates that cells and work sites were the most common location for deaths due to accidents for parish jails. Some of the work-related injuries included two drownings, falling from the bed of a truck travelling down a U.S. highway; and one involved an unspecified "accidental injury to self" at work. Accidental deaths in cells often involved head injuries, such as falling off a bunk bed.

Accidental deaths occurred more often during the morning (29.41%) or afternoon (23.53%), than in the evening (11.76%) or overnight (11.76%) time periods. Four of the seventeen (23.53%) deaths were marked "unknown" for incident time.

Violence

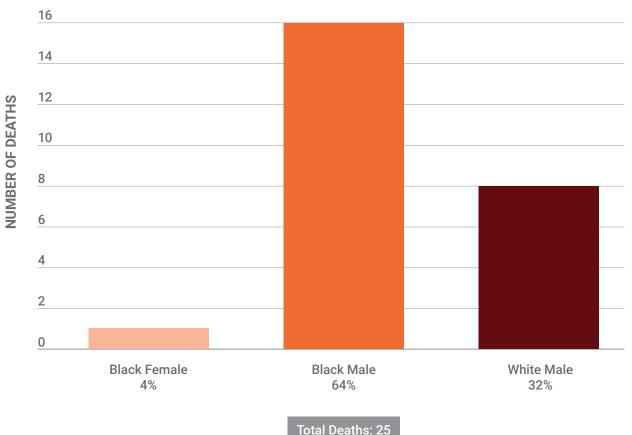
Deaths due to violence, previously the least common cause of death 2015-2019, now outpace accidental deaths and were over 2% of all deaths 2015-2021. Violent deaths have occurred in each calendar year, with a low of one death in 2015 and 2019 and a high of six deaths in 2020. Twenty-four percent of all violent deaths 2015-2021 occurred in 2020.

Five of the deaths involved stabbings by another incarcerated person. Six involved deaths due to significant head injuries received during an assault. Three involved strangulation.



VIOLENT DEATHS BY YEAR

African-Americans were 68% of all violent deaths 2015-2021, which was higher than their share of deaths overall from all causes (58%). There was only one violent female death.



VIOLENT DEATHS BY RACE & SEX

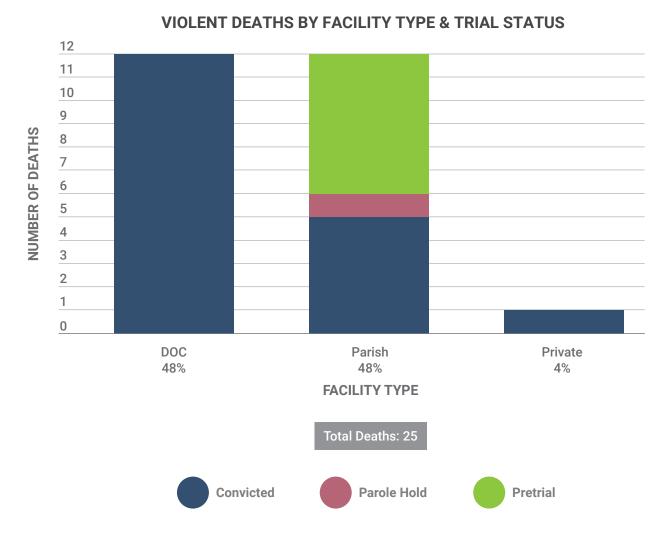
The average age for violent deaths was 41 years old. Violent deaths at private facilities and jails skewed younger (26 and 37 years old respectively), while the average age for violent deaths in prisons was 45 years old.

Violent deaths occurred in every type of facility except for juvenile facilities. The number of violent deaths in both prisons and jails also increased. Prisons had zero violent deaths in 2019, but had five violent deaths 2020-2021. Eight of the eleven violent deaths 2015-2021 occurred in Louisiana State Penitentiary (Angola), with one each in Hunt, Wade, and Rayburn prisons.

