

# State of Idaho

## Frontier Profile of Substance Use Epidemiology: 2009 State Epidemiological Outcomes Workgroup (SEOW) Report

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## Table of Contents

Executive Summary .....	4
Geography and Demography .....	6
Frontier Counties .....	7
Mountainous North-Central Idaho .....	8
Transportation Network.....	11
Population Density and Trends .....	13
Income .....	14
Medical Service Coverage .....	15
Employment Structure .....	16
Idaho and Frontier County Race and Ethnicity Demographics .....	18
Summary of Demographics and Substance Use Prevention Activities .....	19
Clearwater County.....	19
Idaho County .....	22
Lewis County.....	25
Shoshone County.....	28
Alcohol and Other Drug Use .....	31
Alcohol Retail Sales Licenses .....	31
Heavy Drinking and Binge Drinking.....	32
Idaho Substance Use, Safety, and School Climate Survey (SUSSCS) Current Alcohol Users .....	35
Other Drug Use .....	36
Behavioral Risk Factor Surveillance System BRFSS Survey Data .....	36
Smoking and Other Drug Use .....	37
Alcohol and Drug Treatment Services .....	38
Treatment Services .....	38
Treatment Admissions.....	39
Criminal Justice.....	47
Substance Use Related Arrests .....	47
Drug and Mental Health Courts .....	49
Frontier County Felony Convictions and Commitments .....	50
Health Impact of Substance Use.....	52
Appendices .....	56
Idaho Resident Drug-Induced Deaths Occurring in Idaho .....	58

Number and Location of Physicians in Frontier Counties .....	65
Source List of All Relevant Data.....	66
Figures .....	69
Tables .....	70
Idaho SEOW Members .....	71

## Executive Summary

This profile is an attempt to gain better understanding of substance use and abuse patterns within a specific geographic area. The frontier profile relies mainly on four potential sources of data for information on substance users: (1) a statewide survey containing self-reported data on substance use; (2) treatment admissions data; (3) drug-related arrest and conviction data; and (4) mortality data. While all of these information sources are good they do have limitations. As such this profile should be combined with other data sources (e.g., local experts, other archival data) to provide a more thorough basis for understanding substance use practices within the specific geographic area of the four frontier counties.

The frontier counties addressed in this report (defined here as Clearwater, Idaho, Lewis, and Shoshone counties) are among the least populous areas of the state. These counties generally have population estimates of below seven persons per square mile (Lewis County is estimated at 7.5) while the state of Idaho as a whole averages 15.6 and the United States averages 79.6. The frontier counties are sparsely populated counties even in the context of the state of Idaho (Idaho contains over 60 persons per square mile less than the national average). Despite the area's smaller population, per capita substance use indicators are generally near state averages. There are two notable exceptions. Adult methamphetamine treatment admissions are significantly lower than state averages ( $p < .05$ ) and frontier youth alcohol treatment admissions have risen to a level higher than state averages over the past two years.

Admissions to treatment services often reflect earlier trends in drug related arrests. Frontier county drug arrests have been declining since 2004. During 2007, marijuana arrests were recorded at a higher rate than in the state as a whole, but methamphetamine arrests were less prevalent in the frontier counties.

Methamphetamine arrests decreased in 2006 and marijuana arrests have fluctuated but spiked sharply in 2006 (Appendix 1). The drug induced mortality rate has also been increasing in the frontier counties at a rate similar to that found in the rest of the state. Frontier county data on what substances were associated with these deaths are not currently available. However, when looking at substances mentioned statewide-- methadone, benzodiazepines, and morphine all have seen sharp increases while mentions of methamphetamine have dropped notably (Appendix 2).

Smoking attributed mortality rates in the frontier counties are above the state rate and the percentage of self-reported current smokers in all four of the frontier counties is higher than the state average. Because of this, the pattern of smoking and tobacco use in the frontier counties is worthy of closer monitoring.

From 1999 to 2007, the average rate of alcohol induced deaths in the state was 8.9 per 100,000 while in the frontier counties it was 14.6 deaths per 100,000. The trend is declining slightly in the frontier counties while it is increasing slightly in the state as a whole. The pattern of high rates of alcohol induced deaths in the frontier counties, like tobacco induced deaths, should also be closely monitored.

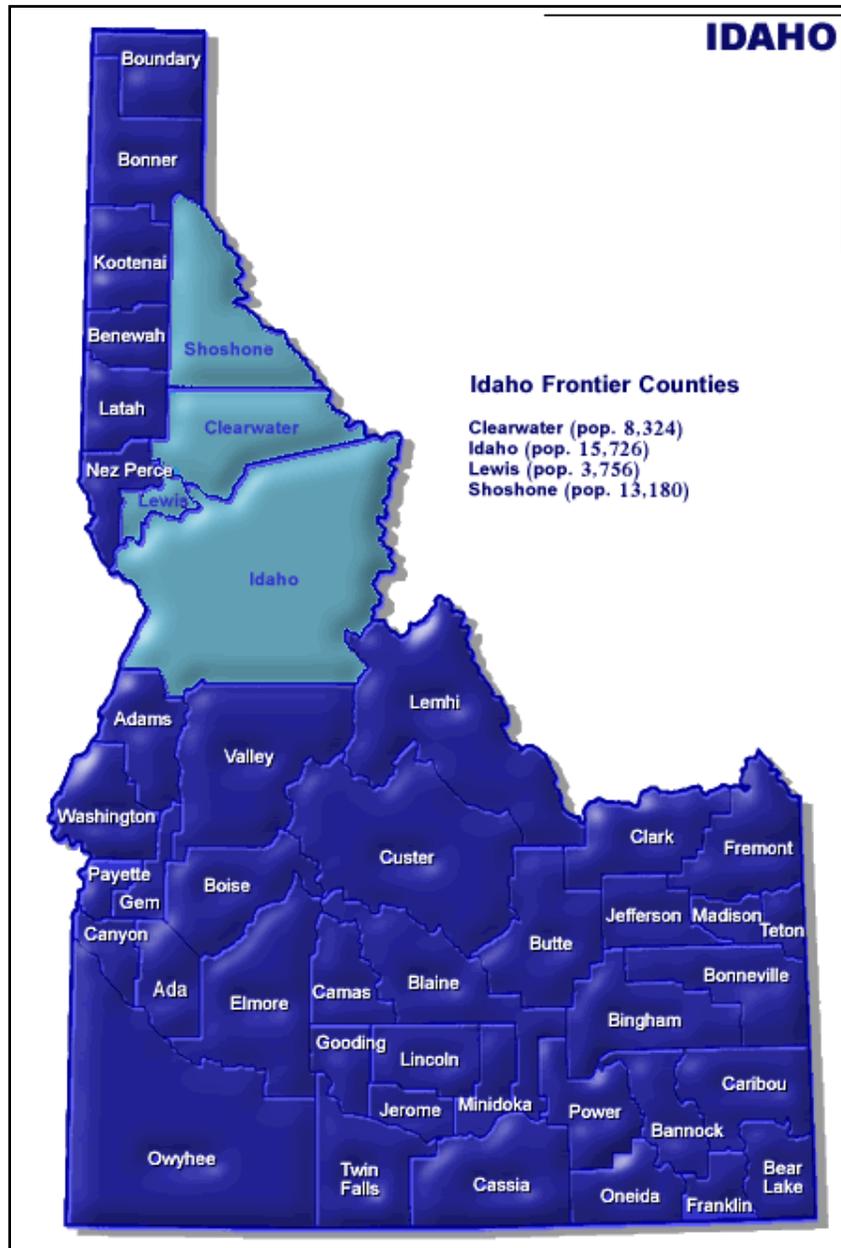
Several illicit drug indicators are mirroring state trends in the frontier. One trend that should be mentioned is in the frontier counties methamphetamine use appears to be running behind the state trends. This is borne out by lower than statewide numbers in methamphetamine treatment, arrests, and drug court participation.



## Frontier Counties

Located in the north-central portion of Idaho, the frontier area (defined as Clearwater, Idaho, Lewis, and Shoshone counties for the purposes of this profile) is one of the least populated areas of the state. Approximately 3% (40,986) of the state's population resides in these frontier counties which cover 17% (14,106 square miles) of the state's total land area.

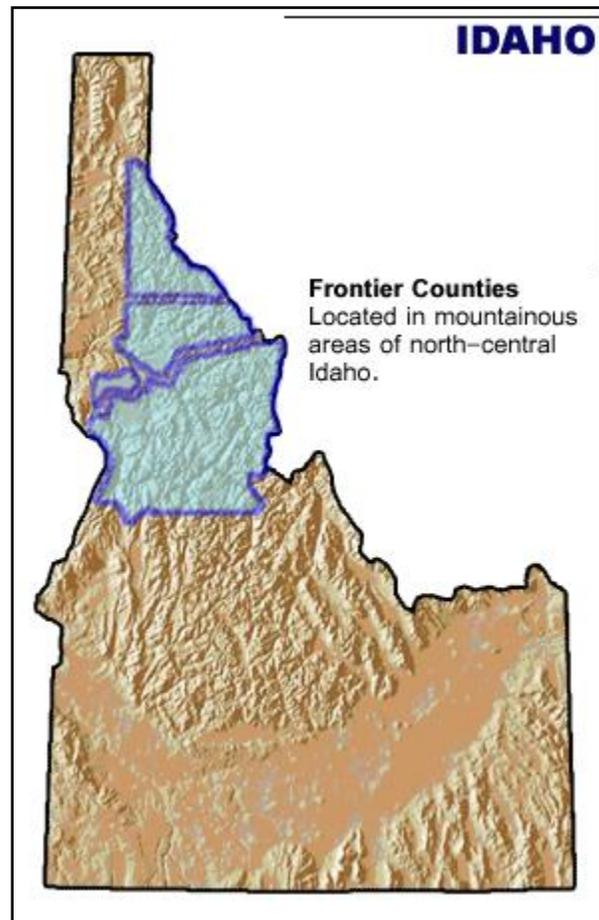
Figure 2: Idaho Frontier Counties (based on 2006 census estimates)



Source: U.S. Census Bureau, State and County QuickFacts.

## Mountainous North-Central Idaho

Figure 3: Relief map of Idaho Showing Frontier Counties



The Rocky Mountains area is the state's largest area and extends through the Idaho Panhandle (the narrow strip of Idaho that runs between Washington and Montana) south to the Wyoming border. The Rocky Mountains area is characterized by steep gorges, deep canyons and swift streams and rivers. Idaho has 50 mountain peaks that rise to over 10,000 feet. Borah Peak, Idaho's highest point is measured at 12,662 feet above sea level.

The Bitterroot Mountain Range lies along the Montana border in the Idaho Panhandle. The Continental Divide passes through Idaho in the Bitterroots.

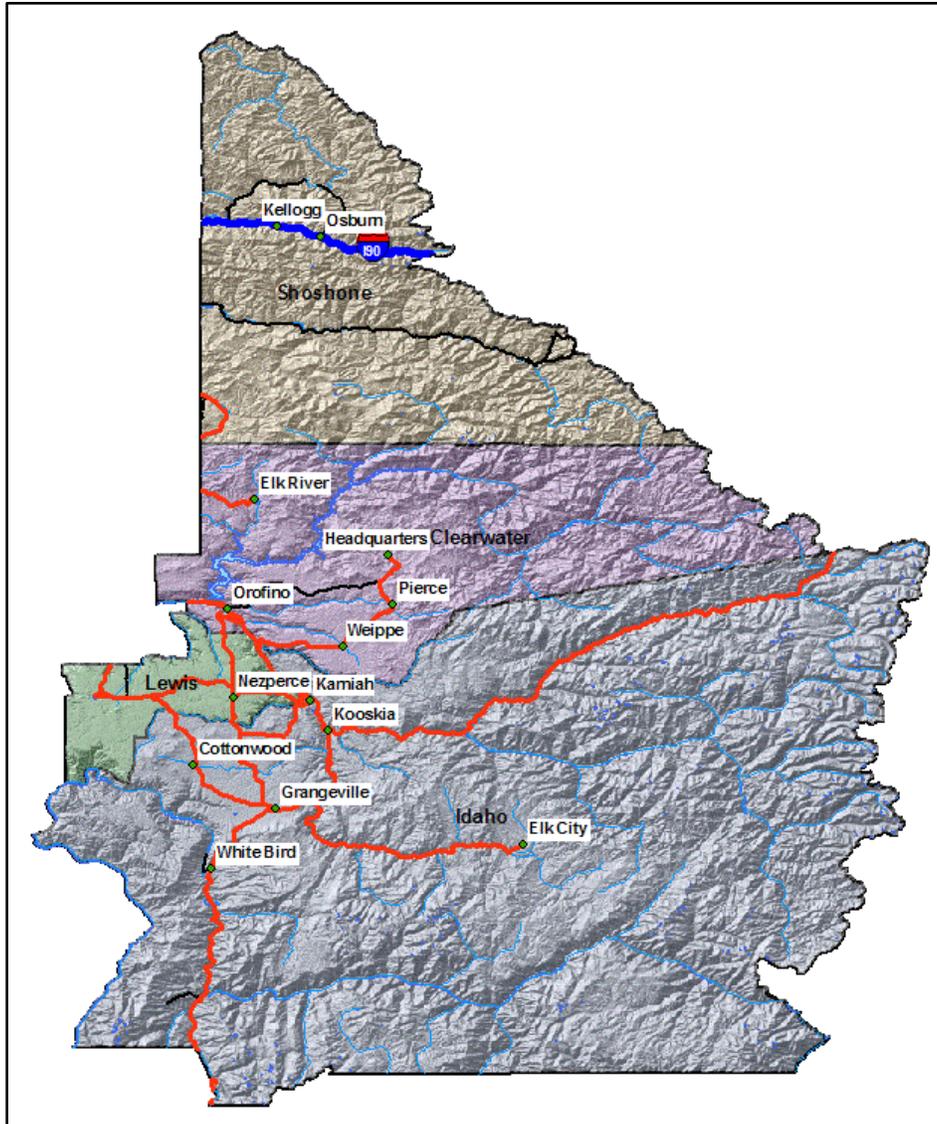
The Coeur d'Alene Mountains in the northern Panhandle lie to the west of the Bitterroot Mountain Range. This triangular area of mountains stretches from Lake Pend Orielle in the north to Coeur d'Alene Lake in the south. The highest peak in the Coeur d'Alene Mountains is Grizzly Mountain at 5,950 feet.

South of the Coeur d'Alene Mountains are the Clearwater Mountains and south of the Clearwater Mountains are the Salmon River Mountains. The Bighorn

Crags, bare granite worn into sharp ridges and spires, are found in the Salmon River Mountains. This mountain range is almost completely circled by the Salmon River.

South of the Salmon River Mountains is the Sawtooth mountain range; an extremely rugged series of granite peaks, beautiful meadows and alpine lakes. Thirty-three mountains in this range exceed 10,000 feet above sea level.

Figure 4: Relief Map of Frontier Counties with Location of Treatment Facilities and Major Roads

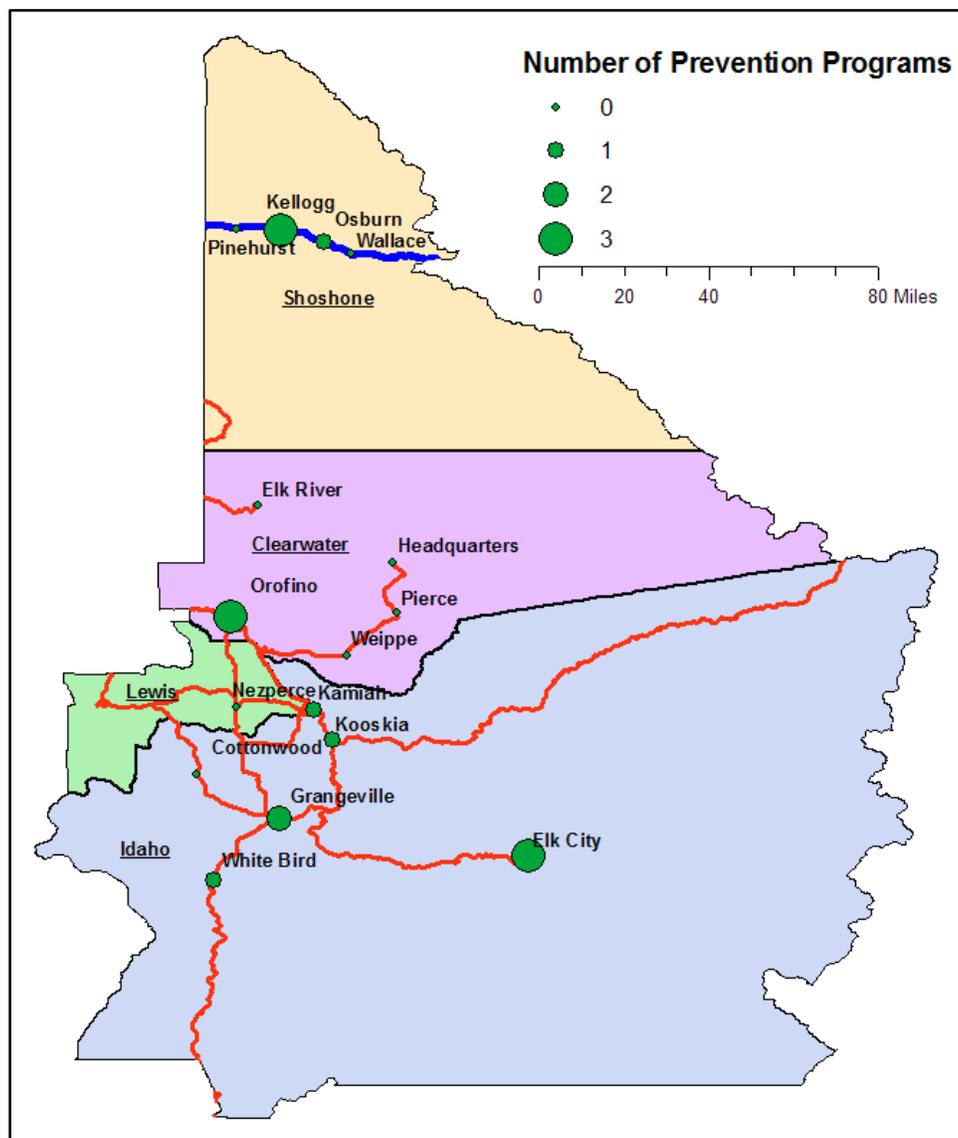


Source: ArcGIS 9.3 Media Kit, Map prepared by Idaho SEOW.

The map shown above illustrates the topography of the region. The towns highlighted contain substance abuse prevention and/or treatment facilities.

Though north-south transportation corridors exist in the western portion of these counties, the geography makes all travel much more difficult in the remote eastern portion of the counties. In the east, only a limited east-west road system is in place with virtually no connecting roads leading to the north. As the state boundaries narrow in the panhandle to only 45 miles from the Washington to the Montana border, the transportation network facilitates movement from east to west across the state. The lack of a north-south road network between Shoshone and Clearwater counties results in a long drive time required for citizens seeking prevention (as seen below) or treatment services in the Idaho panhandle.

