



# Pain in the Nation 2024

Congressional Briefing  
and National Webinar

September 24, 2024  
2:00 – 3:00 PM Eastern

X @HealthyAmerica1  
🌐 tfah.org

ISSUE REPORT

## Pain in the Nation: The Epidemics of Alcohol, Drug, and Suicide Deaths 2024

*SPECIAL FEATURE: Polysubstance Use and Emerging  
Drug Overdose Trends*



JULY 2024

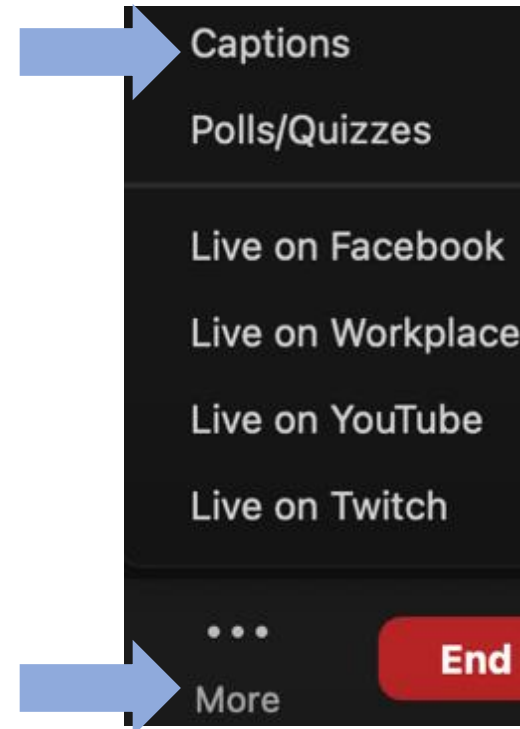


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# Closed Captioning

To see real time captioning:

1. At the bottom of your screen, click to open **More**
2. Click **Closed Caption**

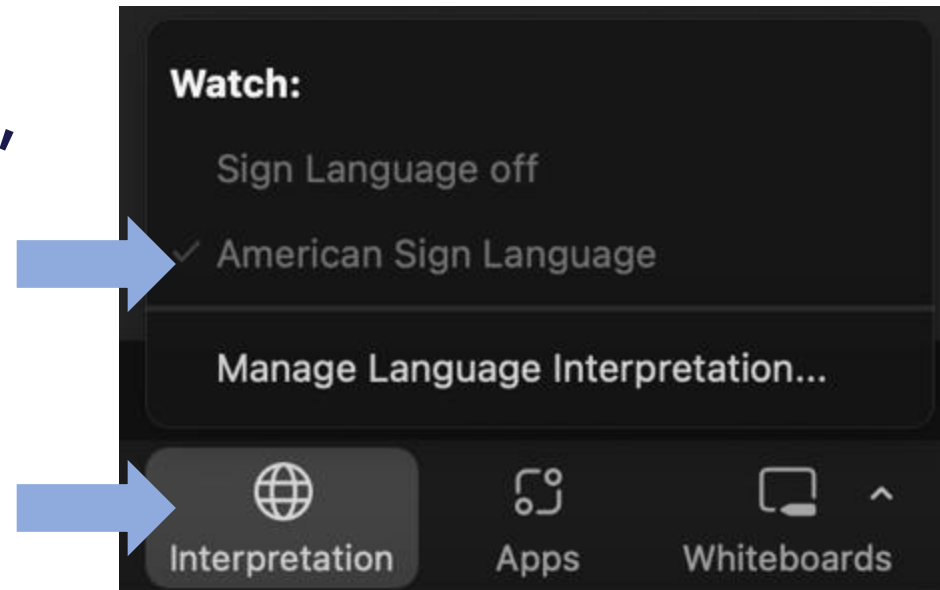


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# ASL Interpreting

To see real time captioning:

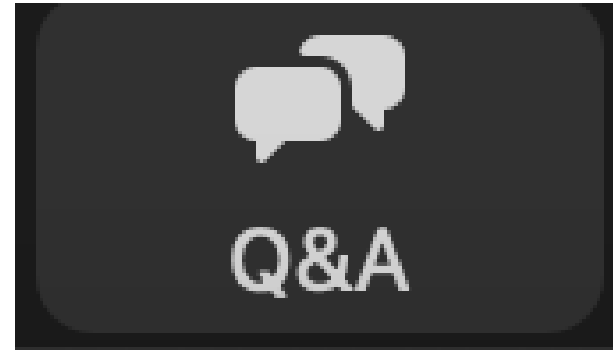
1. At the bottom of your screen, click **Interpretation**
2. Select **American Sign Language**



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# Q&A Feature

1. At the bottom of your screen, click to open the Q&A panel
2. Type your question in the **Q&A box**
3. Hit **Enter**



# Moderator



**Tekisha Dwan Everette, Ph.D., MPA,  
MPH, CPH**

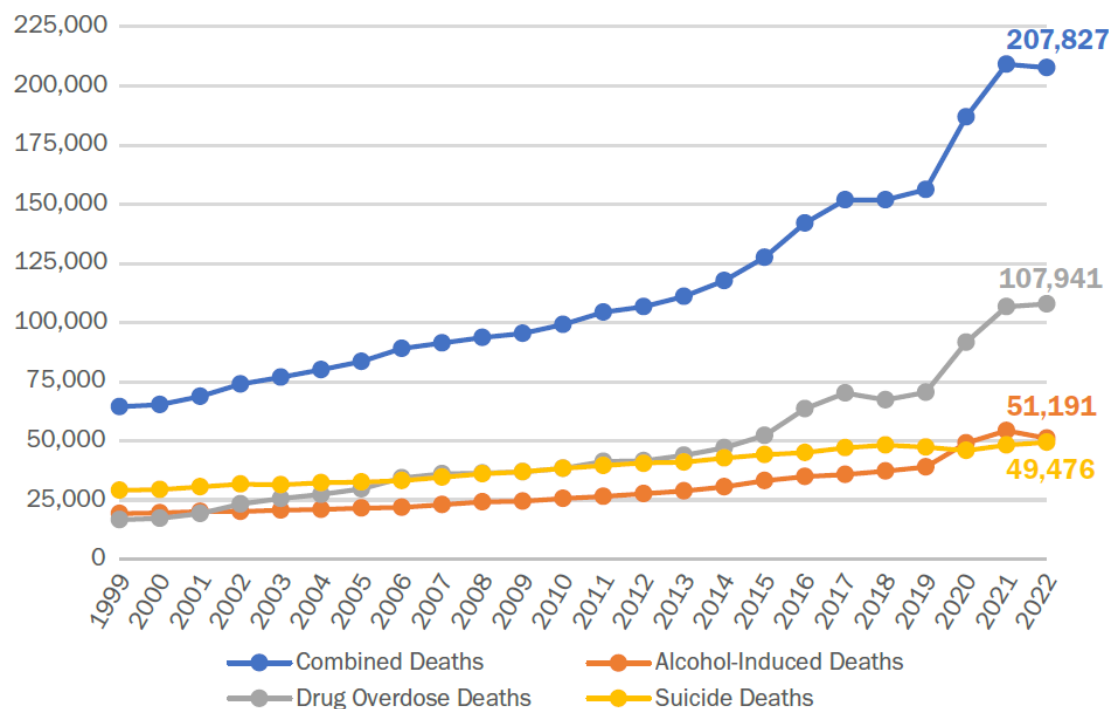
**Executive Vice President  
Trust for America's Health**

[tfah.org](https://tfah.org)

# Pain in the Nation 2024 Report: The Epidemics of Alcohol, Drug, and Suicide Deaths

- Alcohol, drug, and suicide deaths slightly declined for the first time in five years due to a drop in the alcohol-induced death rate
- Drug overdose mortality remained the same from 2021 to 2022
- The suicide rate was also unchanged in 2022, but total annual suicides remain at an historic high

**Figure 1: Annual Deaths from Alcohol, Drugs, and Suicide In the United States, All Ages, 1999–2022**



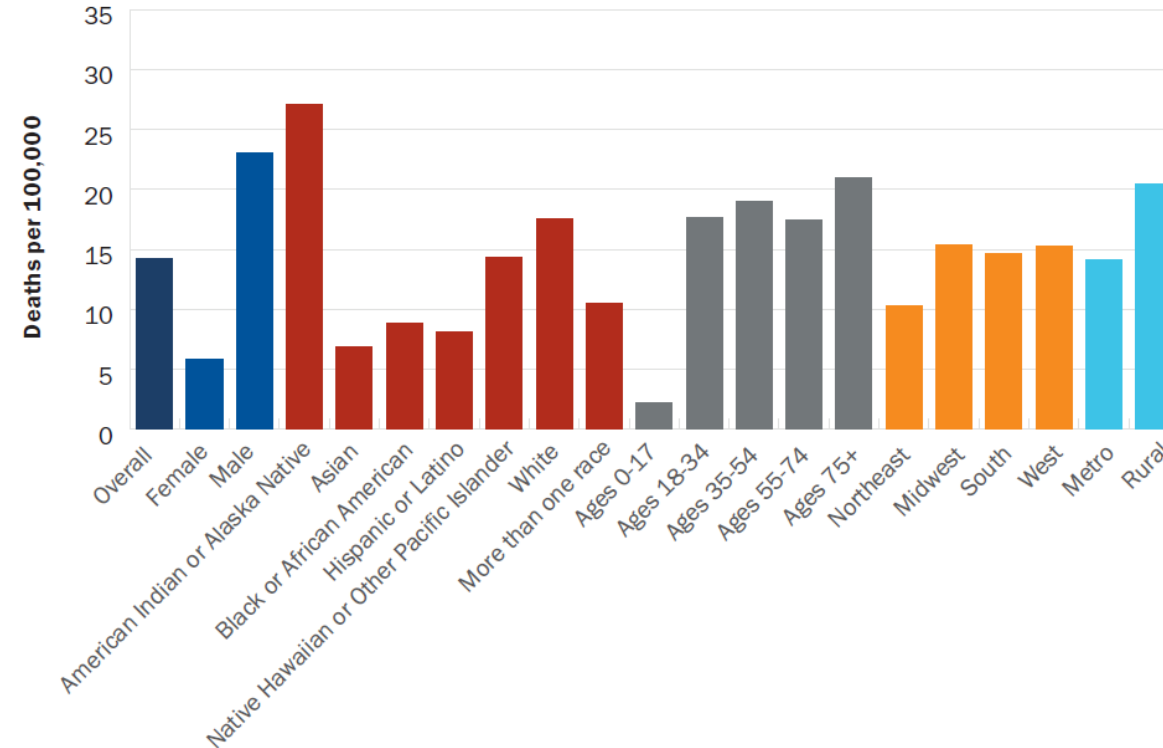
Source: TFAH analysis of National Center for Health Statistics data



# 2022 Trends and Takeaways

- Alarming long-term trends in deaths but improvements in the combined rate compared to 2020-2021
- Variations by demographic groups
- High rates of substance misuse for American Indian/Alaska Native people and Black people
- Drug overdoses largely driven by fentanyl

**Figure 11: Age-Adjusted Suicide Mortality Rate (Deaths per 100,000 People) Overall and by Select Demographics and Region, 2022**



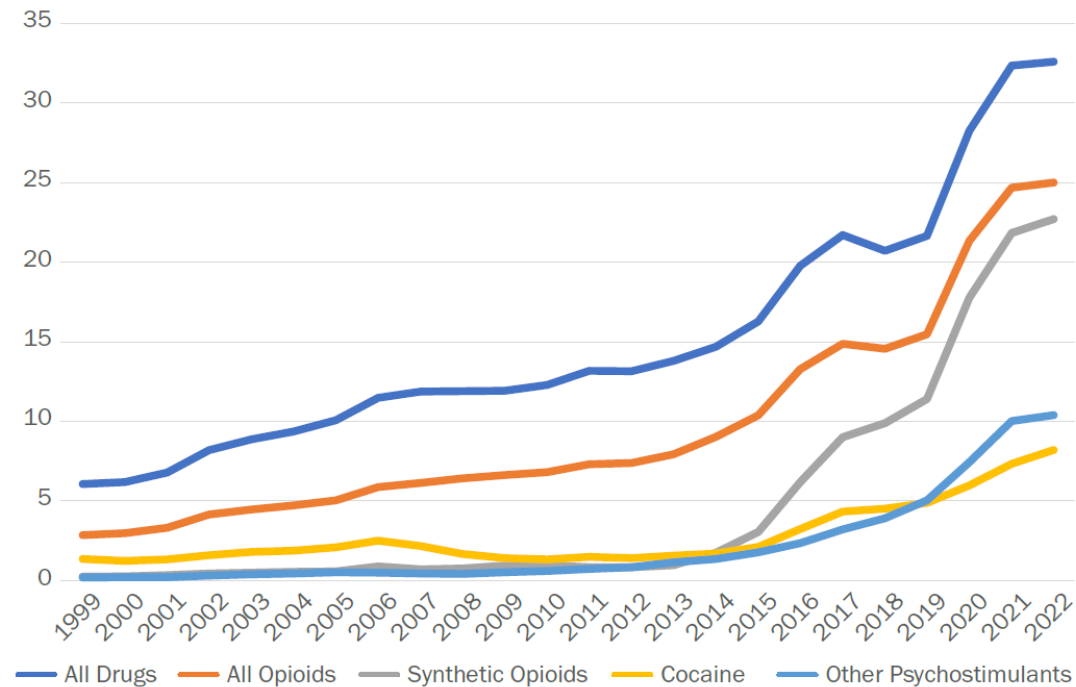
Source: TFAH analysis of National Center for Health Statistics data



# Special Feature: Polysubstance Use and Emerging Drug Overdose Trends

- *Polysubstance overdoses have increased as fentanyl has flooded the drug supply*
- Fatal synthetic opioid overdoses and fatal opioid and stimulant overdoses had the greatest increases from 2010 to 2020
- The addition of xylazine to the illegal drug supply poses significant challenges for people who use drugs, providers, and first responders
- These trends require improved data systems, harm reduction tools, treatments, and workforces

**Figure 6: Annual Age-Adjusted Mortality Rate (Deaths per 100,000 People) from Overdoses by Drug Type, 1999–2022**



Source: TFAH analysis of National Center for Health Statistics data





# Policy Recommendations

Invest

## **Invest in Prevention and Conditions that Promote Health**

- Support policies and programs that reduce adverse childhood experiences and the impact of trauma
- Provide new resources for schools to increase substance use prevention, mental well-being, and resiliency programs

Reduce

## **Reduce Overdose Risk and Access to Lethal Means of Suicide**

- Support safe storage of medications and firearms and other limits on access
- Promote harm-reduction policies to reduce overdoses and infections
- Lower excessive alcohol use through evidence-based policies

Transform

## **Transform the Mental Health and Substance Use Prevention System**

- Bolster the continuum of crisis-intervention programs
- Promote equity and modernize mental health and substance use services
- Expand the mental health and substance use treatment workforce



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# Agenda

- Welcome and overview of 2024 *Pain in the Nation* report
- Presentations from panelists
- Questions and Answers
- Closing



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# Welcome to Our Panelists



**Allison Arwady, M.D., MPH**  
Director, National Center for Injury  
Prevention and Control  
Centers for Disease Control and  
Prevention



