Nov 4, 2020

RE: Record Number of Drug Overdose Deaths in 2020 (Including Data by Race/Ethnicity)

Dear Community Providers,

This alert is in response to rapid changes in drug overdose deaths that were identified during fatality surveillance conducted by the Community Mental Health and Addiction unit. In 2020 we have confirmed a total of 334 overdose deaths through the first nine months of the calendar year in Pima County. This count nearly matches the record breaking total of 337 deaths reported in all of 2019. With three full months remaining, it is anticipated that Pima County will experience between 425-450 total overdose deaths by the end of the year. The highest peak was seen in June-August, which represented an unprecedented 152 fatalities in a three month period (figure 1).

As expected, the high number of drug deaths in this time period also revealed significant emerging demographic trends. Black and American Indian communities have been disproportionately impacted by higher fatality rates (figure 2). Through the first nine months of 2020, the overdose death rate for Black and American Indians has increased by 47% and 36%, respectively. Current overdose death rates for these two racial groups highlight a growing disparity that nearly doubles the rate of the next closest group (White Non-Hispanics).

With respect to age, a similar disproportionate impact was seen in 20-29 year olds. In the first three quarters of 2020, there have been 76 drug deaths in this age group, a 19% increase from the end of 2019. With three months still remaining, this is the highest number of drug deaths ever recorded for this age group in a given year. The largest causal factor remains the lethal presence of non-pharmaceutical fentanyl.

Regardless of age, race, or ethnicity, the risk factors for drug overdose remain the same. The primary difference in 2020 has been the sudden change in environmental conditions triggered by current mitigation policies, which have amplified existing risk factors associated with drug use and addiction.
**Risk Factors to Consider**

- Individuals impacted by eviction, unemployment, loss of insurance, school closures, divorce, domestic violence, isolation, and other forms of trauma.
- People who are personally affected by recent events highlighting racism and discrimination in communities around the nation.
- Individuals who use drugs alone or in secret from others who may be present.
- Drug use following a period of abstinence or depleted tolerance, particularly in close proximity to release from hospital, jail, prison, or treatment program.
- Consuming multiple drugs simultaneously or in close proximity. This is particularly true when an opioid is mixed with another sedative like alcohol, benzodiazepines, or hypnotics.
- The combination of psychostimulants and sedatives significantly increases the risk of overdose.
- People experimenting with drugs with little tolerance and poor understanding of the risks.

**Provider Recommendations**

- Understand the importance of being responsive to highly publicized events involving racism and the severe strain these stories place in our communities, and the potential impact on substance use.
- Alert patients and post signs in clinics and other health care settings explaining the extreme risk of overdose/death associated with fentanyl due to its high potency and unpredictable concentrations.
- Place emphasis on educating younger populations who are likely to have very little physical tolerance to drugs, and also a poor understanding of the health risks associated with drug use.
- Distribute fentanyl test strips and Naloxone to high-risk individuals and their family.
- Promote harm reduction strategies to mitigate risks (e.g. never use alone, carry naloxone, and never use multiple drugs simultaneously).
- Ensure your agency has access to Naloxone at all clinics, and that staff who engage directly with patients and families are trained in recognizing the signs of an overdose and when/how to administer Naloxone.

In behavioral health, we are all too familiar with the harms of stigma, which has imposed feelings of hopelessness, being unheard, and unrecognized for decades. These feelings are most frequently due to how mental illness and addiction is perceived in the public eye. We’ve worked tirelessly to reverse the fear, isolation, avoidance, and discrimination of this population. We ask that you use those same principles to help support and acknowledge that the same is true of prejudice and discrimination based on race or skin color.

As always, the Health Department will continue to conduct surveillance and share important developments in a transparent, responsive fashion. To obtain free overdose prevention trainings and free Naloxone kits, please contact our Community Mental Health and Addiction team at CMHA@Pima.Gov or contact Sonoran Prevention Works at cthomas@spwaz.org or call (520) 402-7748.

Sincerely,

Mark Person, MSP  
Program Manager  
Community Mental Health and Addiction