

# SUBSTANCE MISUSE PREVENTION NEEDS ASSESSMENT

2019



## Acknowledgments

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## 2019 Summary Findings

**Population Stability** — The composition and structure of Idaho's population is different than the rest of the United States in many ways. Idaho has a vast rural landscape with a few small but growing urban areas. The overall population per square mile is 21 for the state, compared to 93 nationally. Idaho's population growth has outpaced the nation's. Additionally, there is a migration from rural to urban areas. The disparities in population shift range from -13% to +15% growth.<sup>1</sup>

**Economic Health** — Idaho has one of the lowest unemployment rates in the country at 2.9%.<sup>2</sup> However, the median household income (\$53,089) is significantly less than the nation's (\$60,293). Idaho also has a low level of educational attainment compared to the nation. Only 26.9% of Idahoans 25 and older have a bachelor's degree, compared to 31.5% in the nation.<sup>1</sup>

**Mental Health** — The National Survey of Drug Use and Health consistently ranks Idaho at the bottom of the nation for indicators of mental illness. For example, Idaho's ranking for having a major depressive episode in the past year is #49 for those aged 1–17 and #48 for those 18–25. Those aged 18–25 report significantly worse outcomes than those 26 and older in all indicators.<sup>3</sup>

**Prescription Drugs** — Sales of retail oxycodone are slightly higher than the national average, but Idaho's numbers have decreased nearly 30% from 2016 to 2018 from 17,013 per 100,000 population to 12,072 per 100,000 population<sup>4</sup>. The percentage of Idaho high school students that misused prescription drugs decreased by 29% between 2011 and 2019.<sup>5</sup> Between 2016 and 2018, the percent decrease for those aged 18–25 was 35% and 20% for those over 25.<sup>3</sup>

**Alcohol** — Underage drinking is identified as a problem across Idaho. Almost 15% of Idaho's 9<sup>th</sup> – 12<sup>th</sup> graders surveyed drank alcohol (other than a few sips) before age 13 and 27% had at least one drink in the past 30 days.<sup>5</sup> Less than half of Idahoans perceive binge drinking as a great risk. Adults 26 and older and those aged 12 – 17 are more likely to think that having five or more drinks once or twice a week is a great risk, at 46.1% and 43.4% respectively, compared to 37.7% of those aged 18 – 25.<sup>3</sup>

**Marijuana** — The normalization of marijuana has led to an increase in use among Idaho's adult and youth population. Marijuana use within the past 30 days has increased from 6.9% to 8.2% in Idaho since 2011.<sup>3</sup> The YRBS reports that 17% of Idaho youth used marijuana in the past 30 days, and 30% at least once in their lifetime.<sup>5</sup>

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<sup>1</sup> U.S. Census Bureau. 2012-2018 American Community Survey, 5-Year Estimates. 2019.

<sup>2</sup> Bureau of Labor Statistics. 2019. "Unemployment Rates for States."

<sup>3</sup> Substance Abuse and Mental Health Services Administration. 2015-2018. National Survey of Drug Use and Health

<sup>4</sup> Automated Reports and Consolidated Ordering System (ARCOS). 2018. ARCOS Retail Drug Summary Reports. Drug Enforcement Administration.

<sup>5</sup> Idaho State Department of Education. 2019. "Idaho Youth Risk Behavior Survey."

**Tobacco or Nicotine** — Approximately 5% of young Idahoans aged 12 –17 report using tobacco in the past month, while those aged 18-25 and 26 and older report usage rates of 27% and 23% respectively.<sup>6</sup> However, vaping has skyrocketed in the nation and Idaho. Although it is technically not a tobacco product, the nicotine content in vape products makes it equally or more addicting.<sup>7</sup> The YRBS reported nearly 23% of Idaho’s high school students used a vaping product in the past 30 days.<sup>8</sup>

**Other Drugs** — The use and trafficking of methamphetamines and heroin remain problematic for Idaho’s law enforcement and medical personnel. The five-year arrest rate for methamphetamines was 111.3%, while the heroin arrest-rate trend is 395.6%.<sup>9</sup> However, the percent of people reporting illicit drug use other than marijuana has decreased since 2016. The decreases are from 3.0% to 2.4% for those aged 12-17, 7.1% to 4.9% for those 18-25, and 2.7% to 2.3% for those 26 and older.<sup>6</sup>

**Prevention Programs** — Funding from the Substance Abuse Block Grant and the Strategic Prevention Framework Partnerships for Success Grant provide prevention program to 69 sub receipts and the seven public health districts around the state.

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<sup>6</sup> Substance Abuse and Mental Health Services Administration. 2015-2018. National Survey of Drug Use and Health

<sup>7</sup> Jankowski, Mateusz, et al. 2019. "E-Cigarettes are More Addictive Than Traditional Cigarettes - A Study in Highly Educated Young People." Int J Environ Res Public Health

<sup>8</sup> Idaho State Department of Education. 2019. "Idaho Youth Risk Behavior Survey."

<sup>9</sup> Idaho State Police. 2018. National Incidence-Based Reporting System. Uniform Crime Reporting Program



## Introduction to Indicators

The State of Idaho's Substance Misuse Prevention Needs Assessment supports directors and practitioners of primary prevention programs conducted around the state. It provides a yearly update of the relevant national, state and local statistics related to the practice of substance misuse prevention. The Statewide Epidemiological Outcomes Workgroup (SEOW) is responsible for reviewing the data submitted in this needs assessment, setting priorities based on the data, and making recommendations to the state and local areas for prevention programming and activities.

This assessment includes three categories of indicators:

- Demographic and Socioeconomic Indicators
- Risk and Protective Indicators
- Substance Misuse Indicators

## Data Types

There are two primary types of quantitative data used for indicators in this needs assessment: administrative data and survey data. It is important to understand the strengths and limitations of each source.

Administrative data come directly from government records and provide actual counts of items, events, or individuals. Examples of administrative data are crime statistics, vital records, crash statistics, and quantities of substances. These statistics are only as good as the information recorded by individuals. Many professionals such as coroners and police officers are allowed discretion in what is submitted in their records; therefore administrative data should not always be considered a complete picture.

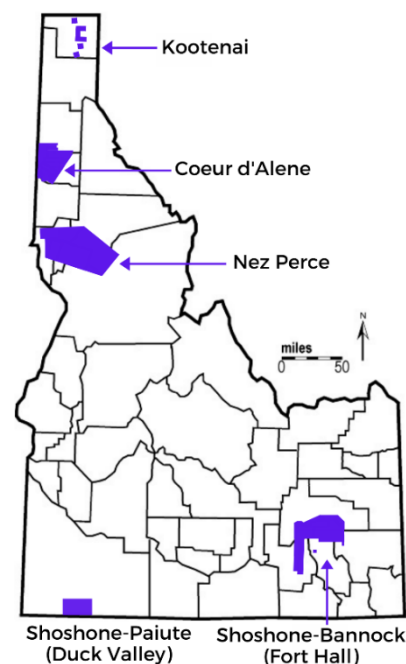
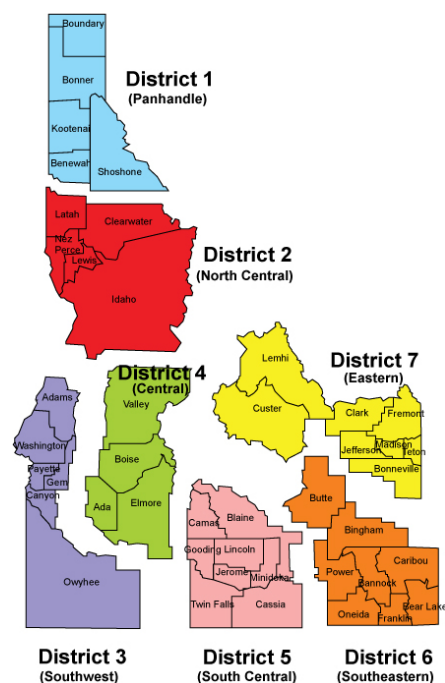
Most national studies are conducted using various types of survey data. The most frequently cited surveys in this needs assessment are the American Community Survey (ACS) conducted by the U.S. Census, the Current Population Survey (CPS) conducted by the Bureau of Labor Statistics, and several surveys conducted by the Centers for Disease Control and Prevention: The National Survey of Drug Use and Health (NSDUH), the Youth Risk Behavior Survey (YRBS), and the Behavioral Risk Factor Surveillance System (BRFSS). All of these studies are conducted nationally and designed to provide state-level data each year the survey is conducted. Although care is taken to account for variance and non-response, survey data are only as good as what is provided by the surveyed individuals.

In some cases this needs assessment may reference research studies published in scientific or academic journals, as well as other types of records or survey data to provide additional information. The Office of Drug Policy conducts the Idaho Healthy Youth Survey (IHYS) every two years to provide local school districts information on their student population regarding substance misuse. At this time, state statistics cited from the IHYS should not be considered as robust as national surveys.



## Geographic Areas

As often as possible, this needs assessment will provide data or links to data available at a county or public health district level. Sources for county level data may come from administrative data from Idaho state agencies or US Census ACS 5-year estimates. In some cases, it is possible to combine multiple years of survey data to estimate substate region level statistics. The Idaho Department of Health and Welfare may aggregate BRFSS data to provide information by public health district, as shown below.



### Seven Idaho Public Health Districts

District 1	Panhandle Health District
District 2	North Central Health Department
District 3	Southwest District Health
District 4	Central District Health Department
District 5	South Central Public Health District
District 6	Southeastern Idaho Public Health
District 7	Eastern Idaho Public Health District

### Five American Indian Reservations in Idaho

- Coeur d'Alene
- Duck Valley
- Fort Hall
- Kootenai
- Nez Perce

## Priority Populations

Where available, data will be analyzed to address the following priority populations:

- Young adults
- Veterans
- Racial and ethnic minorities, namely American Indian and Hispanic populations

## Demographic and Socioeconomic Factors

Idaho is a geographically large state with vast frontier expanses and relatively few heavily populated areas. The state of Idaho is predominately rural in character and culture, reflecting traditional morals, values, and lifestyles, with pockets of cultural and ethnic diversity. According to the United States Census Bureau, Idaho's largest metropolitan area, the Treasure Valley which includes both Ada and Canyon Counties, contains nearly 40% of the state's population. Idaho's urban, suburban, rural and tribal lands have very different historical, social, and cultural features. Each community's needs and perspectives regarding alcohol, tobacco, and other drugs (ATOD) may differ from those of other groups and cultures. Within these communities, prevention efforts must focus on the role social and economic conditions play in problems associated with ATOD and the need to engage community leaders and networks in prevention.

The following tables and maps highlight demographic characteristics by geographic area in Idaho. Except for the unemployment rate, **the data used in the following tables and maps are from the 2018 American Community Survey 5-year estimates.**

### Tribal Reservation Demographics

Metric		Coeur d'Alene	Duck Valley	Fort Hall	Kootenai	Nez Perce
Population Density	Total Population	7,805	1,351	5,894	67	<b>18,770</b>
	Population per Square Mile	14.9	<b>3.0</b>	7.2	16.0	15.7
Priority Populations	Percent Hispanic Alone	5.4%	4.0%	<b>13.0%</b>	4.0%	5.1%
	Percent Native American Alone	20.0%	<b>94.0%</b>	63.6%	68.7%	14.3%
	Percent Aged 18-24	6.8%	5.6%	<b>11.4%</b>	<b>9.0%</b>	7.0%
	Percent Civilian Veterans	<b>12.4%</b>	5.7%	7.0%	8.9%	<b>12.3%</b>
Economic Factors	Percent 25 or Older with a Bachelor's Degree or Higher	<b>18.3%</b>	14.5%	10.4%	2.6%	16.2%
	Median Household Income	\$48,182	<b>\$35,750</b>	\$39,309	\$49,375	\$42,123
	Percent Individuals Living Below the Poverty Level	18.5%	<b>36.2%</b>	24.5%	28.4%	16.2%

U.S. Census Bureau. 2012-2018 American Community Survey, 5-Year Estimates. 2019

## Public Health District Demographics

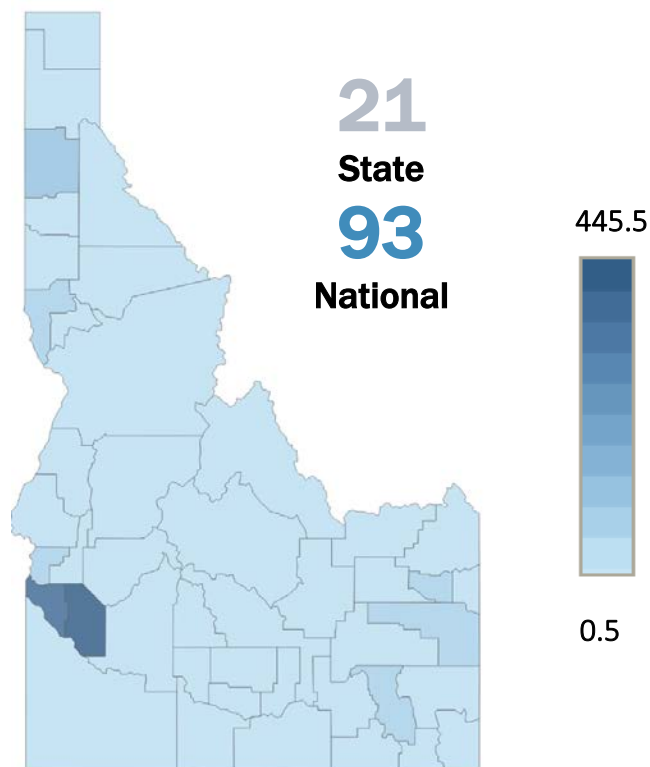
District	Name	Population	Percent of State	% Growth 2010-2019
District 1	Panhandle	240,202	14%	+11.7%
District 2	North Central	109,674	6%	+3.6%
District 3	Southwest	290,788	17%	+14.3%
District 4	Central	515,900	29%	+18.0%
District 5	South Central	199,069	11%	+7.1%
District 6	Southeastern	175,077	10%	+3.1%
District 7	Eastern	223,498	13%	+9.0%
Idaho Population		1,754,208	100%	+11.7

2014-2018 American Community Survey 5-year estimates, Census.

