Americans Face More Than an Opioid Overdose Crisis

Stimulants and alcohol are also major drivers of health problems and deaths

Overdose and alcohol-related deaths are increasing in the United States, and Black and Indigenous communities face the highest mortality rates.¹

In 2021, nearly 110,000 people died from a drug overdose—equaling about one death every five minutes.² Over 30% of these deaths involved stimulant drugs like methamphetamines.³ While all racial and ethnic groups were affected, overdose death rates were highest among American Indian/Alaska Native and Black populations. These groups had 56.6 and 44.2 deaths per 100,000 people, respectively, compared with the overall rate of 32.4 per 100,000 deaths across all racial and ethnic groups.⁴

From 2015 to 2019, excessive alcohol consumption caused more than 140,000 deaths each year.⁵ That’s upward of 380 deaths every day.⁶ American Indians/Native Alaskans face a 3.6 times higher risk of alcohol-related deaths than do non-Hispanic Whites.⁷
Beyond overdoses, substance use contributes to a range of health problems.

Acute hepatitis C infections more than doubled from 2014 to 2021; more than half of people with an acute infection reported injecting drugs, which is associated with disease transmission. Injectable drugs can include cocaine, methamphetamines, prescription stimulants, prescription opioids, and heroin.

An estimated 8% of new HIV infections in 2021 were among people who inject drugs.

The rising use of stimulants such as methamphetamine and cocaine increases the risk of heart attack, stroke, respiratory issues, and kidney failure.

Nonfatal overdoses can cause brain injuries from a lack of oxygen, damage that could be compounded with multiple overdoses.

People who use drugs and alcohol also face multiple mental health challenges.

Across the U.S., 9.2 million adults have both a mental illness and a substance use disorder (SUD).

People with an SUD are more likely to die by suicide than people without one.

Experiencing or witnessing an overdose can lead to mental health issues such as depression and post-traumatic stress disorder.
In 2022, 64.7% of overdose deaths had at least one opportunity for intervention, such as a prior overdose or the presence of a bystander who could have taken action—and this number is probably an underestimate.\textsuperscript{16}

In 2022, over 85% of people with an SUD in the past year, ages 12 and older, did not receive treatment.\textsuperscript{17} Telehealth helps more people access treatment, but COVID 19-related policy changes allowing remote access to buprenorphine (an effective treatment for opioid use disorder) are set to expire at the end of 2024 unless Congress acts to make them permanent.\textsuperscript{18}

Abstaining from or reducing alcohol consumption can decrease health risks, but from 2015 to 2021, just 12% of people with an alcohol use disorder (AUD) were advised by their doctor to cut back—a simple intervention that’s proved to reduce alcohol consumption among people who drink heavily or have milder forms of AUD.\textsuperscript{19}

Twelve states have not authorized syringe services programs (SSPs), which provide clean syringes to reduce the risk of HIV and hepatitis C infection among people who use drugs, and often offer a range of other services such as overdose reversal medication, health care, and referral to treatment.\textsuperscript{20} And even in states where SSPs are authorized, many people who use drugs, especially in rural populations, aren’t able to access these services because they don’t operate where they live.\textsuperscript{21}
Endnotes


4 KFF, “Total Drug Overdose Deaths by Race/Ethnicity.”


6 Ibid.

7 Karaye, Maleki, and Yunusa, “Racial and Ethnic Disparities in Alcohol-Attributed Deaths.”


For more information, please visit: pewtrusts.org/substancemisuse