



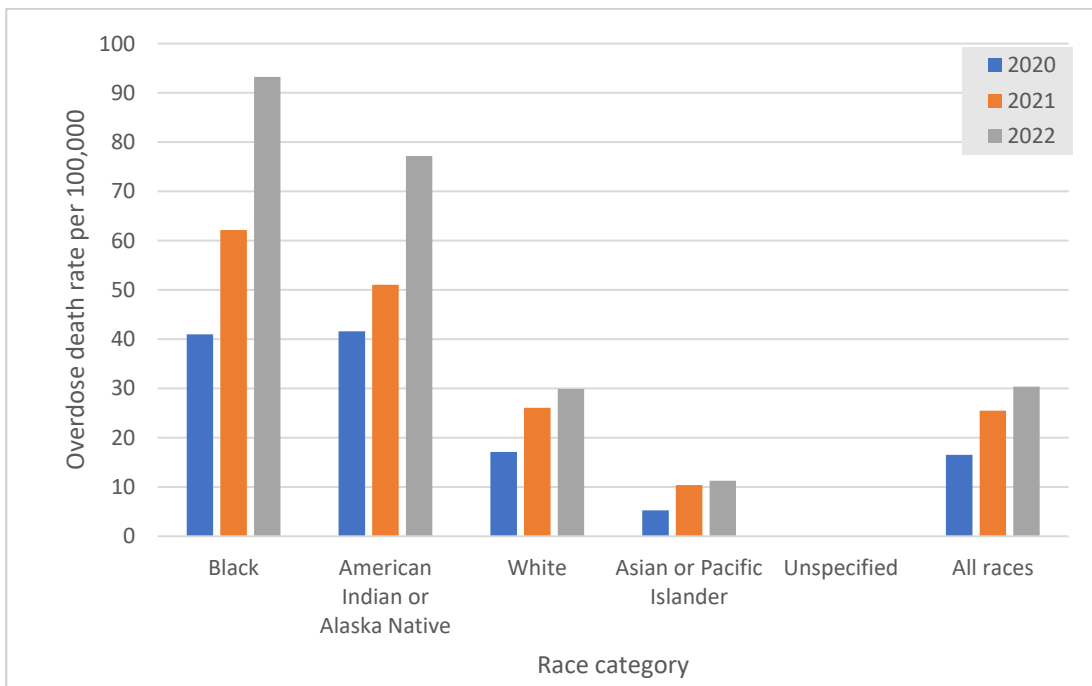
# Overdose Trends Among Black & African American Individuals in Oregon

This document highlights overdose disparities for Black and/or African American Oregonians. The Oregon Health Authority presents this information with the acknowledgement that this data represents individuals whose loss of life has had an enormous impact on their families and communities.

## Overdose Deaths in Oregon

In 2020, 701 Oregonians died from an unintentional or undetermined drug overdose. This number increased to 1,083 in 2021 and 1,289 in 2022.<sup>1</sup> These increases are largely due to the availability and potency of fentanyl, which began to flood Oregon’s illicit drug market in 2019.

Black and African American individuals are disproportionately affected by the overdose crisis. In 2020, 39 Black/African American Oregonians died from an unintentional drug overdose, rising to 60 in 2021 and 90 in 2022.<sup>2</sup> Black and African American individuals account for 5% of Oregon’s overdose deaths, but their overdose death rate is the highest in the state at 93.2 overdose deaths per 100,000 people (compared to 31.1 per 100,000 for non-Hispanic white Oregonians).



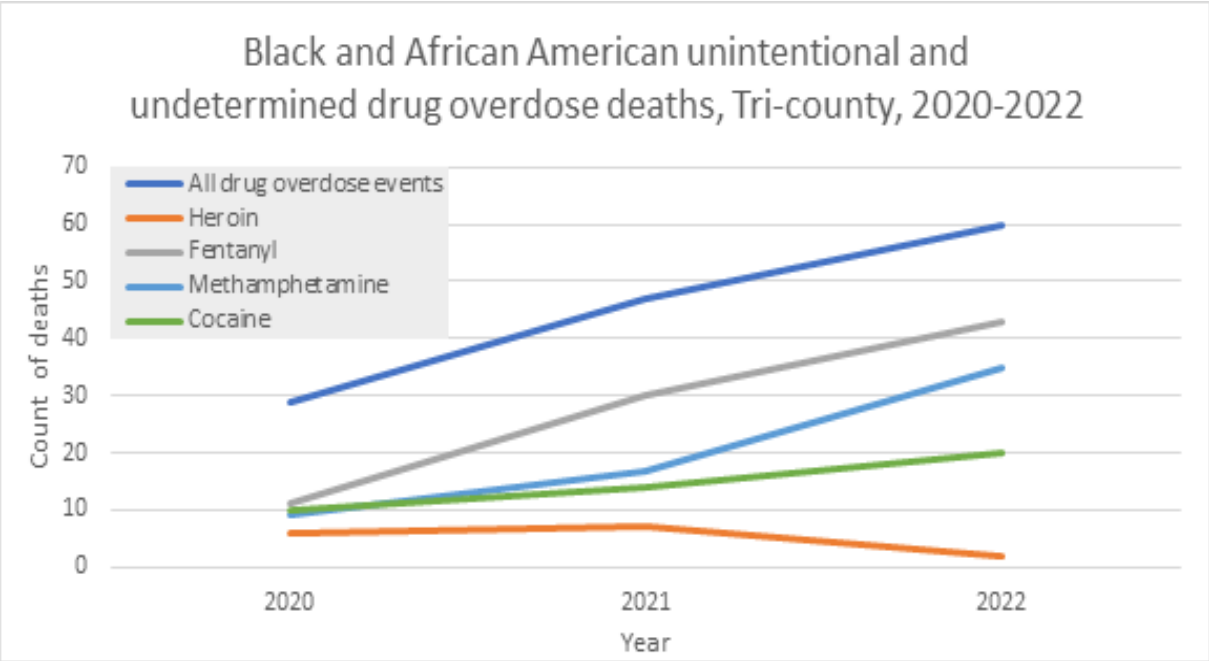
Source: Oregon State Unintentional Drug Overdose Reporting System (OR-SUDORS), 2020-2022.