Figure 5: Location of Prevention Programs in Frontier Counties

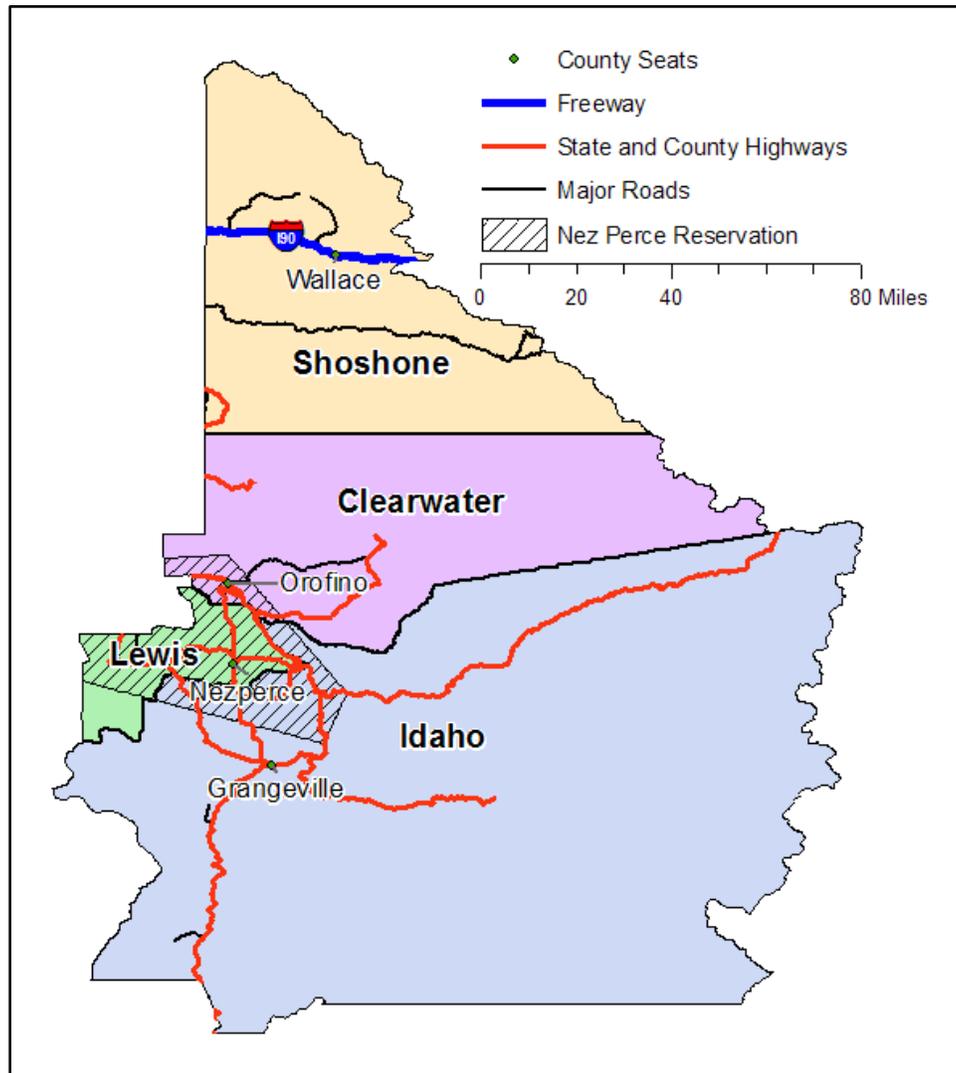


Source: Idaho Department of Health and Welfare, Bureau of Substance Use Disorders, November 2008.

## Transportation Network

As can be seen in the map below (and the aforementioned topographic map), the frontier county boundaries and topographical intricacies lead to a limited transportation network.

Figure 6: County and Transportation Map of Frontier Counties



Source: ArcGIS 9.3 Media Kit, Map prepared by Idaho SEOW.

As a result of this poor road connectivity and coverage, travel times between population centers within the counties can be long and slow. The following table is a partial list of estimated travel times between key towns in the frontier counties.

**Table 1: Sample Distance and Travel Time between Towns**

Town From	Town To	Distance (miles)	Time
Grangeville	White Bird	16.99	18 minutes
Grangeville	Elk City	51.37	1 hour 31 minutes
Nezperce	Kooskia	31.31	45 minutes
Kellogg	Orofino	193.96	3 hours 40 minutes
Kellogg	Kooskia	223.94	4 hours 17 minutes
Kellogg	Elk City	274.65	5 hours 27 minutes
Kellogg	Grangeville	223.38	3 hours 56 minutes
Kellogg	White Bird	239.39	4 hours 11 minutes
Orofino	Kooskia	30.58	40 minutes
Orofino	Grangeville	56.17	1 hour 15 minutes

Source: MapQuest found at [www.mapquest.com](http://www.mapquest.com).

It should be noted that although the above listed towns are the centers for most substance abuse prevention and treatment activities in the frontier counties, they are not large population centers relative to major cities in Idaho and eastern Washington such as Boise or Spokane.

The following table shows that even the larger population centers in the frontier counties are made up of less than 3,500 persons.

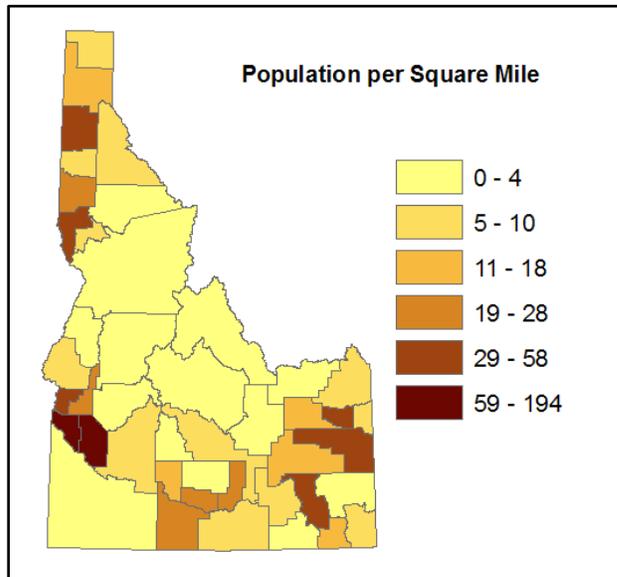
**Table 2: Population of Selected Towns in the Frontier Counties (2000 census)**

Town	Population
Elk City	156
Grangeville	3,228
Kellogg	2,395
Kooskia	675
Nezperce	523
Orofino	3,247
White Bird	106

Source: U.S. Census Bureau, Census 2000.

## Population Density and Trends

Figure 7: Idaho Population Levels per Square Mile



Source: U.S. Census Bureau, 2000 population per square mile of counties, map prepared by Idaho SEOW.

Based on 2007 census estimates, every county in the frontier profile area has experienced a population decline since 2000. Meanwhile, the state of Idaho has experienced growth of more than 200,000 people during that same time.

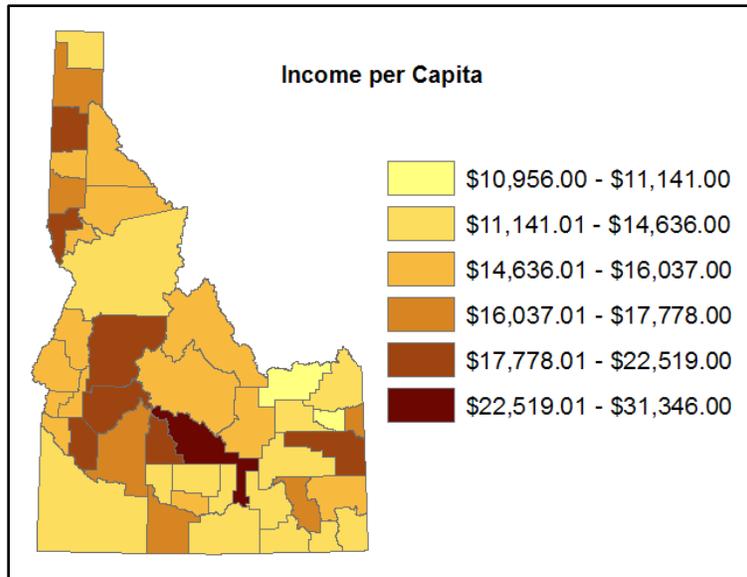
Table 3: Population Trends

	Estimated Population		
	1990	2000	2007
Clearwater	8,505	8,930	8,231
Idaho County	13,783	15,511	15,345
Lewis	3,516	3,747	3,581
Shoshone	13,931	13,771	12,838
State of Idaho	1,006,749	1,293,953	1,499,402

Source: U.S. Census Bureau, 2007 Population Estimates, 2000 Census, 1990 Census

## Income

Figure 8: Idaho per Capita Annual Income



Source: U.S. Census Bureau, 1999 per capita money income of counties, map prepared by Idaho SEOW.

Counties with high per capita annual income tend to be in the more urbanized areas, with the exception of Blaine County in south-central Idaho which is home to the resort community of Sun Valley. The frontier counties are fairly typical in relation to other rural counties and the state as a whole.

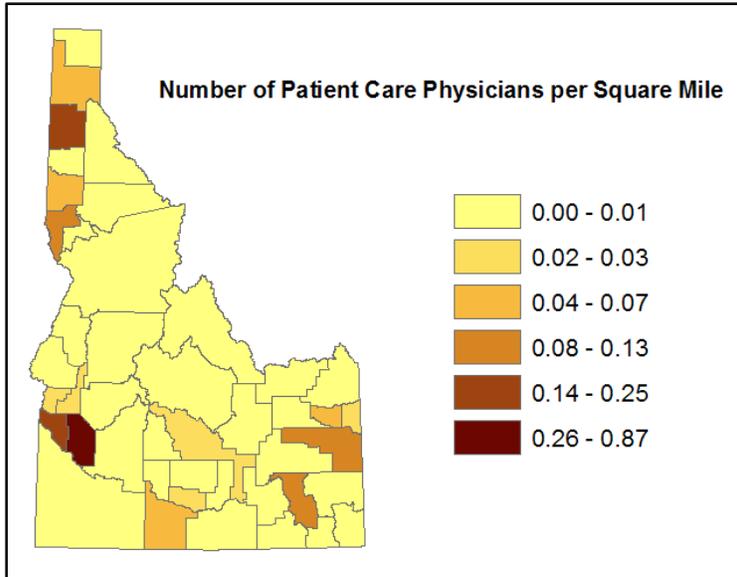
Table 4: Frontier County Income Trends

	Per Capita Income		
	1979	1989	1999
Clearwater	\$11,396	\$11,234	\$15,463
Idaho County	\$10,658	\$10,527	\$14,411
Lewis	\$9,936	\$9,780	\$15,942
Shoshone	\$10,487	\$10,373	\$15,934
State of Idaho	\$13,290	\$14,870	\$17,841

Source: U.S. Census Bureau, 2000 Census, 1990 Census, 1980 Census

## Medical Service Coverage

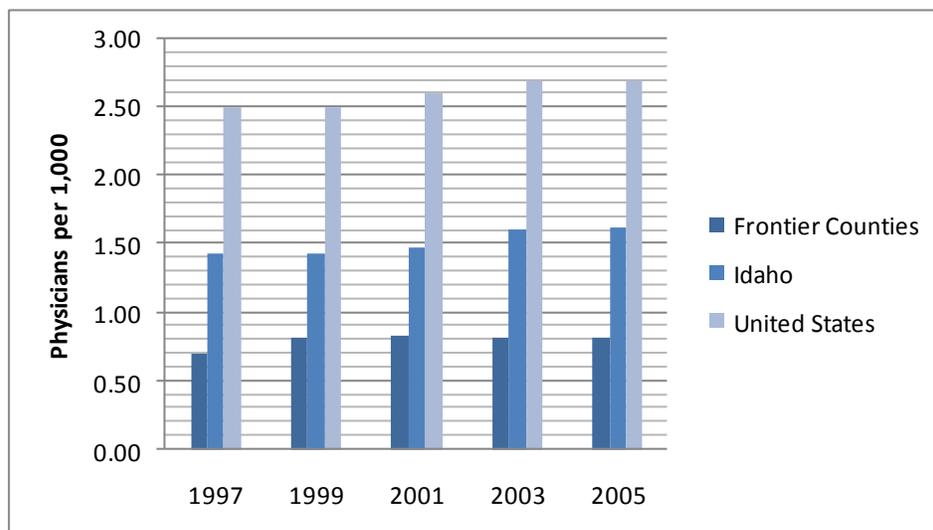
Figure 9: Idaho Physicians per Square Mile



Source: American Medical Association, map prepared by Idaho SEOW.

As is evident from the above figure, physician care in is concentrated in the urban regions of north, southwest, and eastern Idaho. Limited health care access has lead to unique medical care situations so extreme that in one case a physician commutes to his patients via light aircraft. (Source: The Flying Doctor, msnbc.com)

Figure 10 Primary Care Physicians per 1,000 Population



Source: American Medical Association.

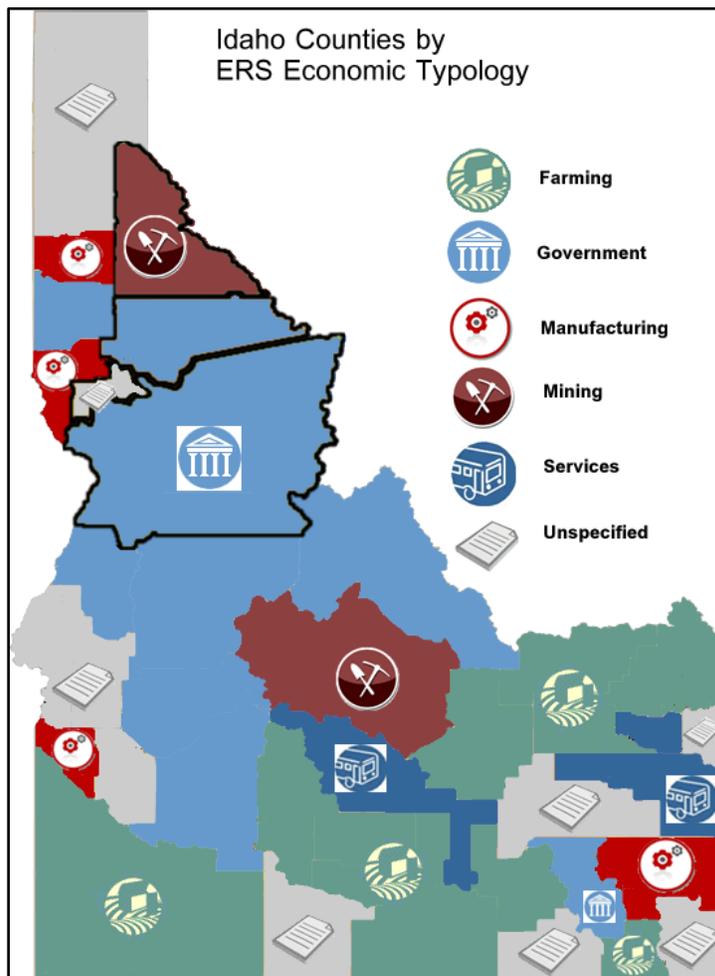
## Employment Structure

In 2004, government and government enterprises accounted for the largest shares of employment in Idaho (14.9%) and the United States (13.9%). Retail trade was the second largest employment sector both in Idaho (11.8%) and the U.S. (11.0%).

The Economic Research Service (ERS) Economic Typology classifies counties into one of five industry categories of specialization or as non-specialized. The map below shows the classification of Idaho counties by this typology, illustrating the diversity across the state.

The frontier counties rely upon government, mining, and non-specialized industries for their primary source of employment.

Figure 11: Idaho Primary Industry by County



Source: Rural Policy Research Institute Truman School of Public Affairs University of Missouri-Columbia  
<http://www.rupri.org>. Map prepared by Idaho SEOW.

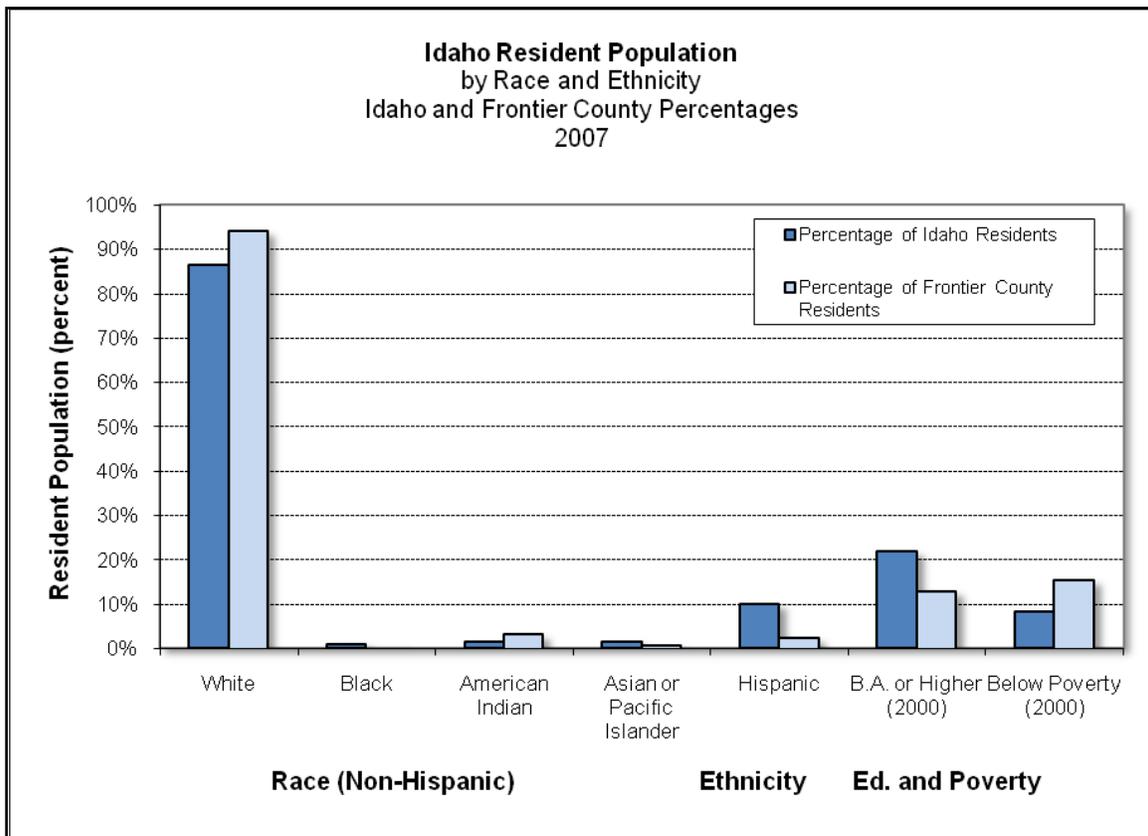
Clearwater and Idaho counties rely heavily on government employment principally the U.S. Bureau of Land Management, the U.S. Forest Service, the Idaho Department of Health and Welfare and the Idaho State Penitentiary. In Lewis County, the major “unspecified” employers are the City of Kamiah, Cloningers Harvest Foods (grocery), Flying B Ranch (tourism), Highland Joint School District (SD) 305, Hillco Technologies (farm equip. manufacturer), It'se-Ye-Ye Casino (Nez Perce Tribe), Kamiah Joint SD 304, Kamiah Mills, Lewis County Nezperce Joint SD 302, and Seeds Incorporated. Mining is the dominant industry in Shoshone County with the largest employers being Galena Mine, Lucky Friday Mine, and Sunshine Mine. (Source: Idaho Department of Labor, [labor.idaho.gov](http://labor.idaho.gov))

## Idaho and Frontier County Race and Ethnicity Demographics

Idaho residents are predominately white at 86.5%; the frontier counties are 93.9% white.

The frontier counties show a lower proportion of individuals with B.A. degrees (12.9%) compared to the state (21.7%) and a higher proportion of people below the poverty level (15.4%) compared to the state (8.3%).

Figure 12: Idaho Resident Population Breakdown



\*Frontier counties as defined by SEOW.

Compiled by Bureau of Vital Records and Health Statistics and Idaho SEOW, Idaho Department of Health and Welfare (October 2008).