**CAPT Christopher Jones, Pharm.D.,  
Dr.PH, MPH**  
Director, Center for Substance Abuse  
Prevention  
Substance Abuse and Mental Health  
Services Administration



**Alexander Crosby, M.D., MPH**  
Professor and Vice Chair, Community  
Health and  
Preventive Medicine  
Morehouse School of Medicine





## **Allison Arwady, M.D., MPH**

Director, National Center for Injury

Prevention and Control

Centers for Disease Control and Prevention

[cdc.gov/injury](https://cdc.gov/injury)



# Advancing Overdose, Suicide, and ACEs Prevention

**Allison Arwady, MD, MPH**

**Director, National Center for Injury Prevention and Control**



# CDC's Injury Center: Putting Science into Action

The work of CDC's Injury Center keeps people safe and helps individuals, families, and communities thrive. We focus on preventing unintentional injuries and violence including:



OVERDOSE



SUICIDE



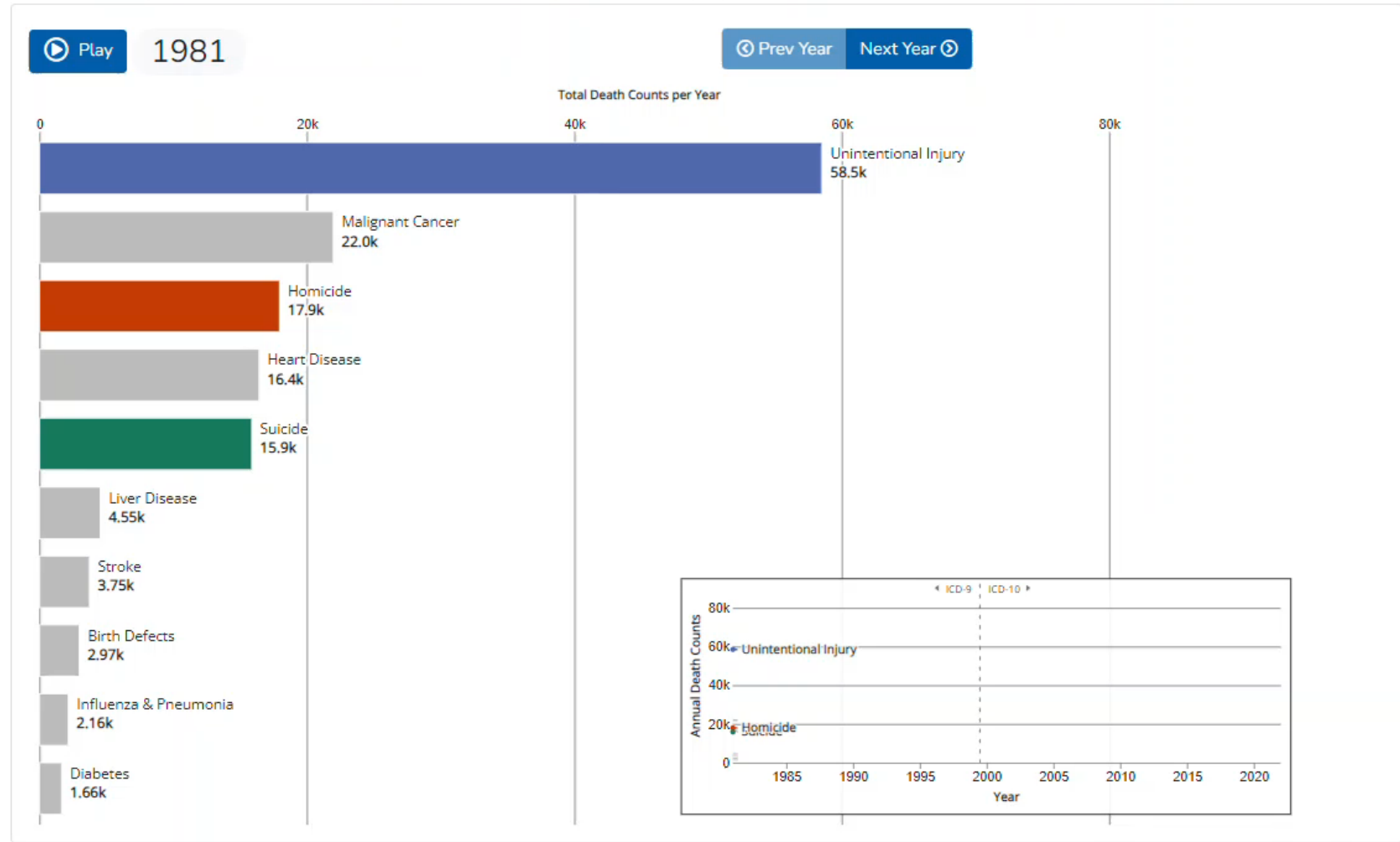
ADVERSE  
CHILDHOOD  
EXPERIENCES



VIOLENCE  
ACROSS THE  
LIFESPAN

# 1981-2022

## Leading causes of death in the U.S. for ages 1-44



[Download Text Version of Chart](#)

**NCIPC awards 85% of its budget to states, localities, and non-profit organizations**

**Overdose Data to Action (OD2A)**

- State (FY24): \$192,115,196
- Local (FY24): \$87,534,792

**Comprehensive Suicide Prevention Program (CSP)**

Anticipated FY24 : \$21,352,381\*

**Tribal Suicide Prevention**

Anticipated FY24: \$994,130\*

**Essentials for Childhood: Preventing Adverse Childhood Experiences through Data to Action (EfC PACE:D2A)**

Anticipated FY24: \$5,734,959\*



**Data**



**Intervention**



**Expertise**



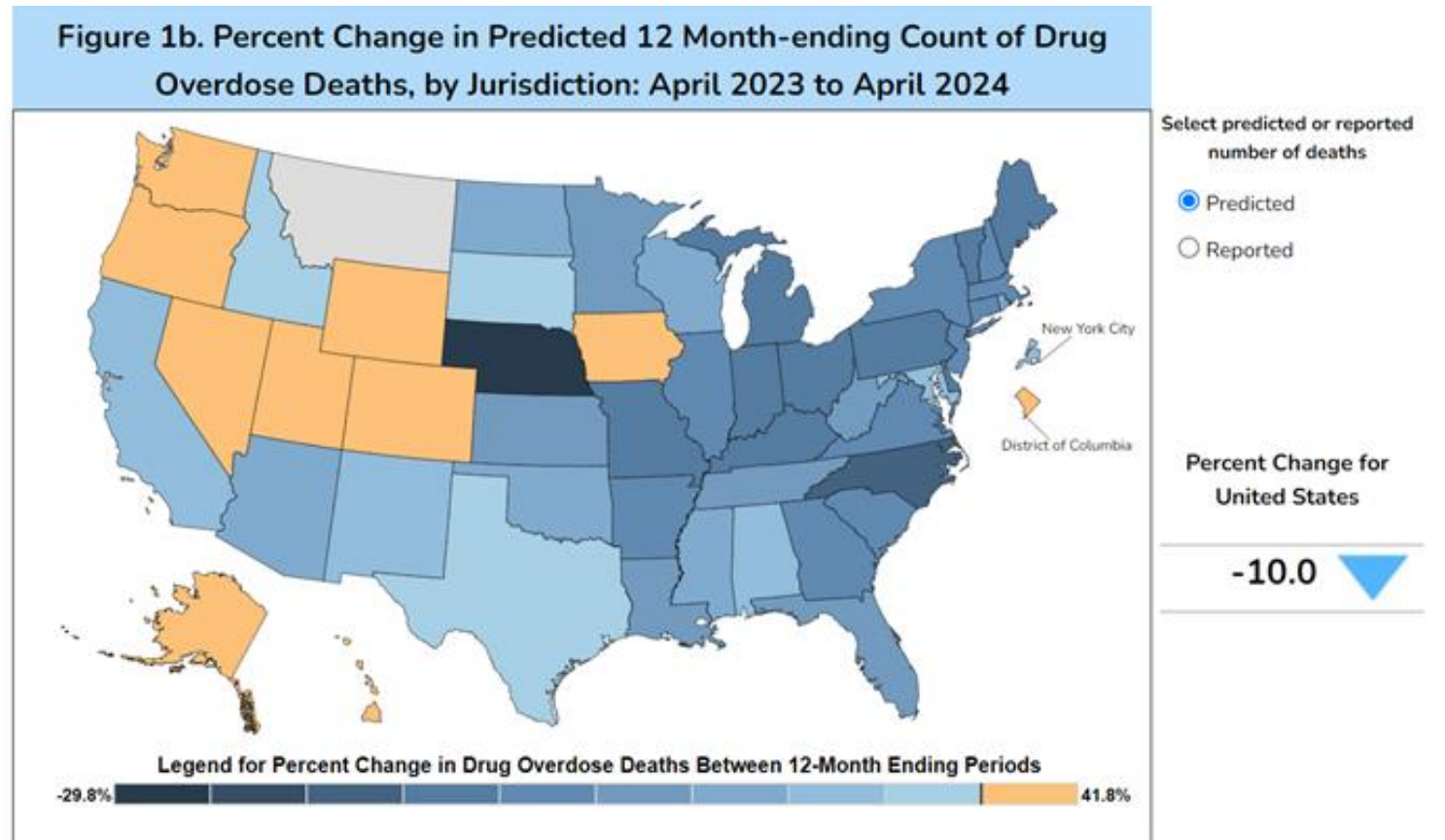
**Community Support**



# 101,168

## Overdose deaths in the U.S. in the 12-months ending in April 2024

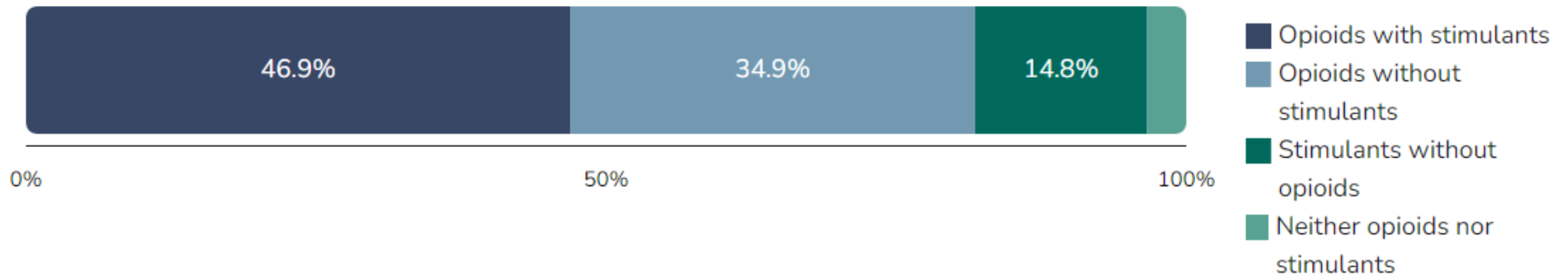
### Current State of the U.S. Drug Overdose Crisis



# What drugs were involved?

## Distribution of overdose deaths by opioid and stimulant involvement in 2023, Overall (30 jurisdictions<sup>1</sup>) – Preliminary Data

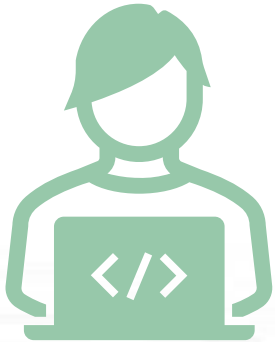
Based on preliminary data, the largest percentage of deaths involved opioids with stimulants, while 3.4% of overdose deaths involved neither opioids nor stimulants.



# Fatal Drug Overdose Data

State Unintentional Drug  
Overdose Reporting System

**SUDORS**




>600 data elements

**Death  
Certificates**

**Medical  
Examiner/  
Coroner Reports**

**Toxicology  
Reports**

 **Demographics**

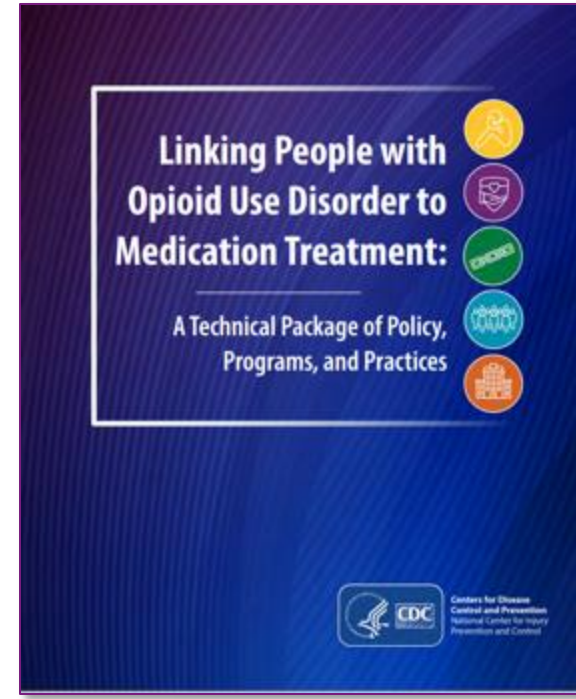
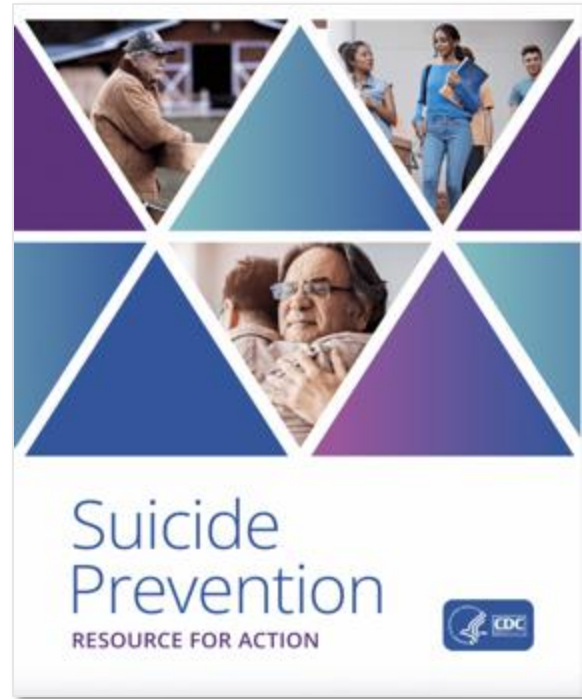
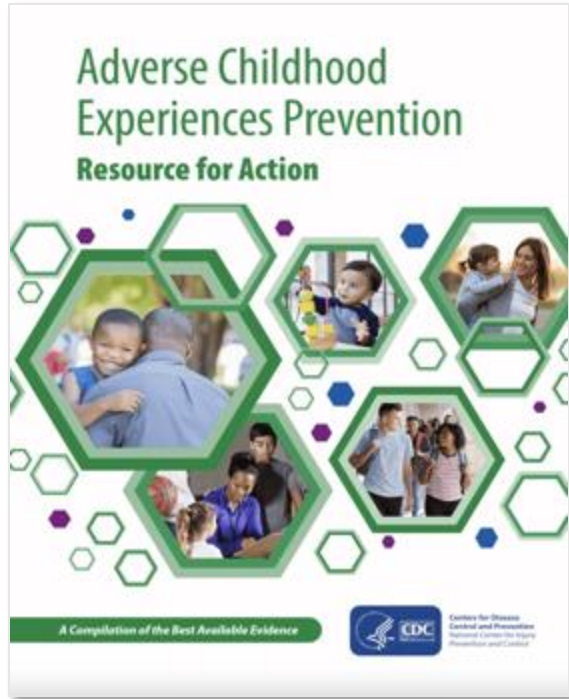
 **Overdose risk  
factors**