The deadliest year for jails was in 2016 with six violent deaths and similar to prisons, had zero violent deaths in 2019 but four additional violent deaths 2020-2021. Four of the ten violent deaths occurred in the East Baton Rough Parish jail.

Private facilities had zero violent deaths 2015-2018, but one each year 2019-2021. Though the three violent deaths occurred in different facilities, all three were managed by LaSalle Corrections at the time of death.

People held pre-trial were 24% of violent deaths and people serving convictions (in all facilities) were approximately 72% of violent deaths.



The average number of days incarcerated prior to violence leading to death was shorter for parish jails than state prisons. All of the pre-trial violent deaths in parish jails were within the first year of incarceration at that facility (between 0 and 278 days).

Violent deaths in state prisons occurred later in a person's incarceration, ranging from one and a half years to over 27 years. The more recent violent deaths (2020-2021) occurred earlier in a person's incarceration than prior violent deaths (2015-2019). Three of the five violent deaths in state prisons 2020-2021 occurred within the first five years of admission, far earlier than the average of almost 15 years incarcerated.

The number of days incarcerated is only available for two out of the three violent deaths at private facilities and occurred on average at four and a half years of incarceration.

60

VIOLENT DEATHS BY FACILITY TYPE & AVERAGE DAYS INCARCERATED



Violent deaths occurred relatively evenly during all time periods. Sixteen percent occurred overnight and 24% occurred during the evening. The time is unknown for 20% of violent deaths.

CONCLUSION

This report is the second in our Louisiana Deaths Behind Bars series and provides important updates since the first report covering 2015-2019. Unnatural deaths, including suicides, drug overdoses, and violence, dramatically increased in 2020 and 2021. Prison, jail, and youth detention administrators can and should use this data to compare the operation of their individual facilities to others.

In some cases, the trends identified implicate institutional policies and practices, which should be reviewed with the aim of decreasing deaths behind bars. While not all deaths are necessarily preventable, prisons and jails should ideally have lower death rates than the general public due to the proximity of medical care behind bars, 24-hour staffing and supervision, and reduced probability of certain types of deaths, such as car accidents, due to incarceration.

None of the people who died behind bars were judicially sentenced to death for their crimes, though some people convicted of serious crimes did receive life sentences. Thirteen percent of deaths 2015-2021 were of people who had only been accused of a crime, without a chance to prove their innocence or be found guilty.

Last, although DOC prioritizes placement of people with serious medical needs in select state prisons, such as Louisiana State Penitentiary, medical-related deaths also occurred in parish jails where there may be less robust medical systems in place.

ABOUT THE PROJECT

Author

Professor Armstrong joined the Loyola University New Orleans, College of Law faculty in 2010. She is a leading national expert on prison and jail conditions and is certified by the U.S. Department of Justice as a Prison Rape Elimination Act auditor. Prof. Armstrong founded IncarcerationTransparency.org, a database/website designed by Prof. Judson Mitchell, that provides facility-level deaths behind bars data and analysis for Louisiana and memorializes lives lost behind bars. Her research has been profiled by New Yorker Magazine and quoted in the New York Times, the Atlantic, National Public Radio, and the Times-Picayune among others. Her scholarship focuses on the constitutional dimensions of prisons and jails, specifically prison labor practices, the intersection of race and conditions of incarceration law and policy, constitutional law, criminal law and procedure, law and poverty, and race and the law. Professor Armstrong is a graduate of Yale Law School (JD), the Princeton School of Public and International Affairs (MPA), and New York University (BA).

Project Participants

The incarceration seminar students benefit from the guidance of the following instructors:

Shanita Farris Nishi Kumar Erica Navalance Rob Harrison, L.S.W.