Source: National Center for Health Statistics. Estimates of the July 1, 2007, United States resident population from the Vintage 2007 postcensal series by county, age, sex, race, and Hispanic origin, prepared under a collaborative arrangement with the U.S. Census Bureau, September 5, 2008. US Census Bureau, Profile of Selected Economic Characteristics 2000.

## Summary of Demographics and Substance Use Prevention Activities



**Clearwater County (population 8,231)** – Clearwater County is a large county with few towns. During the early 1990s, population in Clearwater County peaked at 9,232 in 1996. Hard economic times caused the population to fall 10 percent, from 9,099 in 1997 to 8,231 in 2007, while U.S. population grew 11 percent and Idaho’s population grew 22 percent. New registrations for driver’s licenses and job registrations indicate the few people who did move to Clearwater County came from other parts of the Pacific Northwest and California. People move there to enjoy its scenery, recreational opportunities, and rural lifestyle. The county seat, Orofino, has a population of 3,070. Other principle towns are: Pierce, 530; Weippe, 380; and Elk River, 140.

### Labor Force & Employment

Since a decline in the forest products industry in the late 1990s climaxed with the closure of Pierce’s Jaype Mill, the county has experienced significant employment decreases in almost all industries. Economic development groups work hard to diversify the economy, attract new businesses, and help existing businesses grow. To assist with business expansion, an industrial park in Orofino was constructed. Architectural Signs and Engraving, Inc. was the first tenant and has been successful. In 2006, Clearwater County began to show signs of a recovery. Jobs were added in manufacturing, retail trade, tourism, and health care. Unfortunately, troubles in the lumber industry once again are unsettling the area.

Federal and state employment provides some stability in the job base. The U.S. Forest Service employs 80 people year-round and a few dozen more in the summer. Orofino is home to a U.S. Fish & Wildlife Service hatchery, employing about 45 people. The State of Idaho operates a penitentiary and a mental health facility in Orofino. Together they employ about 230 people. Tourists come to enjoy hunting and fishing opportunities, boating at Dworshak Dam, or learning about the area’s role in the Lewis and Clark Expedition. The Lodge at River’s Edge in Orofino opened in 2005 to provide upscale lodging to help attract more visitors for longer stays.

### Economic Development

Clearwater County has struggled with high unemployment since the mid-1990s. Because of its persistent high unemployment, Clearwater County is an eligible labor surplus area, giving local businesses priority for government contracts.

Clearwater County Economic development and local officials are making efforts to strengthen and diversify the economy.

(Source: Clearwater County Work Force Trends, Idaho Department of Labor, labor.idaho.gov)

### Substance Abuse Prevention Programs

Several groups are actively focused on drug and alcohol prevention or treatment and have had success in creating alcohol-free sections or nights at community events. Another coalition focuses on recovery and relapse prevention for alcoholics. Orofino has a strong coalition that has received very significant funding in the SAMHSA Drug-Free Communities grant for approximately 5 years.

- Idaho Department of Health and Welfare funds substance abuse prevention programs in:
  - Clearwater Substance Abuse Workgroup – Orofino – Social Marketing campaign on adults giving teens alcohol
  - Clearwater Youth Alliance - Orofino – I Can Problem Solve, Raising A Thinking Child – character ed/cognitive, emotional and social reasoning skills (ICPS), instilling the same in children (RATC)

**Table 5: Clearwater County Prevention Locations**

Prevention Program	Delivery Location(s)	Target Population	Risk & Protective Factors
I Can Problem Solve	Orofino	Elementary School Students	Individual And Peer (R) Individual Characteristics (P)
I Can Problem Solve	Orofino	Preschool Students	Individual And Peer (R) Individual Characteristics (P)
Raising A Thinking Child	Orofino	Parents/Families	Individual And Peer (R) Individual Characteristics (P)

Source: Idaho State Department of Education Safe and Drug Free Schools

- Examples of Safe and Drug Free Schools (SDFS) programs active in this county:
  - Advisory Board – SDFS
  - Advisory/Student Councils
  - Assemblies/Motivational speakers
  - Assessments
  - Before/After/Summer Extended Ed
  - Bullying Awareness Week
  - Celebration Graduation
  - Character Education (Ed)
  - Classroom Presentations
  - Coalition/Drug Task Force
  - Conferences/Trainings/Workshops
  - Driver's Ed/Vision goggles
  - Drug Testing Kits

- Drug Testing Program
- Health Ed Classes - Alcohol
- Health Ed Classes - Inhalants
- Health Ed Classes - Marijuana
- Health Ed Classes - Methamphetamines
- Health Ed Classes - Other Drugs
- Health Ed Classes - Prescription Drugs
- Health Ed Classes - Suicide Prevention
- Health Ed Classes - Tobacco
- HLAY-Here's Looking at You
- Idaho Prevention Conference
- Idaho Youth Summit
- IDFY - Idaho Drug Free Youth
- Indirect Costs
- Materials/Supplies/Videos
- Mentors
- Natural Helpers
- Parent Ed/Community Meetings/Presentations
- Peer Helpers
- Prevention Programs - Tobacco - TAG/TEG Tobacco Cessation Program
- Prevention Programs - Tobacco - TAR WARS
- Printing/Mailing
- RADAR Services
- Red Ribbon Activities
- SADD – Students Against Destructive Decisions
- School Counseling/Intervention Teams
- SDFS State Coordinators Kickoff
- Senior Graduation Celebration
- Support Groups
- Surveys
- Teen and Adult Living
- Transition Programs

**Table 6: Safe and Drug Free Schools Budget in Clearwater County**

District	County	Budgeted Amounts		
		State	Federal	Other
Orofino (171)	Clearwater	\$28,740.00	\$6,914.00	\$0.00
Whitepine (288)	Clearwater	\$5,959.00	\$3,636.00	\$0.00
<b>Total</b>		<b>\$34,699.00</b>	<b>\$10,550.00</b>	<b>\$0.00</b>

Source: Idaho State Department of Education Safe and Drug Free Schools



**Idaho County (population 15,345)** – Idaho County is located largely in a mountainous region. This very large county is mainly uninhabited. Part of the Nez Perce Tribe reservation lies within Idaho County.

Idaho County's population fell marginally from 15,414 in 1997 to 15,345 in 2007, while U.S. population grew 11 percent and Idaho's population grew 22 percent. New registrations for driver's licenses and job registrations at the Grangeville Department of Labor office indicate few people moved into Idaho County, most from other parts of the Pacific Northwest and California. They came primarily to enjoy the scenic beauty, outdoor recreational opportunities, and rural lifestyle. Populations of Idaho

County's incorporated cities are: Grangeville, 3,090; Cottonwood, 1,020; Kooskia, 650; Riggins, 400; Stites, 220; Ferdinand, 140; and White Bird, 110.

### **Labor Force & Employment**

Idaho County's economy remains heavily dependent on natural resources—both forest products and agriculture. The U.S. Forest Service employs more than 300 people. High prices for wheat helped farmer's bottom lines in the last couple years, allowing them to spend more money on implements and at wholesalers and retail stores. In the last few months, wheat prices have fallen while costs remain high.

One in eight of the county's private-sector jobs are in logging or wood products manufacturing. Unfortunately, the decrease in U.S. housing starts has depressed lumber prices, forcing local mills to reduce employment.

The county—full of mountains, forests and rivers—is just beginning to tap into its full tourist potential. Over the last few years, the Super 8 Motel in Grangeville, Salmon Rapids Lodge in Riggins, and a \$3.4 million retreat at St. Gertrude's Monastery near Cottonwood have opened. A growing art community also draws some visitors, as well as making the county more attractive to retirees.

In the last few years, steady job growth allowed Idaho County's unemployment rate to edge down. In recent months, troubles in the timber industry have pushed the rates up.

### **Economic Development**

Ida-Lew Economic Development Council—a nonprofit organization working to recruit new businesses, help existing businesses expand, and otherwise strengthen and diversify the economic base of Idaho and Lewis Counties—is

based in Grangeville. It informs businesses about the area's low costs of doing business, favorable business climate, and quality of life.

Because of its long-term high unemployment rate, Idaho County is an eligible labor surplus area, giving local businesses priority for government contracts.

(Source: Idaho County Work Force Trends, Idaho Department of Labor, labor.idaho.gov)

### Substance Abuse Prevention Programs

Several community-based groups, including the Nez Perce Tribe, work to reduce the impact of drug and alcohol use, improve quality of life, or improve economic conditions. Kamiah was recently awarded a Drug-Free Communities grant.

**Table 7: Idaho County Prevention Locations**

Prevention Program	Delivery Location(s)	Target Population	Risk & Protective Factors
Positive Action	Elk City Grangeville White Bird	Elementary School Students	Individual And Peer (R) Family (R) School (R) Community (R) Individual Characteristics (P) Bonding between young people and adults (P) Healthy beliefs and clear standards for youth (P)
Second Step: A Violence Prevention Curriculum	Grangeville Kooskia	Elementary School Students	Individual And Peer (R) Individual Characteristics (P)
I Can Problem Solve	Elk City	Elementary School Students	Individual And Peer (R) Individual Characteristics (P)
I Can Problem Solve	Elk City	Preschool Students	Individual And Peer (R) Individual Characteristics (P)

Source: Idaho State Department of Education Safe and Drug Free Schools

- Idaho Department of Health and Welfare funds substance abuse prevention programs administered in:
  - Mountain View SD – Grangeville, Elk City, White Bird – Positive Action - life skills/character education
  - Mountain View SD – Grangeville, Kooskia – Second Step – violence, bullying and drug prevention
  - Kamiah SD/Nez Perce Tribe – Kamiah - Communities Mobilizing for Change on Alcohol – a cluster of strategies to reduce availability to youth, increase ID verification, reduce public visibility of alcohol, etc.
  - Reach Club after school program - Elk City – I Can Problem Solve – character ed/cognitive, emotional and social reasoning skills.

- Examples of Safe and Drug Free Schools (SDFS) programs active in Idaho County:
  - Advisory Board – SDFS
  - Advisory/Student Councils
  - Assemblies/Motivational speakers
  - Assessments
  - Before/After/Summer Extended Ed
  - Biology/Science Classes
  - Celebration Graduation
  - Character Ed
  - Conferences/Trainings/Workshops
  - Driver's Ed/Vision goggles
  - Drug Free Prevention Activities
  - Drug Testing Program
  - Drug Testing Kits
  - Health Ed Classes - Alcohol
  - Health Ed Classes - Inhalants
  - Health Ed Classes - Marijuana
  - Health Ed Classes - Methamphetamines
  - Health Ed Classes - Other Drugs
  - Health Ed Classes - Prescription Drugs
  - Health Ed Classes - Tobacco
  - HLAY-Here's Looking at You
  - Idaho Prevention Conference
  - Idaho Youth Summit
  - IDFY - Idaho Drug Free Youth
  - Indirect Costs
  - Open Gym
  - Parent Ed/Community Meetings/Presentations
  - Prevention Activities
  - Prevention Programs - Tobacco - TAR WARS
  - Red Ribbon Activities
  - Red Ribbon Activities
  - School Counseling/Intervention Teams
  - SDFS State Coordinators Kickoff
  - Senior Graduation Celebration
  - Support Groups
  - Surveys
  - Teen and Adult Living
  - Youth Companion Services Program

**Table 8: Safe and Drug Free Schools Budget in Idaho County**

District	County	Budgeted Amounts		
		State	Federal	Other
Cottonwood (242)	Idaho	\$10,485.00	\$1,947.00	\$0.00
Salmon River (243)	Idaho	\$4,488.00	\$1,791.00	\$0.00
Mountain View (244)	Idaho	\$25,808.00	\$8,935.00	\$22,201.00
Kamiah (304)	Idaho	\$12,578.00	\$2,954.00	\$0.00
<b>Total</b>		<b>\$53,359.00</b>	<b>\$15,627.00</b>	<b>\$22,201.00</b>

Source: Idaho State Department of Education Safe and Drug Free Schools



**Lewis County (population 3,581)** – Lewis County lies largely within the Nez Perce Tribe reservation. A small county, there are only four towns, all of which are on the reservation. According to U.S. Census Bureau estimates for 2006, 4.6% of the residents of Lewis County are of American Indian descent where 1.4% of Idahoans are American Indian.

After growing slowly for several years, Lewis County's population peaked at 3,856 in 1997. Over the next 10 years, it fell 7 percent to 3,581, while U.S. population grew 11 percent and Idaho's population grew 22 percent.

Declining job opportunities in natural resource-based industries caused young families to move out, while retirees moved to the area to enjoy its rural charm, scenic beauty, hunting and fishing opportunities, safe communities and relatively low cost of living (Source: Personal Communiqué, Executive Director Shelby Kerns, Idaho Rural Partnership).

Offsetting a portion of the population loss impact are people now using parts of Lewis County as bedroom communities for Lewiston. Examples of the population of the county's incorporated cities are: Kamiah, 1,090; Craigmont, 520; Nezperce, 490; Winchester, 290; and Reubens, 70.

### **Labor Force & Employment**

Lewis County remains heavily dependent on natural resource industries—especially agriculture and forest products. Since 1980, jobs in agriculture have decreased by one third. In the last few years, high prices for wheat and other grains have given farms added buying power, benefitting service and retail businesses. Recently, however, grain prices have fallen sharply.

Over time, the forest products industry has lost jobs, but it remains a major source of jobs in several communities in Lewis County. Falling U.S. housing starts have depressed lumber prices, forcing mills to reduce hours or cut jobs. Today, 90 people work at sawmills, and another 40 in the logging industry.

Only 50 people work in other manufacturing businesses. The largest is Hillco Technologies in Nezperce, which makes equipment to keep farm combines level. The county's tourism industry remains small. Public lands within the county, including Winchester State Park, provide recreational opportunities, which help attract tourists and potential residents.

### **Economic Development**

Ida-Lew Economic Development Council is a nonprofit organization recruiting new businesses, assisting existing businesses grow, promoting the infrastructure that will sustain long-term economic growth, and otherwise strengthening and diversifying the economies of Lewis and Idaho Counties.

The Nez Perce Tribe also plays a major role in economic and community development in parts of Lewis, Clearwater and Nez Perce counties.

(Source: Lewis County Work Force Trends, Idaho Department of Labor, labor.idaho.gov)

### Substance Abuse Prevention Programs

Idaho Department of Health and Welfare does currently fund only the Communities Mobilizing for Change on Alcohol substance abuse prevention program in Lewis County.

Prior to reorganization of the Grangeville SD (prevention services were funded at the Craigmont school) but currently there are no services under the new Mountain View SD.

**Table 9: Lewis County Prevention Locations**

Prevention Program	Delivery Location(s)	Target Population	Risk & Protective Factors
Communities Mobilizing for Change on Alcohol	Kamiah	General Population	Healthy beliefs and clear standards for youth (P)

Source: Idaho State Department of Education Safe and Drug Free Schools

- **Examples of Safe and Drug Free Schools (SDFS) programs active in Lewis County:**
  - Advisory Board – SDFS
  - Advisory/Student Councils
  - Assemblies/Motivational speakers
  - Assessments
  - Asset Training Resource Kit
  - Before/After/Summer Extended Ed
  - Bullying Awareness Week
  - Classroom Presentations
  - Conferences/Trainings/Workshops
  - Conflict Management/Resolution
  - Contracted Intervention Services
  - DARE Program
  - Drug Free Prevention Activities
  - Health Ed Classes - Alcohol
  - Health Ed Classes - Inhalants
  - Health Ed Classes - Marijuana
  - Health Ed Classes - Methamphetamines
  - Health Ed Classes - Tobacco

- Indirect Costs
- Materials/Supplies/Videos
- Parent Ed/Community Meetings/Presentations
- Prevention Programs - Alcohol Prevention
- Prevention Programs - Violence/Harassment Prevention
- Red Ribbon Activities
- School Counseling/Intervention Teams
- SDFS State Coordinators Kickoff
- Senior Graduation Celebration
- Social Skills Lessons & Activities
- Support Groups
- Teen and Adult Living
- Youth Activities/Clubs

**Table 10: Safe and Drug Free Schools Budget in Lewis County**

District	County	Budgeted Amounts		
		State	Federal	Other
Nezperce (302)	Lewis	\$4,860.00	\$768.00	\$0.00
Highland (305)	Lewis	\$5,889.00	\$979.00	\$0.00
<b>Total</b>		<b>\$10,749.00</b>	<b>\$1,747.00</b>	<b>\$0.00</b>

Source: Idaho State Department of Education Safe and Drug Free Schools



**Shoshone County (population 12,838)** – After devastating mine and smelter closures, Shoshone County's population fell 28 percent in the 1980s. In the 1990s, the population declined slightly. Over time, several Silver Valley towns have become bedroom communities for the Coeur d'Alene area. From 1997 to 2007, the population fell 9 percent from 14,051 to 12,838, while Idaho's population grew 22 percent and the U.S. population grew 11 percent. A rural policy expert notes that with its economic outlook brighter due to mining making a comeback, the county's population should grow at a fair clip during the next few years (Source: Personal Communiqué, Executive Director Shelby Kerns, Idaho Rural Partnership). This will provide many job opportunities for the young adults choosing to stay in the county.

The county seat, Wallace, has a population of 880.

The largest cities are Kellogg, population 2,230; Pinehurst, 1,560; and Osburn, 1,390.

### **Labor Force & Employment**

High silver prices currently are helping the mining industry, which had declined from a peak of 4,200 jobs in 1981 to 340 jobs in 2002. The Lucky Friday and Galena mines, which are the only major mines left open, employ twice as many people as they did three years ago. The Sunshine Mine, which closed in 2001, reopened in 2007, and after a major layoff due to financial problems employs about 70 people. Many exploration efforts are underway, and it is possible more mines will open. Currently, the mining industry employs about 700 people. A high average annual wage of \$61,000 gives mining additional economic clout.

Shoshone County is developing its tourism sector. In 1990, the world's longest gondola opened, running from Kellogg to the Silver Mountain ski area. Last spring, Silver Mountain Resort opened an indoor water park and broke ground on an 18-hole golf course. The city of Wallace draws many travelers off Interstate 90 to shop and play in its charming downtown. Lookout, a small ski area along Interstate 90 next to the Montana border, doubled employment in the last four years. Growing numbers of hikers, bicyclists and snowmobilers are exploring the hundreds of miles of trails in Shoshone County. The ski areas, other tourist facilities, lodging, restaurants, restaurants, and bars employ about 600 people.

The county's retail and service sectors are growing as population grows, tourism increases, and incomes rise. Dave Smith Motors, an automobile dealership in Kellogg, employs nearly 400 people, making it the county's largest employer.

## Economic Development

In the early 1980s, Shoshone County was one of Idaho's three most prosperous counties. More than 20 years of high unemployment made the county the third poorest by 2003. Fortunately, rising employment and wages are helping Shoshone County regain some of its former luster. According to U.S. Housing and Urban Development estimates, the county's median family income grew 24 percent between 2003 and 2008, while U.S. median family income grew 9 percent. The Silver Valley Economic Development Corporation is working to expand and diversify the local economic base.