 **Circumstances**

 **Comorbidities**

 **Contributing  
Drugs**

# Resources for Action



# Thank You!



[cdc.gov/injury](https://cdc.gov/injury)



@CDCInjury



Centers for Disease  
Control and Prevention  
National Center for Injury  
Prevention and Control



**CAPT Christopher Jones, Pharm.D,  
Dr.PH, MPH**

Director, Center for Substance Abuse  
Prevention  
Substance Abuse and Mental Health Services  
Administration

[samhsa.gov](https://www.samhsa.gov)

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# Leveraging Prevention to Achieve Healthy, Resilient, and Thriving Individuals, Families, & Communities

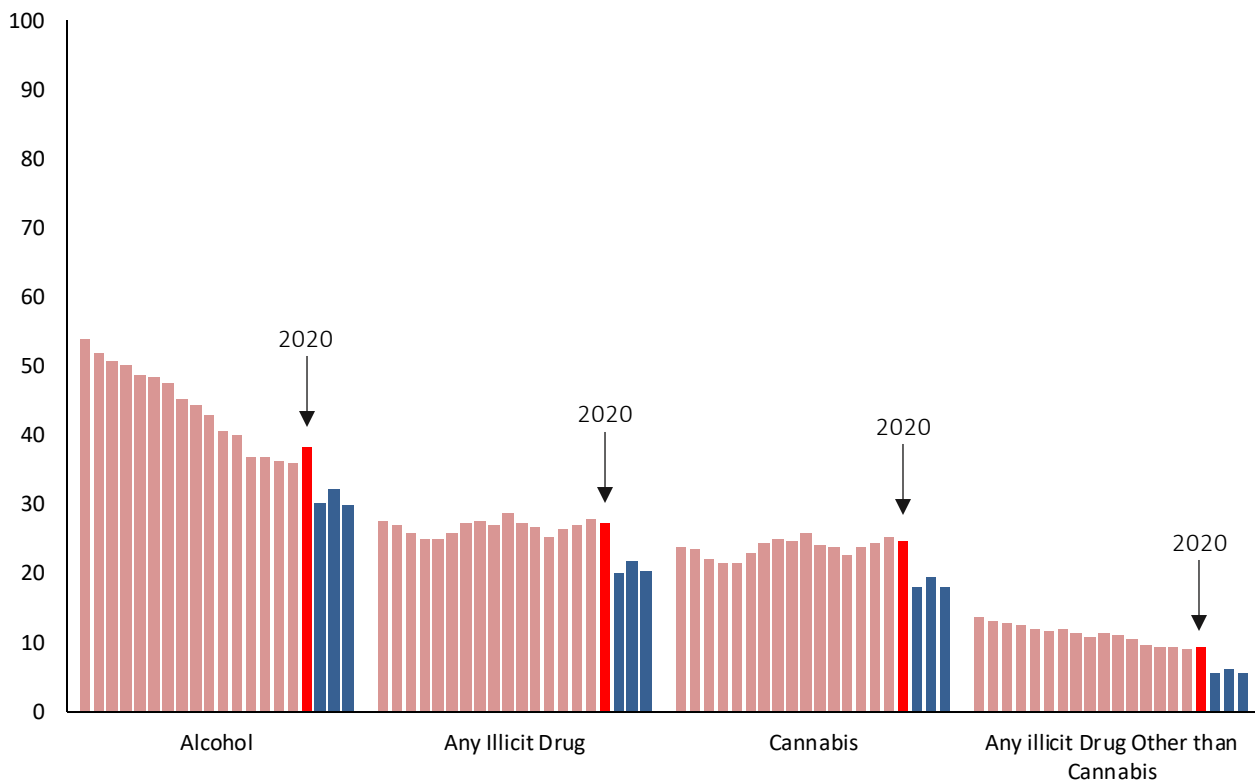
Christopher M. Jones, PharmD, DrPH, MPH  
CAPT, US Public Health Service  
Director, Center for Substance Abuse Prevention  
Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services



**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration

# Substance Use Among Youth – Setting the Stage

Prevalence of Past-Year Use Among 8<sup>th</sup>, 10<sup>th</sup>, 12<sup>th</sup> Grade Students  
Monitoring the Future – 2004-2023



Alcohol – down 44% since 2004; down 16% since 2019

Any illicit drug – down 26% since 2004; down 27% since 2019

Cannabis – down 24% since 2004; down 29% since 2019

Any illicit drug other than cannabis – down 59% since 2004; down 38% since 2019

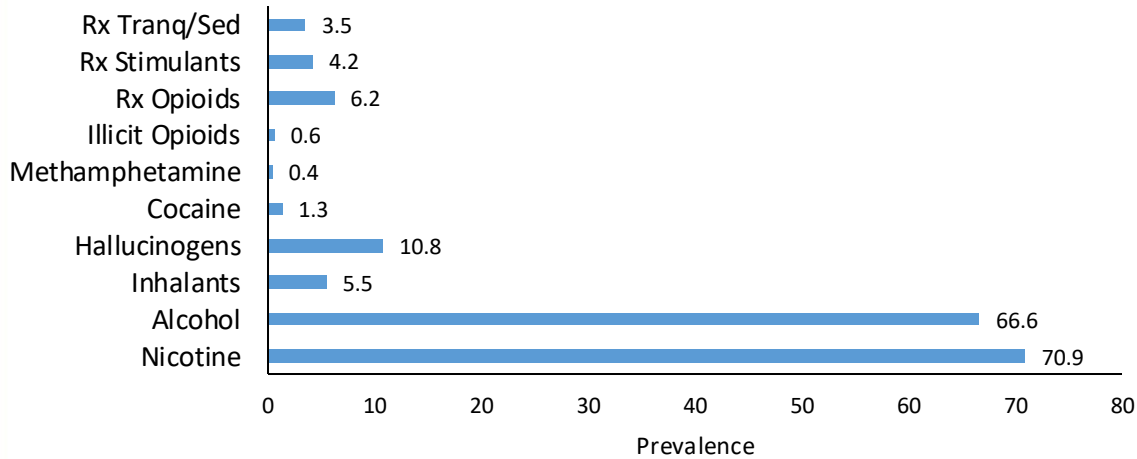
- Youth substance use rates heading in right direction
- Yet, overdose deaths among youth remain at historically high levels – driven by exposure to fake pills and toxic illicit drug market
  - ~1 in 12 deaths among 12-17 year-olds
  - ~1 in 5 deaths among 18-25 year-olds
- Disparities in patterns of use and harms depending on socio-demographics
- Need a holistic approach to **address acute urgency of overdose deaths while remaining laser-focused on addressing root drivers of substance use at the individual, family, school, community and society levels**



# Youth Substance Use Doesn't Happen in a Vacuum

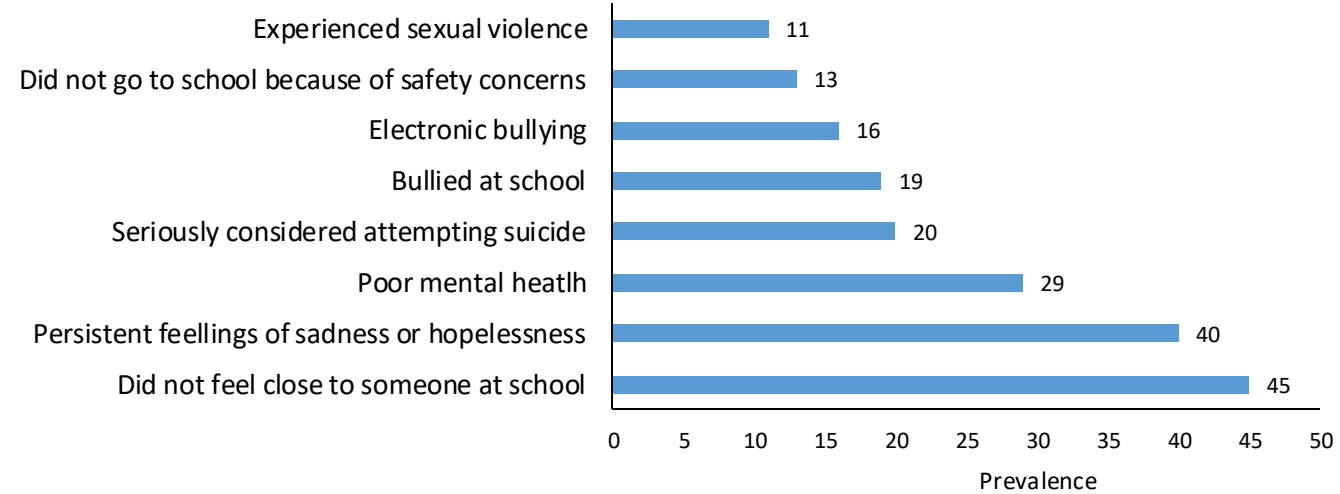
## Poly-Substance Use

Other Substance Use Among Youth Aged 12-17 Using Marijuana in Past Year



## Risk Factors Linked to Substance Use

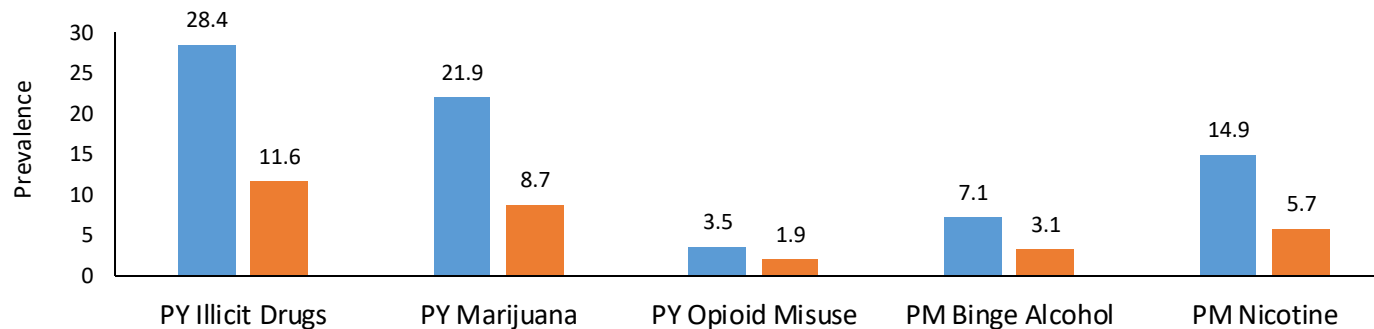
Other Challenges Among High School Students, YRBS 2023



## Mental Health & Substance Use

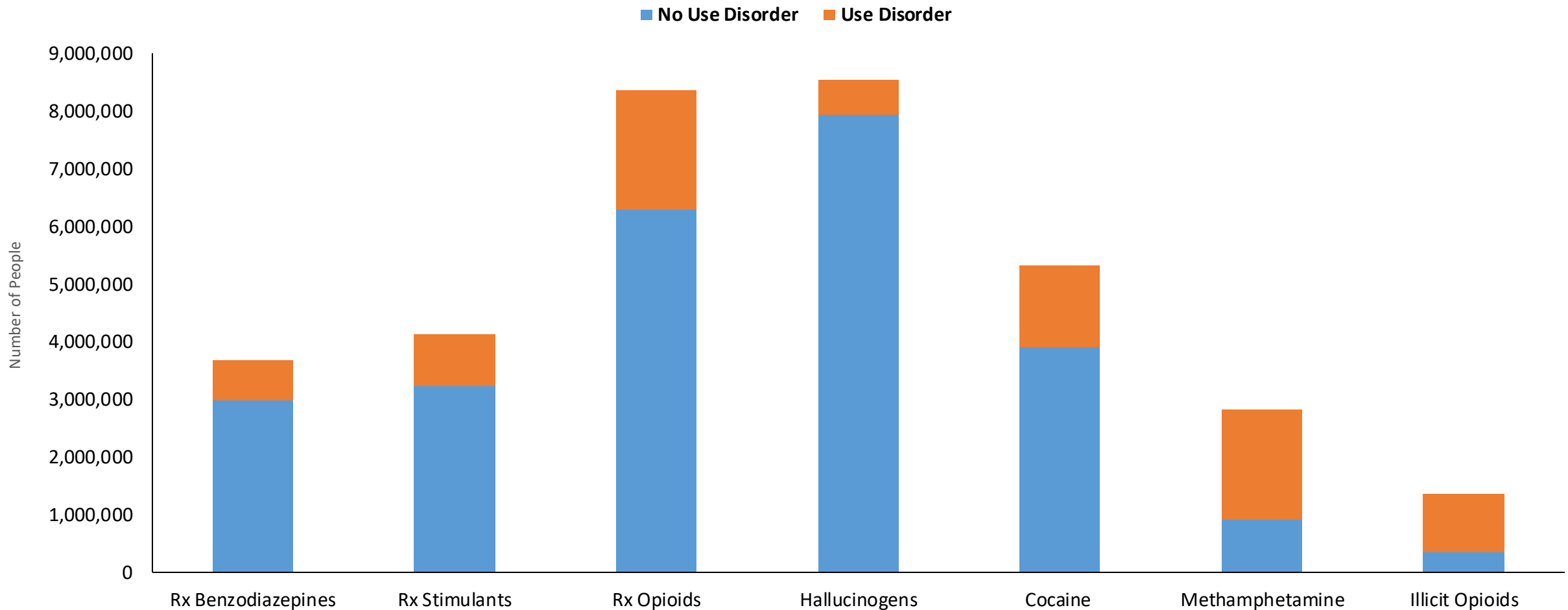
Substance Use by Major Depressive Episode Status 12-17, 2023

■ MDE ■ No MDE



# Many People Who Use Substances Do Not Have SUD But Still At Risk for Progression to SUD & Harms

People 12 and Older Using Substance in Past Year  
(misuse of Rx medications)



