




Pain in the Nation: The Epidemics of Alcohol, Drug, and Suicide Deaths: Snapshot for New Jersey

Major National Findings


Combined Death Rate

 The combined death rate increased 142 percent from 2002 to 2022, from 74,003 deaths to 207,827 deaths, respectively.


 A decrease in the alcohol-induced mortality rate led to a slightly lower combined rate of all U.S. deaths due to alcohol, drugs, and suicide in 2022, but the long-term trend of such deaths is still alarmingly high.


 While all population groups have experienced increases in substance misuse and suicide deaths over the last two decades, American Indian and Alaska Native people, Black people, and white people have higher than average combined rates

Suicide Deaths


 Overall mortality due to suicide was virtually unchanged between 2021 and 2022: 14.1 deaths per 100,000 people and 14.2 deaths per 100,000, respectively.

Drug Deaths

 The overall age-adjusted drug overdose mortality rate was virtually unchanged from 2021 to 2022: 32.4 deaths per 100,000 people and 32.6 deaths per 100,000, respectively.

 In 2022, approximately 70 million people in the U.S. aged 12 and older reported using one or more illegal drugs and just under 10 percent of people aged 12 and over in the U.S. had a drug use disorder

Alcohol Deaths

 For 2022, the alcohol-induced mortality rate decreased by six percent to 13.5 deaths per 100,000 people, the first decrease in the rate after more than a decade of increase.

Percentage Change in Age-Adjusted Death Rate by Cause, 2021 to 2022

US		New Jersey
-1%	Combined alcohol, drug, and suicide	-2%
-6%	Alcohol-induced	-7%
1%	Drug-induced	-2%
1%	Suicide	8%

Percentage Change in Age-Adjusted Death Rate by Drug Type, 2021 to 2022

US		New Jersey
1%	Opioid	-2%
4%	Synthetic opioid	-1%
12%	Cocaine	8%
4%	Other Psychostimulants	16%

For the full report, go to:

<https://www.tfah.org/report-details/pain-in-the-nation-2024/>

Key Recommendations for Congress



Address upstream drivers of behavioral health concerns by increasing funding for the CDC Adverse Childhood Experiences, Division of Adolescent and School Health, Core State Violence and Injury Prevention, and Comprehensive Suicide Prevention programs



Improve mental health services in schools by passing the Advancing Student Services in Schools Today Act, the Mental Health Services for Students Act, and the Campus Prevention and Recovery Services for Students Act



Reduce overdose risk and access to lethal means of suicide by increasing funding for harm reduction programs, promoting safe storage of medications and firearms, and supporting foundational research to identify at-risk populations and prevention strategies



Promote equity and diversity in mental health services—including through outreach to populations of color and culturally appropriate care—by passing the Pursuing Equity in Mental Health Act and the Health Equity and Accountability Act



Modernize crisis care and other mental health services by strengthening the 988 Suicide and Crisis Lifeline and related services, expanding care under Medicaid and Medicare, and incentivizing the integration of behavioral and physical healthcare through the COMPLETE Care Act and other legislation



Increase access to mental health and substance use healthcare by strengthening enforcement efforts under the Mental Health Parity and Addiction Equity Act and by passing the PEER Support Act to bolster the peer support workforce

For more information, please contact Brandon Reavis at breavis@tfah.org