	Population	Ages 18-25	Hispanic	Native American	Bachelor's Educational Attainment	Mean Household Income	% Under Poverty Level*
District 1	240,202	7.1%	4.4%	1.6%	23.1%	\$69,343	11.7%
District 2	109,674	13.3%	4.2%	3.5%	28.1%	\$61,309	13.1%
District 3	290,788	9.0%	23.2%	1.8%	17.3%	\$59,864	11.9%
District 4	515,900	8.7%	8.7%	0.9%	36.3%	\$82,910	9.7%
District 5	199,069	8.3%	24.4%	1.7%	20.4%	\$65,368	12.4%
District 6	175,077	9.2%	11.8%	4.2%	23.3%	\$64,891	12.3%
District 7	223,498	12.2%	11.6%	1.1%	29.3%	\$70,408	13.0%
Idaho	1,754,208	9.3%	12.7%	1.7%	26.9%	\$70,620	11.5%

2014-2018 American Community Survey 5-year estimates, Census.gov; \*2000-2019 US Bureau of the Census, Small Area Income and Poverty Estimates.

## Population per Square Mile, 2018<sup>10</sup>

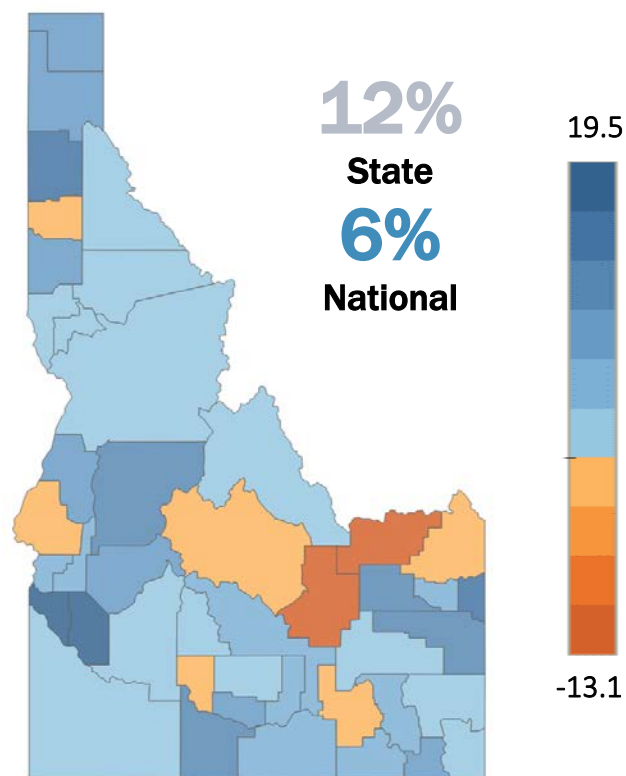


The U.S. Census estimates that Idaho has a total population of 1,754,208.

According to the 2018 Census estimate, the average number of people per square mile nationally was 92.6, compared to 21.2 in Idaho. Approximately 65% (1,145,043) of Idaho's population reside in an urban county.

The counties with the highest number of people per square mile were Ada County (445.5), Canyon County (378.8), and Kootenai County (129.7). The counties with the lowest number of people per square mile were Clark County (0.5), Custer County (0.9), and Camas County (1.0).

## Population Growth, 2010-2018<sup>10</sup>

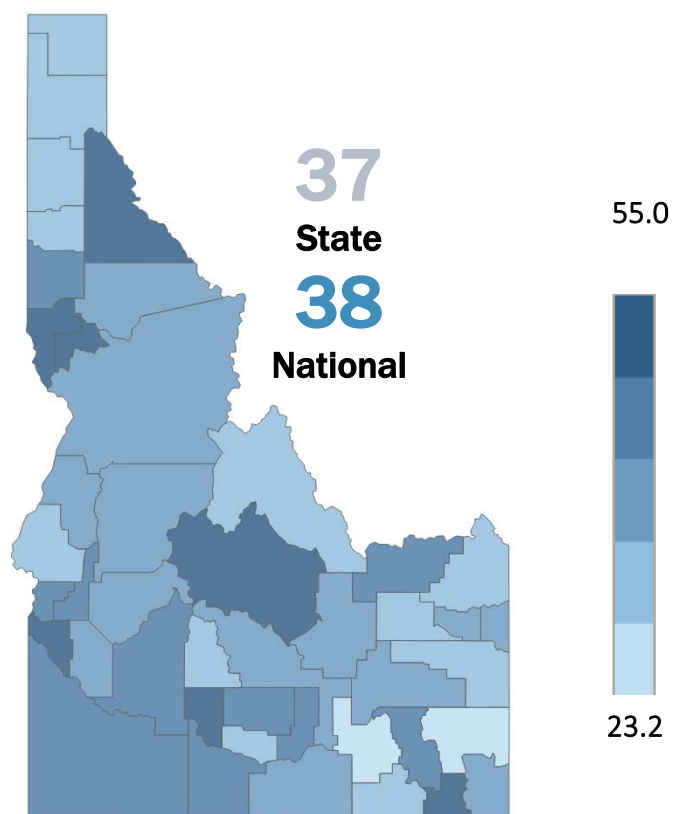


The urban counties were often the fastest growing from 2010-2018. Ada and Canyon counties grew 19.5% and 18.0% respectively.

Only seven counties exceeded the statewide average of 11.7%, while eight counties experienced negative growth during the same time frame. Clark and Butte counties experienced double-digit declines (-13.1%, 10.4%). The other counties had modest gains in population.

<sup>10</sup> U.S. Census Bureau. 2012-2018 American Community Survey, 5-Year Estimates. 2019.

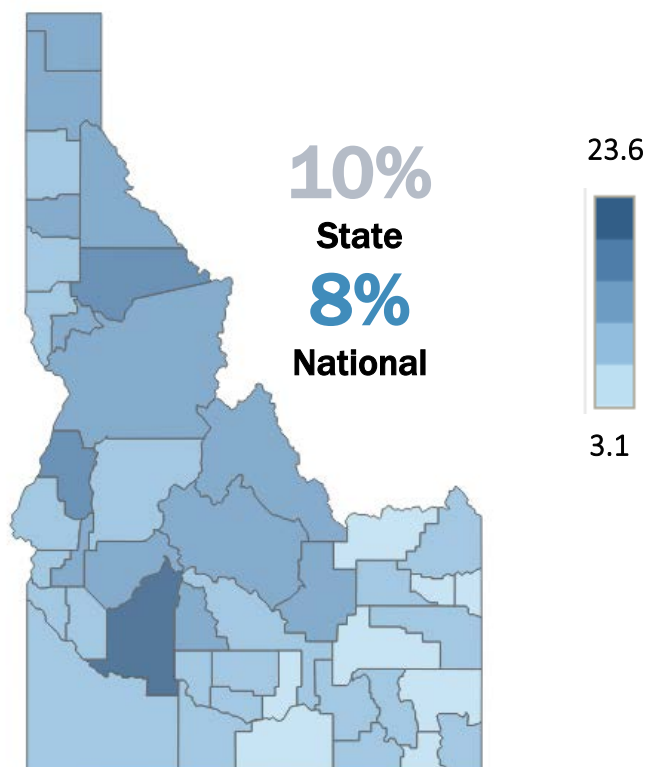
## Median Age, 2018<sup>11</sup>



Idaho has a slightly younger population relative to the United States as a whole, with a median age of just 36.6. Madison and Latah counties are by far the youngest in the state with a median age of just 23.3 and 29.7 respectively. This is a natural result of being dominated by the college towns of Rexburg and Moscow, both of which contain major regional universities.

Despite this, Idaho does have a rapidly aging population, with the median age rising by two years between 2010 and 2018, twice the national rate. Over that same time, the percentage of residents aged 65 or older has increased by 3.4 points from 12.4% to 15.8%.

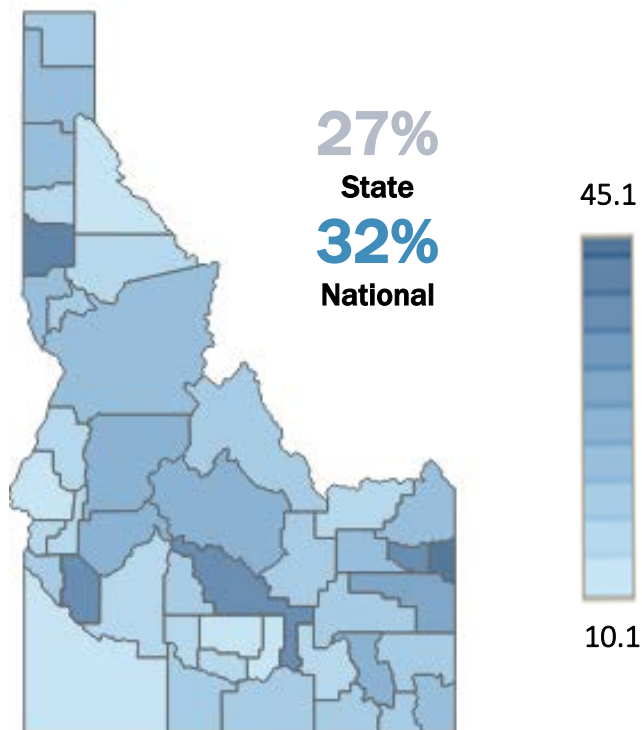
## Civilian Veteran Status, 2018



Idaho has a relatively large population with veteran status, 9.8% of Idahoans over 18 having served in the military compared to 8.2% overall in the United States. The rural, mountainous counties of Northern and Central Idaho, concentrated in health districts 1 and 2, have especially large veteran populations. However, Elmore County (District 4) has by far the largest proportion of veterans of any county in the state due to Mountain Home Air Force Base.

<sup>11</sup> U.S. Census Bureau. 2012-2018 American Community Survey, 5-Year Estimates. 2019

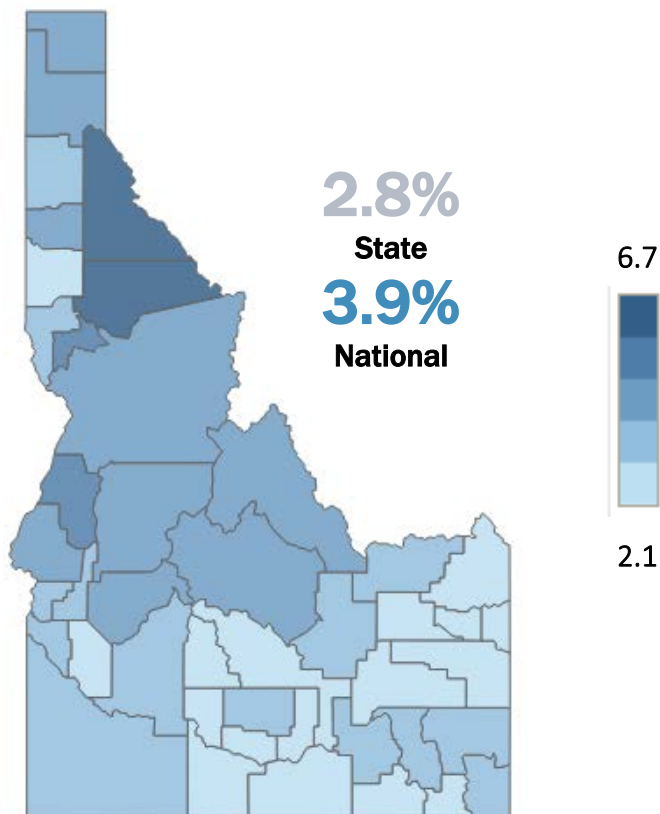
## Educational Attainment, 2018<sup>12</sup>



Of those age 25 and older, the U.S. percentage of bachelor's degree or higher is 31.5%, and the U.S. rate of high school graduates (and equivalents) is 87.7%.

Idaho's rate of high school graduate is higher than the nation's at 90.6%. However, Idaho's bachelor's degree rate is less at 26.9%. Only nine counties have a rate higher than the state's, the highest being Latah County at 45.1%. The county with the lowest educational attainment of a bachelor's degree is Lincoln.