Data from 2022 NSDUH Public Use File. Jones CM Analysis 8.3.24

# Prevention Has Never Been More Important

JAMA Psychiatry | Original Investigation

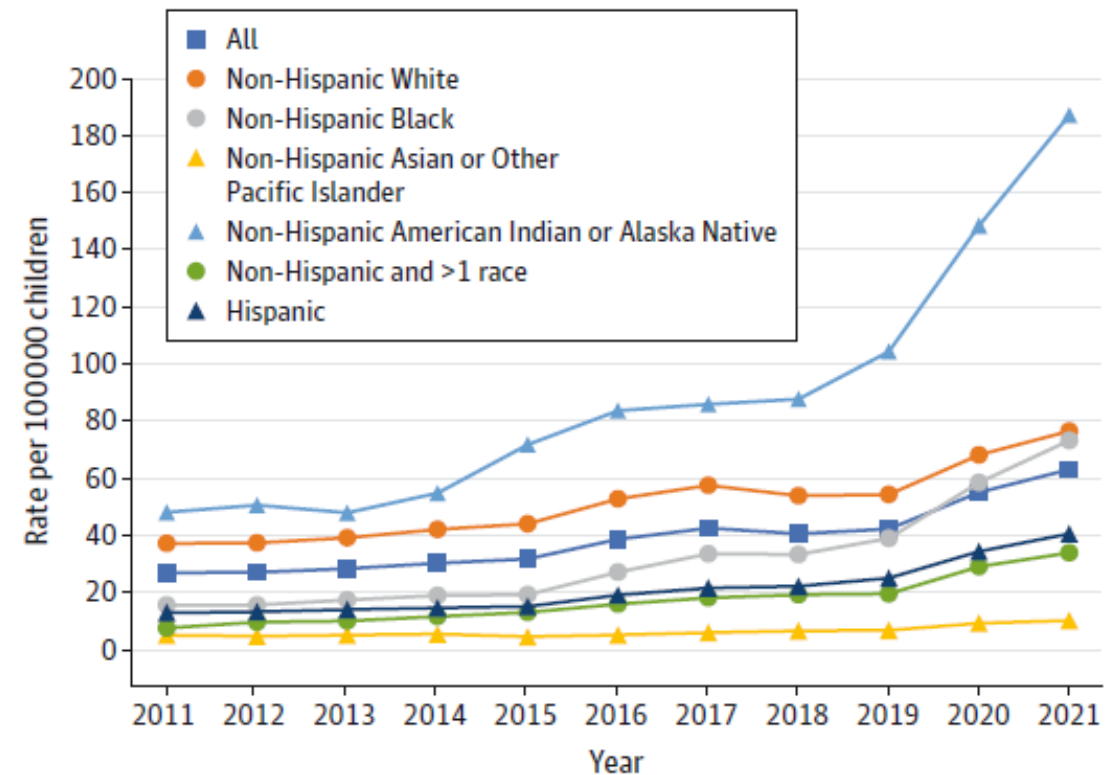
## Estimated Number of Children Who Lost a Parent to Drug Overdose in the US From 2011 to 2021

Christopher M. Jones, PharmD, DrPH, MPH; Kun Zhang, PhD; Beth Han, MD, PhD, MPH; Gery P. Guy, PhD, MPH; Jan Losby, PhD; Emily B. Einstein, PhD; Miriam Delphin-Rittmon, PhD; Nora D. Volkow, MD; Wilson M. Compton, MD, MPE

- Multi-generational impacts of the overdose crisis
- Connected to social, economic and other stressors in homes and communities
- If not addressed comprehensively, we will continue to be playing catch up rather than getting ahead of the crisis

**More than 320,000 kids lost a parent to a drug overdose between 2011 -2021**

Figure 1. Estimated Rate of Community-Dwelling Children Who Lost a Parent to Drug Overdose per 100 000 Children in the US, 2011-2021, by Parental Race and Ethnicity



# Holistic Approach to Substance Use & Overdose

# Guiding Frameworks for SAMHSA's Whole Person Approach



HHS.gov



# The Future We Envision

## • CSAP's Vision

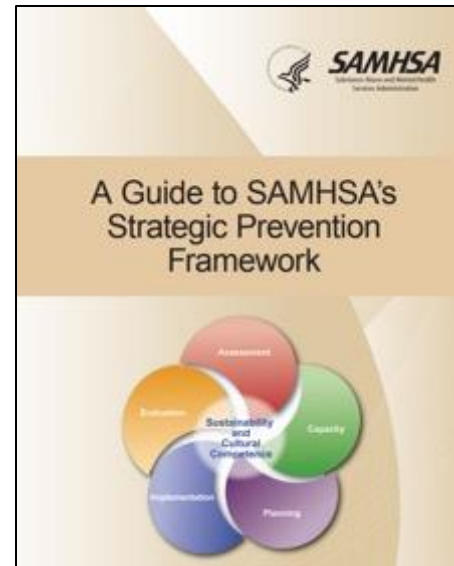
- A future where individuals, families, and communities are healthy and thriving

## • CSAP's Mission

- Provides leadership and collaborates across sectors to advance prevention across the lifespan.
- We aim to:
  - Prevent substance use initiation
  - Prevent progression of substance use
  - Prevent and reduce harms associated with substance use

## • Strategic Priorities

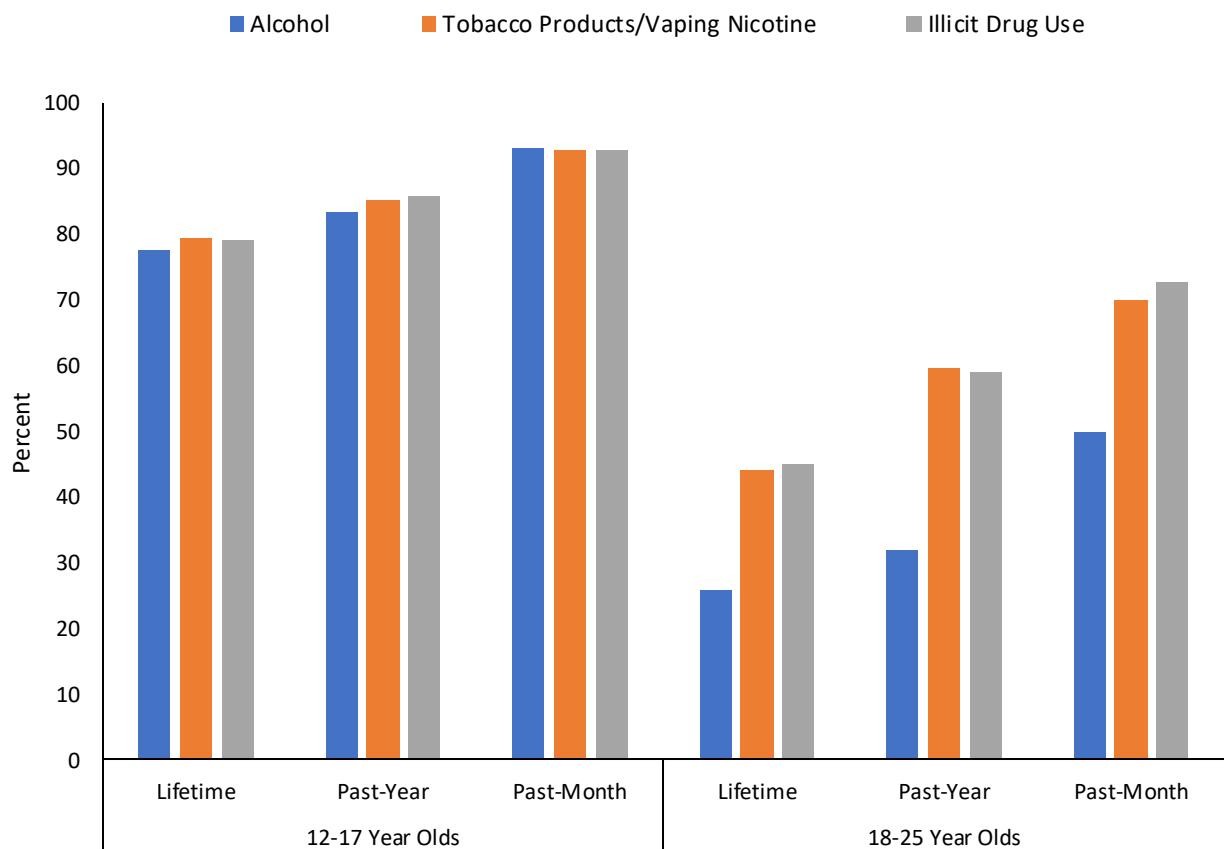
- Analyzing and Disseminating Information on the Latest Data, Trends, and What Works in Prevention
- Building Prevention Capacity at the National, State, Tribal, Territorial, and Local Levels
- Advancing Prevention through Strategic Collaborations and Partnerships
- Raising Awareness and Catalyzing Prevention Action



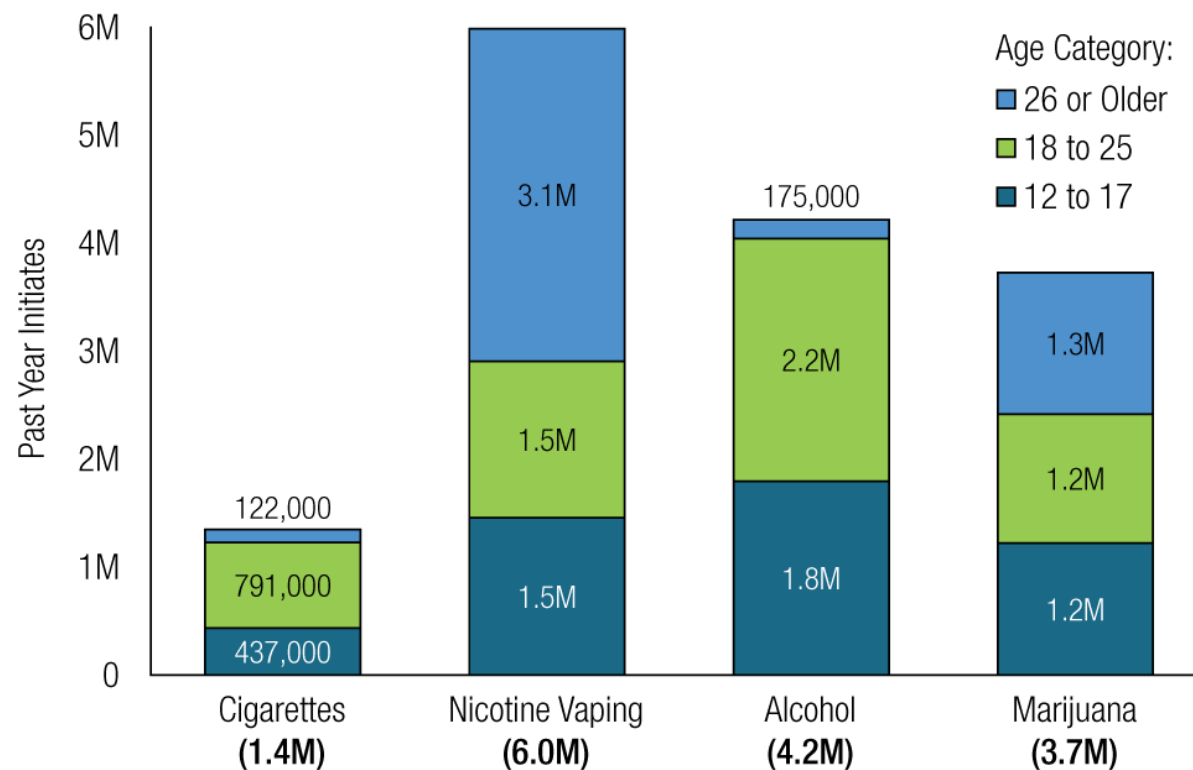
**CSAP Guiding Principles**  
Data-Driven  
Innovative  
Community Informed  
Grounded in Cultural Humility  
Focused on Health Equity  
Inclusive of Social Determinants of Health