The main substances involved in Black/African American unintentional or undetermined overdose deaths were fentanyl (72%), methamphetamine (58%), and cocaine (24%). Polysubstance use is a concern, with 71% of all Black/African American unintentional or undetermined overdose deaths involving multiple substances (e.g., fentanyl and methamphetamine). Cocaine is not frequently involved in overdose deaths in Oregon. However, 20% of Oregon’s overdose deaths involving cocaine occurred among Black/African American individuals. **This is a distinct trend** given that Black/African Americans represent only 2% of Oregon’s population and 5% of the state’s total overdose deaths.

### Overdose Deaths in the Tri-County Area

In the Tri-county area (Multnomah, Clackamas, and Washington counties), 328 individuals died from an unintentional or undetermined drug overdose in 2020. The number of overdose deaths increased to 490 in 2021 and 594 in 2022. Almost half (46.1%) of Oregon’s overdose deaths occurred in the Tri-county area, and 66.7% of all Black/African American overdose deaths occurred within this region. In 2020, 29 Black/African American individuals died from an unintentional drug overdose in the Tri-counties, rising to 47 in 2021 and 60 in 2022.

Tri-county overdose deaths among Black/African Americans match state trends. The main substances involved in these deaths include fentanyl, methamphetamine, and cocaine, and 77% of these deaths are attributed to polysubstance use.



Source: Oregon State Unintentional Drug Overdose Reporting System (OR-SUDORS), 2020-2022. Note: County is the county of injury, where the overdose event occurred. This may differ from the county of death and the resident county of the decedent.

## Nonfatal Overdoses

Emergency department (ED) visits and hospitalizations can also provide substance use and overdose trends.<sup>3</sup> Black/African American Oregonians have the highest rates of drug overdose ED visits and hospitalizations compared to other populations. Black/African American Oregonians are hospitalized more frequently for stimulant overdoses than for opioid overdoses; **this is a distinct trend** compared to statewide overdose hospitalizations. Similar trends are seen in the Tri-county area. Fifteen percent (15%) of all Black/African American overdose hospitalizations occurred within the Tri-county area, and 70% of all Black/African American ED visits occurred within this region.

Overdose Related Emergency Department Visits and Hospitalizations, Oregon, 2022				
	Oregon: Opioids*	Oregon: Stimulants**	Black/AA: Opioids	Black/AA: Stimulants
Emergency department visits***	3,480	471	156	20
Hospitalizations****	1,010	831	53	63

\*Opioids may include prescription painkillers, illicitly manufactured fentanyl and/or heroin

\*\*Stimulants may include methamphetamine and/or cocaine

\*\*\*Emergency department visits include people who were seen in the ED and not admitted into the hospital for continued care

\*\*\*\*Hospitalizations include people admitted to a medical facility for more than 24 hours of care

## Conclusions

Black and African American communities in Oregon are disproportionately impacted by substance use disorder and overdose. These disparities are closely related to the systemic racism and centuries-long inequities these communities have historically experienced. There is an urgent need to dedicate attention and resources to close the harmful gaps of racial inequities surrounding overdoses in Oregon. The Oregon Health Authority is committed to implementing community-driven solutions centered in equity to address Oregon’s overdose crisis.

For more information, please contact the Oregon Health Authority Injury & Violence Prevention Program at [IVPP.General@odhsoha.oregon.gov](mailto:IVPP.General@odhsoha.oregon.gov).

<sup>1</sup> The Oregon Health Authority (OHA) draws upon information from multiple sources to collect information on overdoses in Oregon. Some datasets have up to a one-year lag between data collection and reporting as the data are processed and analyzed. This report provides data through 2022, which is the most recent data available to compare annual trends.

<sup>2</sup> On death certificates, people can be identified with multiple racial categories such as Black, American Indian or Alaska Native, Asian, Pacific Islander, White, Other, or Unknown. When someone has more than one race listed, they are usually classified as multiracial. In this analysis, only individuals identified as “Black” were considered. This means that the data and rates presented may not directly match statewide racial trends where multiple race categories are included.

<sup>3</sup> Emergency department visits and hospitalizations account for a portion of nonfatal overdose events and are not an accurate representation of all nonfatal overdoses in Oregon. Many overdoses are reversed in community setting without interaction with the healthcare system.