(Source: Shoshone County Work Force Trends, Idaho Department of Labor, labor.idaho.gov)

## Substance Abuse Prevention Programs

Idaho Department of Health and Welfare funds substance abuse prevention programs in:

- Kellogg – Kellogg SD – Lions Quest for Adolescents – life skills/character education/social bonding
- Kellogg – Silver Valley Nurturing Program – Nurturing Parents parenting program – communication, firm consequences, family conflict resolution skills
- Wallace – Silver Hills SD - Positive Action – life skills/character education

**Table 11: Clearwater County Prevention Locations**

Prevention Program	Delivery Location(s)	Target Population	Risk & Protective Factors
Positive Action	Osburn and Kellogg	Elementary School Students	Individual And Peer (R) Family (R) School (R) Community (R) Individual Characteristics (P) Bonding between young people and adults (P) Healthy beliefs and clear standards for youth (P)
Nurturing Program	Kellogg	Parents/Families	Family (R) Individual Characteristics (P) Bonding between young people and adults (P)
Lions Quest - Skills for Adolescence	Kellogg	Middle/Junior High School Students	Individual And Peer (R) School (R) Individual Characteristics (P) Bonding between young people and adults (P) Healthy beliefs and clear standards for youth (P)

Source: Idaho State Department of Education Safe and Drug Free Schools

- Examples of Safe and Drug Free Schools (SDFS) programs active in Lewis County:
  - Advisory Board – SDFS
  - Alternative School Curriculum
  - Assemblies/Motivational speakers
  - Assessments
  - Before/After/Summer Extended Ed
  - Bullying Awareness Week
  - Celebration Graduation
  - Character Ed
  - Conferences/Trainings/Workshops
  - Conflict Management/Resolution
  - Contracted Intervention Services
  - Driver's Ed/Vision goggles
  - Drug Free Prevention Activities
  - Health Ed Classes - Alcohol
  - Health Ed Classes - Marijuana
  - Health Ed Classes - Other Drugs
  - Health Ed Classes - Tobacco
  - Idaho Prevention Conference
  - Idaho Youth Summit
  - IDFY - Idaho Drug Free Youth
  - Natural Helpers
  - Prevention Programs - Drug Prevention
  - Prevention Programs - Tobacco - TAG/TEG Tobacco Cessation Program
  - Printing/Mailing
  - Red Ribbon Activities
  - SDFS State Coordinators Kickoff
  - Senior Graduation Celebration
  - Social Skills Lessons & Activities
  - Support Groups
  - Teen and Adult Living
  - Youth Activities/Clubs

**Table 12: Safe and Drug Free Schools Budget in Shoshone County**

District	County	Budgeted Amounts		
		State	Federal	Other
Kellogg (391)	Shoshone	\$30,204.00	\$9,305.00	\$0.00
Mullan (392)	Shoshone	\$3,488.00	\$837.00	\$0.00
Wallace (393)	Shoshone	\$10,039.00	\$3,851.00	\$201,500.00
Avery (394)	Shoshone	\$1,854.00	\$360.00	\$0.00
<b>Total</b>		<b>\$45,585.00</b>	<b>\$14,353.00</b>	<b>\$201,500.00</b>

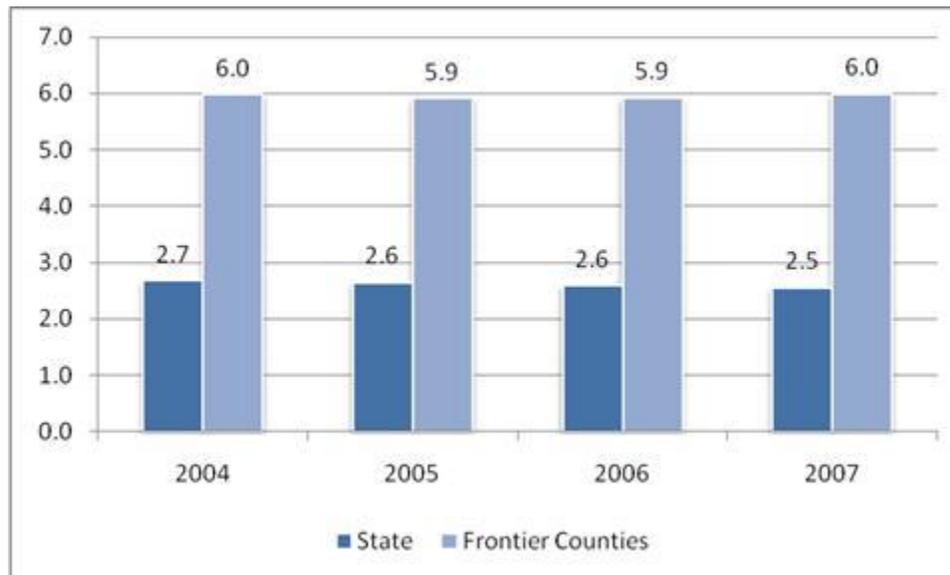
Source: Idaho State Department of Education Safe and Drug Free Schools

## Alcohol and Other Drug Use

### Alcohol Retail Sales Licenses

The number of retail alcohol licenses is a valuable measure of the availability of alcohol in a county. Various researchers have found an association between the density of alcohol licenses and alcohol related crime and injuries. However this is not a simple one to one relationship; multiple additional factors are involved such as social acceptance of drinking. This measure indicates the number of retail alcohol licenses held by retail outlets such as grocery stores, restaurants, and wine shops (*State liquor outlet stores are not included*).

Figure 13: Rate of Liquor Licenses per 1,000 Population, State Versus Frontier Counties



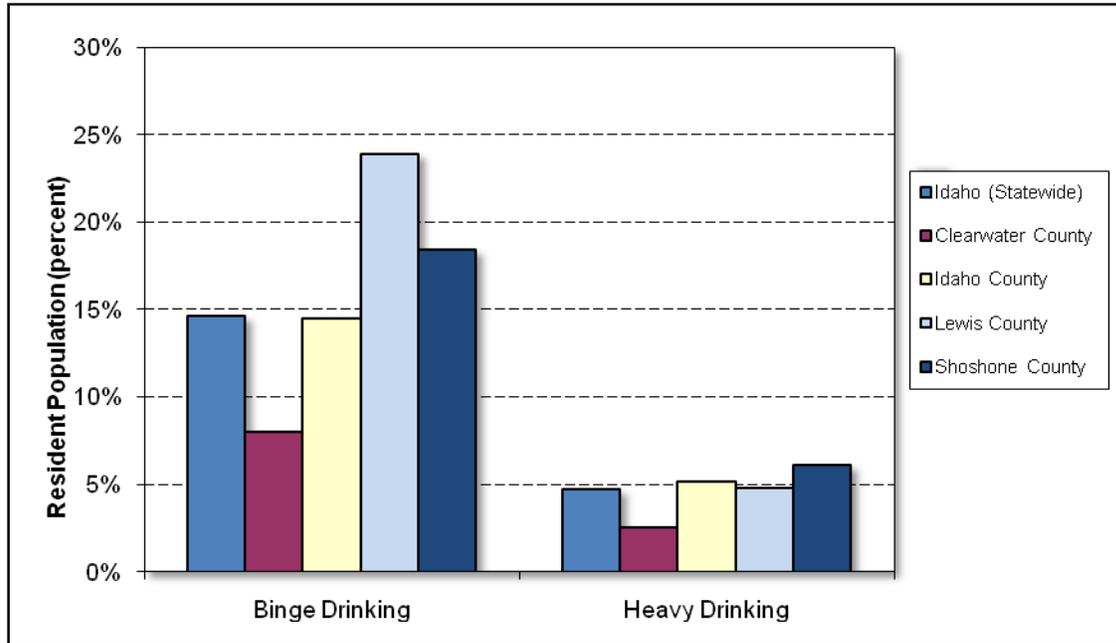
Rates based on data supplied by Idaho State Police Alcohol and Beverage Control Bureau (2005-2007)

Over the past four years, the per capita rate of alcohol licenses (per 1,000 population) in the frontier counties held steady at about 6 licenses per 1,000 population. In all years, the frontier counties showed more than twice the state average of active liquor licenses.

## Heavy Drinking and Binge Drinking

Binge drinking in Idaho has historically been equal to or slightly below the rest of the nation. Lewis and Shoshone counties have a higher reported percentage of binge drinking than the rest of the state.

Figure 14: Binge Drinking and Heavy Drinking (2005-2007), Aggregated



**Binge drinking** defined as: Females:  $\geq 4$  alcoholic beverages on one occasion in prior 30 days; Males:  $\geq 5$  alcoholic beverages on one occasion in prior 30 days.

**Heavy drinking** defined as: Females:  $>30$  alcoholic beverages in prior 30 days; Males:  $>60$  alcoholic beverages in prior 30 days.

Source: Idaho Behavioral Risk Factor Surveillance System, 2005-2007. Idaho Department of Health and Welfare, Bureau of Vital Records and Health Statistics, September 2008.

Heavy drinking is roughly the same for all the frontier counties except Clearwater County and it almost reflects the level of heavy drinking found in the state as a whole.

Table 13: Frontier County Liquor Dispensary Sales

	Fiscal Year	Fiscal Year	Fiscal Year	Fiscal Year
	Ending	Ending	Ending	Ending
	June 30, 2007	June 30, 2006	June 30, 2007	June 30, 2006
	Sales		Distributions	
<b>CLEARWATER COUNTY</b>			57,807.00	50,122.00
Elk River	46,638.32	36,303.19	3,995.00	2,327.00
Orofino	583,682.88	512,061.51	61,298.00	54,554.00
Pierce	56,422.73	49,004.84	8,208.00	8,208.00
Weippe	68,322.34	66,858.03	7,773.00	6,283.00
<b>Total</b>	<b>755,066.27</b>	<b>664,227.57</b>	<b>139,081.00</b>	<b>121,494.00</b>
<b>IDAHO COUNTY</b>			89,982.00	79,756.00
Cottonwood	141,499.88	131,408.53	15,710.00	14,177.00
Elk City	57,153.00	57,188.00	-	-
Ferdinand	-	-	3,812.00	3,331.00
Grangeville	413,475.84	394,453.77	46,967.00	39,923.00
Kooskia	159,779.30	134,318.54	16,239.00	15,465.00
Riggins	288,569.28	255,186.11	30,552.00	26,086.00
Stites	-	-	5,960.00	5,183.00
Whitebird	69,322.67	57,229.84	7,078.00	7,571.00
<b>Total</b>	<b>1,129,799.97</b>	<b>1,029,784.79</b>	<b>216,300.00</b>	<b>191,492.00</b>
<b>LEWIS COUNTY</b>			39,473.00	35,298.00
Craigmont	55,002.10	57,403.75	6,850.00	6,844.00
Kamiah	362,822.65	303,240.61	36,130.00	32,080.00
Nez Perce	74,171.12	62,732.70	7,353.00	5,524.00
Reubens	-	-	1,923.00	1,679.00
Winchester	36,835.24	30,743.88	3,791.00	3,956.00
<b>Total</b>	<b>528,831.11</b>	<b>454,120.94</b>	<b>95,520.00</b>	<b>85,381.00</b>
<b>SHOSHONE COUNTY</b>			110,548.00	95,330.00
Kellogg	623,006.26	578,926.08	68,929.00	58,488.00
Mullan	-	-	20,556.00	17,730.00
Osburn	-	-	38,047.00	32,741.00
Pinehurst	348,796.09	315,394.38	37,648.00	32,714.00
Smelterville	-	-	16,127.00	13,819.00
Wallace	407,339.35	375,063.61	44,961.00	39,422.00
Wardner	-	-	5,291.00	4,538.00
<b>Total</b>	<b>1,379,141.70</b>	<b>1,269,384.07</b>	<b>342,107.00</b>	<b>294,782.00</b>

Source: Idaho State Liquor Dispensary 2007 Annual Report

**Table 14: Idaho State Liquor Dispensary Sales and Distributions Totals**

	Fiscal Year	Fiscal Year	Fiscal Year	Fiscal Year
	Ending	Ending	Ending	Ending
	June 30, 2007	June 30, 2006	June 30, 2007	June 30, 2006
	Sales		Distributions	
<b>STATE FISCAL YEAR TOTALS</b>	<b>\$121,623,147.85</b>	<b>\$109,604,222.71</b>	<b>\$23,891,500.00</b>	<b>\$20,607,000.00</b>
<b>FRONTIER COUNTIES FISCAL YEAR TOTALS</b>	<b>3,792,839.05</b>	<b>3,417,517.37</b>	<b>793,008.00</b>	<b>693,149.00</b>
<b>FRONTIER COUNTIES % of STATE TOTALS</b>	<b>3.12%</b>	<b>3.12%</b>	<b>3.32%</b>	<b>3.36%</b>

Source: Idaho State Liquor Dispensary 2007 Annual Report

The above tables show the sales and distribution figures from the state liquor dispensary. By statute, the profits generated by the liquor dispensary are distributed based on the following formula.

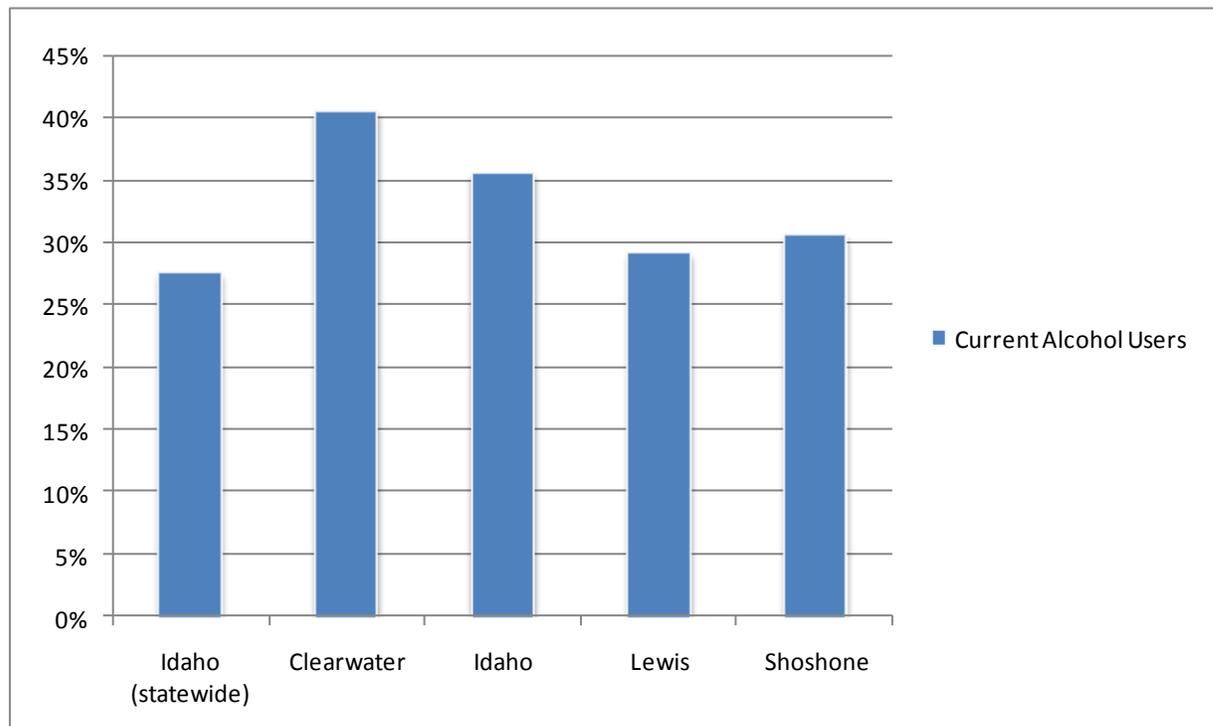
**Statutory Profit Distribution Formula:**

- Two percent surcharge on liquor sales to the Drug Court and Family Court Services Fund.
- Forty percent of profits (through FY 2009, increasing by 2% annually to 50% in FY 2014) are distributed as follows:
  - Repay \$1.8 million annually to the cities and counties during FY's 2006 through 2009.
  - Annual fixed distributions totaling \$3,350,000 to Public Schools, Alcohol Treatment Fund, Cooperative Welfare Fund and Community Colleges. *(Effective July 1, 2007, annual fixed distributions will increase to \$5,350,000 to Public Schools, Substance Abuse Treatment Fund, Cooperative Welfare Fund, Community Colleges, Drug Court and Family Court Services Fund, and Court Supervision Fund.)*
- Remaining balance to the General Fund.
- Sixty percent of profits (through FY 2009, decreasing by 2% annually to 50% in FY 2014) are distributed as follows:
  - 40% to counties in proportion to sales in each county.
  - 60% to cities as follows:
    - 90% to those incorporated cities with liquor stores in proportion to sales.
    - 10% to those incorporated cities without liquor stores in proportion to population.

## Idaho Substance Use, Safety, and School Climate Survey (SUSSCS) Current Alcohol Users

Responses to the SUSSCS regarding 30-day alcohol use were used to create a statewide metric of youth substance use (i.e., current alcohol users). A weighted 30-day alcohol use metric was calculated using SUSSCS data and school population data. The resulting variable combined data from all grades surveyed into one measure. It can best be interpreted as the percentage of current alcohol users in the 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades. As was the case with the Youth Risk Behavior Surveillance (YRBS), this weighted 30-day alcohol use variable will be referred to as “current alcohol users.” Not all county and grade combinations were surveyed by the SUSSCS. When missing grade data were encountered, the appropriate statewide average for that grade was used. The data were then summarized by county (see Table 5 and Figure 7). At best, these values should be viewed as approximations.

Figure 15: Current Alcohol Users Grades 6, 8, 10 and 12



Source: IDHW Statewide 2008 Needs Assessment Benchmark Research & Safety, Inc.

## Other Drug Use

The stigmatized nature of illicit drug use makes data on drug users difficult to obtain. Because of this it is recommended that multiple sources of data be used to determine the extent and nature of drug-using behaviors in an area. The most widely used approach is to combine both existing data (often administrative data) with surveys. Surveillance of existing data reflect consequences of use (e.g., substance abuse treatment, arrest reports, mortality and infectious disease information) and can provide information on general drug-use patterns within a population. Since this datum is not population based it is difficult to accurately develop prevalence rates from it. However, looking at this datum over time can highlight where drug abuse patterns exist and how they spread within, and across, geographic areas. Survey data is usually population based and can provide information on the prevalence of drug use in the population.

## Behavioral Risk Factor Surveillance System (BRFSS) Survey Data

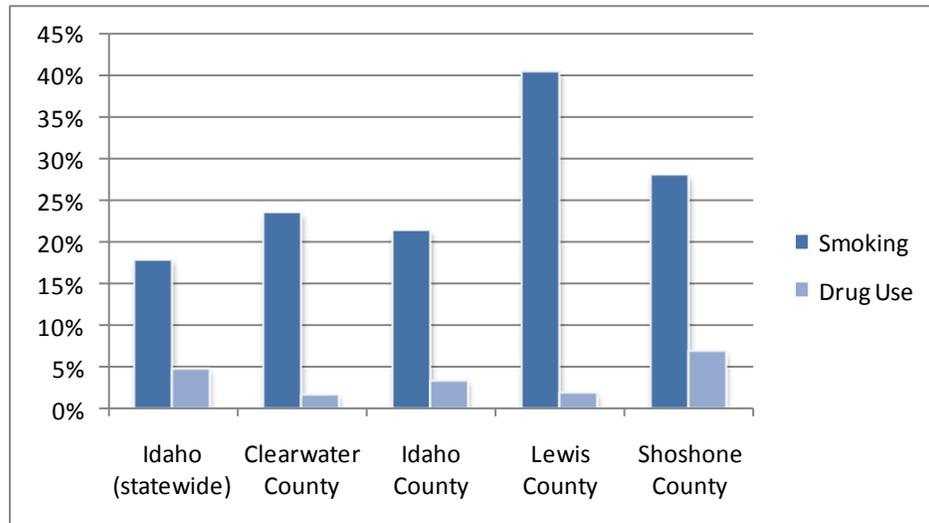
Estimates of substance use prevalence in the frontier counties come from the statewide BRFSS survey. This telephone-based survey contains several substance use related questions that can be analyzed at the county level. It should be noted there are several known limitations having to do with the BRFSS telephone survey: 1) persons who are institutionalized are excluded from the survey; 2) BRFSS is a self-reported survey and is consequently subject to recall bias; and 3) persons who do not have a residential telephone are excluded which eliminates those having no telephone service or cell-phone only service.