## Unemployment Rate, 2018<sup>13</sup>



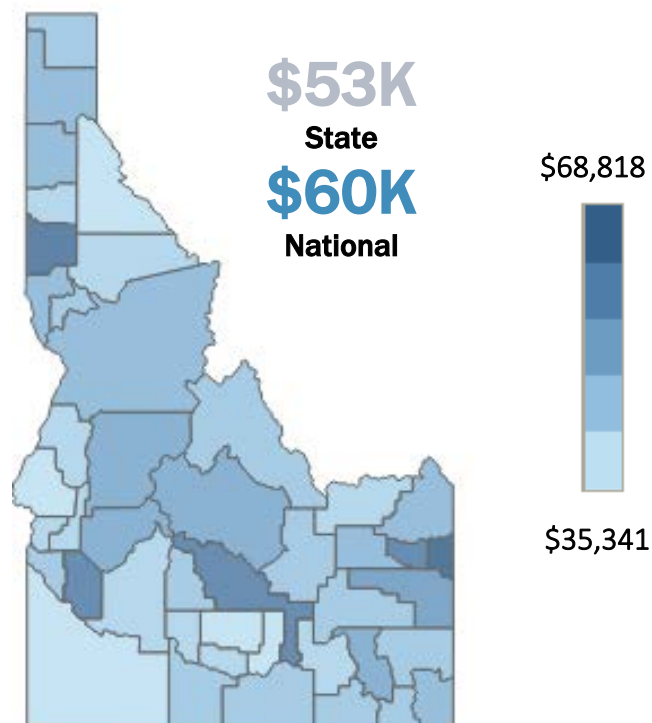
Idaho has consistently had a lower average employment rate than the rest of the United States. The Benchmarked Average Annual 2018 rate for Idaho is 2.8% compared to 3.9% for the U.S. The estimated rates in 2019 for Idaho are 2.9% and the U.S. at 3.7%.

Within the state, the counties with the highest unemployment rates in 2018 were Clearwater at 6.7% and Shoshone at 5.7%. The counties with the lowest unemployment rate were Madison County at 1.7% and Franklin at 2.1%.

<sup>12</sup> U.S. Census Bureau. 2012-2018 American Community Survey, 5-Year Estimates. 2019

<sup>13</sup> Idaho Department of Labor. 2020. "State of Idaho Resident Labor Force."

## Median Household Income, 2018



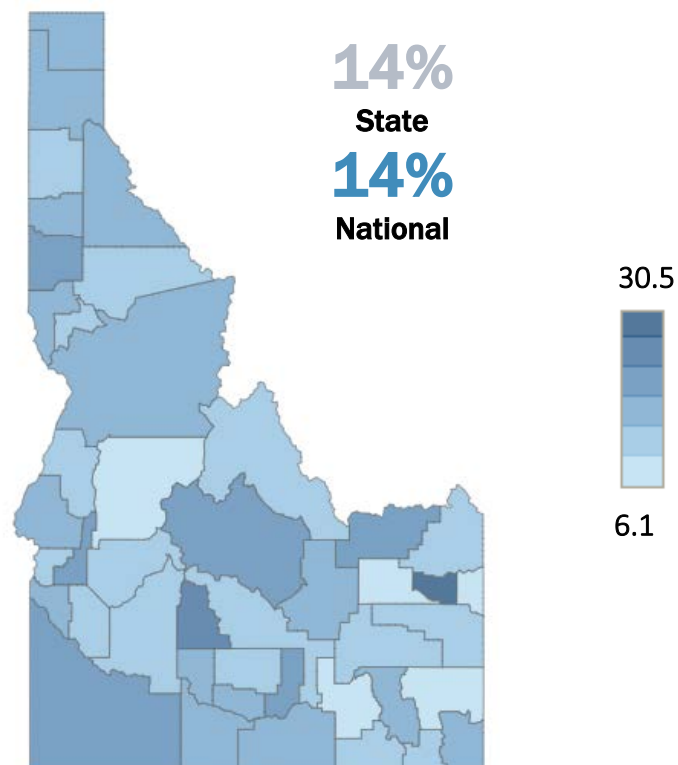
Idaho's median income significantly lags the nation's at \$53,089 per Idaho household compared to \$60,293 for U.S. households.

Only two counties in Idaho have a median household income higher than the national average: Teton at \$68,818 and Ada at \$63,137.

Shoshone County has the lowest median income at \$36,7839.

**Source:** ACS 2018 5-Year Estimates  
Income and benefits (in 2018 inflation-adjusted dollars): Median household income

## Income Below the Poverty Line, 2018



With a nation and state poverty rate at 14%, Madison County has the highest percentage of people below the poverty line at 30.5%. Neighboring Teton County has the lowest percent at 6.1%.

**Source:** ACS 2018 5-Year Estimates  
Percentage of People whose income in the past 12 months is below the poverty level.



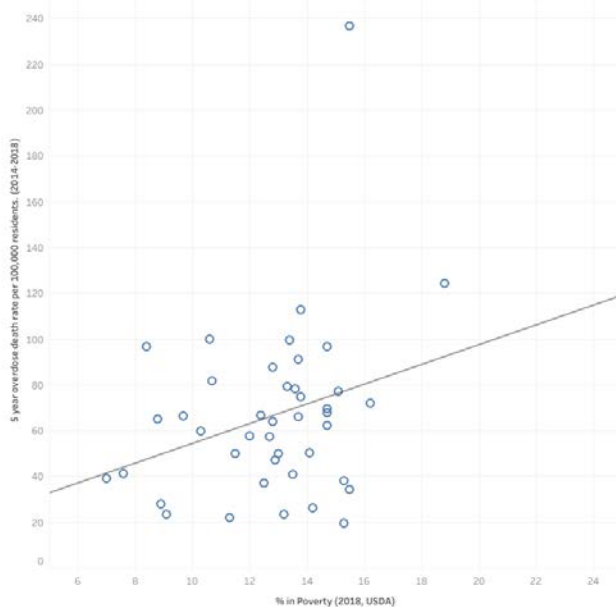
# Socio-Economic Factors

Analysis by Andrew Casio

While there is a correlation between poverty and substance use, the relationship is extremely complex. While communities with a greater prevalence of poverty do tend to have more overdoses as well as alcohol related deaths, no correlation exist with incidence of drug related crime and poverty.

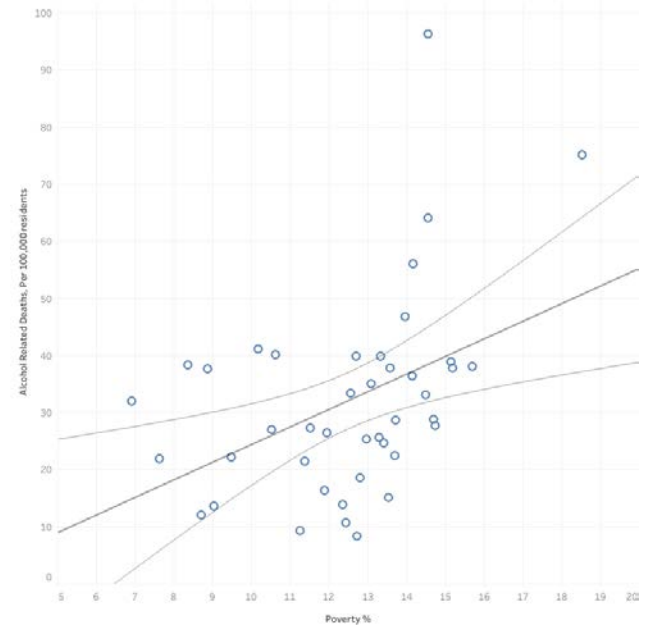
What this may suggest is the phenomenon of overdoses exists independently of substance abuse. Notably, Hispanics have a higher risk of substance use over their lifetime, and yet the risk of overdose or alcohol related deaths for Hispanics is nearly one third that of non-Hispanics. Despite being traditionally seen as a natural outcome of lifetime substance abuse, overdoses can be reevaluated instead as a result of cultural attitudes, socio-economic factors, and addiction liability.

Comparison of 42 Idaho counties for drug overdose deaths from 2014 to 2018



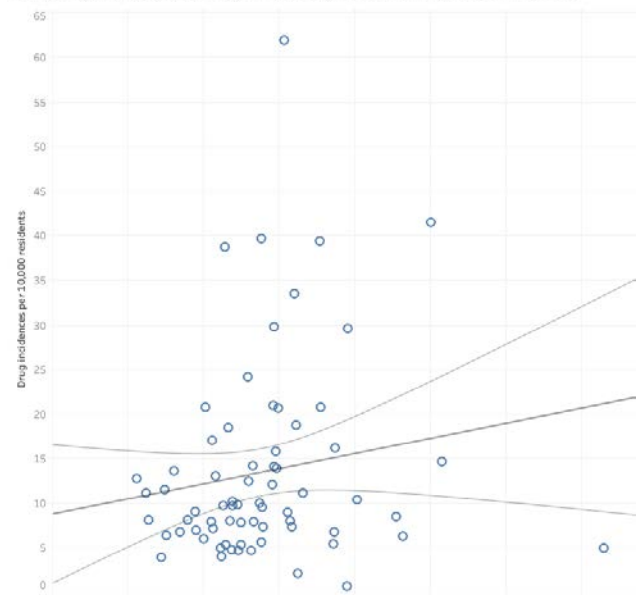
*R-Squared: 0.0837, P-value 0.0630. Excludes Madison, Camas counties as outliers. A weak-positive correlation between poverty and drug overdoses is observed.*

Comparison of 42 Idaho counties for alcohol-related deaths and poverty



*R-Squared: 0.1836; P-value: 0.0047. Excludes Madison, Clark counties as outliers.*

Comparison of drug incidences in 69 urban and rural Idaho communities



*R-Squared: 0.0242, P-value: 0.2015. Correlation is not statistically significant.*

## Sources:

[Race/ethnicity differences between alcohol, marijuana, and co-occurring alcohol and marijuana use disorders and their association with public health and social problems using a national sample.](https://www.sciencedirect.com/science/article/pii/S037687161501618X?casa_token=hKMdki5HRIMAAAAA:X4AcCL5fMVW8-orAV_TDWrYw6SJotcWlfyH02iPduntKYDZDW63M-t99tSmn9fcxmd3ktaY9RPwJ) (2012). The American Journal on Addictions.

[https://www.sciencedirect.com/science/article/pii/S037687161501618X?casa\\_token=hKMdki5HRIMAAAAA:X4AcCL5fMVW8-orAV\\_TDWrYw6SJotcWlfyH02iPduntKYDZDW63M-t99tSmn9fcxmd3ktaY9RPwJ](https://www.sciencedirect.com/science/article/pii/S037687161501618X?casa_token=hKMdki5HRIMAAAAA:X4AcCL5fMVW8-orAV_TDWrYw6SJotcWlfyH02iPduntKYDZDW63M-t99tSmn9fcxmd3ktaY9RPwJ)

[Evaluation of race and ethnicity on alcohol and drug testing of adolescents admitted with trauma.](#) (2003). Journal of Academic Emergency Medicine.

"Idaho Drug Overdose Deaths – 2018." (2019) Idaho Department of Health and Welfare.

National Incidence-Based Reporting System. (2018). Idaho State Police.

[Genetic predisposition to substance addiction among American Indians.](#) (2012). American Journal of Psychiatry.

# Risk and Protective Factors

## Mental Health Indicators

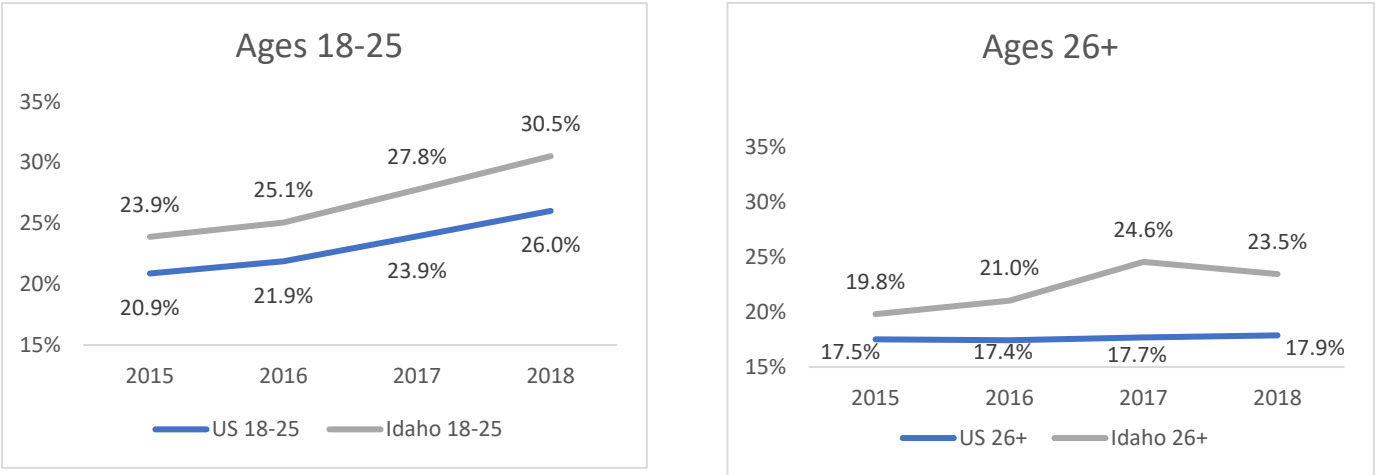
The following mental health indicators are taken from the National Survey on Drug Use and Health. Where available, three years of results are provided from the 2015-2016, 2016-2017, and 2017-2018 surveys. Outcomes are provided by age group – young adults 18 – 25 and adults 26 and older. A few measures include the 12 – 17 age group, which is included if available. State rankings include the District of Columbia and range from #1 to #51.

Data is provided for the regional health districts based on the NSDUH Substate Area report referencing data for ages 12 and older aggregating results from the 2014-2016 surveys.

### Any Mental Illness in the Past Year

The number of youth aged 18 – 25 reporting any mental illness in the past year has risen steadily in both the U.S. and Idaho. In the overall U.S., individuals over the age of 26 had a steady rate of around 17.7%, while Idaho’s rate increased. For the 2017-2018 NSDUH survey, Idaho ranks #47 for youth aged 18-25 and #50 for those ages 26 and older.