# Prevention Needs to Start Early But It Isn't Just for Youth

## Prevalence of Non-Use of Substances

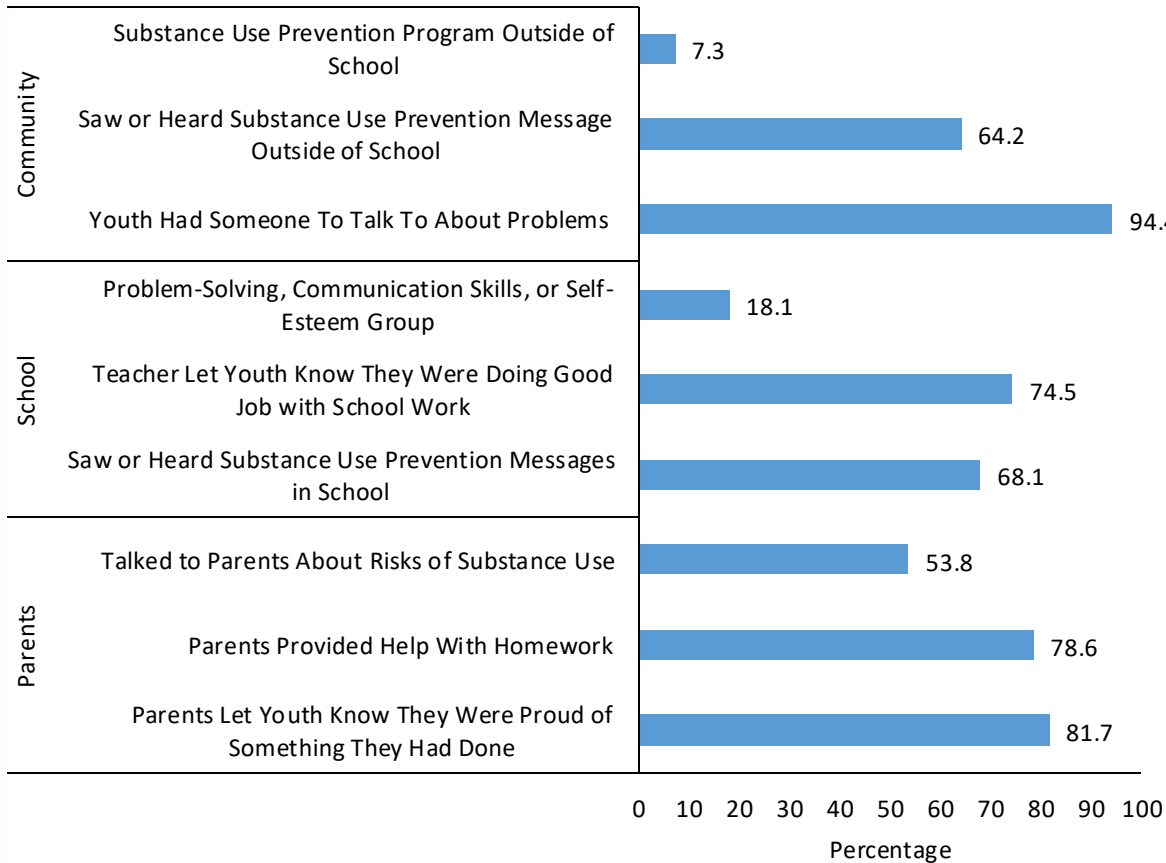


## Initiation Age

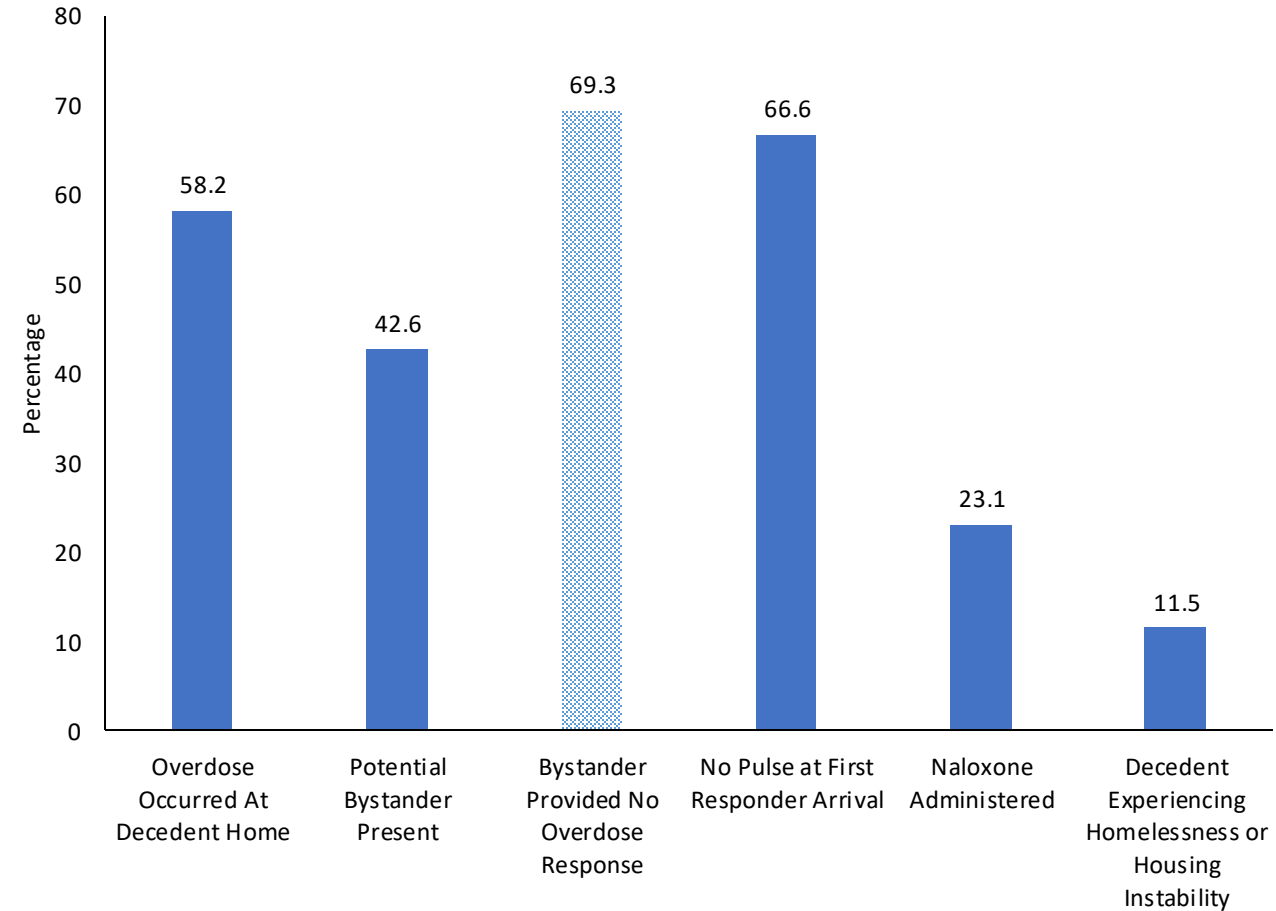


# Prevention Opportunities Across the Spectrum

## Youth Exposure to Prevention Strategies



## Overdose Prevention Opportunities Among Overdose Decedents





# Substance Use Risk Factors – Social-Ecological Model

## Individual

- Genetic factors
- Initiating substance use early
- Low risk perception of use
- Peers who use substances
- Perception of substance use among peers is high
- Early emotional distress or aggressiveness
- Mental health challenges
- ACEs/Trauma

## Relationship

- Substance use in the family and home
- Parental mental health challenges
- Family conflict, abuse, or neglect, other ACEs
- Parents who favorably view or approve of substance use
- Lack of family connectedness

## Community

- Lack of community connectedness and supports
- Community norms favorable toward alcohol and drugs
- Violence in schools or community
- Availability of, access to, and costs of drugs and alcohol
- Toxic and unpredictable drug markets
- Lack of access to health and behavioral health services

## Societal

- Lack of economic and educational opportunities
- Inadequate housing
- Disinvestment
- Discrimination
- Social norms
- Laws and policy environment

**PROTECTIVE FACTORS CAN COUNTER RISK FACTORS - BUILDING INDIVIDUAL, FAMILY, & COMMUNITY RESILIENCE**

Focuses on promoting positive situational, social, and individual characteristics

1) Healthy development of social & emotional competencies; 2) Presence of positive relationships; 3) Safe, protective, & equitable environments

# SAMHSA's Substance Use & Overdose Prevention Programs

## State formula funding for Prevention

- Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant
- Synar Program (youth tobacco prevention)

## State & community discretionary primary prevention programs

- Strategic Prevention Framework – Partnerships for Success (PFS)
  - State NOFO
  - Communities NOFO
- STOP Act Program (Sober Truth on Preventing Underage Drinking)

## Tribal discretionary funding

- Tribal Behavioral Health (Native Connections) – youth/young adult substance use and suicide prevention

## Opioid Overdose Prevention discretionary programs

- Strategic Prevention Framework for Prescription Drugs (SPF-Rx)
- Grants to Prevent Prescription Drug/Opioid Overdose Related Deaths
- First Responders (FR-CARA)
- Improving Access to Overdose Treatment (ODTA)

## HIV discretionary program

- Minority Aids Initiative (MAI) HIV Prevention Navigator Program
- Braided MAI Prevention & Treatment program

## Harm Reduction Grant Program

- COVID-19 supplemental funded

# Empowerment and Engagement Collaborations and Resources



**#MyPreventionStory**



## Voices of Youth: FY2024 Strategic Partnerships

- Communities Talk to Prevent Alcohol and Other Drug Use
- Community Anti-Drug Coalitions of America (CADCA)
- HOSA – Future Health Professionals
- 4-H – Positive Youth Development, Mentorship, and Education
- FentAlert Challenge
- SAMHSA’s Youth Summit, Fall 2024
- State Prevention Policy Academy

<https://www.samhsa.gov/prevention-week/voices-of-youth>

# Thank You!

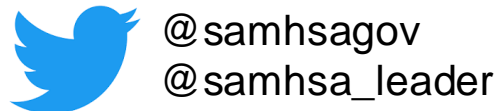
SAMHSA's mission is to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes.

## **Grant Opportunities**

[www.samhsa.gov/grants](http://www.samhsa.gov/grants)  
[www.grants.gov/web/grants](http://www.grants.gov/web/grants)

## **988 Suicide and Crisis Lifeline Toolkit**

[www.samhsa.gov/find-help/988/partner-toolkit](http://www.samhsa.gov/find-help/988/partner-toolkit)





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## **Alexander Crosby, M.D., MPH**

Professor and Vice Chair, Community Health  
and Preventive Medicine

Morehouse School of Medicine

[msm.edu](http://msm.edu)

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# **The patterns and prevention of suicidal behavior among African Americans and American Indian/Alaska Natives**

**Congressional Briefing – Trust for America’s Health  
Challenges in communities from drug overdoses, suicide, and alcohol  
September 2024**

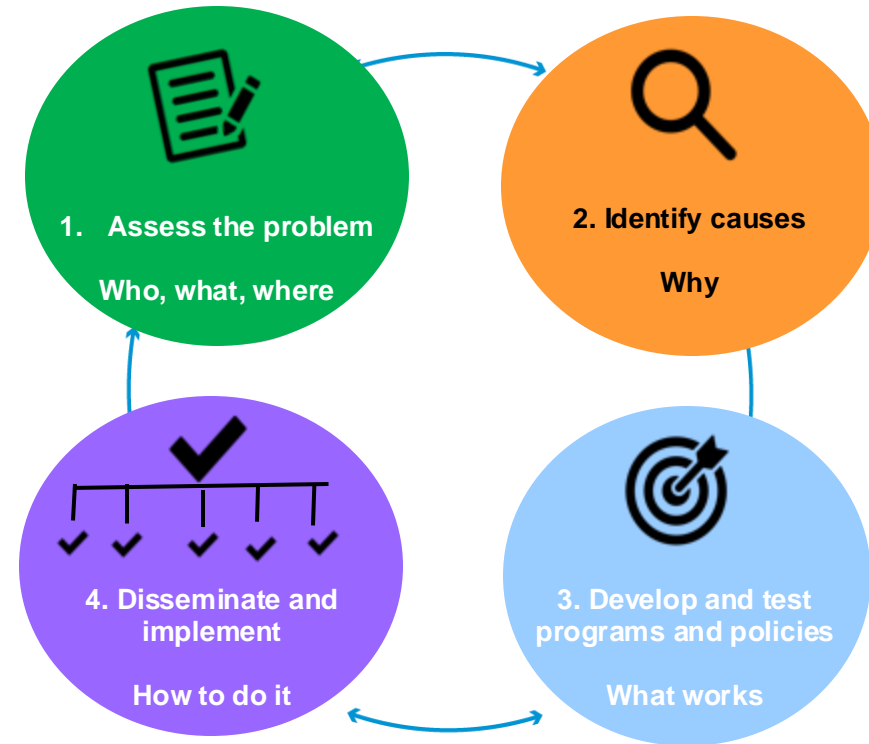
**Alex E. Crosby  
Dept of Community Health and Preventive Medicine,  
Morehouse School of Medicine  
Atlanta, GA**



Disclaimer: “The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of my employers”

# Public Health Approach to Prevention

- The public health approach seeks to answer the foundational questions:
  - What is the problem?
  - How could we prevent it from occurring?
- To answer these questions, public health uses a systematic, scientific method for understanding and preventing suicide.

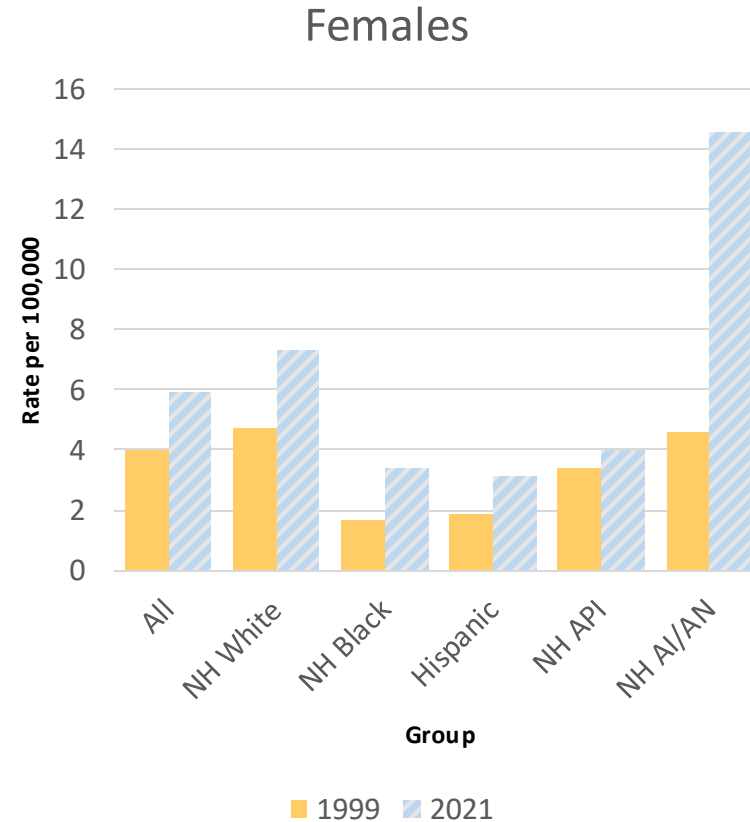
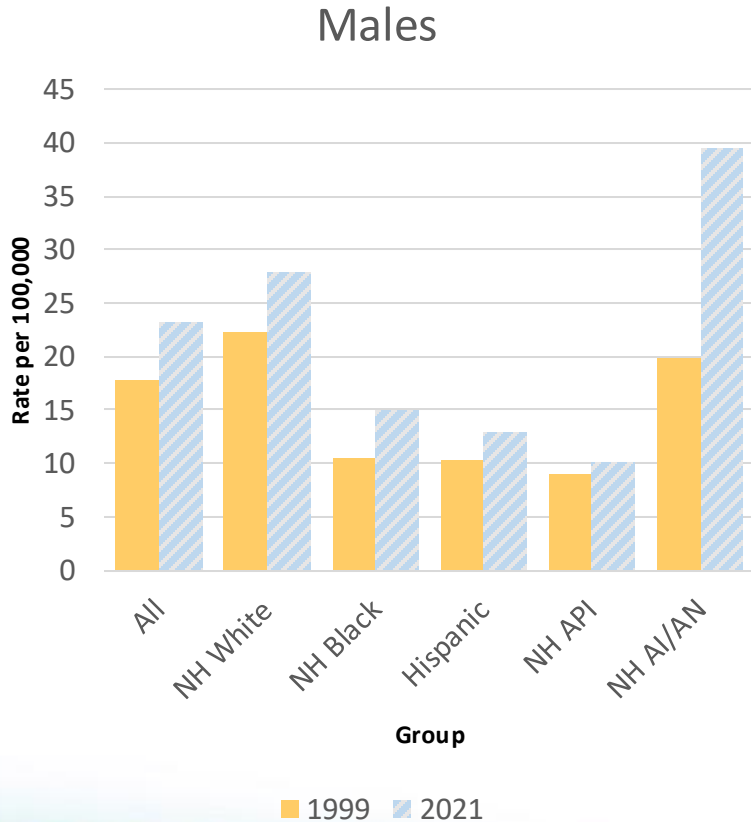