Source: Centers for Disease Control and Prevention. *Public Health Surveillance for Behavioral Risk Factors in a Changing Environment: Recommendations from the Behavioral Risk Factor Surveillance Team*. MMWR 2003:52 (No. RR-9).

## Smoking and Other Drug Use

Idaho has historically been significantly lower than the U.S. with respect to the percent of current smokers. All of the frontier counties report a higher level of smoking than the statewide average. Lewis County (40.7%) reports a level of smoking more than twice the statewide average (18%).

**Figure 16: Smoking and Illicit Drug Use Prevalence for Idaho and for Clearwater, Idaho, Lewis, and Shoshone Counties, 2005-2007, Aggregated**



Source: Idaho Behavioral Risk Factor Surveillance System, 2005-2007. Idaho Department of Health and Welfare, Bureau of Vital Records and Health Statistics, October 2008.

**Smoking** is defined as: individuals who self-reported as being current smokers.

**Drug use** is defined as: non-medical use of a prescription drug or use of an illicit drug in the last 12 months.

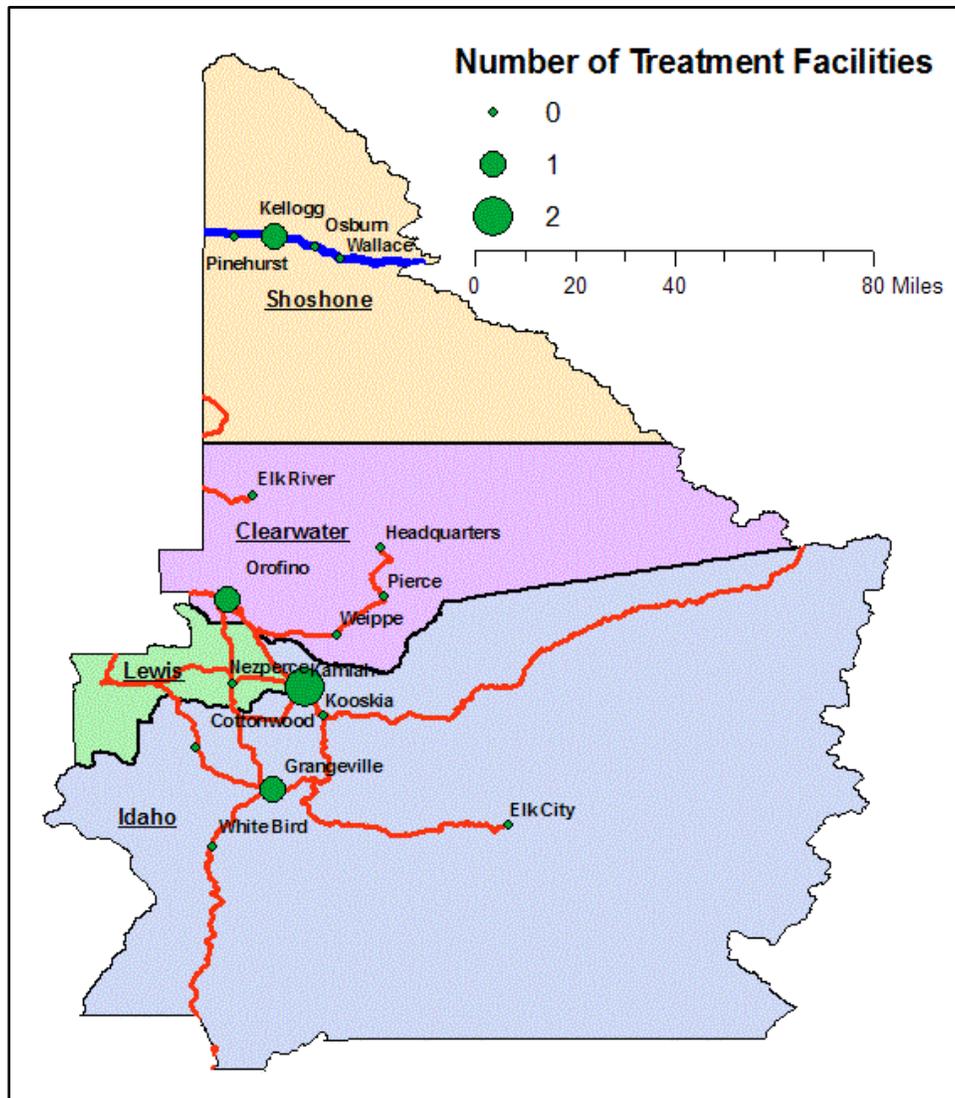
By contrast, only Shoshone County (6.9%) shows a higher rate of illicit drug use than the state average (4.8%), not a statistically significant difference. The other frontier counties (Clearwater, Idaho, and Lewis) show a somewhat lower level of illicit drug use than the state as a whole.

## Alcohol and Drug Treatment Services

### Treatment Services

As can be seen in Figure 17, there are 5 treatment providers located in the frontier counties. The providers are in the cities of Grangeville (Idaho County), Orofino (Clearwater County), Kellogg (Shoshone County), Lapwai (Nez Perce County), and Kamiah (Lewis County). The types of services available include outpatient treatment for youth and adults. There is currently no residential program for heroin dependent individuals available in the area. The closest program is in Spokane, Washington.

Figure 17: Location of Treatment Facilities in Frontier Counties



Source: Idaho Department of Health and Welfare, Bureau of Substance Use Disorders, November 2008.

## Treatment Admissions

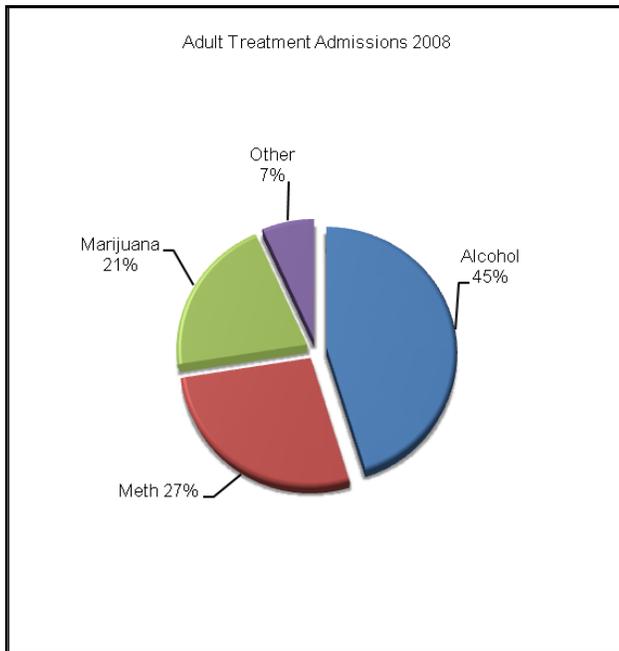
Treatment admission data is available at the county level and can be useful in understanding patterns of substance use. It is important to note that admission data can be influenced by many factors including treatment availability; priority populations; income; treatment demand (self-referral and court referrals) changes in administrative policies (locally and statewide); funding; and availability of outreach or intervention programs. Since only publically available data can be examined and there may be others accessing treatment through private providers who are not reflected here.

Although the above factors limit its use, an advantage of treatment data is that it is a generally good indicator of the types of drugs being used in an area, particularly among the poor and those within the criminal justice system, and can show changes in patterns over time. One disadvantage is that treatment data cannot readily be used to make prevalence estimates for a geographic area because most users do not seek or are unable to obtain treatment.

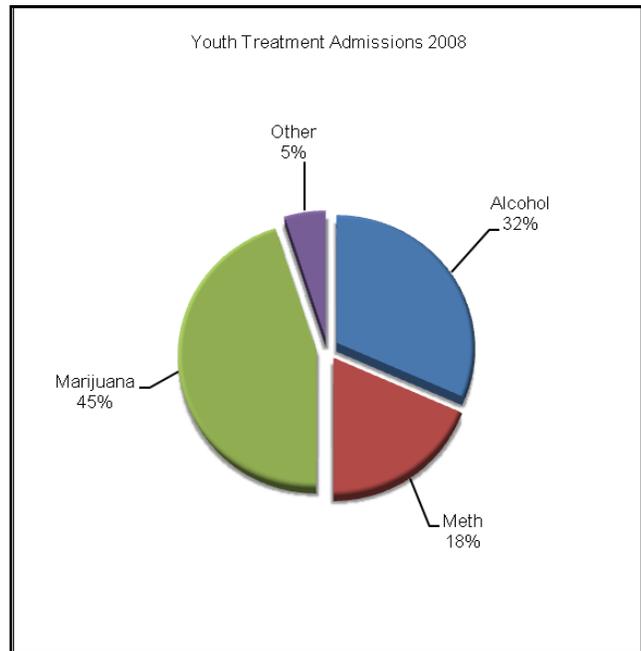
Treatment data can be compared with data from other areas. However, one cannot assume from treatment data that County A has a larger methamphetamine problem than County B because of its higher treatment admission rate. County A may simply have outreach programs targeted specifically to bring methamphetamine users into treatment. Important programmatic differences stand to go unnoticed if comparisons of treatment data are never made.

Alcohol is the most common drug treated in the frontier counties for adults, followed by methamphetamine and marijuana (based on primary drug of choice). Marijuana is the most commonly treated drug for youth, followed by alcohol and methamphetamine. Admission rates for youth alcohol treatment are above the state average while all other drugs are at or lower than the state average. Heroin, 'Other Opiates', and cocaine treatment admissions were infrequent for both groups in 2008.

**Figure 18: 2007 Adult Treatment Admissions for the Frontier Counties (primary drug of choice)**



**Figure 19: 2007 Youth Treatment Admissions for the Frontier Counties (primary drug of choice)**

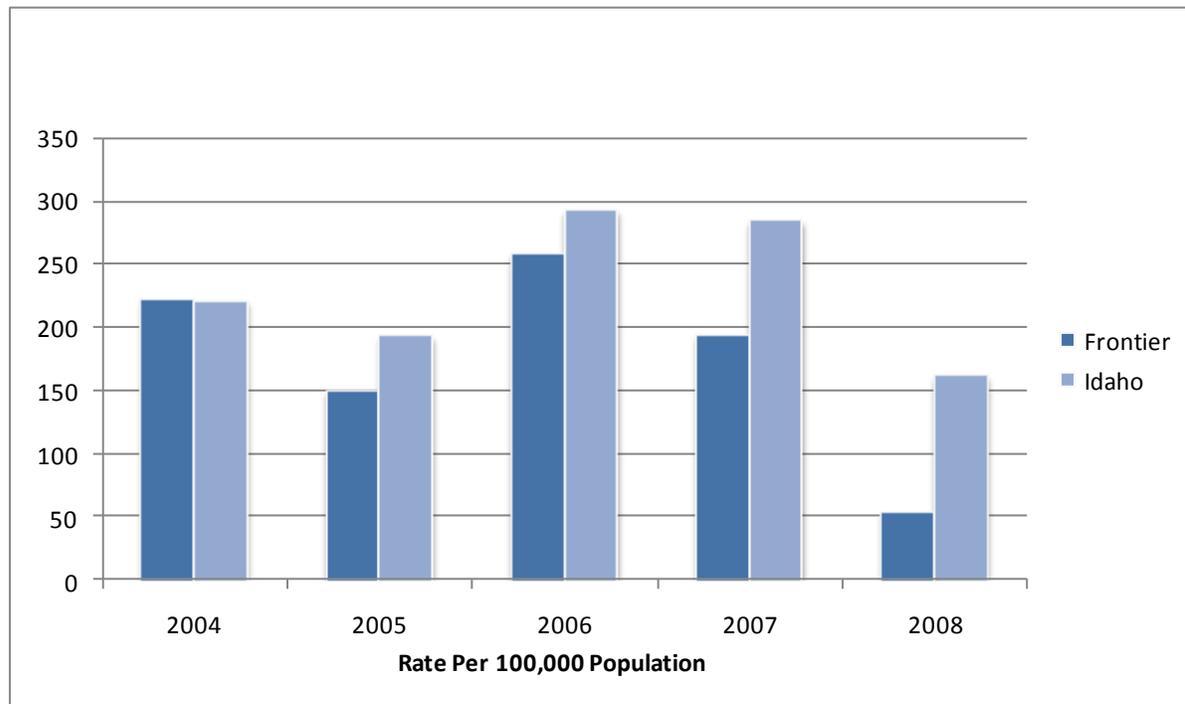


Source: rates based on data from IDHW substance abuse data warehouse.

## Alcohol

The rate of adult alcohol treatment admissions in the frontier counties held fairly steady through 2007 but we have seen a marked decrease in 2008 for both the state and frontier counties. The reason for this decrease is the loss of the Access to Recovery Funds. The decrease is not an indication of need, but simply an indication of capacity.

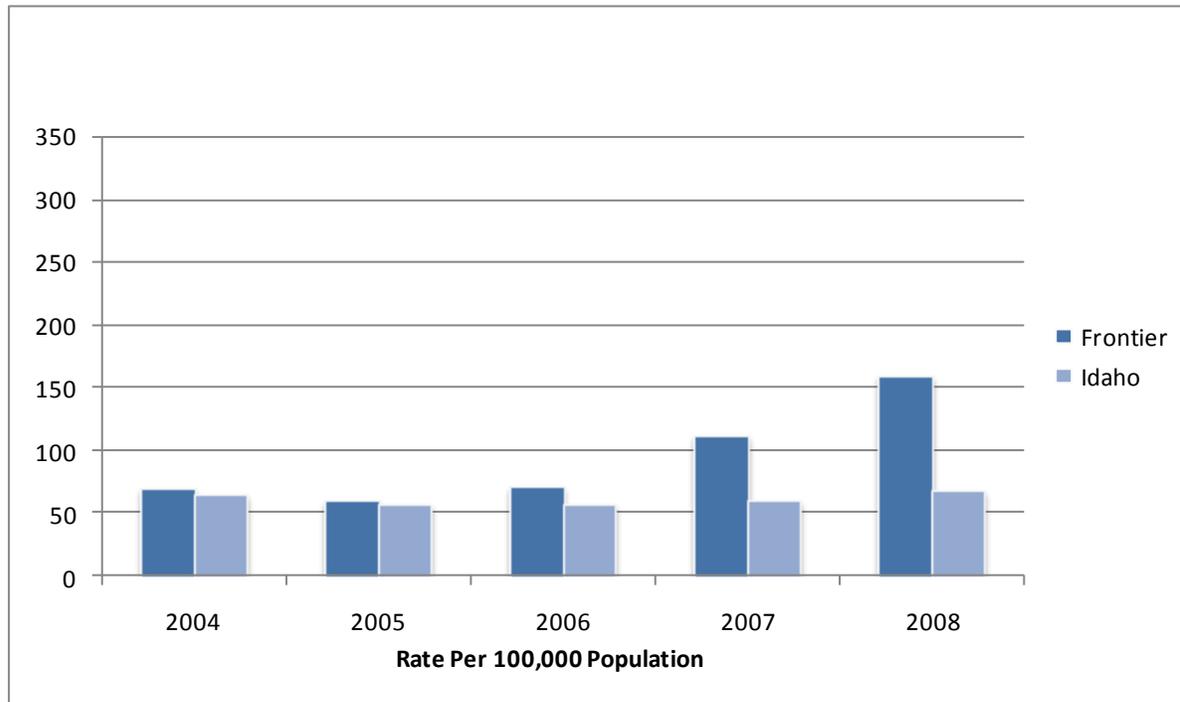
**Figure 20: Adult Alcohol Treatment Admissions**



Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

Youth alcohol treatment admissions are increasing in number, and in the frontier counties youth admissions have grown to numbers well above the state rate since 2007.

**Figure 21: Youth Alcohol Treatment Admissions**

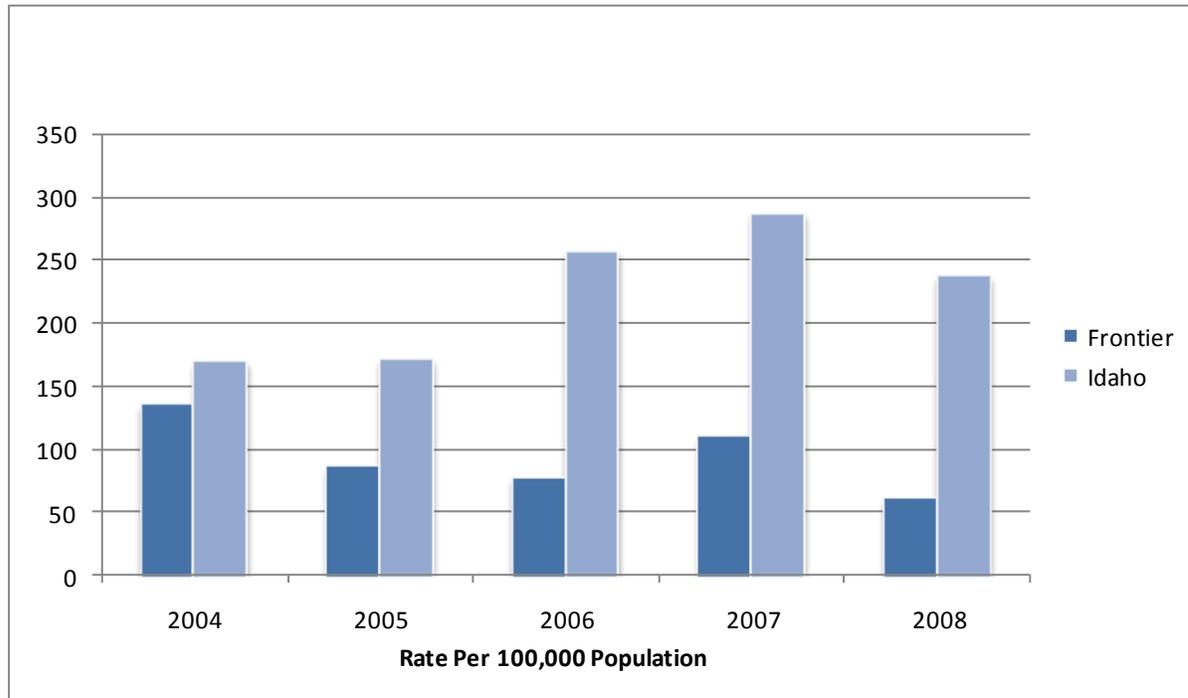


Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

## Methamphetamine

Adult methamphetamine admissions in the frontier counties are much the same as alcohol admissions. Methamphetamine admissions for adults have stabilized in the frontier counties while rising dramatically statewide since 2005. State Fiscal Year 2005 was a year which preceded an expansion of services and was a year in which substance abuse programs experienced a budget shortfall.