#### Any Mental Illness in the Past Year, by Age Group, Percentages, Annual Averages (NSDUH 2017-2018)



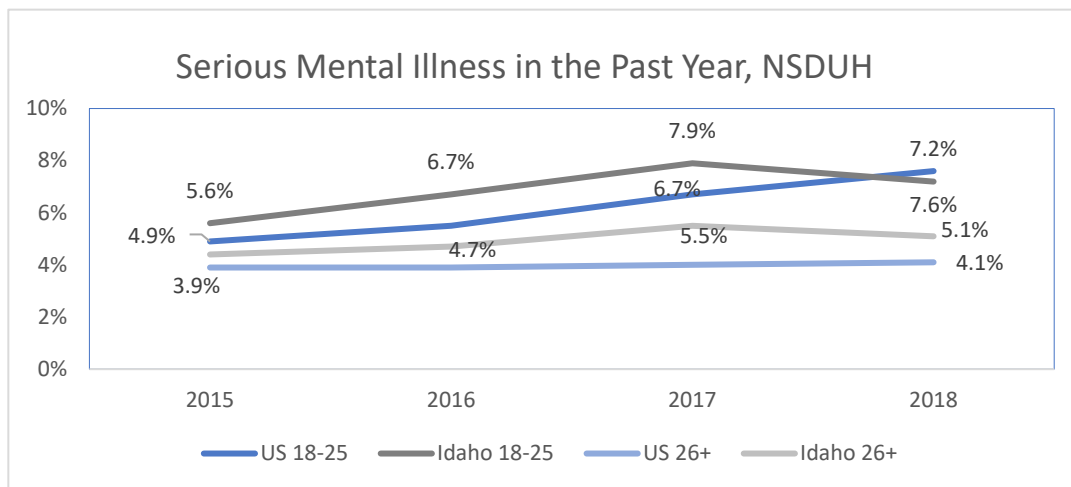
The rates of mental illness for those ages 12 and older in the substate areas between 2014 and 2016 are not widely varied.

#### Mental Illness Rates in Substate Areas (NSDUH 2014-2016)

Idaho	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
21.6%	20.8%	20.4%	21.8%	22.8%	20.8%	21.8%	21.1%

## Serious Mental Illness in the Past Year

The trend lines for reporting serious mental illness is similarly sloped to those for any mental illness, but the percentages are much smaller. Idaho's 18-25 youth report rates of 5.6% in 2015 to 8.9% in 2018, compared to the US rates of 4.9% to 7.6%. Those over the age of 26 fare better, reporting rates of 4.3% to 5.0% for Idaho and 3.9% to 4.1% nationally. Idaho's state rankings have improved in this category for 2017-2018. **Idaho ranks #42 for ages 18-25, up from #46 in 2016-2017; and #43 for ages 26 and over, up from #51 (last).**



The rates of serious mental illness in the substate areas between 2014 and 2016 are not widely varied.

**Serious Mental Illness Rates in Substate Areas (NSDUH 2014-2016)**

Idaho	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
4.85%	4.85%	4.76%	5.33%	4.60%	4.98%	5.01%	4.73%

## Received Mental Health Services in the Past Year

Again, Idaho ranks in the bottom quartile for received Mental Health Services in the Past Year.

**Idaho's U.S. Ranking by Age Group (NSDUH)**

	18-25	26+
2016	#44	#36
2017	#41	#39
2018	#43	#48

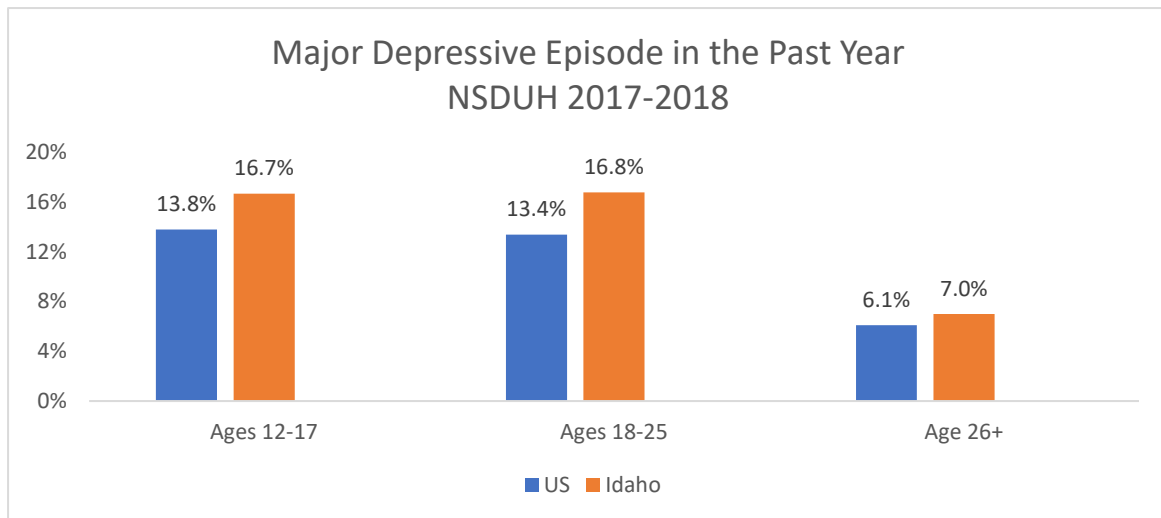
A higher percentage of individuals aged 12 and older received mental health services in Region 4 compared to Region 5.

**Received Mental Health Services in the Past Year in Substate Area (NSDUH 2014-2016)**

Idaho	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
16.8%	17.3%	17.2%	16.0%	18.0%	14.9%	16.7%	16.4%

## Major Depressive Episode in the Past Year

A larger percentage of Idaho's youth reported having a major depressive episode in the past year (2017-2018 NSDUH).



Again, Idaho's state ranking is near the bottom for most age groups reporting having a major depressive episode in the past year.

Idaho's U.S. Ranking, NSDUH			
	12-17	28-25	26+
2016-2017	#50	#44	#45
2017-2018	#49	#48	#29

The rates of having a major depressive episode in the past year are not widely varied by substate areas between 2014 and 2016.

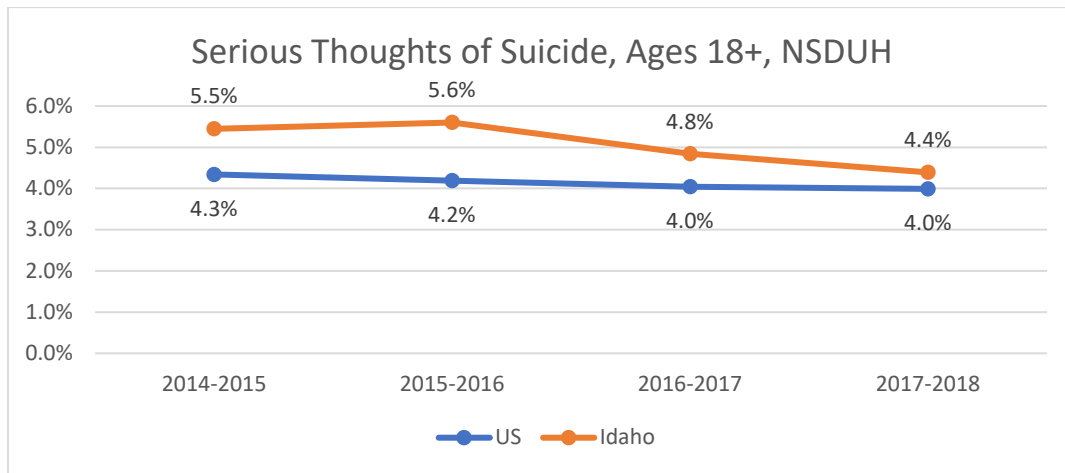
Major Depressive Episode Rates in Substate Areas (NSDUH 2014-2016)							
Idaho	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
7.4%	6.9%	7.6%	7.2%	8.0%	7.0%	7.4%	7.2%

## Serious Thoughts of Suicide in the Past Year

The number of individuals reporting serious thoughts of suicide has decreased over the past three years. However, Idaho's rates are still above the nation's and the ranks are near the bottom.

Idaho U.S. Ranking, NSDUH		
	18-25	26+
2015-2016	#30	#42
2016-2017	#40	#44

2017-2018	#41	#51
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The rates of serious thoughts of suicide in the past year are not widely varied by substate areas between 2014 and 2016 (ages 18+).

**Serious Thoughts of Suicide in the Past Year (NDUH 2014-2016)**

Idaho	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
4.8%	4.6%	4.5%	5.2%	4.8%	4.3%	4.9%	4.9%

## Substance Indicators - Prescription Pain Medicine

Opioids are a class of drugs that include prescription pain relievers, as well as the illegal drug heroin, and synthetic opioids such as fentanyl. The drug works by binding to opioid receptors on the nerve cells in the brain and body to reduce pain and suppress coughs. It can also cause intense euphoria or high that leads the body to dependence and/or addiction. Side effects include sleepiness, constipation, and nausea, while symptoms of an overdose may include shallow breathing, slowed heart rate and loss of consciousness.

### Risk

#### Perception of Harm

Questions from the **2018 Idaho Behavioral Risk Factor Surveillance System** were used to ascertain perceptions of harm when people use prescription painkillers more frequently or in higher doses than prescribed or when they use without a prescription. Sex, age group, and income categories were statistically associated with perceptions of harm.

Risk Perception	All Adults	Male	Female	Income less than \$35,000	Income greater than \$35,000
No Risk	1.3%	1.8%	0.8%	2.3%	0.9%
Slight Risk	3.8%	4.5%	3.1%	6.3%	2.6%
Moderate Risk	16.6%	19.3%	13.9%	18.6%	15.8%
Great Risk	78.3%	74.4%	82.2%	72.8%	80.6%

Risk Perception	All Ages	18-24	25-34	35-44	45-54	55-64	65+
No Risk	1.3%	<0.1%	0.9%	2.8%	1.7%	1.5%	0.8%
Slight Risk	3.8%	5.6%	5.4%	3.3%	5.3%	1.9%	2.8%
Moderate Risk	16.6%	22.6%	21.2%	13.2%	16.2%	16.1%	12.9%
Great Risk	78.3%	71.7%	72.5%	80.8%	76.7%	80.6%	83.6%

In the **2019 Idaho Healthy Youth Survey**, Idaho students in the 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades were surveyed about their perceptions relating to misusing prescription drugs and the perceptions of their parents and friends. Most students perceived that there was *great risk* for harm (61.9%) with a significant number indicating *moderate risk* (26.3%). The students also thought it would be *very wrong* for someone their age to misuse prescription drugs, and they perceived their parents/caregivers and friends felt similarly.

Perception of Wrongness	Very Wrong	Not Wrong at All
Parental Perception	83.9%	1.6%
Friends Perception	56.9%	3.9%
Self-Perception	71.8%	2.1%

## Consumption

### Opioid Prescribing Rate per 100 Persons

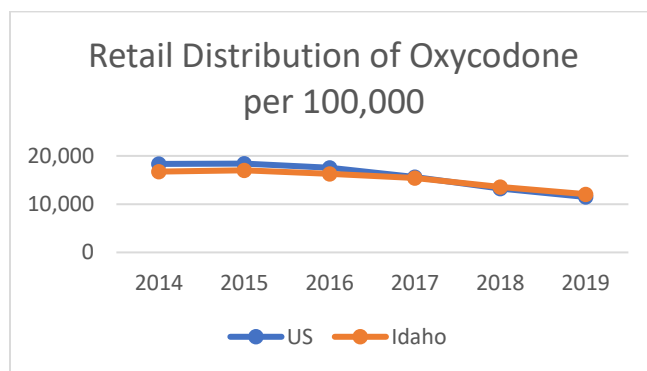
According to the Centers for Disease Control and Prevention's *U.S. Prescribing Rate Maps*, the rate of retail opioid prescriptions dispensed in Idaho was 53.4 per 100 persons in 2019, down from 70.3 per 100 persons in 2017. Although this was a 24% decrease, Idaho still remains higher than the national average of 46.7 opioid prescriptions dispensed per 100 persons.<sup>14</sup>

Nez Perce County (142.2), Caribou (91.6), Twin Falls County (90.7), Bannock County (81.8), Butte (76.2) and Bonneville (75.5) all fall within the top 10<sup>th</sup> percentile of all counties in the nation for opioid prescribing rate per 100 persons.<sup>15</sup>

According to the Automation of Reports and Consolidated System (ARCOS), which is a database of controlled substance transactions, in 2018, Idaho was above the national average in the rate of retail oxycodone distributed. ARCOS is a database of controlled substance transactions destined for pharmacies, hospitals, or physicians' offices, collected from manufacturers and distributors, and reported to the Drug Enforcement Administration (DEA). The rates reported are based on population estimates in 2010.

Among all opioids within the ARCOS database, oxycodone and hydrocodone have the highest retail distribution per 100,000 in Idaho. In 2018, 212,925.62 grams of oxycodone and 201,065.09 grams of hydrocodone were distributed to pharmacies, hospitals, and physicians' offices in Idaho.