# Leading causes of death by age group – United States, 2022

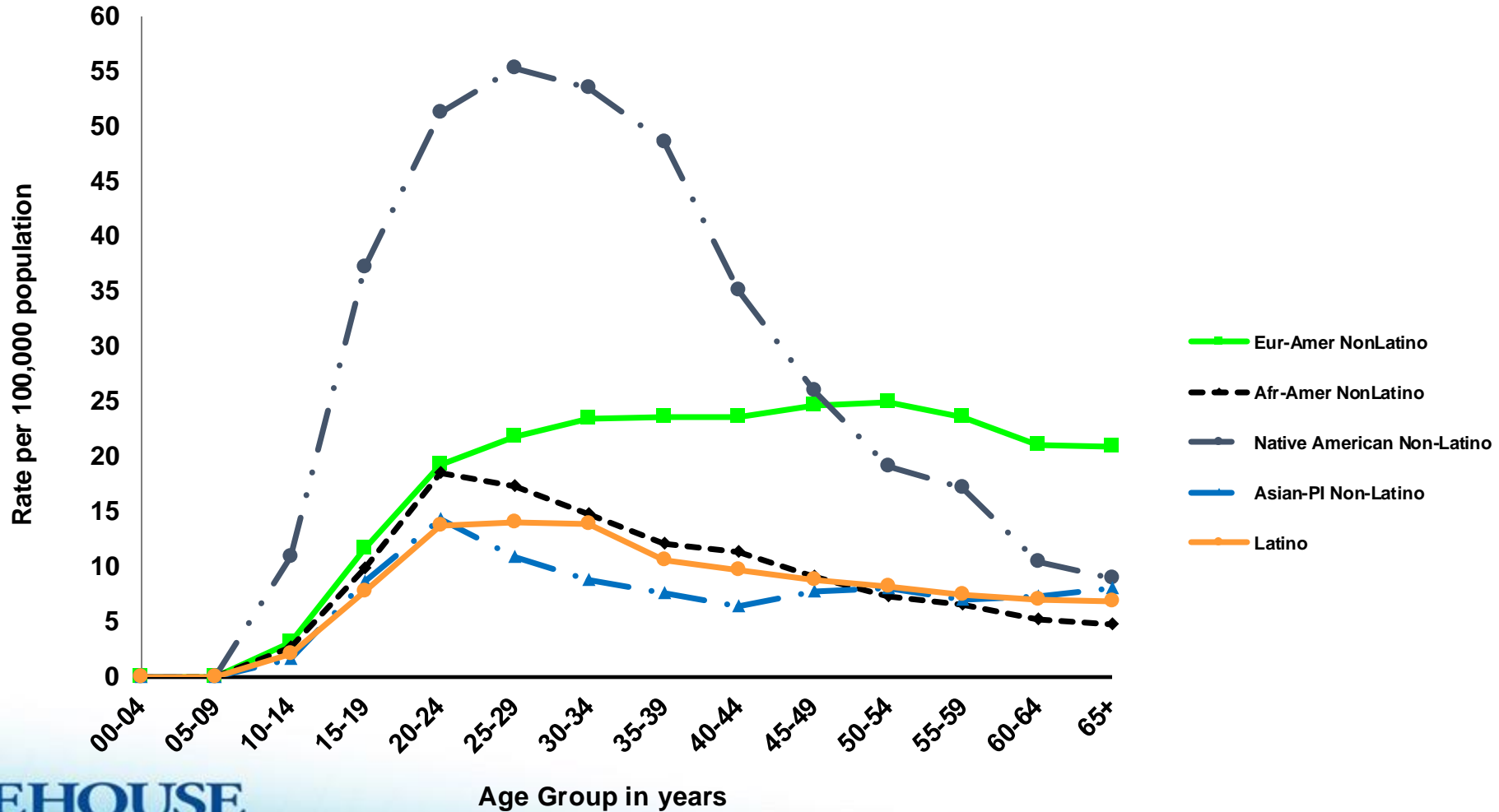
Rank	10-14 years	15-19 years	20-29 years	30-39 years	40-49 years	50-59 years
1	Unintentional Injuries	Unintentional Injuries	Unintentional Injuries	Unintentional Injuries	Unintentional Injuries	Malignant Neoplasms
2	<b>Suicide</b>	Homicide	<b>Suicide</b>	<b>Suicide</b>	Heart Disease	Heart Disease
3	Malignant Neoplasms	<b>Suicide</b>	Homicide	<b>Heart Disease</b>	Malignant Neoplasms	Unintentional Injuries
4	Homicide	Malignant Neoplasms	Malignant Neoplasms	Malignant Neoplasms	<b>Suicide</b>	COVID-19
5	Congenital Malformations	Heart Disease	Heart Disease	Homicide	Liver Disease	Liver Disease
6	Heart Disease	Congenital Malformations	COVID-19	Liver Disease	<b>COVID-19</b>	Diabetes Mellitus
7	COVID-19	COVID-19	Diabetes Mellitus	COVID-19	Diabetes Mellitus	Cerebro-Vascular
8	Chronic Lower Respiratory Ds	Diabetes Mellitus	Liver Disease	Diabetes Mellitus	Homicide	<b>Suicide</b>



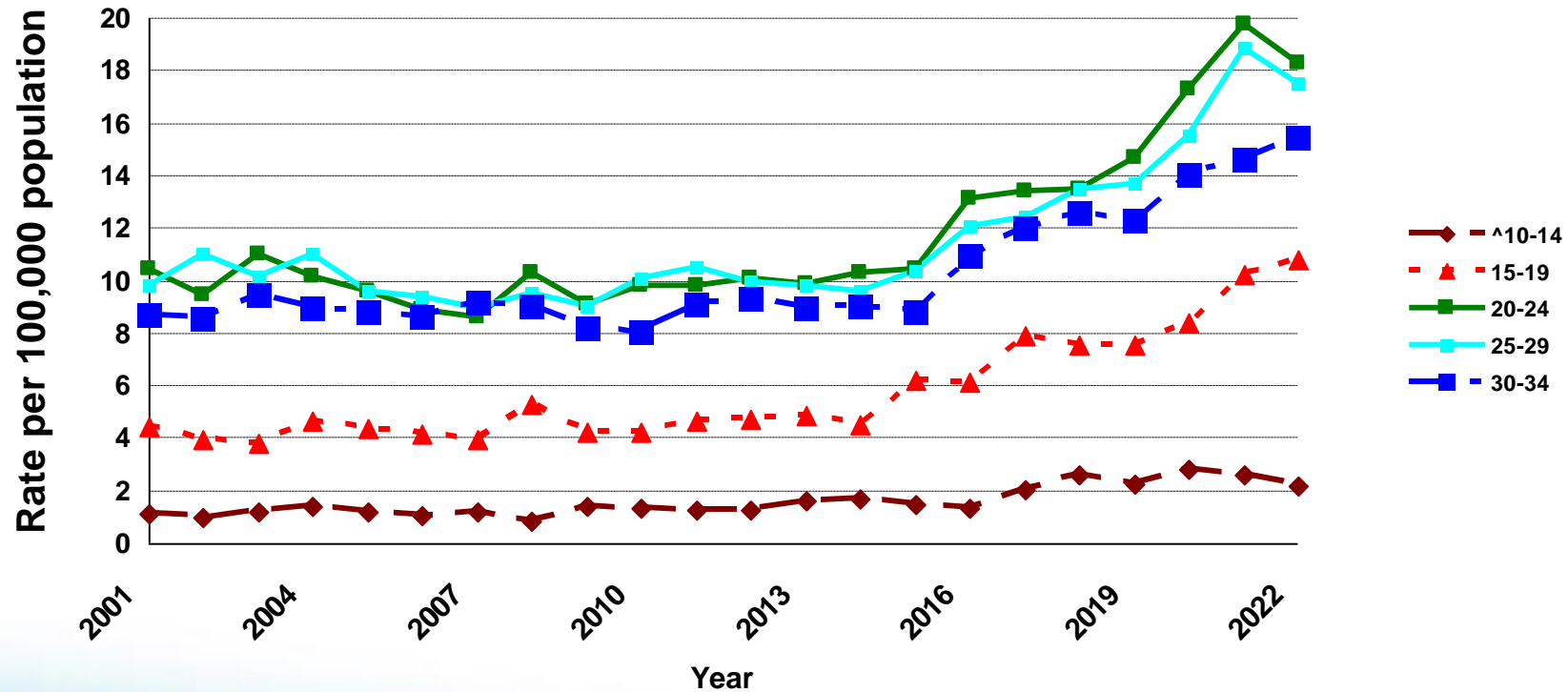
# Suicidal rates among by race/ethnicity and sex -- United States, 1999 and 2022



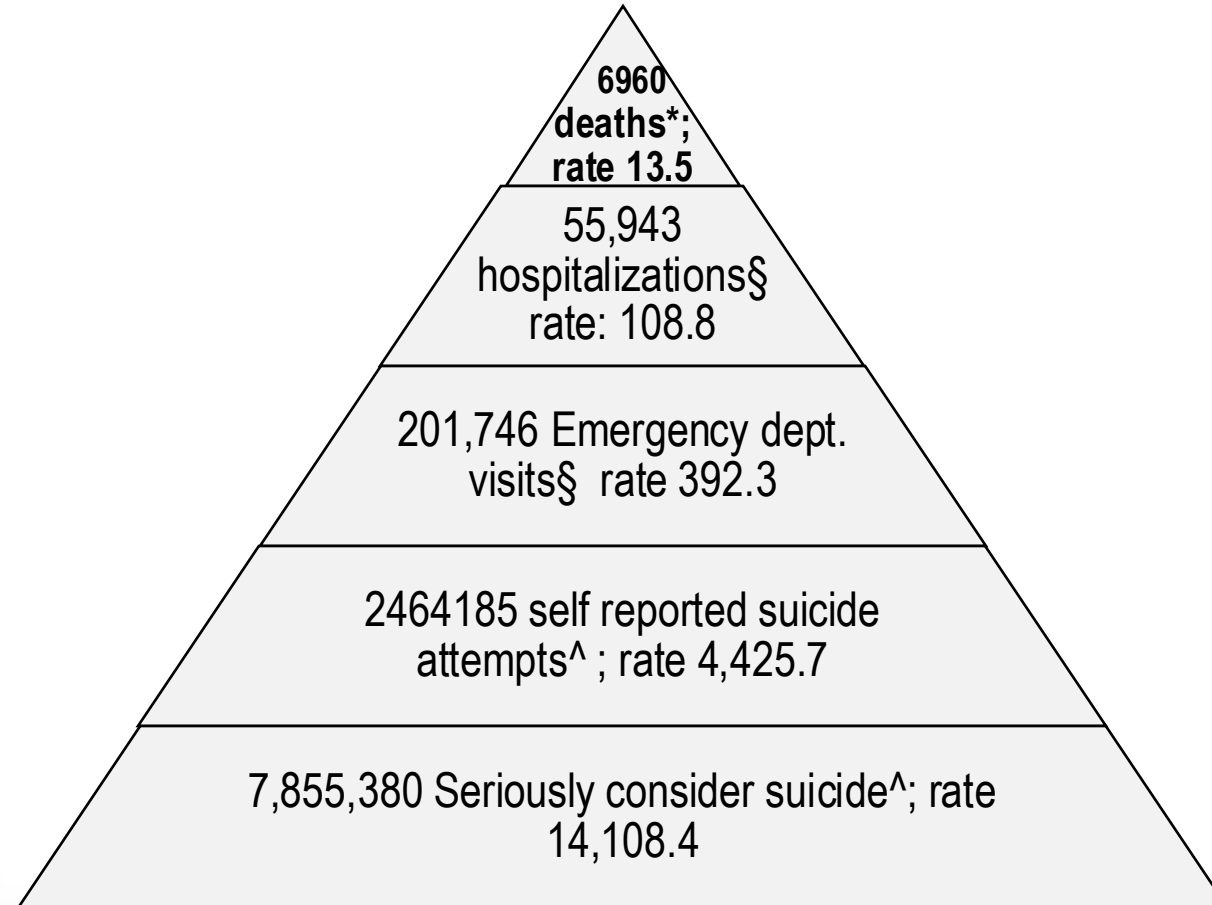
# Suicide rates by ethnicity and age group -- United States, 2020-2022