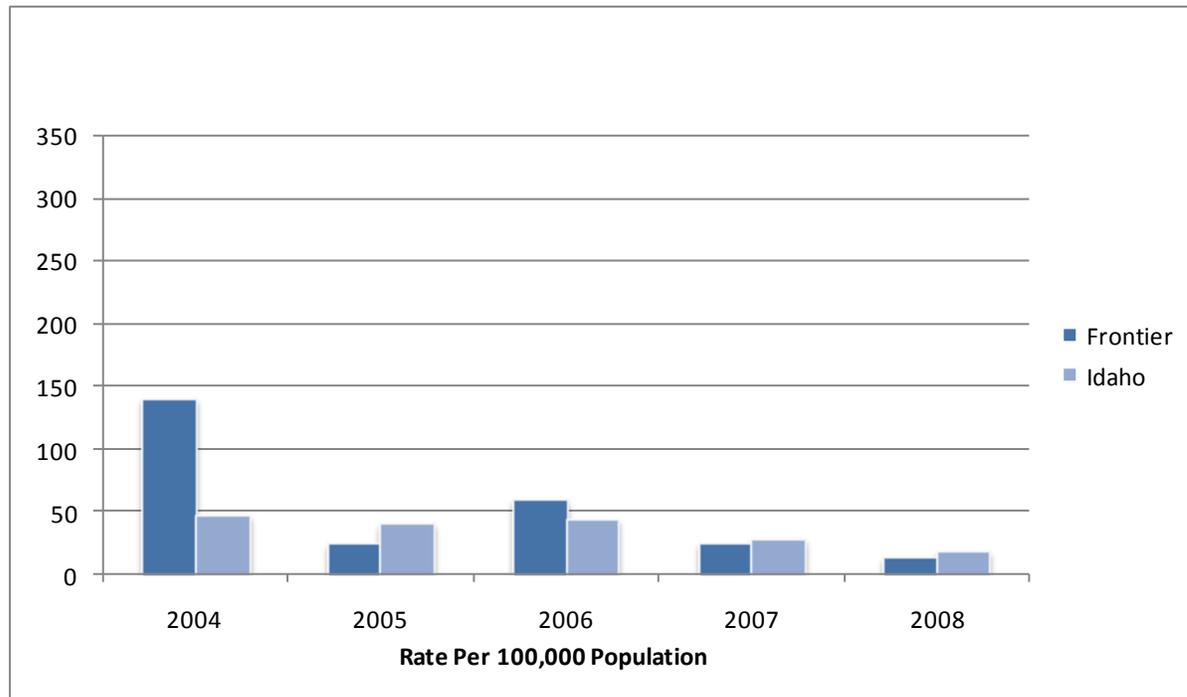
Figure 22: Adult Methamphetamine Treatment Admissions



Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

Youth methamphetamine admissions in the frontier counties have been low since 2007 and somewhat below the state average since that time. The trend over the past three years has shown a decreasing occurrence of methamphetamine treatment admissions both in the state and in the frontier counties.

**Figure 23: Youth Methamphetamine Treatment Admissions**

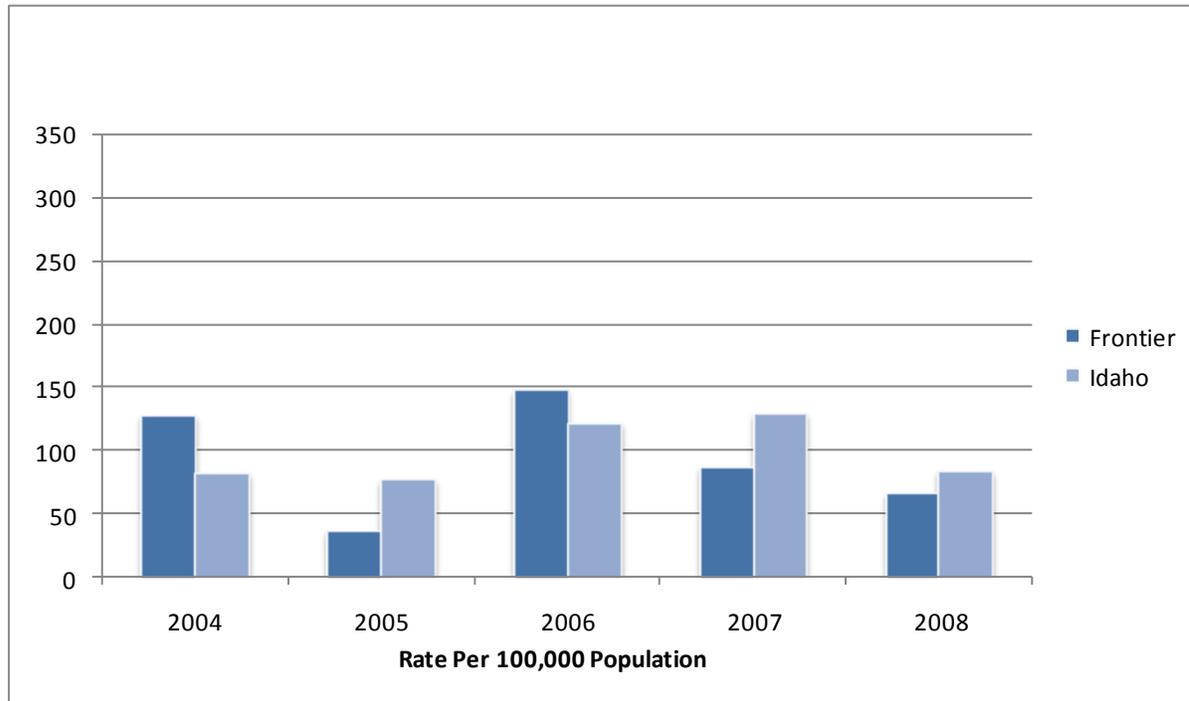


Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

## Marijuana

Following a pattern opposite to the adult alcohol admissions, frontier marijuana admissions have greatly decreased in the last two years. The frontier rate has been lower than the state for the past two years.

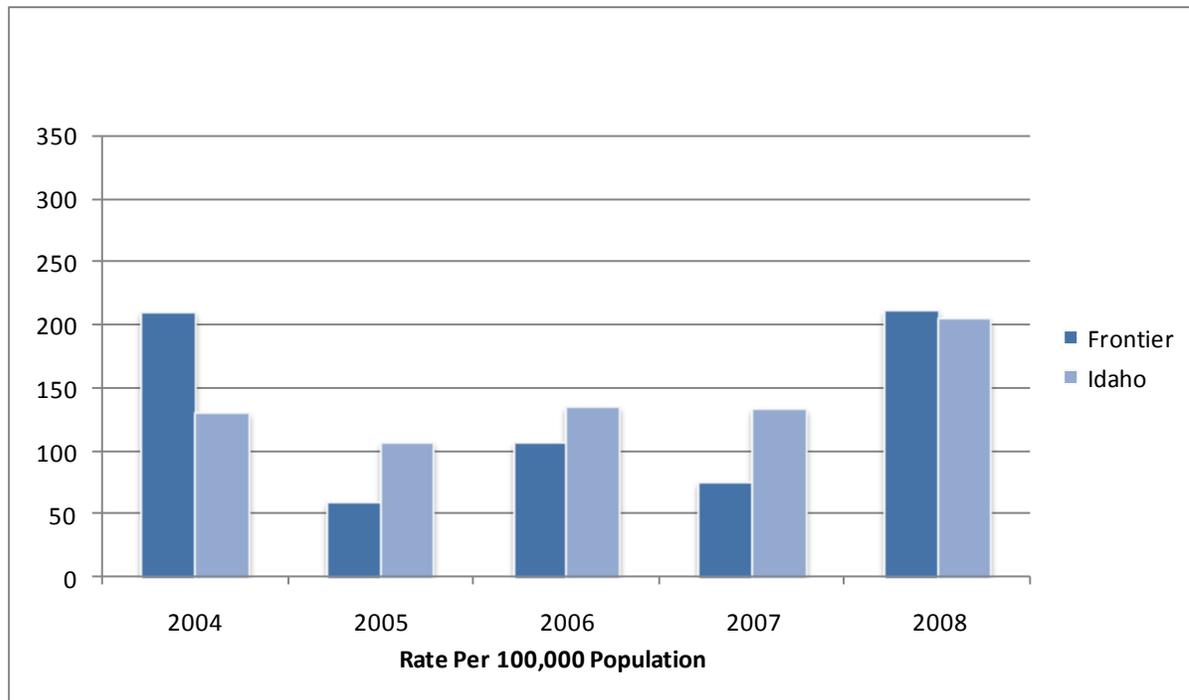
**Figure 24: Adult Marijuana Treatment Admissions**



Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

In 2008 frontier youth admission rates for marijuana are nearly identical to those in the rest of the state. This is a change to the proportions observed in the three prior years where the frontier counties showed rates slightly lower than the state as a whole. Rates for marijuana treatment admissions are much higher than youth admission rates for any other substance.

**Figure 25: Youth Marijuana Treatment Admissions**



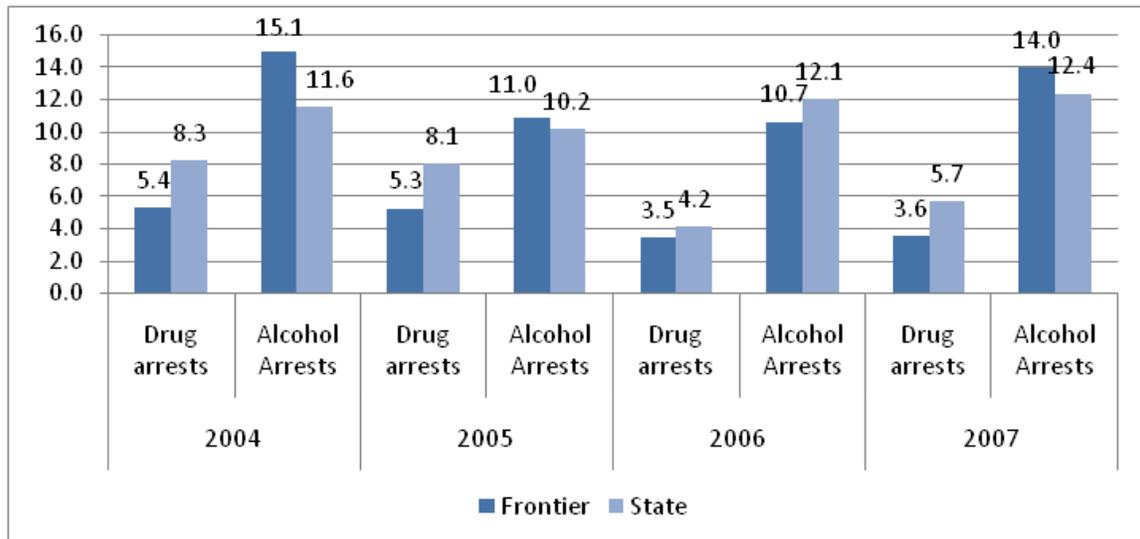
Source: rates based on data from IDHW substance abuse data warehouse. \*- 2008 census estimates are not yet available. To create one, population growth estimates between 2006 and 2007 were held constant.

## Criminal Justice

### Substance Use Related Arrests

As with the sources of data discussed previously, there are several limitations to be aware of when examining crime data. Among those limitations are targeted enforcement, officer alertness, willingness to record drug-related data and other factors. Crime datum, even drug related data, is not an accurate measure of a geographic area’s drug prevalence. This is because many people arrested for other types of crimes, or those not arrested at all, use drugs. This data represents a measure of drug related criminal activity. Substance use related arrests are dependent on the actual magnitude of crime as well as law enforcement concentration (e.g., number of officers, changes in policy).

Figure 26: Drug and Alcohol Related Arrests per 10,000



Source: Idaho State Police, Idaho Statistical Analysis Center (September, 2008)

Table 15: Proportion of each County’s Arrests Related to Marijuana, Meth, or other Drugs (2007)

	% Marijuana Arrests	% Meth Arrests	% Other Drugs
Clearwater	77.5	2.5	20.0
Idaho	75.0	0.0	25.0
Lewis	84.6	15.4	0.0
Shoshone	77.8	11.1	11.1
<b>State Total</b>	<b>69.6</b>	<b>20.5</b>	<b>9.9</b>

The ‘Other’ category includes cocaine, hallucinogens, depressants, heroin, and unknown drugs. Drug Related Arrests are arrests in which a drug or drug equipment was seized. Note, there are multiple arrest counts per incident. Thus, there may be 5 arrests but only one seizure. However, the seizure is counted 5 times (once for each arrest).

Source: Idaho State Police, Idaho Statistical Analysis Center (September, 2008)

Over the past four years, the rate of other drug-related arrests were lower in the frontier counties than in the rest of the state while alcohol-related arrests have generally been higher in the frontier counties (with the exception of 2006).

The proportion of drug-related arrests that involved methamphetamine were lower in the frontier counties than in the state overall. However, when the component counties of the frontier (Clearwater, Idaho, Lewis, and Shoshone Counties) were analyzed striking differences were identified.

At the county level, all of the frontier counties show a proportion of marijuana arrests (between 75 and 84.6%) that are higher than the state (69.6%). Lewis County has the highest proportion of marijuana arrests (84.6%) and methamphetamine arrests (15.4%). Clearwater and Idaho counties show other drug arrests at or above 20% which is higher than the other frontier counties and above the state rate of 9.9%.

**Table 16: Total Value of Drug Equipment Seized 2002 through 2007**

County	2002	2003	2004	2005	2006	2007
Clearwater	\$ 38	\$ 81	\$ 271	\$ 267	\$ 831	\$ 443
Idaho	\$ 1	\$ 5	\$ 3	\$ 244	\$ 15	\$ 40
Lewis	\$ 117	\$ 5	\$ 5	\$ 40	\$ 19	\$ 13
Shoshone	\$ 3,344	\$ 295	\$ 658	\$ 3,788	\$ 1,364	\$ 866
Total						
Idaho	\$ 56,694	\$ 43,428	\$ 64,739	\$ 66,693	\$ 67,287	\$ 74,283
% of total	6.17%	0.89%	1.45%	6.51%	3.31%	1.83%

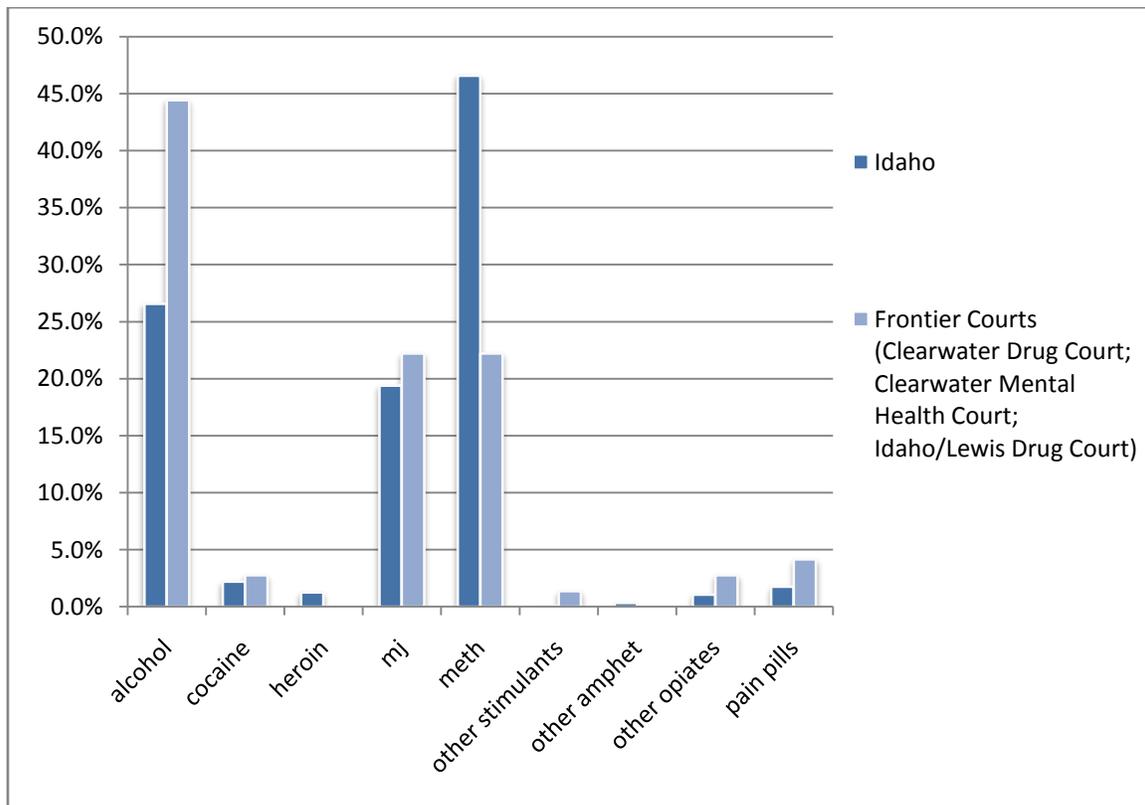
Source: Idaho State Police, Idaho Statistical Analysis Center (September, 2008)

On average, the amount of drug equipment seized in the frontier counties is approximately what would be expected based on the population living in these counties. Approximately 3% of the state's population resides in the frontier counties and the amount of drug equipment seized is near 3% of the total seized in the state of Idaho.

### Drug and Mental Health Courts

There are two drug courts available in the frontier counties, one in Clearwater County, one in Idaho/Lewis Counties, and one mental health court in Clearwater County.

**Figure 27: Drug Court Participants by Primary Drug of Choice, FY2008**



Source: Idaho Statewide Trial Court Automated Record System (ISTARS), Idaho Supreme Court (November, 2008)

## Frontier County Felony Convictions and Commitments

This section shows felony convictions and commitments to the Idaho Department of Correction (IDOC) for the frontier counties. These counties represent such a small portion of commitments to IDOC that we have aggregated their data and refer to the aggregated data as Frontier. Table 17 below shows a recent history of felony court commitments to IDOC by fiscal year with status for these counties and statewide data for comparison. Frontier county courts contribute less than 4% of the commitments to any status.

**Table 17: Felony Court Commitments by Fiscal Year and Status for Frontier Counties with Idaho Totals for Comparison**

Year	Probation	Rider	Term	Total
2003	47	16	15	78
2004	74	29	15	118
2005	48	32	10	90
2006	55	24	10	89
2007	41	17	11	69
2008	33	17	9	59

Year	Probation	Rider	Term	Total
2003	1.9%	2.0%	2.3%	2.0%
2004	2.9%	3.1%	2.4%	2.9%
2005	1.7%	3.5%	1.6%	2.1%
2006	2.0%	2.3%	1.4%	2.0%
2007	1.5%	1.7%	1.7%	1.6%
2008	1.2%	2.0%	1.6%	1.4%

Year	Probation	Rider	Term	Total
2003	2,509	802	644	3,955
2004	2,516	931	632	4,079
2005	2,780	916	622	4,318
2006	2,810	1,027	717	4,554
2007	2,788	977	641	4,406
2008	2,652	865	571	4,088

Source: Idaho Department of Corrections (October, 2008)

**Table 18: Frontier County Offender Populations by Status and Gender**

	Female	Male	Total
Probation	43	109	152
Parole	4	42	46
Rider	3	9	12
Term	8	100	108
Parole Violator	1	5	6
Data current 10/01/2008			

Source: Idaho Department of Corrections (October, 2008)

Table 19 shows Frontier county offender populations by status and gender who have a substance abuse issue as indicated by the LSI- R.

**Table 19: Frontier Offenders with Substance Abuse Issues by Gender and Status**

	Female	Male	Total
Probation	28	59	87
Parole	2	23	25
Rider	3	9	12
Term	7	70	77
Parole Violator	1	3	4
Substance abuse issues as indicated by LSI-R			

Source: Idaho Department of Corrections (October, 2008)

Table 20 shows (the portion of) Frontier county offender populations by status and gender who have a substance abuse issue as indicated by the LSI- R.