Between 2014 and 2018, the retail distribution of grams of oxycodone per 100,000 population in the United States decreased by 28%. During the same time period, in Idaho, the retail distribution of grams of oxycodone per 100,000 population decreased by 19%. The rate in Idaho had been consistently lower than that of the United States until 2018 when retail distribution in Idaho was greater than that in the United States.<sup>16</sup>



2019 ARCOS Summary Report

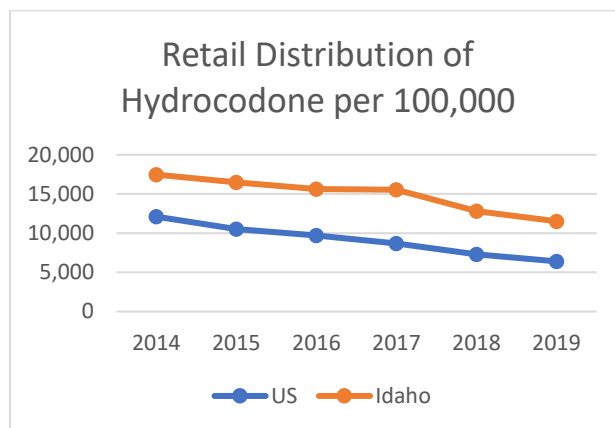
<sup>14</sup> <https://www.cdc.gov/drugoverdose/maps/rxrate-maps.html>

<sup>15</sup> <https://www.cdc.gov/drugoverdose/maps/rxcounty2019.html>

<sup>16</sup> 2018. ARCOS Retail Drug Summary Reports. Drug Enforcement Administration, United States Department of Justice, Diversion Control Division.



Between 2014 and 2018, the retail distribution of grams of hydrocodone per 100,000 population in the United States decreased by 40%. During the same time period, in Idaho, the retail distribution of grams of hydrocodone per 100,000 population decreased by 27%. The rate in Idaho has been consistently above that of the United States.<sup>17</sup>



2019 ARCOS Summary Report

In 2018, Idaho ranked 6th in the nation for the highest retail distribution per 100,000 population of hydrocodone.<sup>15</sup>

## Pain Reliever Misuse in the Past Year

According to the National Survey on Drug Use and Health (NSDUH), in 2017/2018, among all 50 states and D.C., Idaho ranked 27<sup>th</sup> among individuals 12 and older for pain reliever misuse in the past year. This item on the NSDUH was revised in 2016, so estimates cannot be reliably compared to previous years. Misuse is defined as use in any way not directed by a doctor, including use without a prescription of one's own; use in greater amounts, more often, or longer than told; or use in any other way not directed by a doctor. Approximately 4.3% of Idahoans reported past year pain reliever misuse compared to 4.2% nationally. Idahoans aged 18 - 25 were significantly more likely to report pain reliever misuse than other age groups; 7.2% reported misusing pain relievers in the past year.<sup>18</sup>

## Youth Lifetime Prescription Drug Use without a Doctor's Prescription

According to the Youth Risk Behavior Survey (YRBS) in 2019, 14.2% of high school students in Idaho reported taking prescription drugs not prescribed by a doctor or differently than how a doctor told them to use it one or more times during their life. The Idaho trend matches the national trend.

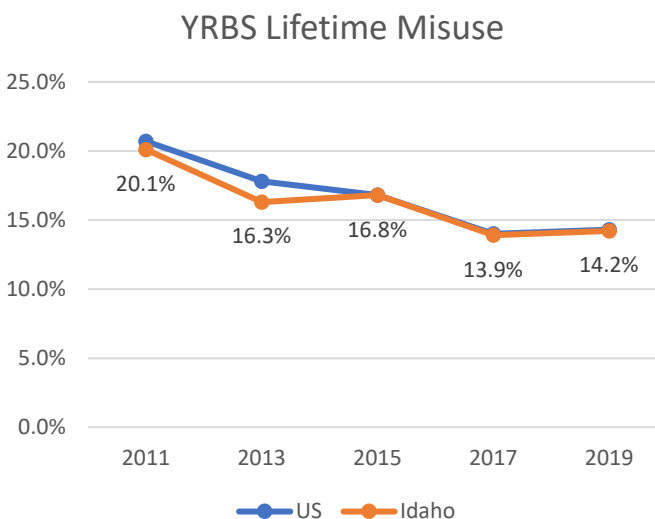
<sup>17</sup> 2018. ARCOS Retail Drug Summary Reports. Drug Enforcement Administration, United States Department of Justice, Diversion Control Division.

<sup>18</sup> Substance Abuse and Mental Health Services Administration. 2015-2018. National Survey of Drug Use and Health. Center for Disease Control and Prevention.

The percentage of Idaho high school students that misused prescription drugs decreased by 29% between 2011 and 2019.

Between 2011 and 2019, the percentage of Idaho high school that reported having ever used prescription drugs without a doctor's prescription has decreased, with the percentage in Idaho hovering slightly below that of the United States

According to the Idaho Department of Education's 2019 YRBS report, females (compared to males) were significantly more likely to report having ever used a prescription drug without a doctor's prescription. Further, academic achievement is significantly associated with prescription drug use; those with lower grades are more likely to report using prescription drugs at least once in their lifetimes.<sup>19</sup>



## Consequence

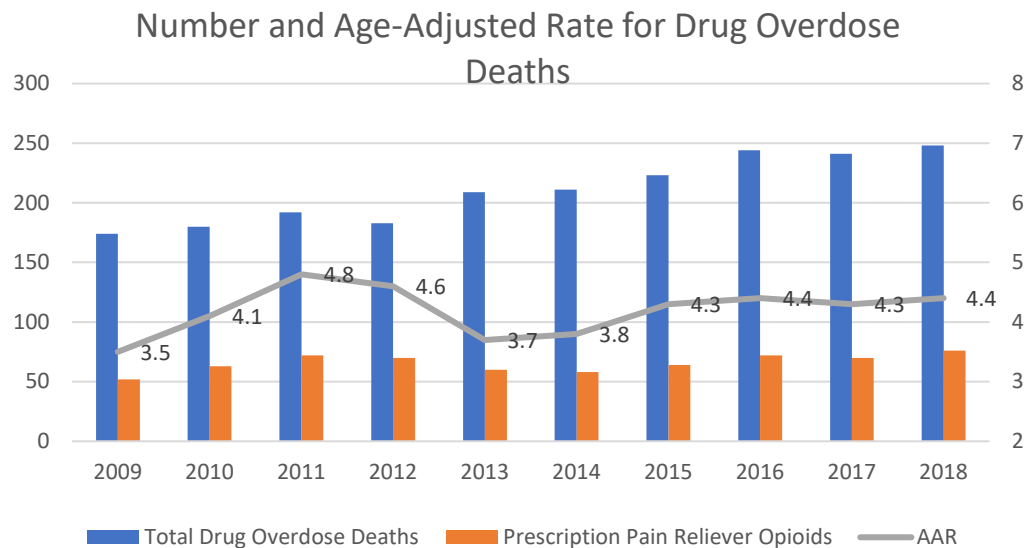
### Prescription Drug Overdose Deaths

Opioids, including prescription pain relievers, heroin, and fentanyl, lead drug-induced deaths in Idaho. Although Idaho does not require coroners to report toxicology from drug overdose deaths, 58% of deaths with drugs identified from 2015 to 2019, of the deaths where one or more drugs was identified, were identified as opioid-involved. Not including deaths, opioid overdoses also accounted for nearly 16 out of every 10,000-emergency department visit in 2019.<sup>20</sup>

<sup>19</sup> Idaho State Department of Education. 2019. "Idaho Youth Risk Behavior Survey."

<sup>20</sup> Idaho Department of Health and Welfare, Drug Overdose Prevention Program. October 2020.

The following chart shows the number and age-adjusted rate (AAR) of drug overdose deaths, total, and reporting prescription pain reliever opioid involvement by year: Idaho residents, 2009-2018.



The following table shows the number of drug overdose deaths with one or more drugs reported, and drug overdose deaths by type of opioid and type of non-opioid drug(s) reported on the death certificate by Public Health District of residence (HD): Idaho residents, 2014-2018 (aggregate).<sup>21</sup>

Drug Overdose Deaths reporting Opioids	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
Natural and synthetic opioids	5	15	29	92	30	51	17
*Oxycodone/Hydrocodone/Codeine	45	14	24	76	28	40	16
*Morphine	19		9	24	3	15	1
Methadone	9	4	4	25	8	15	7
Synthetic opioid other than methadone	17	6	10	48	9	14	11
Other/unspecified narcotic	5	5	2	4	2	9	7

Idaho Department of Health and Welfare, Vital Records and Statistics, Drug Overdose Deaths 2018

<sup>21</sup> Idaho Department of Health and Welfare, *Drug Overdose Deaths – 2018*.

## Estimated Prescription Drug/Narcotic Offenses

According to the **National Incidence Based Reporting System (NIBRS)**, estimates for prescription drug-related arrests have more than doubled between 2009 - 2018.

5-Year Arrest trend 2014 – 2018 = 17.3%

10-Year Arrest Rate Trend 2009-2018 = 85.4%

Counties with the highest arrest rates per 1,000 residents are Clark (3.46), Adams (3.09), and Benewah (2.27).<sup>22</sup>

For county level records, please view [www.isp.idaho.gov/pgr/sac/drug-crime-data](http://www.isp.idaho.gov/pgr/sac/drug-crime-data)

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<sup>22</sup> Idaho State Police. 2018. National Incidence-Based Reporting System. Uniform Crime Reporting Program

## Substance Indicators - Alcohol

### Risk

#### Perception of Harm

According to the NSDUH, Idahoans' perception of great risk from having five or more drinks of an alcoholic beverage once or twice a week is slightly lower than the national percentage. The difference is not statistically significant.<sup>23</sup>

Perceptions of Great Risk from Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week, by Age Group, NSDUH

Ages	Idaho 2017	Idaho 2018	U.S. 2017	U.S. 2018
12 - 17	42.2%	40.9%	43.8%	43.4%
18 - 25	36.1%	34.8%	37.5%	37.7%
26+	43.8%	45.7%	45.7%	46.1%

### Consumption

According to the **Idaho State Liquor Division**, the sales of 9-liter cases increased 17.5% from 1,050,000 in 2015 to 1,234,000 in 2019. The apparent per capita consumption of distilled spirits has increased 1.53 to 1.64 from 2015 to 2018, an increase of 7%. The rate has been consistently lower than that of the United States.<sup>24</sup>

According to the NSDUH in 2017/2018 among all 50 states and D.C., Idaho ranked 44<sup>th</sup>, 49<sup>th</sup>, 48<sup>th</sup>, and 43<sup>rd</sup> among individuals 12 and older (45.2%), 12 to 17 (7.8%), 18 to 25 (47.1%), and 26 and older (50.2%), respectively, for past month alcohol use. These rankings are down for Idahoans in all age groups.<sup>21</sup>

NSDUH, Alcohol Use in the Past Month. Ages 12+

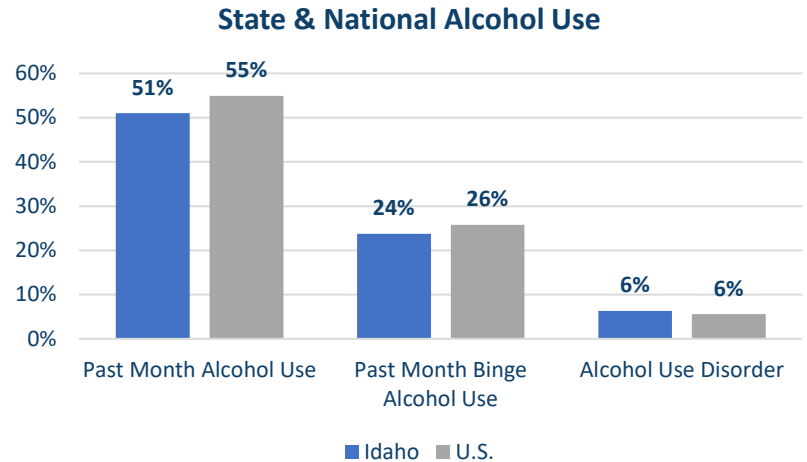
State	2015-2016	2016-2017	2017-2018
Total U.S.	51.21%	51.21%	51.37%
Idaho	44.62%	46.47%	45.23%

<sup>23</sup> Substance Abuse and Mental Health Services Administration. 2010-2018 National Survey of Drug Use and Health

<sup>24</sup> Idaho State Liquor Division. 2020. "2019 Annual Report"

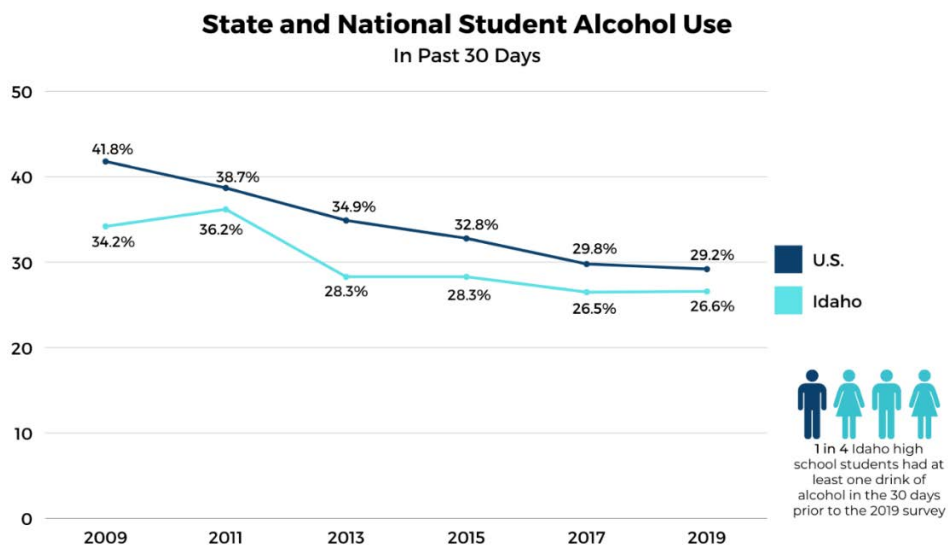
For Idahoans aged 18+, it is estimated that:

- 632,000 Idahoans used alcohol in the past month;
- 301,000 Idahoans engaged in binge drinking in the past month;
- 75,000 Idahoans struggled with Alcohol Use Disorder in the past year;
- 72,000 Idahoans needed treatment for alcohol use but did not receive it.<sup>25</sup>

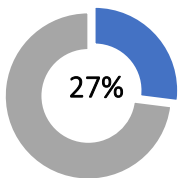


## Underage Drinking

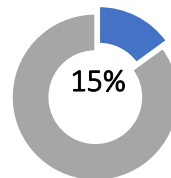
Alcohol use has decreased among high school students. According to the Idaho Youth Behavior Risk Survey (YRBS) in 2019, the percentage of high school students in Idaho reporting alcohol use and binge drinking in the past 30 days decreased significantly since 2009 (see charts and table below).<sup>26</sup>



According to the 2019 Idaho Youth Risk Behavior Survey Idaho students reported alcohol as the most used substance, with 39.1% of high schoolers having used alcohol at least once in their lifetime.<sup>24</sup>



One in four Idaho high school students reported having at least one drink of alcohol on one or more of the past 30 days.