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APPENDIX

List of Tables

Page #

1. Deaths per year	7
2. Deaths by race	13
3. Deaths by race & cause	14
4. Deaths by race & sex	15
5. Deaths by sex & facility type	16
6. Deaths by sex & cause	17
7. Deaths by age	18
8. Deaths by age & facility type	19
9. Deaths by age & cause of death	20
10. Deaths by trial status & facility type	21
11. Mortality rate convicted population	22
12. Deaths by facility type	23
13. Deaths by facility type & cause	24
14. Deaths by incident location	25
15. Deaths in unknown location by cause	26
16. Deaths in segregation by cause	27
17. Deaths by cause & average days incarcerated	28
18. Deaths by cause & average days incarcerated & facility type	29
19. Deaths by cause	31
20. Deaths by cause & year	32
21. Deaths by medical cause	33
22. Medical deaths by cause & facility type	34-35
23. Medical cause of death by year	36
24. Medical deaths by race	37
25. Medical deaths by facility type & average days incarcerated	38
26. Medical deaths by facility type & average days incarcerated	
convicted populations	39
27. Medical deaths related to COVID-19	41
28. COVID-19 deaths by race & sex	43
29. COVID-19 deaths by age	44
30. Medical deaths related to COVID-19 by case	45
31. Respiratory deaths 2015-2021	45
32. Respiratory deaths related to COVID-19	46
33. Suicide deaths by year	47
34. Suicide deaths by race & sex	48
35. Suicide deaths by race & sex & facility type	49

36.	Suicide deaths by facility type & incident time	50
37.	Suicide deaths by average days incarcerated & facility type	51
38.	Drug deaths by year	52
49.	Drug deaths by race & sex & facility type	52
40.	Drug deaths by trial status & facility type	53
41.	Drug deaths by average days incarcerated	54
42.	Accidental deaths by year	55
43.	Accidental deaths by race	55
44.	Accidental deaths by facility type & trial status	56
45.	Accidental deaths by facility type & trial status & average days incarcerated	57
46.	Violent Deaths by year	58
47.	Violent Deaths by race & sex	59
48.	Violent Deaths by facility type & trial status	60
49.	Violent Deaths by facility type & average days incarcerated	61

Deaths by Facility & Year

	2015	2016	2017	2018	2019	2020	2021	Total
DOC	119	116	118	110	95	134	136	828
Allen Correctional Center				1			1	2
B.B. Rayburn Correctional Center - DOC	1	2	4	1	3	5	8	24
David Wade Correctional Center - DOC	5	6	4	9	6	6	7	43
Dixon Correctional Institute - DOC	9	12	9	5	6	12	17	70
Elayn Hunt Correctional Center - DOC	42	32	39	30	32	39	22	236
Louisiana State Penitentiary (Angola Prison)	56	53	52	50	41	61	73	386
Louisiana Correctional Institute for Women - DOC	2	3	6	2	2	5	1	21
Raymond Laborde Correctional Center - DOC	4	8	4	12	5	6	7	46
Juvenile			2		2			4
Swanson Center for Youth at Monroe - DOC /Youth			1					1
Ware Youth Center - DOC Youth			1		2			3
Parish	46	36	49	39	31	40	51	292
Acadia Parish Jail			2		2		1	5
Ascension Parish Jail				1		1		2
Assumption Parish Jail				1				1
Avoyelles Marksville Detention Center	1	1		3				5
Avoyelles Parish Simmsport Detention				1		1		2
Baton Rouge City Jail		1	1					2
Bayou Dorcheat Correctional Center						1		1
Beauregard Parish Jail							1	1
Bienville Parish Jail			1					1
Bogalusa City Jail	1							1
Bossier Parish Maximum Security Facility			1			2		3
Bossier Parish Medium Security Facility							1	1
Caddo Parish Correctional Center		2	1	2	1		1	7
Calcasieu Parish Correctional Center	1	1		1	1	1		5
Calcasieu Sheriff's Prison				1				1
Caldwell Parish Correctional Center	1							1
Catahoula Correctional Center - LaSalle							2	2
City of Faith Monroe House (Male & Female)	1				1			2
City of Hammond Jail					1			1
City of Kenner Jail	1			1				2