**Table 20: Portion with Substance Abuse Issues by Gender and Status in Frontier Counties**

	Female	Male	Total
Probation	65.1%	54.1%	57.2%
Parole	50.0%	54.8%	54.3%
Rider	100.0%	100.0%	100.0%
Term	87.5%	70.0%	71.3%
Parole Violator	100.0%	60.0%	66.7%

Source: Idaho Department of Corrections (October, 2008)

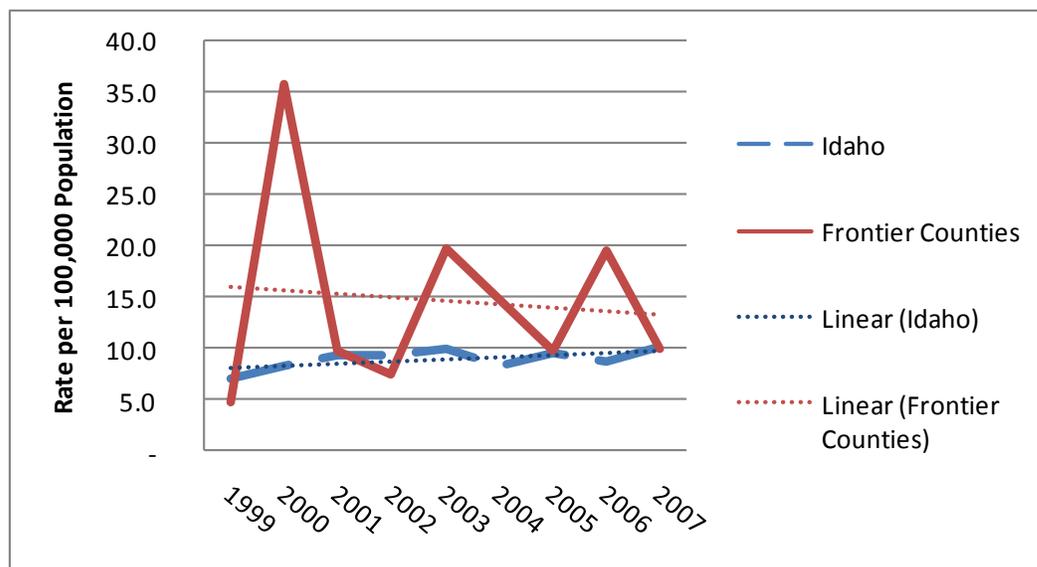
## Health Impact of Substance Use

### Mortality

Mortality data provides information about drug-related mortality trends. Limitations on substance abuse mortality include variability in the completion of the death certificate. Guidelines dictate that deaths without medical attendance or deaths due to external causes (homicides, suicides, and accidents) are investigated by medical examiners/coroners. Only about 20% of all U.S. deaths are investigated. Instruction manuals are provided to certifiers to ensure the proper completion of death certificates. However, ultimately the cause of death and contributing conditions reported are at the discretion and expertise of the certifier. As a result, drug induced or alcohol induced deaths may be under reported because of social or economic pressures surrounding a given death. The process of the classification of the underlying cause of death by the state is a highly standardized process that occurs under the guidelines of the National Center for Health Statistics.

From 1999 to 2007, the average rate of alcohol induced deaths in the state was 9 per 100,000 while in the frontier counties it was 14.6 per 100,000. The trend is declining slightly in the frontier counties while it is increasing slightly in the state as a whole.

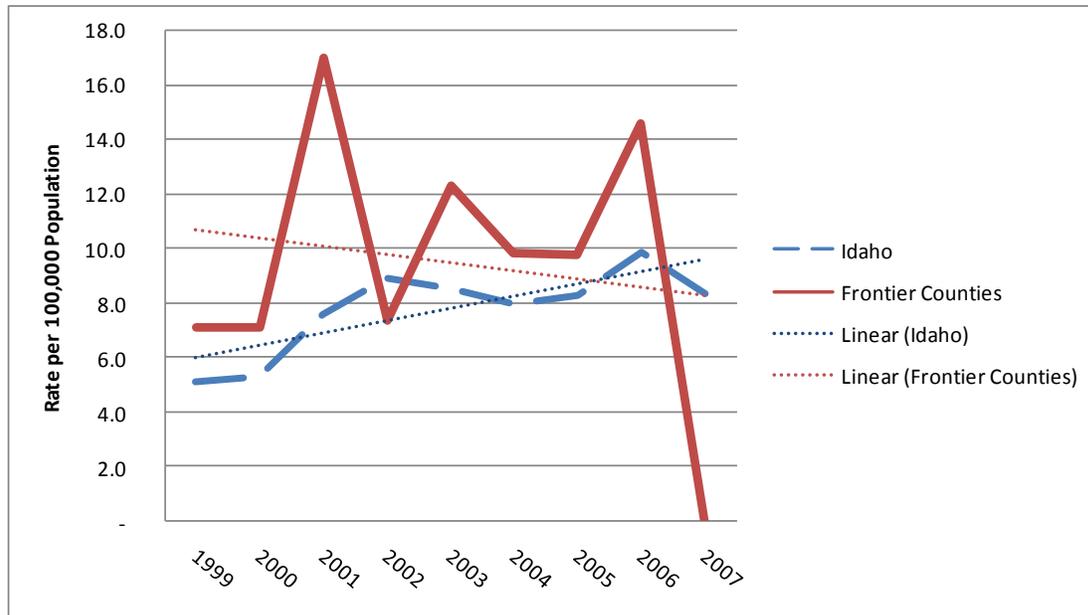
Figure 28: Alcohol Induced Death Rate in Frontier Counties and Idaho (1999-2007)



Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (November 2007).

The rate of drug induced deaths in the frontier counties and those in Idaho are much different. From 1999 to 2007, the average rate of drug induced deaths in the state has been 7.9 per 100,000. During that same period, the average rate of drug induced deaths in frontier counties has been 9.5 per 100,000.

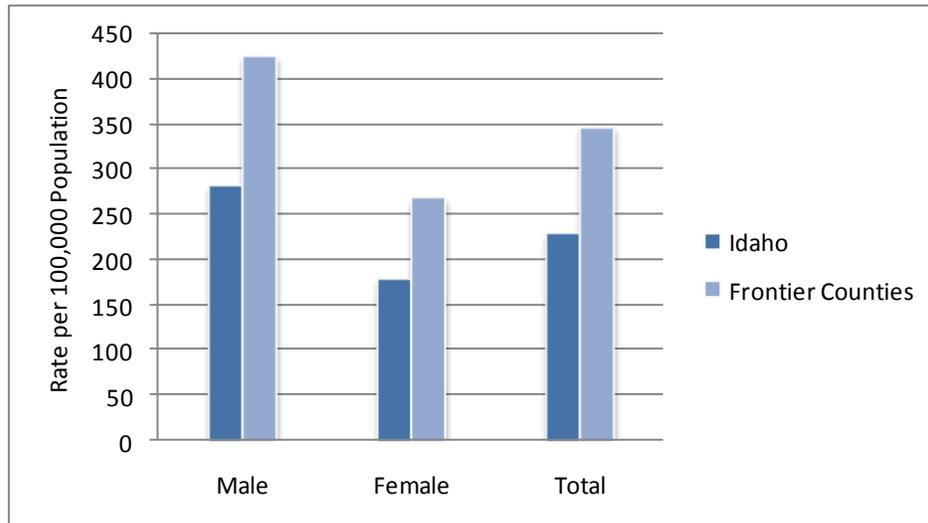
**Figure 29: Drug Induced Death Rate in Frontier Counties and Idaho (1999-2007)**



Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (November 2007)

Smoking has been attributed as a catalyst for a wide range of causes of death, including selected cancers, circulatory system diseases, and respiratory system diseases. The rate of smoking attributable deaths in the Frontier Counties is 34% higher than the state overall.

**Figure 30: Idaho and Frontier County Smoking Attributable Mortality (SAM)**



Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (November 2007)

## Notes

<sup>1</sup> *Alcohol induced deaths*- The list of codes included in alcohol-induced causes was expanded in 2003 to be more comprehensive. ICD-10 codes: E24.4, F10, G31.2, G62.1, G72.1, I42.6, K29.2, K70, K86.0, R78.0, X45, X65, and Y15. Alcohol-induced deaths include mental and behavioral disorders due to alcohol use, degeneration of nervous system due to alcohol, alcohol polyneuropathy, alcoholic cardiomyopathy, alcoholic gastritis, alcoholic liver disease, findings of alcohol in blood, accidental poisoning by and exposure to alcohol, intentional self-poisoning (suicide) by and exposure to alcohol, and poisoning by and exposure to alcohol, undetermined intent. Alcohol-induced deaths do not include accidents such as falls and motor vehicle crashes, homicides, and other causes indirectly related to alcohol use. This category also excludes newborn deaths associated with maternal alcohol use.

Source: Estimates for 1999 are based on the 1990 Census, Internet release date August 30, 2000. 2000 Census: U.S. Bureau of the Census, Internet release date August 1, 2001. Estimates for 2001-2006 are based on the 2000 Census, U.S. Census in collaboration with the National Center for Health Statistics, Internet release dates August 8, 2003, August 18, 2004, September 9, 2005, August, 2006 and August 16, 2007.

<sup>2</sup> *Smoking attributable mortality*- The absence of death certifications of complete and reliable data on smoking requires the use of estimation techniques to approximate the extent of smoking-attributable deaths. Estimation methods based on the concept of attributable risk, while not precise, may at least provide a general indication of the extent of such deaths. Smoking-attributable deaths are derived by multiplying a smoking-attributable fraction by the number of deaths aged 35+ in specified cause of death categories. These categories are comprised of selected malignant neoplasms (cancer), circulatory system diseases, and respiratory system diseases. It does not include burn or second-hand smoke deaths.

Source: Smoking attributable mortality calculations are based on a smoking-attributable fraction (SAF). Relative-risk data from the American Cancer Society's Cancer Prevention Study (CPS-II) 1982-1988 were selected for use, as they have been widely used for similar analysis. The data from CPS-II established the age groups (35+, or 35-64 and 65+) and the classification of smokers (current, former, and never) for which smoking prevalence data were required. Idaho's average-annual prevalence rates for smoking for 2002-2006 were provided by the Behavioral Risk Factor Surveillance System (BRFSS). Interpretation: Of the 2,975 select malignant neoplasm deaths to males 35+ in Idaho from 2002-2006, 1,974 (66.4 percent) were attributed to smoking. This accounted for 40.8 percent of all of the smoking-attributed deaths to males 35+.

<sup>3</sup> *Drug induced deaths*- The list of codes included in drug-induced causes was expanded in 2003 to be more comprehensive. ICD-10 codes: D52.1, D59.0, D59.2, D61.1, D64.2, E06.4, E16.0, E23.1, E27.3, E66.1, F11.0-F11.5, F11.7-F11.9, F12.0-F12.5, F12.7-F12.9, F13.0-F13.5, F13.7-F13.9, F14.0-F14.5, F14.7-F14.9, F15.0-F15.5, F15.7-F15.9, F16.0-F16.5, F16.7-F16.9, F17.0, F17.3-F17.3-F17.5, F17.7-F17.9, F18.0-F18.5, F18.7-F18.9, F19.0-F19.5, F19.7-F19.9, G21.1, G24.0, G25.1, G25.4, G25.6, G44.4, G62.0, G72.0, I95.2, J70.2-J70.4, L10.5, L27.0, L27.1, M10.2, M32.0, M80.4, M81.4, M80.4, M81.4, M83.5, M87.1, R78.1-R78.5, X40-X44, X60-X64, X85, and Y10-Y14. Drug-Induced deaths include deaths due to drug psychosis; drug dependence; nondependent use of drugs not including alcohol and tobacco; accidental poisonings by drugs, medicaments, and biologicals; intentional self-poisoning (suicide) by drugs, medicaments, and biologicals; assault (homicide) by poisoning by drugs and medicaments; and poisoning by drugs, medicaments, and biologicals, undetermined whether accidental or purposely inflicted. Drug-induced deaths do not include accidents such as falls and motor vehicle crashes, homicides, and other causes indirectly related to drug use. Also excluded are newborn deaths associated with mother's drug use.

Source: Estimates for 1999 are based on the 1990 Census, Internet release date August 30, 2000. 2000 Census: U.S. Bureau of the Census, Internet release date August 1, 2001. Estimates for 2001-2006 are based on the 2000 Census, U.S. Census in collaboration with the National Center for Health Statistics, Internet release dates August 8, 2003, August 18, 2004, September 9, 2005, August, 2006 and August 16, 2007.

## **Appendices**

**Appendix 1****Drug and Alcohol Arrest Rates Frontier Counties versus State**

County	2004				2005				2006				2007			
	Drugs		Alcohol		Drugs		Alcohol		Drugs		Alcohol		Drugs		Alcohol	
	Arrests	Rate														
Clearwater	58	6.8	143	17	38	4.4	101	12	40	4.7	140	16	40	4.8	137	16.5
Idaho	46	2.9	226	14	76	4.7	193	12	41	2.5	123	7.6	43	2.7	138	8.7
Lewis	14	3.7	46	12	43	11	30	7.8	10	2.6	36	9.4	14	3.7	54	14.3
Shoshone	104	7.8	208	16	64	4.9	132	10	55	4.1	150	11	50	3.8	248	18.8
State Total	11541	8.3	16109	12	11494	8.1	14578	10	6156	4.2	17702	12	8575	5.7	18608	12.4

Source: Idaho State Police, Idaho Statistical Analysis Center

**Appendix 2**

**Idaho Resident Drug-Induced Deaths Occurring in Idaho  
Substances Mentioned on Death Certificate**

Idaho, Clearwater County, Idaho County, Lewis County, and Shoshone County Deaths  
Alcohol-Induced<sup>1</sup>  
1999-2007

Year	Idaho, All Counties		Frontier Counties <sup>2</sup>		Clearwater County		Idaho County		Lewis County		Shoshone County	
	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>
Total	1,107	9.0	54	14.6	19	24.7	15	10.8	5	14.9	15	12.6
1999	89	7.1	2	4.8	-	-	1	6.7	-	-	1	7.3
2000	107	8.3	15	35.7	3	33.6	5	32.2	2	53.4	5	36.3
2001	122	9.2	4	9.7	2	23.2	1	6.5	-	-	1	7.4
2002	125	9.3	3	7.4	1	11.8	1	6.5	-	-	1	7.6
2003	134	9.8	8	19.7	6	71.4	1	6.5	-	-	1	7.7
2004	116	8.3	6	14.8	1	11.9	2	12.8	1	26.6	2	15.6
2005	135	9.4	4	9.8	2	23.9	1	6.4	-	-	1	7.6
2006	128	8.7	8	19.5	1	12.0	3	19.0	1	26.6	3	22.8
2007	151	10.1	4	10.0	3	36.4	-	-	1	27.9	-	-

1. The list of codes included in alcohol-induced causes was expanded in 2003 and again in 2006 to be more comprehensive. Data for all years have been updated to include these codes; therefore, data may differ slightly from previous publications.

ICD-10 codes: E24.4, F10, G31.2, G62.1, G72.1, I42.6, K29.2, K70, K85.2, K86.0, R78.0, X45, X65, and Y15. Alcohol-induced deaths include mental and behavioral disorders due to alcohol use, degeneration of nervous system due to alcohol, alcoholic polyneuropathy, alcoholic cardiomyopathy, alcoholic gastritis, alcoholic liver disease, findings of alcohol in blood, accidental poisoning by and exposure to alcohol, intentional self-poisoning (suicide) by and exposure to alcohol, and poisoning by and exposure to alcohol, undetermined intent. Alcohol-induced deaths do not include accidents such as falls and motor vehicle crashes, homicides, and other causes indirectly related to alcohol use. This category also excludes newborn deaths associated with maternal alcohol use.

2. Frontier Counties include: Clearwater County, Idaho County, Lewis County, and Shoshone County.

3. Rates are per 100,000 population. Cause-specific death rates are based on small data bases; caution must be exercised when attempting to draw conclusions. It is recommended to show the number of deaths with the rate.

Population Source: Estimates for 1999 are based on the 1990 Census, Internet release date August 30, 2000. 2000 Census: U.S. Bureau of the Census, Internet release date August 1, 2001. Estimates for 2001-2007 are based on the 2000 Census, U.S. Census in collaboration with the National Center for Health Statistics, Internet release dates August 8, 2003, August 18, 2004, September 9, 2005, August 16, 2006, August 16, 2007, and September 5, 2008.

Data Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (September 2008).

Idaho Resident Aged 35+ Smoking-Attributable Mortality (SAM)<sup>1</sup>  
2003-2007

Cause of Death	IDAHO													
	Total				Male					Female				
	Total Deaths <sup>2</sup>	SAM			SAF <sup>6</sup>	Total Deaths <sup>2</sup>	SAM			SAF <sup>6</sup>	Total Deaths <sup>2</sup>	SAM		
		Number <sup>3</sup>	Percent <sup>4</sup>	Rate <sup>5</sup>			Number	Percent <sup>4</sup>	Rate <sup>5</sup>			Number	Percent <sup>4</sup>	Rate <sup>5</sup>
Total	25,435	8,065	100.0	229.1		13,203	4,843	100.0	281.1		12,232	3,222	100.0	179.2
Selected Malignant Neoplasms	5,223	3,135	38.9	89.0		3,025	1,986	41.0	115.3		2,198	1,149	35.7	63.9
Lip, Oral Cavity, Pharynx	170	108	1.3	3.1	0.72	112	80	1.7	4.7	0.48	58	28	0.9	1.6
Esophagus	304	203	2.5	5.8	0.68	252	172	3.6	10.0	0.59	52	31	1.0	1.7
Stomach	193	39	0.5	1.1	0.24	126	31	0.6	1.8	0.12	67	8	0.2	0.4
Pancreas	747	172	2.1	4.9	0.22	358	78	1.6	4.5	0.24	389	94	2.9	5.3
Larynx	67	53	0.7	1.5	0.81	49	39	0.8	2.3	0.74	18	13	0.4	0.7
Trachea, Lung, Bronchus	2,915	2,341	29.0	66.5	0.87	1,626	1,407	29.1	81.7	0.72	1,289	933	29.0	51.9
Cervix Uteri	62	7	0.1	0.2	-	-	-	-	-	0.11	62	7	0.2	0.4
Kidney and Renal Pelvis	282	68	0.8	1.9	0.35	178	63	1.3	3.6	0.05	104	6	0.2	0.3
Urinary Bladder	288	114	1.4	3.2	0.43	217	94	1.9	5.4	0.28	71	20	0.6	1.1
Acute Myeloid Leukemia	195	31	0.4	0.9	0.21	107	22	0.5	1.3	0.10	88	9	0.3	0.5
Cardiovascular Diseases	15,857	2,284	28.3	64.9		7,977	1,450	29.9	84.1		7,880	835	25.9	46.4
Ischemic Heart Disease	7,960	1,257	15.6	35.7		4,654	878	18.1	50.9		3,306	379	11.8	21.1
Persons Aged 35-64	1,508	512	6.3	18.9	0.35	1,171	408	8.4	30.1	0.31	337	104	3.2	7.7
Persons Aged 65+	6,452	745	9.2	90.9	0.14	3,483	470	9.7	127.9	0.09	2,969	275	8.5	60.8
Other Heart Disease	3,678	475	5.9	13.5	0.17	1,549	268	5.5	15.5	0.10	2,129	208	6.4	11.6
Cerebrovascular Disease	3,516	286	3.5	8.1		1,407	145	3.0	8.4		2,109	141	4.4	7.8
Persons Aged 35-64	328	113	1.4	4.2	0.31	172	54	1.1	4.0	0.38	156	59	1.8	4.4
Persons Aged 65+	3,188	173	2.1	21.1	0.07	1,235	91	1.9	24.7	0.04	1,953	82	2.5	18.1
Atherosclerosis	148	27	0.3	0.8	0.26	66	17	0.4	1.0	0.11	82	9	0.3	0.5
Aortic Aneurysm	353	206	2.6	5.9	0.61	206	127	2.6	7.4	0.54	147	80	2.5	4.4
Other Arterial Disease	202	34	0.4	1.0	0.16	95	15	0.3	0.9	0.17	107	18	0.6	1.0
Respiratory Diseases	4,355	2,646	32.8	75.2		2,201	1,408	29.1	81.7		2,154	1,238	38.4	68.9
Pneumonia, Influenza	1,281	235	2.9	6.7	0.20	584	117	2.4	6.8	0.17	697	118	3.7	6.6
Bronchitis, Emphysema	457	388	4.8	11.0	0.88	248	219	4.5	12.7	0.81	209	169	5.2	9.4
Chronic Airway Obstruction	2,617	2,023	25.1	57.5	0.78	1,369	1,071	22.1	62.2	0.76	1,248	952	29.5	52.9

1. The absence of death certifications of complete and reliable data on smoking requires the use of estimation techniques to approximate the extent of smoking-attributable deaths. Estimation methods based on the concept of attributable risk, while not precise, may at least provide a general indication of the extent of such deaths. Smoking-attributable deaths are derived by multiplying a smoking-attributable fraction by the number of deaths aged 35+ in specified cause of death categories. These categories are comprised of selected malignant neoplasms (cancer), circulatory system diseases, and respiratory system diseases. It does not include burn or second-hand smoke deaths.