Fifteen percent of students reported having their first drink of alcohol before the age of 13 (other than a few sips).

<sup>25</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

<sup>26</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey"

## Heavy and Binge Drinking

**Binge Drinking:** The National Institute of Alcohol Abuse and Alcoholism defines binge drinking as a pattern of drinking that brings blood alcohol concentration (BAC) levels to 0.08 g/dL. This typically occurs after 4 drinks for women and 5 drinks for men—in about 2 hours.

**Heavy Alcohol Use:** Substance Abuse Mental Health Services (SAMHSA) defines heavy alcohol use as binge drinking on 5 or more days in the past month.

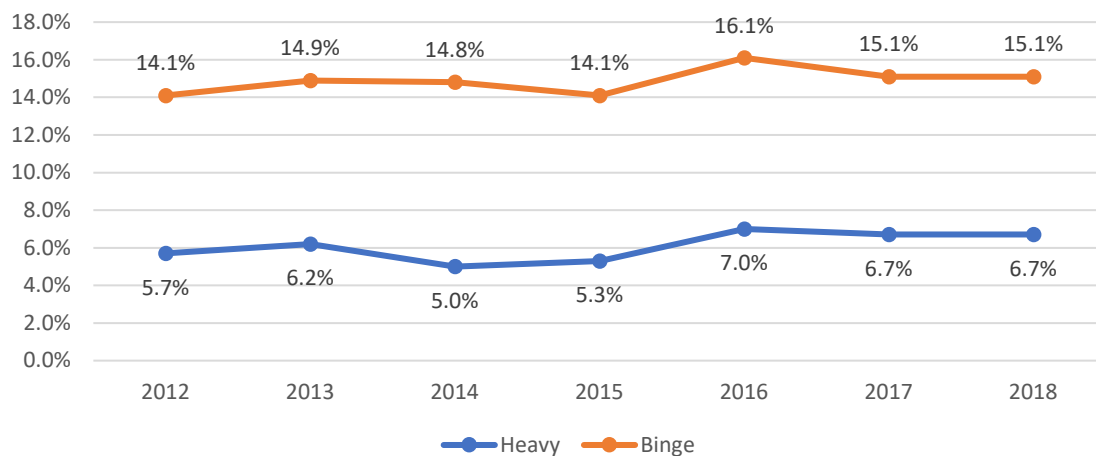
According to the YRBS, the percentage of students who had five or more drinks of alcohol in a row, that is, within a couple of hours, on one or more of the past 30 days.<sup>27</sup>

**Binge Drinking Among High School Students<sup>25</sup>**

	2005	2007	2009	2011	2013	2015	2017	2019
Idaho	28.30%	30.40%	22.30%	21.80%	18.2%	15.60%	15.3%	15.9%
U.S	25.50%	26.00%	24.20%	21.90%	20.8%	17.70%	13.5%	13.7%

According to the Behavioral Risk Factor Surveillance System (BRFSS) the percentage of adults 18 and over in Idaho reporting heavy drinking and binge drinking have not changed significantly since 2012.<sup>28</sup>

**Heavy and Binge Drinking, Idaho BRFSS 2018**



## Consequence

Nationally, an estimated 95,000 people (approximately 68,000 men and 27,000 women) die from alcohol-related causes annually, making alcohol the third leading preventable cause of death in the U.S. behind tobacco, poor diet, and physical inactivity.<sup>29</sup> In Idaho, each year 437 deaths and 12,311 years of potential life are lost due to the harms resulting from excessive alcohol use.<sup>30</sup>

<sup>27</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey

<sup>28</sup> Idaho Department of Health and Welfare. 2019. *Behavioral Risk Factor Surveillance System*.

<sup>29</sup> National Institute on Alcohol Abuse and Alcoholism. October 2020. "Alcohol facts and statistics."

<sup>30</sup> Centers for Disease Control and Prevention. 2019. "Prevention Status Reports by State, Idaho Summary."



## Liquor Law Violations

The rate of liquor law violations has decreased dramatically since 2009 – from 4.19 per 1,000 residents to 0.63 per 1,000 residents. The trends are as follows:

- 5-year arrest trend 2014 – 2018 = -57.2%
- 10-Year Arrest Rate Trend 2009-2018 = -85.1%<sup>31</sup>

## Alcohol: Driving Under the Influence Arrest Rates

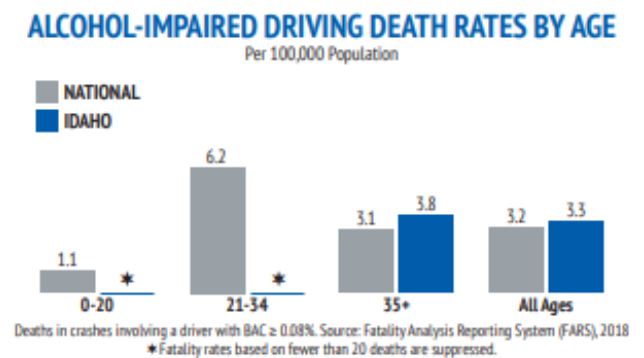
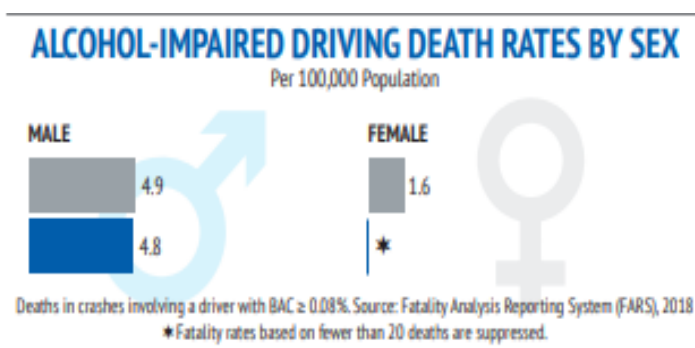
Rates of arrests for driving under the influence have leveled out in the past five years after a large decrease from 2009. The 2009 arrest rate was 7.95 per 1,000 residents to 4.50 per 1,000 residents in 2018.

- 5-year arrest trend 2014 – 2018 = 2.6%
- 10-Year Arrest Rate Trend 2009-2018 = -43.4%
- 

The counties with the highest arrest rates for driving under the influence per 1,000 residents are: Valley (8.98), Clark (8.08), Blaine (7.71 and Adams (7.36)<sup>29</sup>.

## Alcohol-Involved Crashes (2019)

According to the CDC, 612 people were killed in crashes involving an alcohol-impaired driver in Idaho from 2009-2018. In 2018, 22 Idahoans under the age of 21 died from alcohol-attributed deaths, resulting in 1,376 years of potential life lost.<sup>32</sup>



<sup>31</sup> Idaho State Police. 2019. National Incidence-Based Reporting System.

<sup>32</sup> Centers for Disease Control and Prevention. 2019. "Prevention Status Reports by State, Idaho Summary."

In 2019:

- 28% of all fatal crashes were alcohol involved;
- 14% of serious injury crashes are alcohol involved
- 5% of all alcohol related crashes resulted in fatal injury;
- 11% of all alcohol related crashes result in serious injury<sup>33</sup>.

For county level crash data, please view <https://itd.numetric.net/itd-safety-dashboards#/>

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<sup>33</sup> Office of Highway Safety, Idaho Transportation Department. 2019. "Crash Statistics"

## Substance Indicators - Tobacco and Nicotine Products

### Risk

#### Perception of Harm

Idaho's adults 18-25 and 18 and older have a significantly lower perception of great risk from smoking one or more packets of cigarettes a day than the rest of the West<sup>34</sup>.

Perceptions of Great Risk from Smoking One or More Packs of Cigarettes per Day,  
2017-2018 NSDUH

Survey Year	Area	12 or Older Estimate	12-17 Estimate	18-25 Estimate	26 or Older Estimate	18 or Older Estimate
2017-2018	Total U.S.	71.73%	66.27%	67.04%	73.11%	72.27%
2017-2018	West	73.62%	67.17%	69.68%	75.02%	74.27%
2017-2018	Idaho	70.74%	67.28%	61.90%	72.69%	71.15%

#### Idaho Healthy Youth Survey 2019

As part of the 2019 Idaho Healthy Youth Survey, students were asked *“How much do you think people risk harming themselves physically or in other ways when they use a vape pen or e-cigarette?”* Most students thought it presented a moderate to great risk<sup>35</sup>.

Vape or E-Cigarette Perception of Harm  
2019 IHYS

Risk	6th grade	8th grade	10th grade	12th grade	Overall
No Risk	7.5%	6.2%	8.3%	11.0%	8.1%
Slight Risk	10.9%	15.7%	19.7%	23.6%	17.3%
Moderate Risk	22.2%	27.3%	28.3%	27.0%	26.2%
Great Risk	59.4%	50.6%	43.8%	38.5%	48.3%

<sup>34</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

<sup>35</sup> Idaho State Department of Education. 2019. “Idaho Youth Behavior Risk Survey”

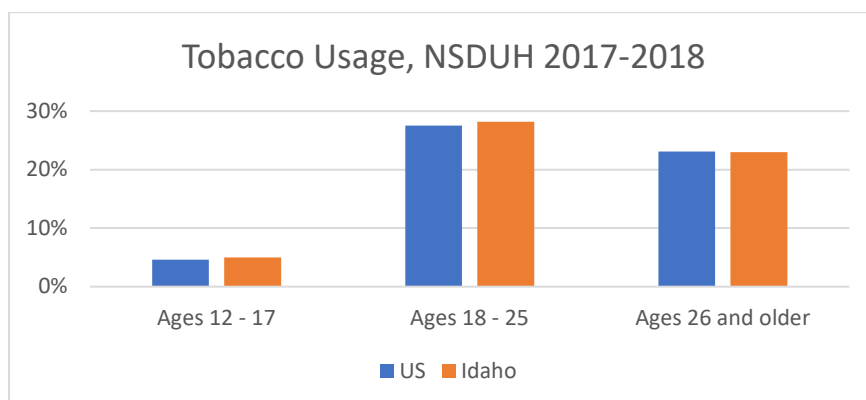
## Consumption

There hasn't been a significant change in tobacco product use across the last three years across all age groups.<sup>36</sup>

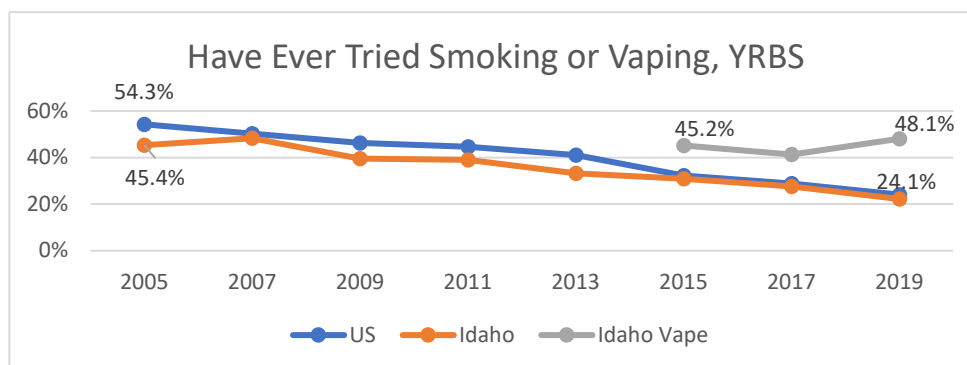
**Tobacco Product Use in the Past Month, by Age Group; NSDUH**

Year	State	12 or Older Estimate	12-17 Estimate	18-25 Estimate	26 or Older Estimate	18 or Older Estimate
2017-2018	Total U.S.	22.0%	4.6%	27.5%	23.1%	23.7%
	Idaho	21.7%	5.0%	28.2%	23.0%	23.7%
2016-2017	Total U.S.	23.0%	5.1%	29.5%	24.04%	24.8%
	Idaho	22.7%	6.0%	33.0%	23.3%	24.7%
2015-2016	Total U.S.	23.7%	5.7%	31.5%	24.6%	25.6%
	Idaho	21.0%	5.7%	31.2%	21.5%	22.9%