# Suicide rates among African-Americans aged 10-34 years by age group – U.S., 2001-2022



# Number and rate of self-directed violence among persons aged 14-25 years -- United States, 2019



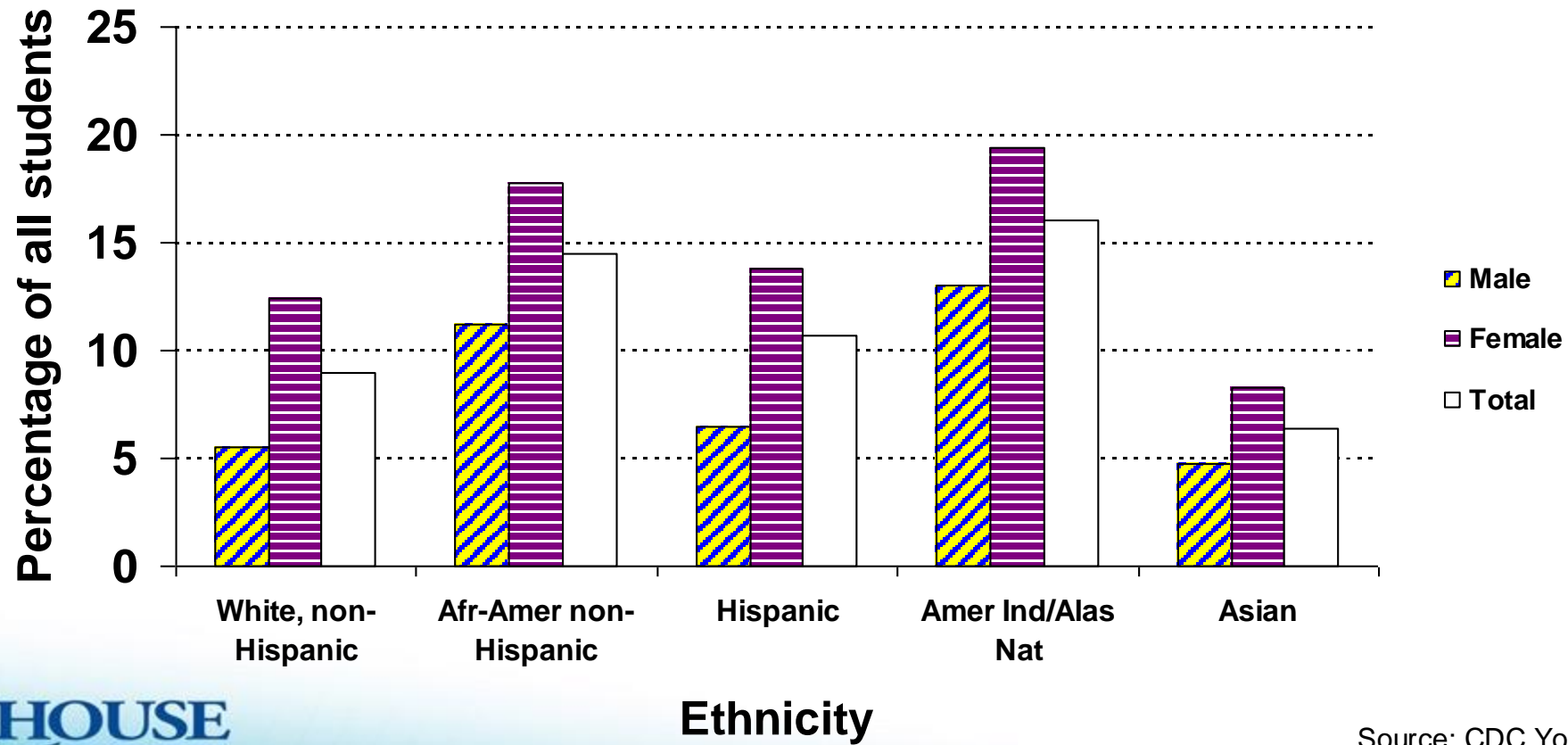
Rates are per 100,000 population

\*Source: CDC's National Vital Statistics System,

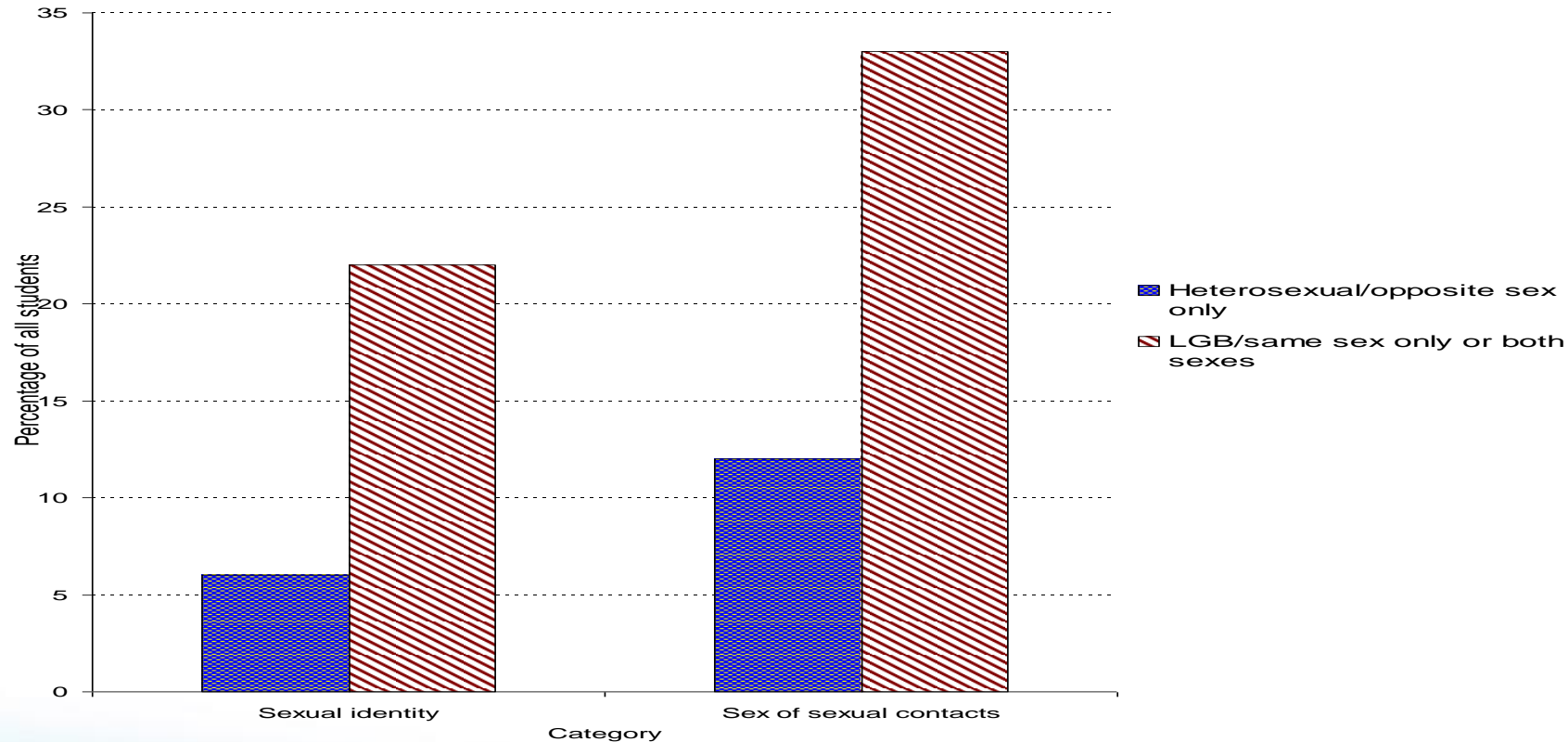
§ Source: CDC's National Electronic Injury Surveillance System-All Injury Program (NEISS-AIP)

^Source: CDC's Youth Risk Behavior Surveillance System and SAMHSA's National Survey on Drug Use and Health

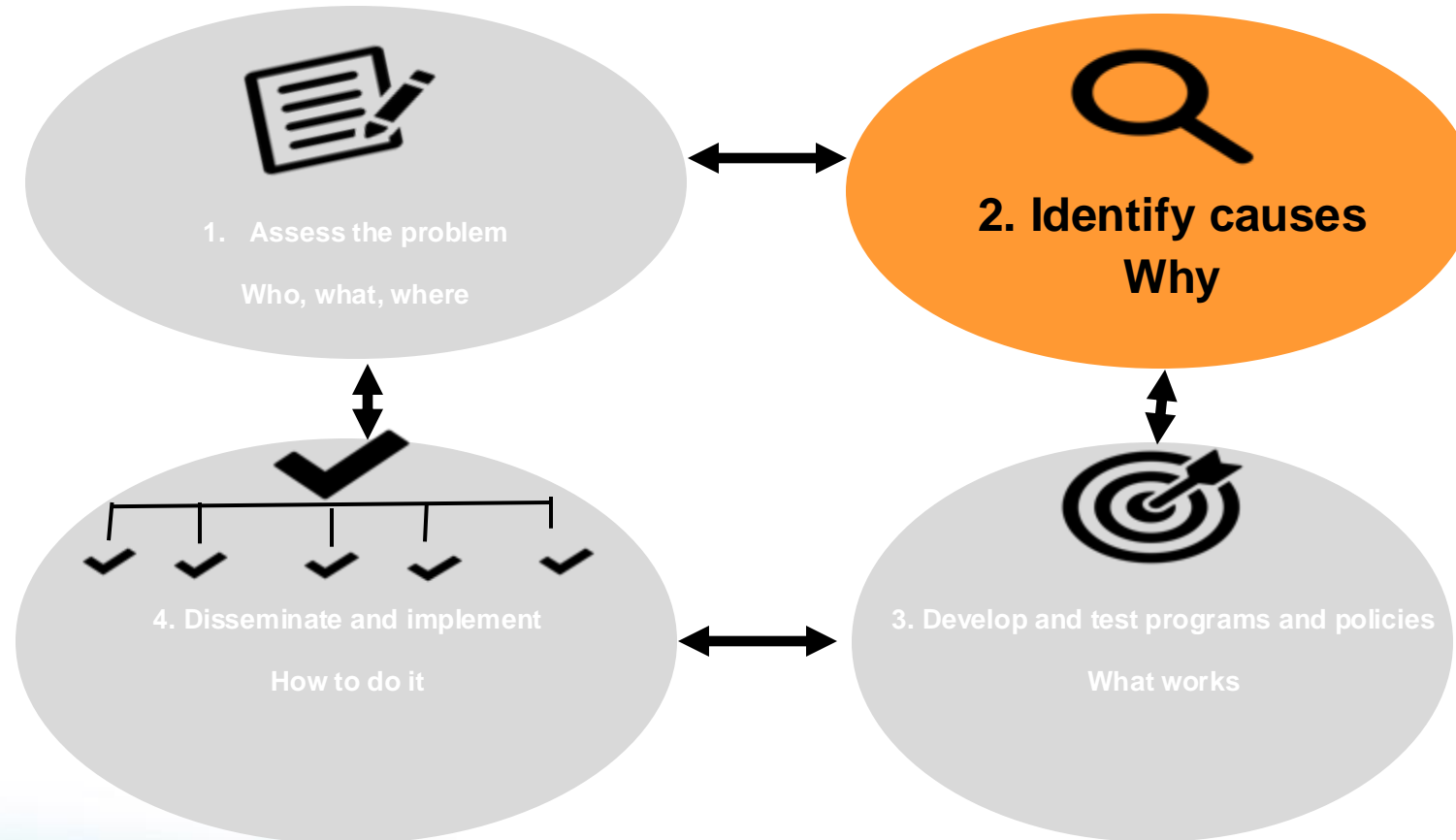
# Suicidal behavior\* among U.S. high school students by category and ethnicity -- United States, 2021



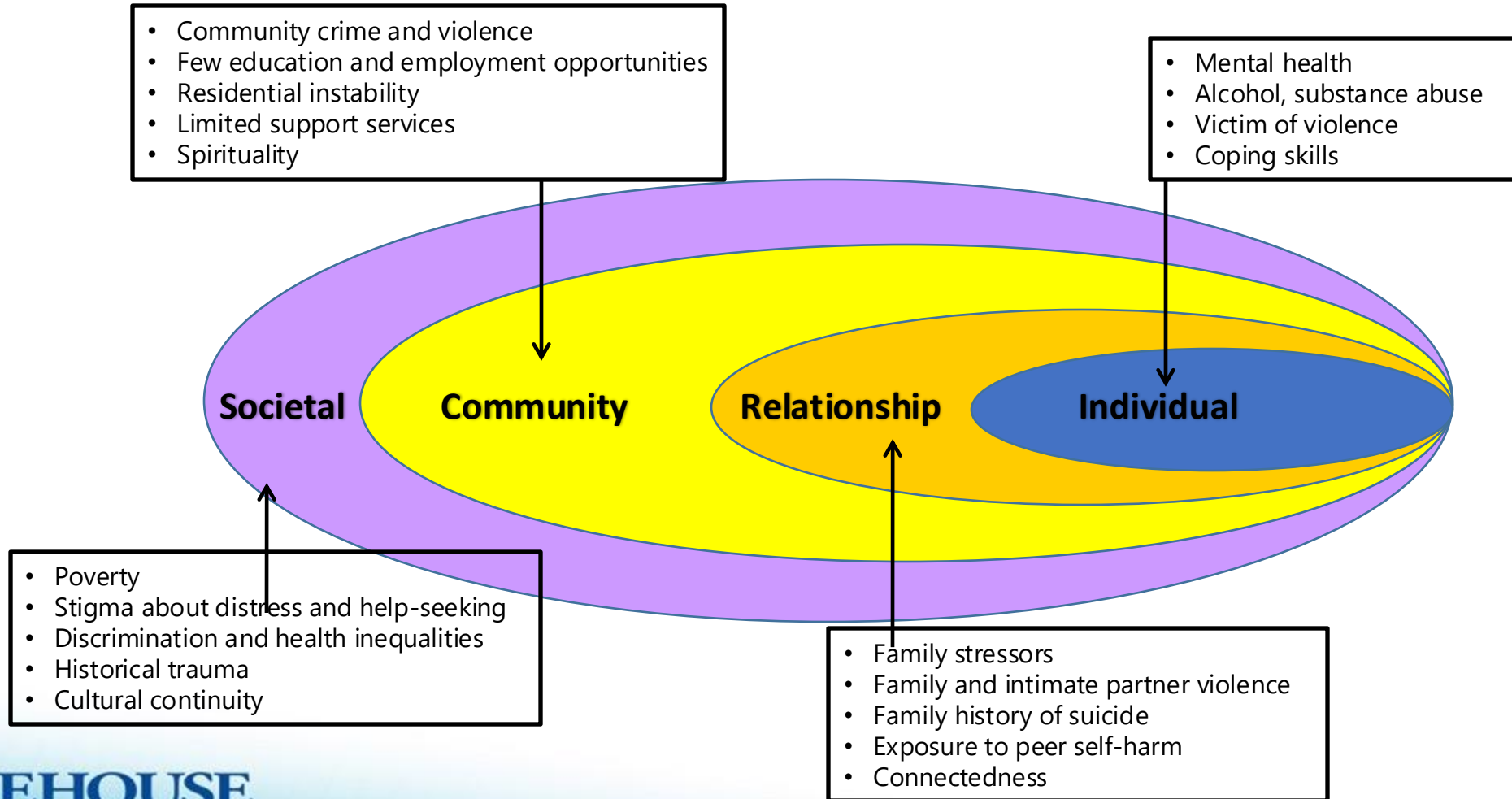
# Suicidal behavior\*^ among high school students by sexual identity# and sexual contact – U.S., 2021



# Public Health Approach to Suicide Prevention



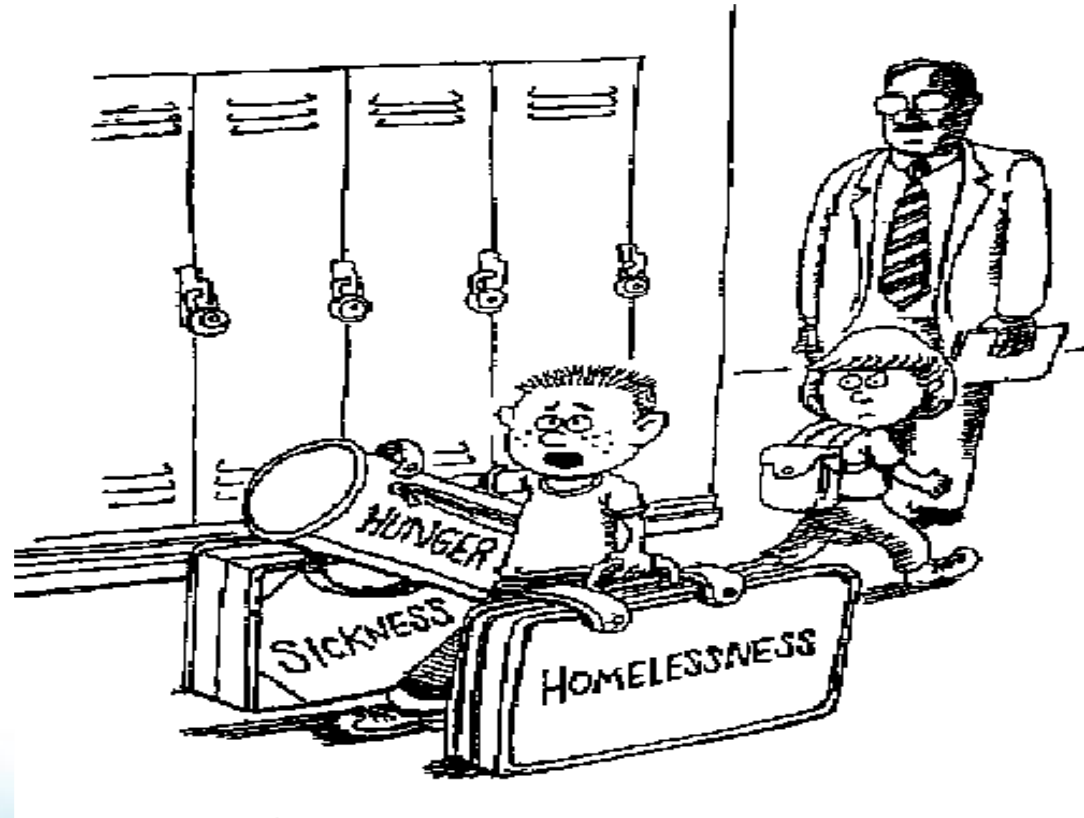
# Social ecological model for risks and protective factors for suicidal behavior



