

Drug Overdose Trends among Black Indiana Residents: 2013-2017

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Objective

To understand trends in race-specific mortality rates between blacks and whites to discover any racial inequalities that might exist for drug overdose deaths. To delve into the types of drugs that are prominently involved in black drug overdose deaths from 2013-2017 in the state of Indiana.

Introduction

Black Hoosiers, the largest minority population in Indiana, make up almost 10% of the state's population, and accounted for 8% of the total resident drug overdose deaths from 2013-2017 compared to whites at 91%. However, a closer look at race-specific mortality rates might reveal racial inequalities.

Therefore, the purpose of this project was to analyze drug overdose mortality rates among white and black Hoosiers to discover possible racial inequalities and to discover trends in drug involvement in overdose deaths among blacks.

Methods

Drug overdose deaths that occurred in Indiana between 2013 and 2017 were identified using the underlying and contributing cause of death ICD-10 codes and abstracted from the Indiana State Department of Health's annual finalized mortality dataset. Race-specific drug overdose death rates were calculated and compared among racial groups. Drug overdose deaths in blacks were examined for trends over time and by the types of drugs involved.

Results

Between 2013 and 2017, drug overdose mortality rates for whites increased from 17.05 to 27.28 per 100,000. Blacks saw a higher rate increase during this same time frame: from 10.74 to 30.62 per 100,000, surpassing the mortality rate of whites by the end of 2017. Drug overdose deaths in blacks increased 197% from 2013-2017 and drug specific mortality rate increases were seen across all drug category's. Opioids, which were involved in 61% of the 2017 drug overdose deaths among blacks, had a rate increase from 3.05 to 18.62 per 100,000 between 2013 and 2017. Drug specific overdose mortality rate increases were also seen for overdoses involving cocaine (1.76 to 10.62 per 100,000), benzodiazepines (0.32 to 3.08 per 100,000), and psychostimulants other than cocaine (0.16 to 1.69 per 100,000) such as amphetamines.

Conclusions

While white Hoosiers had higher drug overdose mortality rates between 2013 and 2016, black Hoosiers had a greater mortality rate increase and surpassed the mortality rate in whites in 2017. Opioids, the most frequently involved substance in overdose deaths among blacks from 2013-2017, showed increasing rates during this time period. However, increases in drug specific overdose mortality rates for cocaine, benzodiazepines, and psychostimulants other than cocaine also call for public health attention. These results promote the inclusion of minority health experts in drug overdose prevention efforts and issue a call for future prevention efforts to be targeted toward the state's largest minority population.



