

Overdose Snapshot

June 2025

We thank Craig Brady and team from the Australian Bureau of Statistics for preparing the raw data that underpin this report.

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This report contains references to suicide, self-harm behaviours, mental health disorders, and overdose, which may be distressing to some readers.

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Foreword

Almost 190 Australians are dying from drug overdoses each month.

The latest data shows that in 2023, 2272 Australians died from an overdose. To put that figure in perspective, it is the equivalent of a Boeing 737 plane full of people dying every month, and almost twice the number of Australian road deaths.

That is the conclusion of Penington Institute's latest overdose snapshot, based on our analysis of preliminary data from the Australian Bureau of Statistics (ABS).

The figures will likely increase after the ABS's comprehensive revision process, but the overall narrative is already clear.

It marks the 10th consecutive year in which Australia has recorded more than 2000 overdose deaths. It is a sombre milestone, and without urgent action, a trend that will likely continue.

The good news is we already know what works to reduce overdose deaths.

Australia needs a comprehensive national overdose strategy to end the overdose crisis rather than the current piecemeal approach.

One relatively cheap and easy solution is wider access to naloxone for potential overdose witnesses, a life-saving opioid reversal treatment already proven to save lives. All first responders in Australia should include naloxone in their medical kits, following the leadership of the Western Australia Police Force. Doing so will save lives every year.

The overdose crisis continues to take loved ones from families and communities. Governments should not merely stand by as deaths continue – national leadership is required now.

John Ryan

CEO, Penington Institute

Overdose Snapshot

This snapshot is an early look at the data that will form the basis of Penington Institute's *Australia's Annual Overdose Report*, which is due for publication later in the year. The snapshot highlights key high-level insights based on the most recent available data, demonstrating the widespread impact of overdose on the community.

Preliminary analysis of 2023 data shows that overdose deaths continue at high rates. In Australia, all suspected drug-induced deaths must be reported to a coroner. In some instances, these investigations can take several years to complete. Therefore, the first available data on drug-induced deaths is preliminary. The figures are then revised the following year and finalised the year after that. Based on past reports, the final number of deaths for 2022 and 2023 is expected to be 7-10% higher than the preliminary data.¹

A comprehensive analysis will be released in August in *Australia's Annual Overdose Report 2025*, ahead of International Overdose Awareness Day on 31 August. International Overdose Awareness Day is convened by Penington Institute and is the largest global campaign to end overdose.

Overdose deaths in 2023

- There were 2272 drug-induced deaths in Australia in 2023. This represents a 6.1% decline from the 2419 deaths in 2022, though the year-on-year decline will be smaller if the 2023 preliminary data is revised upward as expected.
- 2023 was the tenth year in a row that more than 2000 drug-induced deaths have been recorded.
- In 2023, the number of drug-induced deaths (2272) was almost twice the number of road traffic deaths (1315). The total number of drug-induced deaths first surpassed the number of deaths from road traffic accidents in 2008, and the gap remains significant.²
- In 2023, all drug-induced deaths accounted for 66,636 years of potential life lost, the equivalent of 31 years per person.³
- For all drug-induced deaths, the most common drugs involved were opioids (985 deaths), benzodiazepines (707 deaths) and stimulants (644 deaths).

¹ For further information, see ABS <u>Causes of Death, Australia methodology, 2023</u>. "All drug-induced deaths" includes deaths directly attributable to drug use including homicide, suicide or of deaths of undetermined intent. "Unintentional drug-induced deaths" and "drug-induced suicides" cannot be summed to total all drug-induced deaths.

² Due to larger numbers of open cases for coroner-certified deaths, we are anticipating further increases, especially for 2022 and 2023 data.

³ As calculated by the Australian Bureau of Statistics (ABS), Years of life lost (YLL) is a measure of premature mortality that takes into account both the frequency of deaths and the age at which it occurs.