However, youth aged 17-25 use tobacco products at a higher rate than other age groups.<sup>34</sup>



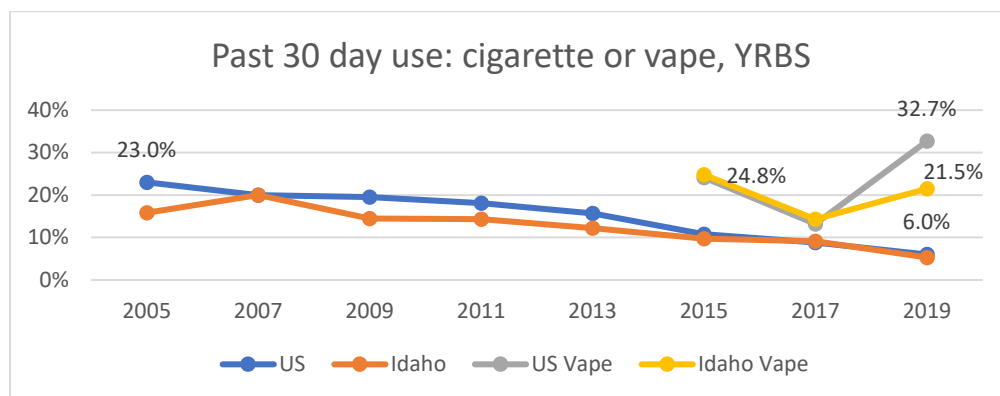
The Youth Risk Behavior Survey has tracked the percent of high school students who had ever tried smoking or vaping. The percentage of students in Idaho and the nation who had ever tried cigarettes has decreased steadily. However, the percent who had tried vaping in Idaho since 2015 is over twice as high.<sup>37</sup>



<sup>36</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

<sup>37</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey"

A smaller percentage of students currently use cigarettes or vaping products, but the slope of the curve mirrors the decrease in students ever trying cigarettes or an electronic vapor product. The US rate of daily vaping is significantly higher than Idaho's.<sup>38</sup>



<sup>38</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey"

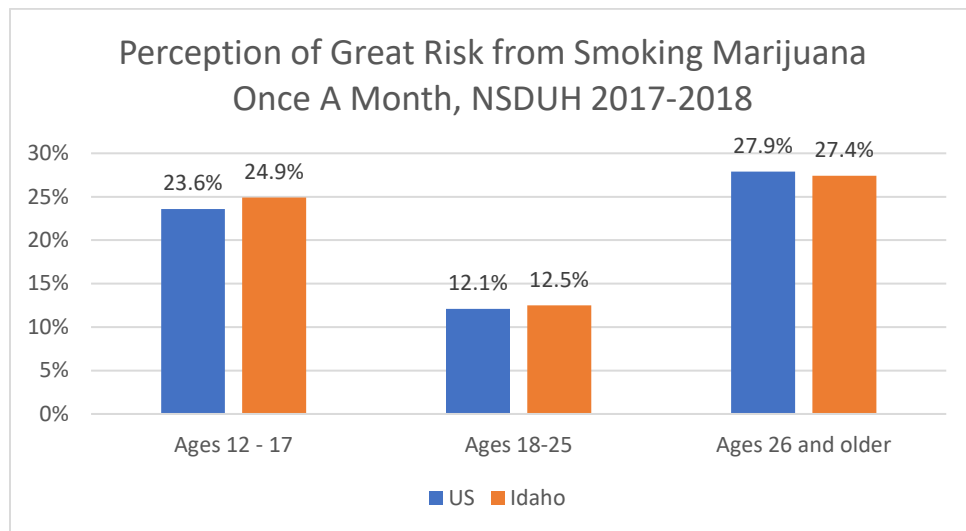
## Substance Indicators – Marijuana

### Risk

#### Perception of Harm

##### NSDUH

The National Survey of Drug Use and Health shows that there has not been a significant change in the perception of marijuana use among any age group since 2015. However, both Idaho and national youth between the ages of 18-25 have a significantly lower perception of great risk from smoking marijuana monthly.<sup>39</sup>



<sup>39</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

## BRFSS 2019

Questions from the 2018 Idaho Behavioral Risk Factor Surveillance System were used to ascertain perceptions of harm when people use marijuana one or twice a week. In 2019, nearly 60% of Idaho adults said that using marijuana once or twice a week posed “no risk” or “slight risk” to the user. The number of adults saying “no risk” has increased significantly from 2016 at 27.8% to 34.8% in 2019.

Except there are no significant differences in “no risk” perception among the public health districts, every other demographic category in the chart below showed a statistically significant difference for both 2018 and 2019. For example, the 65+ respondents were less likely to indicate no risk than 35-26 group which in turn was less likely to indicate no risk than the 18-34 group.<sup>40</sup>

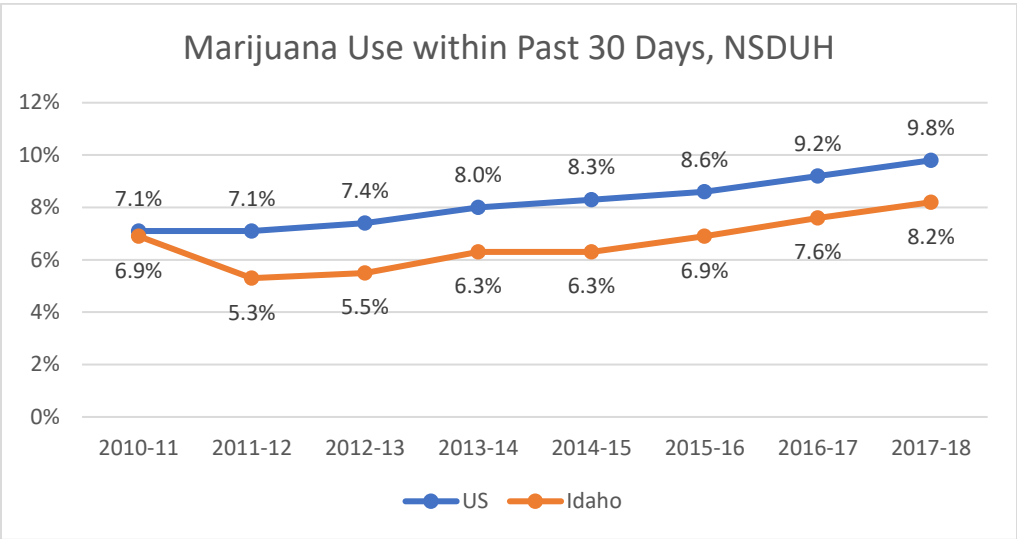
### Marijuana Use Once or Twice a Week Posed No Risk to the User, BRFSS Percent of Idaho Population<sup>38</sup>

	2015	2016	2017	2018	2019
	%	%	%	%	%
Idaho	24.9	27.8	30.5	35.2	34.8
<b>Public Health District</b>					
District 1	27.4	26.7	37.1	31.3	37.2
District 2	20.8	24.1	29.8		32.8
District 3	26.9	28.9	24.8	30.6	34.6
District 4	28.3	33.1	39.0	41.6	38.5
District 5	26.0	23.8	26.0	30.1	33.0
District 6	21.5	25.1	23.3	27.0	30.9
District 7	15.4	23.7	22.3	24.2	30.2
<b>Sex</b>					
Male	27.6	32.0	33.2	36.4	35.6
Female	22.3	23.8	27.7	28.4	34.1
<b>Age</b>					
18-34	34.3	38.3	42.1	38.8	51.7
35-64	24.1	26.5	29.4	34.0	32.1
65+	13.3	15.6	17.0	22.1	17.6
<b>Marijuana use in last 30 days</b>					
No	21.9	25.1	27.1	28.0	30.4
Yes	72.6	68.1	76.6	69.0	71.6

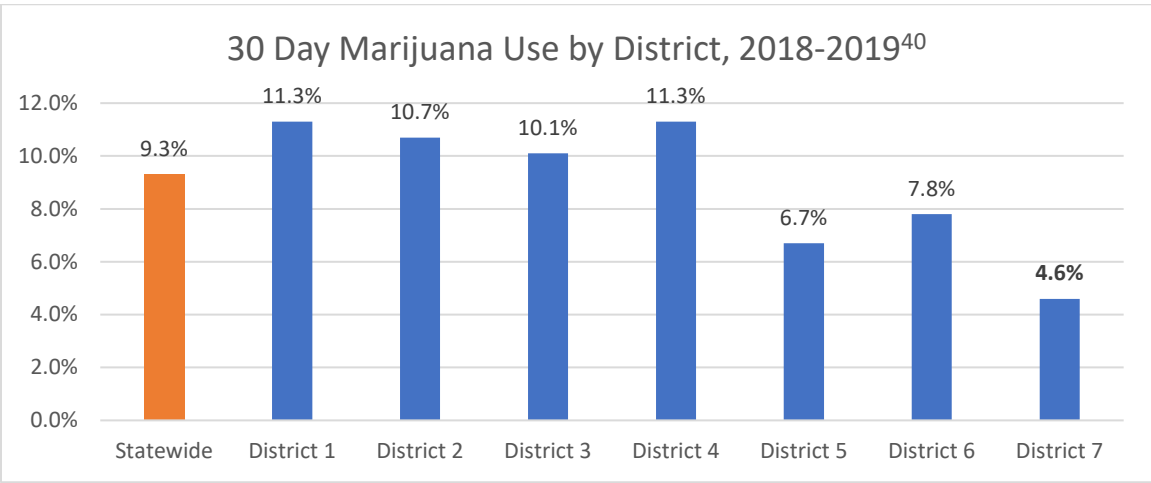
<sup>40</sup> Idaho Department of Health and Welfare. 2019. *Behavioral Risk Factor Surveillance System*

# Consumption

According to the NSDUH, in 2017-2018, among all 50 states and D.C. Idaho ranked 36th, 24th, 46th, and 29th among individuals 12 and older (8.2%), 12 to 17 (6.3%), 18 to 25 (16.5%), and 26 and older (7.1%), respectively, for marijuana use in the past month. These rankings are up from 44th, 42nd, and 47<sup>th</sup> for the same age ranges. Nevertheless, Idaho’s current consumption is significantly lower than the nation’s rate for those ages 18-25.<sup>41</sup>



According to the Behavioral Risk Factor Surveillance Survey for years 2018 and 2019, Idaho’s statewide rate for current marijuana use for adults 18 and older is 9.3%. Public Health District #7 (Eastern) is significantly less than all of the other districts. There has been a statistically significant increase in the statewide marijuana use rate from 6.0% in 2017 to 9.3% in 2018-2019 and in District 5 from 2.1 to 7.8%<sup>42</sup>.



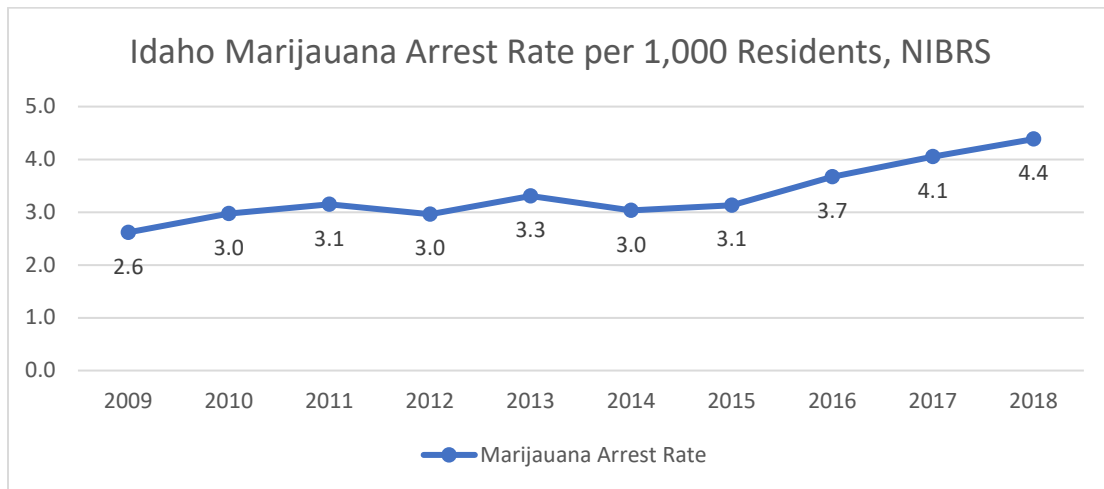
<sup>41</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

<sup>42</sup> Idaho Department of Health and Welfare. 2019. *Behavioral Risk Factor Surveillance System*



## Consequence

Idaho's marijuana arrest rate has steadily increased in the past 10 years. The National Incident-Based Reporting System (NIBRS) Uniform Crime Reporting drug/narcotic offenses arrest rates are displayed on the graph below.



