The death rate from drug overdose among American Indian & Alaska Natives (AI/AN) in the state of Idaho (ID) was 14.5 per 100,000 people in 2017.

The rate among AI/AN in Idaho is:
- 2.1% less than the Idaho average
- 11.7% less than the AI/AN USA average
- 33.2% less than the USA average

The overdose death rate among AI/AN in Idaho increased by 300% from 2006 to 2013. From 2009 to 2014, the rate was higher than state and national averages.

The rate among AI/AN began sharply decreasing in 2013 and dropped below state and national averages in 2016.

State and national averages have increased each year since 2006.

*Three-year rolling averages, third year is listed on graph*
Drug overdose deaths are most common among Idaho AI/AN between the ages of 50 and 59, with a rate of 40.9 per 100,000. This rate is over 1.5 times higher than the Idaho State average for this age group. The rates among AI/AN between the ages of 30-49 are similar to the state averages for these age groups, and the rates among AI/AN in their 20s and older than 60 are lower than the state averages.

The death rate from drug overdose in Idaho is 1.7 times higher among female AI/AN than male AI/AN. This is different than what is seen nationally and statewide, where the death rate from overdose is higher among men than women. The rate among male AI/AN in Idaho is lower than the Idaho average for men.
Drugs Involved in Overdose Deaths*
Idaho, 2013-2017

- **Unknown**: 42.9%
- **Any Opioid**: 30.3%
- **Prescription Opioid**: 22.7%
- **Stimulant**: 14.8%
- **Heroin**: 6.5%
- **Benzodiazepine**: 5.4%
- **Methadone**: 4.1%
- **Cannabis**: 1.1%
- **Cocaine**: 0.6%

12.9% of drug overdose deaths involved more than one drug.

The drug involved in the overdose was not known or no specific drug was listed on the death certificate.

**Prescription Opioids**
Prescription opioids are typically prescribed for pain relief. Examples include:
- Morphine
- Codeine
- Oxycodone (OxyContin, Percocet)
- Hydrocodone (Vicodin)
- Hydromorphone (Dilaudid)
- Oxy Morphine (Opana)

**Benzodiazepines**
Benzodiazepines are typically prescribed for anxiety, insomnia, and seizures. Examples include:
- Alprazolam (Xanax)
- Clonazepam (Klonopin)
- Diazepam (Valium)
- Lorazepam (Ativan)
- Midazolam (Versed)

**Stimulants**
Stimulants are typically prescribed for attention-deficit hyperactivity disorder (ADHD) or narcolepsy. Some stimulants are illegal. Examples include:
- Methamphetamine
- MDMA (Ecstasy, Molly)
- Amphetamines (Adderall, Dexidrine)
- Methylphenidates (Ritalin, Concerta)
- Ephedrine (Found in some cold medicines)

*More than one drug may be involved in an overdose, therefore categories do not total to 100%.

The individual **may or may not have had a valid prescription** for the drug. It could have been obtained illegally.
**Northwest Tribal Opioid and Overdose Resources**

**INDIAN COUNTRY ECHO**  
**Substance Use Disorders (SUD)**

This program increases access to treatment and recovery services for persons with SUD in tribal communities by training providers on best practices and evidence-based treatments, including DATA Waiver certification, telehealth sessions, and more. Contact David Stephens at dstephens@npaihb.org for more information.

**TRIBAL OPIOID RESPONSE Consortium (TOR)**

This project assists NW Tribes in developing the capacity to implement a complex, comprehensive opioid response, including increasing awareness of and preventing SUD, as well as developing a Tribal Opioid Strategic Plan. Contact Colbie Caughlan at ccaughlan@npaihb.org for more information.

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**About the Data**

**AI/AN are often misclassified as another race in health data systems.** For example, an AI/AN person might be listed as “White” in their hospital or doctor’s office records, or on their death certificate. This causes an under-counting of AI/AN people and makes it difficult to accurately measure health outcomes.

The Northwest Portland Area Indian Health Board’s **IDEA-NW Project** corrects inaccurate race data for AI/AN in health data systems. Without this correction, the data in this publication would have under-counted AI/AN overdoses by 6 deaths and underestimated the drug overdose mortality rate by up to 23%.

- **Idaho State Data Source:** Death certificates from the Idaho Bureau of Vital Records and Health Statistics, corrected for AI/AN misclassification
- **National Data Source:** Centers for Disease Control and Prevention, National Center for Health Statistics, Multiple Cause of Death 1999-2017 on CDC WONDER Online Database
- Overdose deaths include records with the following ICD-10 codes for underlying cause of death: X40-X44, X60-X64, X85, Y10-Y14
- The data presented may not be comparable to information published by state or federal agencies due to differences in racial classification