	2015	2016	2017	2018	2019	2020	2021	Total
City of West Monroe Jail	1							1
Claiborne Parish Detention Center			2				3	5
Concordia Correctional Facility	3	2			1	1	2	9
Concordia Parish Work Release Facility			1	1				2
DeSoto Parish Detention Center						1		1
East Baton Rouge Parish Prison	3	6	5	4	4	3	6	31
East Baton Rouge Work Release		2			1		1	4
East Feliciana Parish Work Release			1					1
Evangeline Parish Jail	1						1	2
Franklin Parish Detention Center	2		1				2	5
Iberia Parish Jail		2				4	1	7
Iberville Parish Jail	1						1	2
Jefferson Davis Parish Jail		1						1
Jefferson Parish Correctional Center	4	1	6	4	4		1	20
Lafayette Parish Correctional Center	2	1		2		4		9
Lafourche Parish Detention Center				1		1		2
Lafourche Parish Transitional Work Program			1					1
Lincoln Parish Detention Center				1			1	2
Livingston Parish Detention Center		1	1			2	1	5
Livingston Parish Transitional Work Program				1				1
Morehouse Parish Detention Center		1						1
Morehouse Parish Jail	3					1		4
Natchitoches Parish Detention Center			2					2
Orleans Parish Prison & TDC	3	2	7	2		3	1	18
Other	1	1						2
Ouachita Correctional Center		2	1	4	2	4	2	15
Ouachita Parish Transitional Work Program						1	1	2
Plaquemines Parish Detention Center				1	1	1	1	4
Rapides Parish Detention Center I, II, III	1	1	2		2			6
Red River Parish Jail							1	1
Richland Parish Detention Center (Males) - LaSalle	1				1	2	5	9
Richwood Correctional Center - LaSalle		1						1
Riverbend Detention Center		1	1	2	1			5
Sabine Parish Correctional Division		1				1		2
Saint Bernard Parish Jail			1					1
Shreveport City Jail		1						1

	2015	2016	2017	2018	2019	2020	2021	Total
Southwest TWP- Phelps Correctional Center, Dequincy, LA	2				1	1	4	8
St. Charles Parish Nelson Coleman Correctional Center		1	1					2
St. Helena Parish Jail				1				1
St. James Parish Prison							1	1
St. Landry Parish Jail	1							1
St. Martin Parish Corrections - (Main Jail/Work Release)						1		1
St. Mary Parish Law Enforcement Center		1	1					2
St. Tammany Parish Jail	2		2	1		1	3	9
Sulphur City Jail			1					1
Tangipahoa Parish Prison	1	1	1	1	1		2	7
Tensas Parish Detention Center	1							1
Terrebonne Parish Criminal Justice Complex	2	1	1					4
Terrebonne Parish Jail						1		1
Union Parish Detention Center	2					1		3
Vermilion Parish Law Enforcement Center	1							1
Vernon Parish Correctional Facility			2					2
Washington Parish Jail	1		1		1		1	4
Webster Correctional Facility (Bayou Dorcheat Correctional Facility)	1			2	2			5
Webster Parish Jail			1		1			2
West Baton Rouge Parish Detention Center					1			1
West Feliciana Parish Detention Center							2	2
West Feliciana Parish Work Release Facility					1		1	2
Private	8	11	3	7	1	8	6	44
Allen Correctional Center	3	5						8
Catahoula Correctional Center - LaSalle		1	1	1	1	2		6
Jackson Parish Correctional Center - LaSalle		1	1	1				3
LaSalle Corrections Center	1			1				2
Madison Parish Correctional Center & Work Release Facility				1		5	6	12
River Correctional Center - LaSalle		1		3				4
South Louisiana Correctional Center	1							1
Winn Correctional Center	3	3	1			1		8
Grand Total	173	163	172	156	129	182	193	1168





LOUISIANA DEATHS BEHIND BARS 2015—2021