Marijuana: Drug/Narcotic Offenses Arrest Rates 2009-2018  
Uniform Crime Reporting, National Incident-Based Reporting System NIBRS

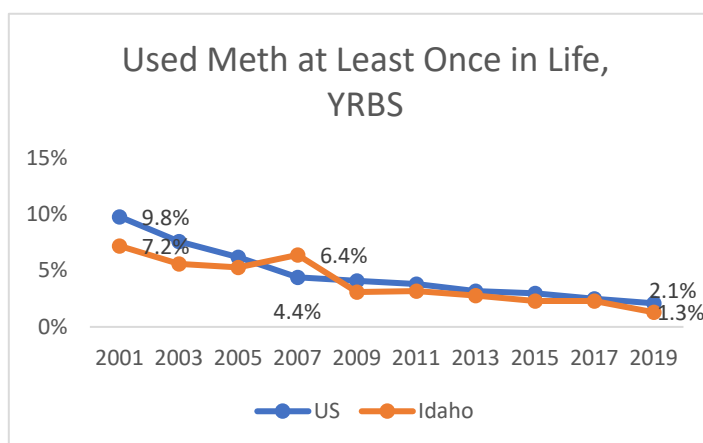
The five-year marijuana arrest rate increase from 2014 to 2018 was 44.4%, and the 10-year rate increase is 67.5%. The highest county arrest rates per 1,000 residents for marijuana in 2018 are Clark (24.25), Adams (12.59); and Benewah (11.14).<sup>43</sup>

<sup>43</sup> Idaho State Police. 2019. National Incident-Based Reporting System NIBRS

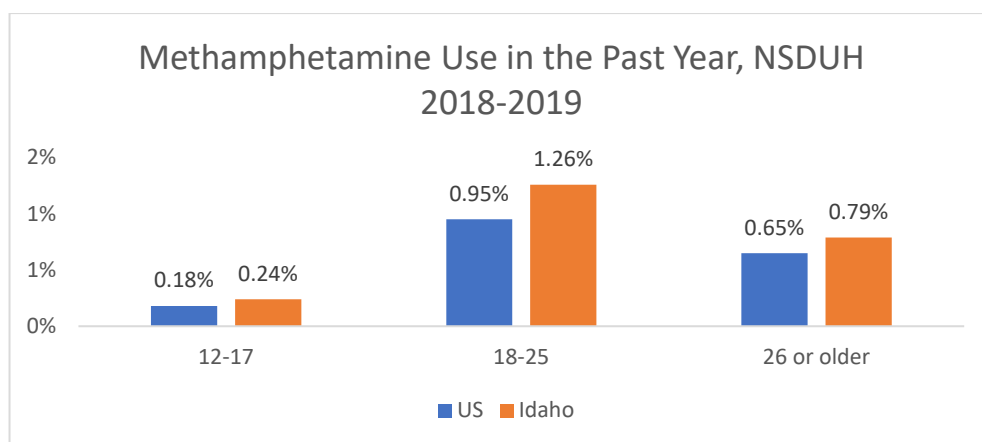
## Substance Indicators - Methamphetamine

### Consumption

Since the turn of the century there has been a significant decrease in the number of high school students who have tried methamphetamines one or more times during their life. The YRBS shows the percentage of 1.3% , with 9<sup>th</sup> graders more likely to report using meth at least once.<sup>44</sup>



Youth ages 12-17 are significantly less likely to have used methamphetamines in the past year than other age groups.<sup>45</sup>



<sup>44</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey"

<sup>45</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

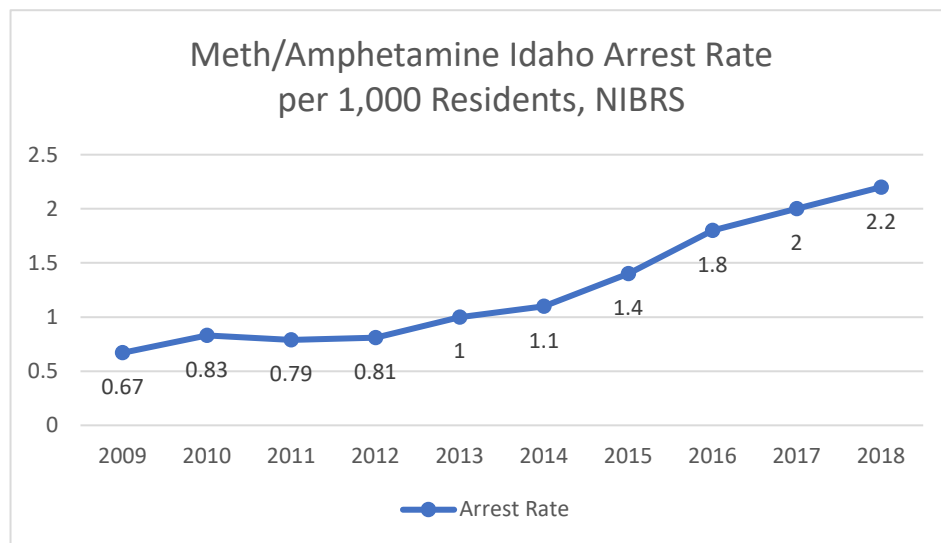
## Consequence

NIBRS reports significant increases in the Meth/Amphetamine: Drug/Narcotic Offenses Arrest Rates:

5-year = 111.3% increase from 1.06 to 2.23 per 1,000 residents

10-year = 231.2% increase from 0.67 to 2.23 per 1,000 residents

The highest county arrest rates for Meth/Amphetamines in 2018 are Benewah (7.46), Clark (6.93); Payette (5.40); and Twin Falls (3.66).<sup>46</sup>



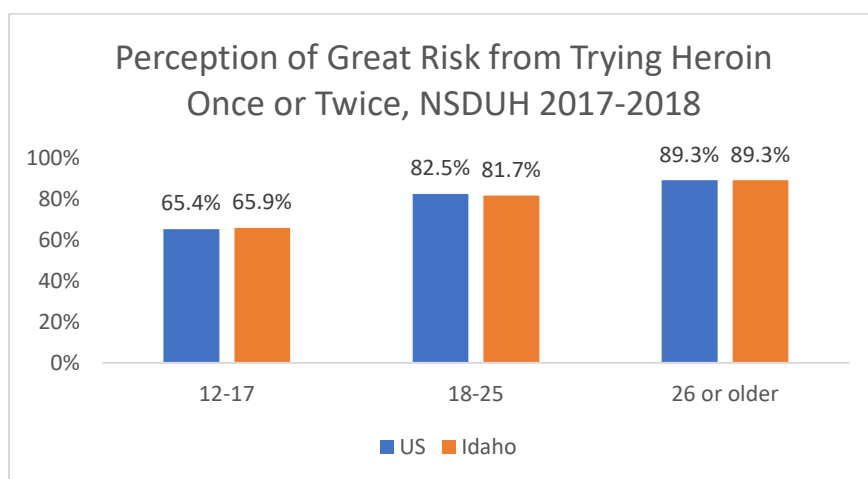
Meth/Amphetamine Drug/Narcotic Offenses Arrest Rates 2009-2018  
Uniform Crime Reporting, National Incident-Based Reporting System NIBRS

<sup>46</sup> Uniform Crime Reporting, National Incident-Based Reporting System NIBRS

## Substance Indicators - Heroin

### Risk

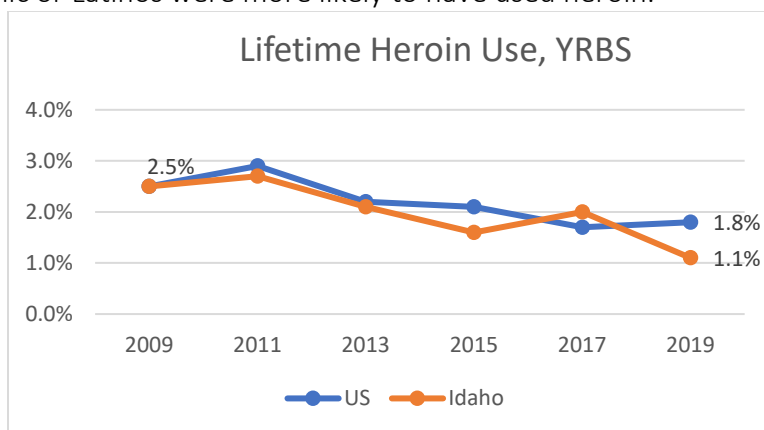
According to the 2017-2018 NSDUH, youth aged 12-17 are significantly less likely to perceive great risk from trying heroin once or twice.<sup>47</sup>



### Consumption

According to NSDUH, Idaho's heroin consumption has remained steady for the past four years at approximately 0.3% which is not statistically different than the nation's rate.<sup>47</sup>

As part of the YRBS, students were asked about their lifetime use of heroin (also called smack, junk, or China White). The percentage of students who used heroin once or more times during their life remains small. In 2019, Hispanic or Latinos were more likely to have used heroin.<sup>48</sup>

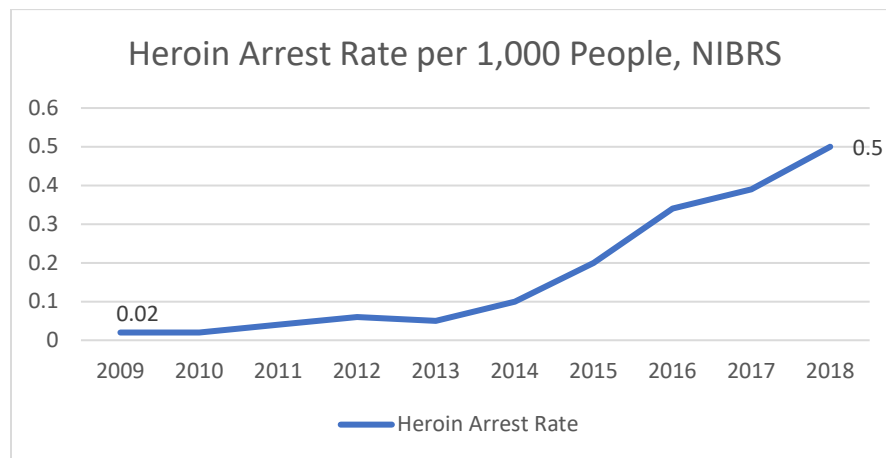


<sup>47</sup> Substance Abuse and Mental Health Services Administration. 2015-2018 National Survey of Drug Use and Health

<sup>48</sup> Idaho State Department of Education. 2019. "Idaho Youth Behavior Risk Survey"

## Consequence

Uniform Crime Reporting, National Incident-Based Reporting System NIBRS shows that the heroin arrest-rate has increased 395.6% in the five years since 2014-2018. The 10-year arrest rate increase is an astonishing 2450.5%.<sup>49</sup>



Uniform Crime Reporting, National Incident-Based Reporting System NIBRS

The highest county rates for heroin arrests in 2018 are Clark (1.15), Kootenai (0.97); Payette (0.89); and Benewah at (0.76).<sup>45</sup>

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<sup>49</sup> Idaho State Police. 2019. National Incident-Based Reporting System NIBRS

# Data Resources for Local Prevention Practitioners

## Indicators Idaho

U.S. Census indicators for Idaho counties and Indian Reservations

<http://indicatorsidaho.org/>

## Public Health Data

For public health district data:

Drug Overdose Prevention Program – Idaho Opioid Dashboard

<https://www.getthehealthy.dhw.idaho.gov/drug-overdose-dashboard>

Idaho Behavioral Risk Factor Surveillance System Results

<https://www.getthehealthy.dhw.idaho.gov/idaho-brfss> by public health district

[https://nccd.cdc.gov/BRFSSPrevalence/rdPage.aspx?rdReport=DPH\\_BRFSS.ExploreByLocation&irbLocationType=MMSA&isLocation=&isClass=&isTopic=&isYear=](https://nccd.cdc.gov/BRFSSPrevalence/rdPage.aspx?rdReport=DPH_BRFSS.ExploreByLocation&irbLocationType=MMSA&isLocation=&isClass=&isTopic=&isYear=) by MMSAs (urban areas)

Interactive Substate Estimates from National Survey of Drug Use and Health

<https://pdas.samhsa.gov/saes/substate>

## Crime Statistics

For county level arrest records, please view [www.isp.idaho.gov/pgr/sac/drug-crime-data](http://www.isp.idaho.gov/pgr/sac/drug-crime-data).

## Crash Statistics

For county level crash data, please view <https://itd.numetric.net/itd-safety-dashboards#/>

# Public Health District Area Resources

## Behavioral Health Boards

<https://healthandwelfare.idaho.gov/about-dhw/boards-councils-committees/regional-behavioral-health-boards>

### Idaho Region 1

Community Health Data

<https://panhandlehealthdistrict.org/healthdata/>

### Idaho Region 2

Behavioral Health Board Resources

<http://riibhb.idahopublichealth.com/resources>

### Idaho Region 3

Behavioral Health Board Resources

<https://phd3.idaho.gov/behavioral-health/bhb-resources/>

### Idaho Region 4

Behavioral Health Board Resources

<https://www.cdhd.idaho.gov/hl-r4bhb-resources.php>

### Idaho Region 5

Behavioral Health Board

2015 Resource Manual

[https://www.dropbox.com/sh/f4yl0e3n589xmk9/AAC\\_dWwqWKCHuM4E1pBRxmtaa/Administration/Resources%20%26%20Idaho%20Codes?dl=0&preview=Resource+Manual+2015.pdf&subfolder\\_nav\\_tracking=1](https://www.dropbox.com/sh/f4yl0e3n589xmk9/AAC_dWwqWKCHuM4E1pBRxmtaa/Administration/Resources%20%26%20Idaho%20Codes?dl=0&preview=Resource+Manual+2015.pdf&subfolder_nav_tracking=1)

### Idaho Region 6

Behavioral Health Resources

<https://siphidaho.org/comhealth/rbhb/Behavioral-Health-Resources.pdf>

### Idaho Region 7

Eastern Idaho Resource Directory

[https://eiph.idaho.gov/Home/Resources/EASTERN%20IDAHO%20RESOURCE%20DIRECTORY\\_Revised%2012-14-2018.pdf](https://eiph.idaho.gov/Home/Resources/EASTERN%20IDAHO%20RESOURCE%20DIRECTORY_Revised%2012-14-2018.pdf)

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