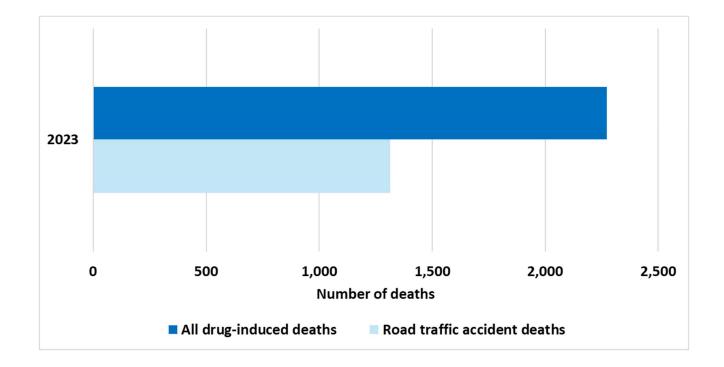


Figure 1: Number of all drug-induced deaths and road traffic deaths, 2023

Unintentional drug-induced deaths 2022-2023

- More than three-quarters (77.8%) or 1768 of all drug-induced deaths in 2023 were unintentional, which is broadly consistent with previous years.
- **Opioids** were the most common drug involved in unintentional deaths, contributing to almost half (43.9%) of all unintentional drug-induced deaths.⁴ Opioids have been the most common drug involved in unintentional deaths for over 2 decades.
- **Stimulants**⁵ replaced **benzodiazepines** as the second-most common drug involved in unintentional drug-induced deaths, contributing to 33.1% of unintentional deaths in 2023 (586 deaths).
- Unintentional deaths involving **cocaine** increased by 6.4% (from 94 deaths in 2022 to 100 in 2023).
- Unintentional drug-induced deaths related to alcohol, benzodiazepines, antidepressants and anti-convulsants all decreased. However, these figures are expected to rise somewhat with data revisions.

⁴ Due to larger numbers of open cases for coroner-certified deaths, we are anticipating further increases especially for 2022 and 2023 data

⁵ This group includes methamphetamine (including 'ice'), amphetamine (including prescription stimulant medications used to treat attention deficit hyperactivity disorder and narcolepsy), and ecstasy (MDMA). This group does not include cocaine.

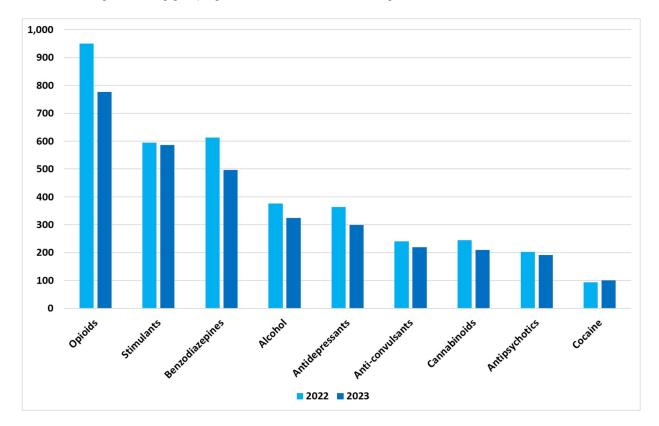


Figure 2: Drug groupings involved in unintentional drug-induced deaths, 2022-20236

Demographics of unintentional drug-induced deaths 2023

- Males accounted for 1295 unintentional drug-induced deaths, compared to 473 females.⁷
- In 2023, the age group with the highest number of unintentional drug-induced deaths was people aged 40-49.
- People aged 50 and over comprised a larger share of unintentional drug-induced deaths than in previous years (47.9% compared to 46.8% in 2022).

⁶ Data by drug type indicates the number of deaths with a specified drug recorded. Drug type in these tables represents when the drug is present in an acute overdose/toxicity setting. Drug types are not mutually exclusive and deaths with multiple drugs present will be included in more than one category. As a result, categories cannot be summed to obtain the total number of drug-induced deaths.

