

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

Major National Findings

New data show that deaths due to drug overdose and alcohol are down nationally, but this progress is uneven across population groups and at risk due to cuts to federal health programs and workforce.

Combined Death Rate



The combined rate of alcohol, drug, and suicide deaths was down nationally in 2023 for the second straight year (National Center for Health Statistics (NCHS)).



Still, over 200,000 Americans died due to alcohol, drugs, and suicide in 2023, twice the rate of such deaths 20 years ago (NCHS).

Suicide Deaths



Overall mortality due to suicide was virtually unchanged between 2022 and 2023, maintaining a rate of 14.1 deaths per 100,000 (NCHS).

Drug Deaths



The overall age-adjusted drug overdose mortality rate decreased 4 percent from 32.6 deaths per 100,000 people in 2022 to 31.3 deaths per 100,000 in 2023 (NCHS). Provisional data predict an unprecedented 27 percent one year drop from 2023 to 2024.



There is concerning variation underlying the recent positive trends. In 2023, white people were the only racial/ethnic group that experienced a statistically significant decrease in drug overdose deaths. The rates were highest among American Indian/Alaska Native people, Black people, and males.

Alcohol Deaths



For 2023, the alcohol-induced mortality rate decreased by 7 percent to 12.6 deaths per 100,000 people, continuing the decline that began in 2022 (NCHS).

For the full report, go to:

https://www.tfah.org/report-details/pain-in-the-nation-2025/

Substance Use and Mental Health Data, 2022-2023

US

Vermont

17%

Illicit drug use among 12+ population (past month)



22%

Binge drinking among 12+ population (past month)



17%

Substance Use
Disorder
among 12+ population
(past month)



6%

Serious mental illness among 18+ population (past month)



5%

Serious thoughts about suicide among 18+ population (past month)



29%

Poor mental health among high schoolers (past year)



20%

Seriously considered suicide among high schoolers (past year)



15%

ACEs among children 0-17 (past month)

17%



Key Recommendations for Congress



Protect investments in behavioral health and injury and violence prevention by providing robust funding for CDC's National Center for Injury Prevention and Control (Injury Center) and SAMHSA, and fully restoring the workforces at these distinct and vital entities.



Continue to expand effective programs, like CDC's Overdose Data to Action and the Youth Risk Behavior Surveillance System, which track emerging trends by geographic, demographic, and drug type and provide resources and data to guide local, state, and national responses and to prevent overdoses and deaths.



Address upstream drivers of substance use and mental health challenges among children and youth by passing the Preventing Adverse Childhood Experiences Act and the RISE from Trauma Act and increasing funding for CDC's Adverse Childhood Experiences program and Division of Adolescent and School Health, and SAMHSA's National Child Traumatic Stress Network.



Bolster the continuum of community-based crisis intervention programs by strengthening the 988 Suicide and Crisis Lifeline and related services.



Sustain the prevention, treatment, and recovery workforce and promote access to behavioral health services for anyone needing such services by reauthorizing provisions of the SUPPORT for Patients and Communities Act.

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