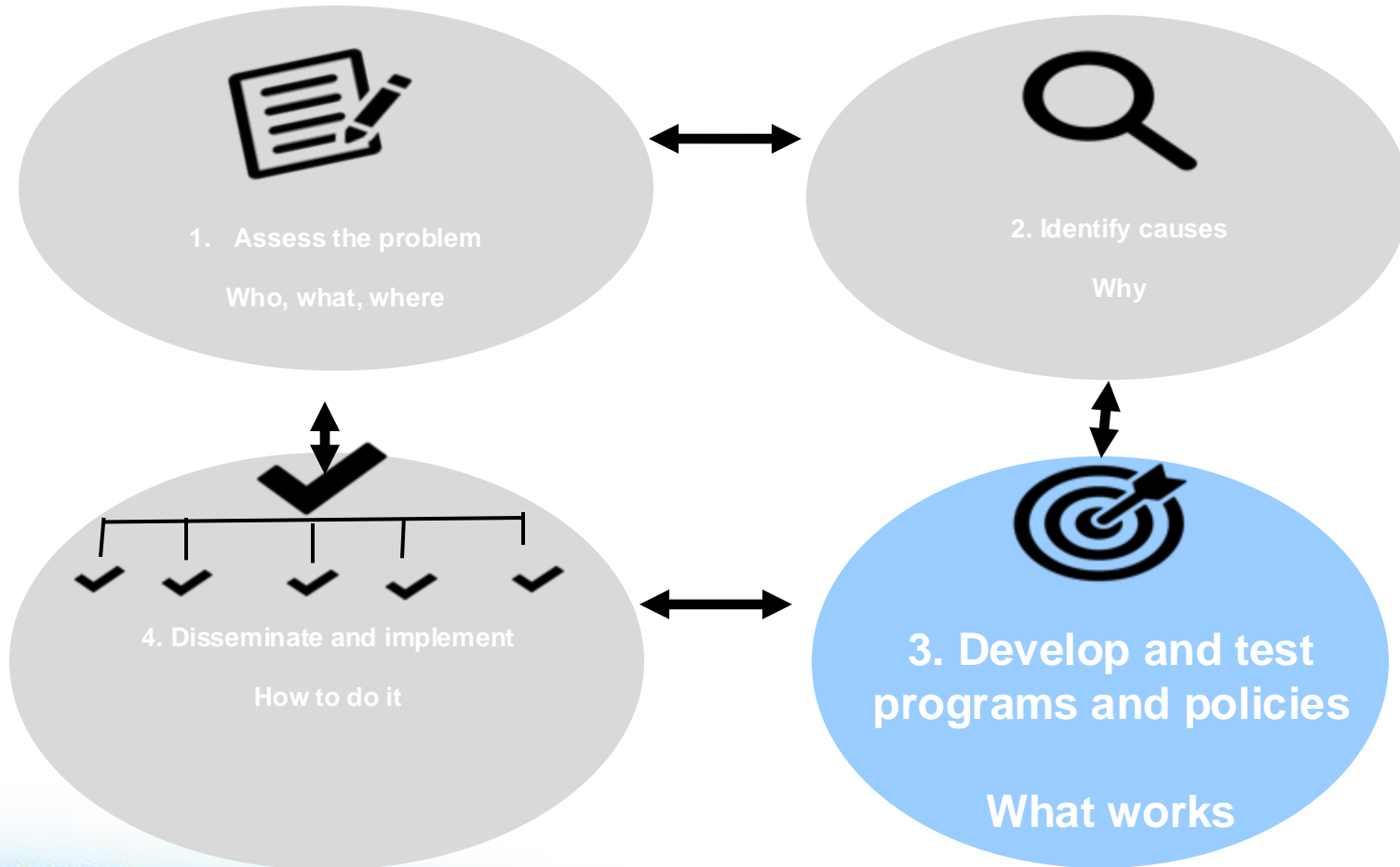


# Can somebody help me with these?

Overlapping factors



# Public Health Approach to Suicide Prevention



# Moving Prevention Upstream



- Cognitive behavioral
- Crisis response



- Gatekeeper training
- Reduce Substance misuse

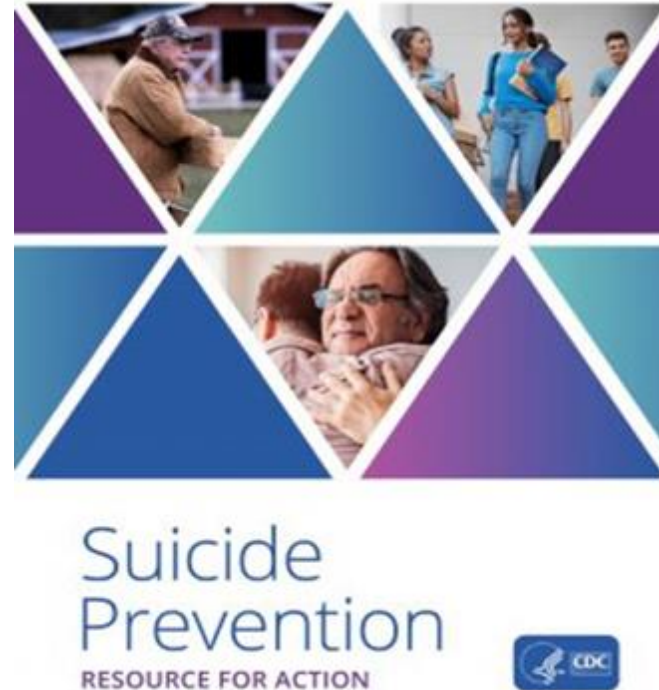


- Economic supports
- Coping or problem-solving skills



# CDC's Resources for Action Formerly - Technical Packages

- Child Abuse and Neglect
- Sexual Violence
- Youth Violence
- Intimate Partner Violence
- Suicide Prevention
- Adverse Childhood Experiences



<https://www.cdc.gov/suicide/resources/prevention.html>

Source: CDC. (2022). Suicide Prevention Resource for Action: A Compilation of the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

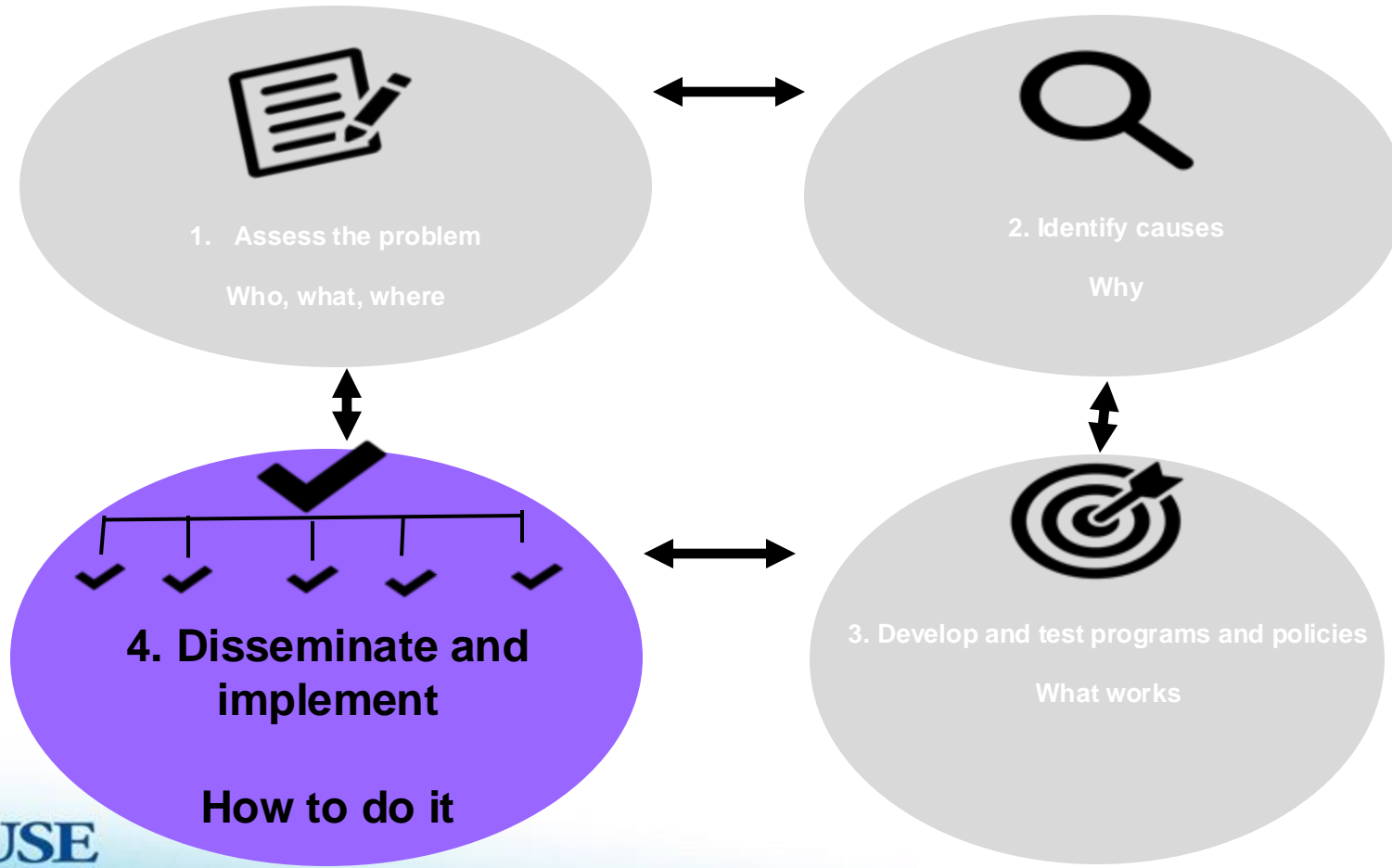
# Preventing Suicidal Behavior – Resources for Action

Strategy	Approach
1. Strengthen economic supports	<ul style="list-style-type: none"> <li>• Strengthen household financial security</li> <li>• Housing stabilization policies</li> </ul>
2. Strengthen access and delivery of suicide care	<ul style="list-style-type: none"> <li>• Coverage of mental health conditions in health insurance policies</li> <li>• Reduce provider shortages in underserved areas</li> <li>• Safer suicide care through systems change</li> </ul>
3. Create protective environments	<ul style="list-style-type: none"> <li>• Reduce access to lethal means among persons at-risk of suicide</li> <li>• Organizational policies and culture</li> <li>• Community-based policies to reduce excessive alcohol use</li> </ul>
4. Promote connectedness	<ul style="list-style-type: none"> <li>• Peer norm programs</li> <li>• Community engagement activities</li> </ul>
5. Teach coping and problem-solving skills	<ul style="list-style-type: none"> <li>• Social-emotional learning programs</li> <li>• Parenting skill and family relationship approaches</li> </ul>
6. Identify and support people at risk	<ul style="list-style-type: none"> <li>• Gatekeeper training</li> <li>• Crisis intervention</li> <li>• Treatment for people at-risk of suicide</li> <li>• Treatment to prevent re-attempts</li> </ul>
7. Lessen harms and prevent future risk	<ul style="list-style-type: none"> <li>• Postvention (i.e., activities which reduce risk and promote healing after a suicide death)</li> <li>• Safe reporting and messaging about suicide</li> </ul>



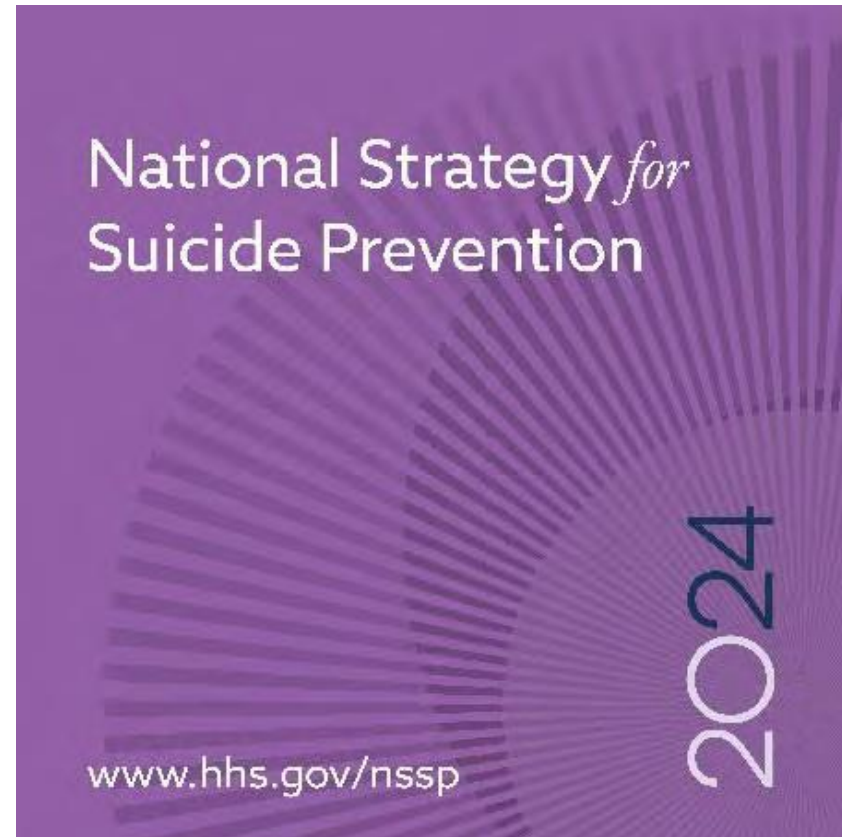
Source: Stone, D.M., Holland, K.M., Bartholow, B., Crosby, A.E., Davis, S., & Wilkins, N. (2017). Preventing Suicide: A Technical Package of Policy, Programs, and Practices. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

# Public Health Approach to Suicide Prevention



# National Strategy for Suicide Prevention (NSSP 2024 version)

- 15 goals & 85 objectives,
- 4 strategic directions,
- Strategic Directions
  1. Community-Based Suicide Prevention.
  2. Treatment and Crisis Services.
  3. Surveillance, Quality Improvement, and Research.
  4. Health Equity in Suicide Prevention



Source: U.S. Department of Health and Human Services (HHS), National Strategy for Suicide Prevention. Washington, DC: HHS, April 2024.

# Conclusion

- Suicide is a significant public health problem
- Results from an interaction of factors
  - never a single item that causes a suicide
  - multiple opportunities for action
- Research has shown much of suicidal behavior can be prevented
- Broad responsibility for addressing the issue
  - communities must work together
  - no one person or group can do it alone





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# Submit Questions for Our Panelists



**Allison Arwady, M.D., MPH**  
Director, National Center for Injury  
Prevention and Control  
Centers for Disease Control and  
Prevention



**CAPT Christopher Jones, Pharm.D.,  
Dr.PH, MPH**  
Director, Center for Substance Abuse  
Prevention  
Substance Abuse and Mental Health  
Services Administration



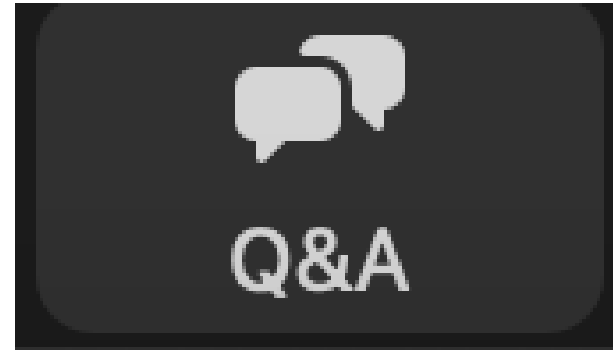
**Alexander Crosby, M.D., MPH**  
Professor and Vice Chair, Community  
Health and  
Preventive Medicine  
Morehouse School of Medicine



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# Q&A Feature

1. At the bottom of your screen, click to open the Q&A panel
2. Type your question in the **Q&A box**
3. Hit **Enter**



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# Thank You to Our Moderator and Panelists



**Tekisha Dwan Everette, Ph.D.,  
MPA, MPH, CPH**  
Executive Vice President  
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# Thank you!

@HealthyAmerica1 

The recording and slides will be available at [tfah.org](https://tfah.org)