⁷ The APS data publication only reports 'male' and 'famale'. Say not stated may be included in totals. For more information on reporting

⁷ The ABS data publication only reports 'male' and 'female'. Sex not stated may be included in totals. For more information on reporting sex and gender in causes of death statistics, please refer to the classifications section of the <u>Causes of Death, Australia methodology</u>, <u>2023.</u>

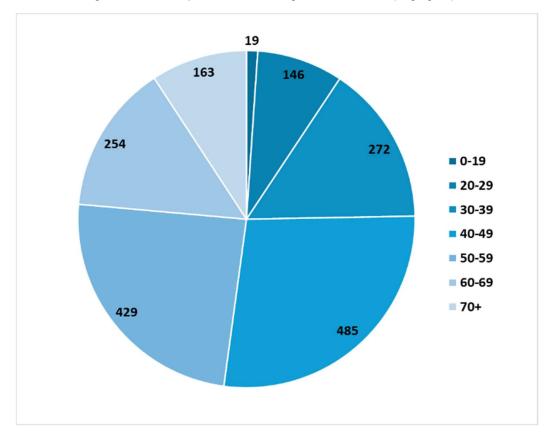


Figure 3: Number of unintentional drug-induced deaths by age group, 2023

Table 1: Number and proportion of unintentional drug-induced deaths by age group 2022-2023

Age group	2022	2022 proportion (%)	2023	2023 proportion (%)
0-19	19	1.0	19	1.1
20-29	168	8.8	146	8.3
30-39	306	16.1	272	15.4
40-49	519	27.3	485	27.4
50-59	442	23.3	429	24.3
60-69	277	14.6	254	14.4
70 and above	170	8.9	163	9.2

- The rate of drug-induced deaths among Aboriginal and Torres Strait Islander peoples remains significantly higher compared to non-Indigenous people.⁸
 - o In 2023, the rate of all drug-induced deaths among Indigenous people was 22.5 per 100,000 population, a small decrease from 25.2 per 100,000 in 2022.

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⁸ Data by Indigenous status are reported by jurisdiction of usual residence for NSW, Qld, WA, SA and the NT only. Only these five states and territories have evidence of a sufficient level of Aboriginal and Torres Strait Islander identification and numbers of deaths to support mortality analysis. See 'Deaths of Aboriginal and Torres Strait Islander people' in the methodology of <u>Causes of Death, Australia, 2023</u> for further information.

 The rate of unintentional drug-induced deaths among Indigenous people remained stable at 21.3 per 100,000 population, compared to 5.7 per 100,000 population among non-Indigenous unintentional drug-induced deaths.

20.0

20.0

20.0

20.0

20.0

20.0

20.0

Indigenous all drug-induced deaths

Non-Indigenous unintentional drug-induced deaths

Non-Indigenous unintentional drug-induced deaths

Figure 4: Rate of drug-induced deaths by Indigenous status 2022-2023 (rate per 100,000 population)

Intentional drug-induced suicides 2022-2023

- Preliminary data shows 421 intentional drug-induced suicides in 2023, decreasing 10% from the year prior (468 in 2022).⁹
- In 2023, benzodiazepines were the most common drug involved (171 deaths), followed by opioids (165) and anti-depressants (159). All other drug types were involved in fewer than 100 drug-induced suicides.
- Rates of drug-induced suicide are similar for males and females unlike unintentional drug-induced deaths, which are far more common among males than females. In 2023, 54.6% of drug-induced suicides were among women (230 deaths) compared to 45.3% among men (191 deaths).
- The largest proportions of drug-induced suicides occurred among people aged 50-59 (23.3% or 98 deaths) and people aged 70 and above (23.0% or 97 deaths).

⁹ There is no systematic definition to differentiate intentional from unintentional death, and coroners may not make a finding on intent for various reasons. Care should therefore be taken in interpreting figures relating to intentional self-harm. For more information on the coding of suicide, see ABS (2023). *Deaths due to intentional self-harm (suicide)*.

Table 2: Number and proportion of intentional drug-induced deaths by age group, 2022-2023

Age group	2022	2022 proportion (%)	2023	2023 proportion (%)
0-19	4	0.9	15	3.6
20-29	47	10.0	39	9.3
30-39	62	13.2	47	11.2
40-49	95	20.3	61	14.5
50-59	89	19.0	98	23.3
60-69	67	14.3	64	15.2
70 and above	104	22.2	97	23.0