2. Total deaths: number of deaths to individuals between 2003-2007 aged 35+ years or as specified in the diagnostic category for selected causes of death.

3. Number: total SAM number may not sum to total male SAM number plus female SAM number due to rounding. Partial numbers are rounded down to the nearest integer.

4. Percent: number of smoking-attributable deaths by cause of death per total number of smoking-attributable deaths.

5. Rate: average number of deaths per 100,000 individuals. Rates are based on mid-year population.

6. SAF: smoking-attributable fraction. Relative-risk data from the American Cancer Society's Cancer Prevention Study (CPS-II) 1982-1988 were selected for use, as they have been widely used for similar analysis. The data from CPS-II established the age groups (35+, or 35-64 and 65+) and the classification of smokers (current, former, and never) for which smoking prevalence data were required. Idaho's average-annual prevalence rates for smoking for 2005-2007 were provided by the Behavioral Risk Factor Surveillance System (BRFSS). SAM number of deaths were calculated using death data from 2003-2007.

Note: Due to the small number of deaths and small SAF, SAM numbers of less than 1 may be calculated for a cause of death. All numbers and rates are rounded to the nearest integer.

Interpretation: Of the 5,223 selected malignant neoplasm deaths to adults aged 35+ in Idaho from 2003-2007, 3,135 (60.0 percent) were attributed to smoking. This accounted for 38.9 percent of all of the smoking-attributed deaths to males 35+.

Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (November 2008).

Idaho Resident Aged 35+ Smoking-Attributable Mortality (SAM)<sup>1</sup> for SEOW designated Frontier (Clearwater, Lewis, Idaho, and Shoshone) Counties 2003-2007

Cause of Death	FRONTIER COUNTIES													
	Total				SAF <sup>6</sup>	Male				SAF <sup>6</sup>	Female			
	Total Deaths <sup>2</sup>	SAM				Total Deaths <sup>2</sup>	SAM				Total Deaths <sup>2</sup>	SAM		
		Number <sup>3</sup>	Percent <sup>4</sup>	Rate <sup>5</sup>	Number		Percent <sup>4</sup>	Rate <sup>5</sup>	Number	Percent <sup>4</sup>		Rate <sup>5</sup>		
Total	1,208	446	100.0	346.8		663	274	100.0	425.1		545	172	100.0	267.9
Selected Malignant Neoplasms	280	183	41.0	142.3		170	122	44.3	188.4		110	61	35.8	95.9
Lip, Oral Cavity, Pharynx	9	6	1.3	4.7	0.74	6	4	1.6	6.8	0.53	3	2	0.9	2.5
Esophagus	11	8	1.8	6.1	0.71	11	8	2.9	12.2	0.64	-	-	-	-
Stomach	10	2	0.4	1.5	0.27	4	1	0.4	1.7	0.14	6	1	0.5	1.3
Pancreas	33	8	1.9	6.5	0.23	17	4	1.4	6.0	0.28	16	5	2.6	7.1
Larynx	5	4	0.9	3.2	0.82	4	3	1.2	5.1	0.78	1	1	0.5	1.2
Trachea, Lung, Bronchus	170	142	31.8	110.3	0.88	103	90	33.0	140.3	0.76	67	51	29.9	80.0
Cervix Uteri	3	0	0.1	0.3	-	-	-	-	-	0.13	3	0	0.2	0.6
Kidney and Renal Pelvis	15	4	0.8	2.7	0.38	8	3	1.1	4.7	0.07	7	0	0.3	0.7
Urinary Bladder	19	8	1.9	6.4	0.46	15	7	2.5	10.8	0.33	4	1	0.8	2.0
Acute Myeloid Leukemia	5	1	0.2	0.6	0.23	2	0	0.2	0.7	0.11	3	0	0.2	0.5
Cardiovascular Diseases	720	120	27.0	93.6		394	77	28.0	119.1		326	43	25.3	67.9
Ischemic Heart Disease	398	74	16.5	57.2		253	53	19.2	81.7		145	21	12.2	32.6
Persons Aged 35-64	81	30	6.8	33.6	0.38	64	24	8.8	52.1	0.37	17	6	3.6	14.2
Persons Aged 65+	317	43	9.7	112.9	0.15	189	29	10.4	157.0	0.11	128	15	8.5	72.9
Other Heart Disease	146	22	4.9	16.9	0.19	63	12	4.3	18.4	0.12	83	10	5.7	15.3
Cerebrovascular Disease	154	17	3.7	12.9		68	8	2.8	11.9		86	9	5.2	13.9
Persons Aged 35-64	21	8	1.8	9.1	0.33	10	3	1.2	7.2	0.44	11	5	2.9	11.1
Persons Aged 65+	133	8	1.9	21.9	0.08	58	4	1.6	24.0	0.05	75	4	2.3	20.0
Atherosclerosis	2	0	0.1	0.2	0.28	-	-	-	-	0.14	2	0	0.2	0.4
Aortic Aneurysm	10	6	1.4	4.9	0.64	6	4	1.4	6.0	0.60	4	2	1.4	3.7
Other Arterial Disease	10	2	0.4	1.5	0.16	4	1	0.2	1.0	0.21	6	1	0.7	1.9
Respiratory Diseases	208	142	32.0	110.8		99	76	27.7	117.6		109	67	38.8	104.0
Pneumonia, Influenza	45	9	2.1	7.3	0.22	10	2	0.8	3.5	0.20	35	7	4.1	11.1
Bronchitis, Emphysema	32	28	6.3	21.8	0.90	19	17	6.2	26.6	0.84	13	11	6.3	17.0
Chronic Airway Obstruction	131	105	23.6	81.8	0.81	70	56	20.6	87.6	0.80	61	49	28.4	75.4

1. The absence of death certifications of complete and reliable data on smoking requires the use of estimation techniques to approximate the extent of smoking-attributable deaths. Estimation methods based on the concept of attributable risk, while not precise, may at least provide a general indication of the extent of such deaths. Smoking-attributable deaths are derived by multiplying a smoking-attributable fraction by the number of deaths aged 35+ in specified cause of death categories. These categories are comprised of selected malignant neoplasms (cancer), circulatory system diseases, and respiratory system diseases. It does not include burn or second-hand smoke deaths.

2. Total deaths: number of deaths to individuals between 2003-2007 aged 35+ years or as specified in the diagnostic category for selected causes of death.

3. Number: total SAM number may not sum to total male SAM number plus female SAM number due to rounding. Partial numbers are rounded to the nearest integer.

4. Percent: number of smoking-attributable deaths by cause of death per total number of smoking-attributable deaths.

5. Rate: average number of deaths per 100,000 individuals. Rates are based on mid-year population.

6. SAF: smoking-attributable fraction. Relative-risk data from the American Cancer Society's Cancer Prevention Study (CPS-II) 1982-1988 were selected for use, as they have been widely used for similar analysis. The data from CPS-II established the age groups (35+, or 35-64 and 65+) and the classification of smokers (current, former, and never) for which smoking prevalence data were required. Clearwater, Idaho, Lewis and Shoshone Counties average-annual prevalence rates for smoking for 2005-2007 were provided by the Behavioral Risk Factor Surveillance System (BRFSS). SAM number of deaths were calculated using death data from 2003-2007.

Note: Due to the small number of deaths and small SAF, SAM numbers of less than 1 may be calculated for a cause of death. All numbers and rates are rounded to the nearest integer.

Interpretation: Of the 280 selected malignant neoplasm deaths to adults aged 35+ in the Frontier counties from 2003-2007, 183 (65.4 percent) were attributed to smoking. This accounted for 41.0 percent of all of the smoking-attributed deaths to males 35+.

Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (November 2008).

**Idaho Resident Drug-Induced Deaths Occurring in Idaho**  
**Substances Mentioned on Death Certificate by Year**  
**2005-2007**

SUMMARY OF SUBSTANCES MENTIONED ON DEATH CERTIFICATE	TOTAL		YEAR		
	Number	Percent	2005	2006	2007
<b>Total Drug-Induced Deaths to Idaho Residents Occurring in Idaho</b>	<b>365</b>	<b>100.0</b>	<b>111</b>	<b>134</b>	<b>120</b>
<b>Substances Listed on Death Certificates*</b>	<b>592</b>	<b>100.0</b>	<b>172</b>	<b>212</b>	<b>208</b>
<i><b>Total Nonopioid Analgesics, Antipyretics, and Antirheumatics</b></i>	<b>3</b>	<b>0.8</b>	<b>-</b>	<b>2</b>	<b>1</b>
Salicylates/Acetylsalicylic (aspirin)	1	0.3	-	-	1
Other (inc. 4-aminophenol, NSAID, pyrazolone)	2	0.5	-	2	-
<i><b>Total Antiepileptic, Sedative-Hypnotic, Antiparkinsonism, and Psychotropic</b></i>	<b>145</b>	<b>39.7</b>	<b>51</b>	<b>44</b>	<b>50</b>
Amphetamine	4	1.1	3	-	1
Antidepressants	37	10.1	17	9	11
Antipsychotics	9	2.5	3	3	3
Barbiturates	1	0.3	1	-	-
Benzodiazepine	43	11.8	11	19	13
Gamma-hydroxybutyrate (GHB)	-	-	-	-	-
Methamphetamine	29	7.9	13	6	10
Muscle relaxants	13	3.6	3	4	6
Other (inc. antianxiety, antitussive, sedatives, tranquilizers, etc.)	9	2.5	-	3	6
<i><b>Total Narcotics and Psychodysleptics (hallucinogens)</b></i>	<b>212</b>	<b>58.1</b>	<b>52</b>	<b>81</b>	<b>79</b>
Cannabis (Marijuana)	-	-	-	-	-
Cocaine	1	0.3	1	-	-
Codeine	9	2.5	2	5	2
Heroin	10	2.7	3	4	3
Hydrocodone / Hydrocodone and Acetaminophen combinations	43	11.8	10	14	19
Methadone	64	17.5	11	32	21
Morphine	20	5.5	2	8	10
Oxycodone / Oxycontin	24	6.6	10	7	7
Other (inc. LSD, mescaline, opium/alkaloids)	32	8.8	9	9	14
Drug overdose of narcotic drug(s), narcotic drug(s) not listed	9	2.5	4	2	3
<i><b>Other Known (named), Medicaments, and Biological Substances</b></i>	<b>39</b>	<b>10.7</b>	<b>14</b>	<b>14</b>	<b>11</b>
Antihistamines	27	7.4	10	11	6
Other (inc. antiemetics, antihypertensive, insulin, anticonvulsant, etc.)	12	3.3	4	3	5
<i><b>Alcohol in combination with a drug(s)</b></i>	<b>57</b>	<b>15.6</b>	<b>16</b>	<b>22</b>	<b>19</b>
<i><b>Tobacco Use</b></i>	<b>20</b>	<b>5.5</b>	<b>8</b>	<b>11</b>	<b>1</b>
<i><b>Specific Drug, Medicament, or Biological Substance Not Listed</b></i>	<b>116</b>	<b>31.8</b>	<b>31</b>	<b>38</b>	<b>47</b>
Drug use/overdose, no mention of type of drug(s)	54	14.8	15	19	20
Drug use/overdose of pain medication(s), pain medication(s) not listed	1	0.3	-	-	1
Drug use/overdose of prescription drug(s), prescription drug(s) not listed	61	16.7	16	19	26

\* Each death certificate may list one or more specific substance(s) or no specific substance.  
 See Technical Notes for additional information.

Idaho, Clearwater County, Idaho County, Lewis County, and Shoshone County Deaths  
Drug-Induced<sup>1</sup>  
1999-2007

Year	Idaho, All Counties		Frontier Counties <sup>2</sup>		Clearwater County		Idaho County		Lewis County		Shoshone County	
	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>	Number	Rate <sup>3</sup>
Total	970	7.8	35	9.5	5	6.5	4	2.9	3	8.9	23	19.3
1999	64	5.1	3	7.1	-	-	-	-	-	-	3	22.0
2000	69	5.3	3	7.1	1	11.2	-	-	-	-	2	14.5
2001	100	7.6	7	17.0	1	11.6	-	-	1	27.6	5	37.1
2002	120	8.9	3	7.4	1	11.8	-	-	-	-	2	15.3
2003	117	8.6	5	12.3	-	-	1	6.5	1	26.7	3	23.1
2004	111	8.0	4	9.9	1	11.9	1	6.4	-	-	2	15.6
2005	119	8.3	4	9.8	1	11.9	-	-	-	-	3	22.8
2006	145	9.9	6	14.6	-	-	2	12.7	1	26.6	3	22.8
2007	125	8.3	-	-	-	-	-	-	-	-	-	-

1. The list of codes included in drug-induced causes was expanded in 2003 and again in 2006 to be more comprehensive. Data for all years have been updated to include these codes; therefore, data may differ slightly from previous publications.

ICD-10 codes: D52.1, D59.0, D59.2, D61.1, D64.2, E06.4, E16.0, E23.1, E24.2, E27.3, E66.1, F11.0-F11.5, F11.7-F11.9, F12.0-F12.5, F12.7-F12.9, F13.0-F13.5, F13.7-F13.9, F14.0-F14.5, F14.7-F14.9, F15.0-F15.5, F15.7-F15.9, F16.0-F16.5, F16.7-F16.9, F17.0, F17.3-F17.5, F17.7-F17.9, F18.0-F18.5, F18.7-F18.9, F19.0-F19.5, F19.7-F19.9, G21.1, G24.0, G25.1, G25.4, G25.6, G44.4, G62.0, G72.0, I95.2, J70.2-J70.4, K85.3, L10.5, L27.0, L27.1, M10.2, M32.0, M80.4, M81.4, M83.5, M87.1, R50.2, R78.1- R78.5, X40-X44, X60-X64, X85, and Y10-Y14. Drug-induced deaths include deaths due to drug psychosis; drug dependence; nondependent use of drugs not including alcohol and tobacco; accidental poisoning by drugs, medicaments, and biologicals; intentional self-poisoning (suicide) by drugs, medicaments, and biologicals; assault (homicide) by poisoning by drugs and medicaments; and poisoning by drugs, medicaments, and biologicals, undetermined whether accidental or purposely inflicted. Drug-induced deaths do not include accidents such as falls and motor vehicle crashes, homicides, and other causes indirectly related to drug use. Also excluded are newborn deaths associated with mother's drug use.

2. Frontier Counties include: Clearwater County, Idaho County, Lewis County, and Shoshone County.

3. Rates are per 100,000 population. Cause-specific death rates are based on small data bases; caution must be exercised when attempting to draw conclusions. It is recommended to show the number of deaths with the rate.

Population Source: Estimates for 1999 are based on the 1990 Census, Internet release date August 30, 2000. 2000 Census: U.S. Bureau of the Census, Internet release date August 1, 2001. Estimates for 2001-2007 are based on the 2000 Census, U.S. Census in collaboration with the National Center for Health Statistics, Internet release dates August 8, 2003, August 18, 2004, September 9, 2005, August 16, 2006, August 16, 2007, and September 5, 2008.

Data Source: Bureau of Vital Records and Health Statistics, Idaho Department of Health and Welfare (September 2008).

**Technical Notes****Idaho Resident Drug-Induced Deaths  
2004-2006****Drug-Induced Deaths**

Drug-induced deaths as classified by the National Center for Health Statistics (NCHS). The list of codes included in drug-induced causes was expanded in 2003 to be more comprehensive. ICD-10 codes: D52.1, D59.0, D59.2, D61.1, D64.2, E06.4, E16.0, E23.1, E24.2, E27.3, E66.1, F11.0-F11.5, F11.7-F11.9, F12.0-F12.5, F12.7-F12.9, F13.0-F13.5, F13.7-F13.9, F14.0-F14.5, F14.7-F14.9, F15.0-F15.5, F15.7-F15.9, F16.0- F16.5, F16.7-F16.9, F17.0, F17.3-F17.5, F17.7-F17.9, F18.0-F18.5, F18.7-F18.9, F19.0-F19.5, F19.7-F19.9, G21.1, G24.0, G25.1, G25.4, G25.6, G44.4, G62.0, G72.0, I95.2, J70.2-J70.4, L10.5, L27.0, L27.1, M10.2, M32.0, M80.4, M81.4, M83.5, M87.1, R78.1- R78.5, X40-X44, X60-X64, X85, and Y10-Y14. Drug-induced deaths include deaths due to drug psychosis; drug dependence; nondependent use of drugs not including alcohol and tobacco; accidental poisoning by drugs, medicaments, and biologicals; intentional self-poisoning (suicide) by drugs, medicaments, and biologicals; assault (homicide) by poisoning by drugs and medicaments; and poisoning by drugs, medicaments, and biologicals, undetermined whether accidental or purposely inflicted. Drug-induced deaths do not include newborn deaths associated with mother's drug use or accidents such as falls and motor vehicle crashes, homicides, and other causes indirectly related to drug use.

ICD-10 Code F17.9: unspecified mental and behavioral disorder due to use of tobacco (chain, former, life long, or packs per day). The question 'Did tobacco use contribute to cause of death?' was added to the death certificate in 2003. Prior to 2003, deaths that were ill-defined or had an unknown cause of mortality listed on the death certificate were coded to ICD-10 codes R96-R99.9. Beginning in 2003, deaths that were ill-defined or had an unknown cause of mortality listed on the death certificate were coded to ICD-10 codes R96-R99.9, if the question 'Did tobacco use contribute to cause of death?' was marked no or unknown. If the question 'Did tobacco use contribute to cause of death?' was marked yes or probably, deaths that were ill-defined or had an unknown cause of mortality listed on the death certificate were coded to ICD-10 code F17.9.

Idaho Vital Records receives death records for Idaho resident deaths occurring out of state. These records list the ICD-10 code for underlying cause of death. However, literal information on immediate cause, conditions leading to the immediate cause, underlying cause, other significant contributing conditions, and description of how the injury occurred are not provided to Idaho Vital Records. Therefore, only substances listed on death certificates to Idaho residents occurring in Idaho are shown in tables 4-7.

**Substances Listed on Death Certificate**

Includes all substances listed on the Idaho death certificate on one or more of the following lines: immediate cause, conditions leading to the immediate cause, underlying cause, other significant contributing conditions, and description of how the injury occurred. Each death certificate may list one or more specific substance(s) or no specific substance.

**Other Antiepileptic Sedative-Hypnotic, Antiparkinsonism, and Psychotropic\***

Other, includes antianxiety, antitussive, sedatives, tranquilizers, etc.

Ambien	Meprobamate
Buspirone	Sleeping pills
Dextromethorphan	Valproic Acid

**Other Known (named) Medicaments, and Biological Substances\***

Includes the following substances named on the death certificate that are not elsewhere classified:

Helium	Oxcarbazepine
Insulin	Potassium
Lisinopril	Tobramycin
Metaclopramide	Verapamil

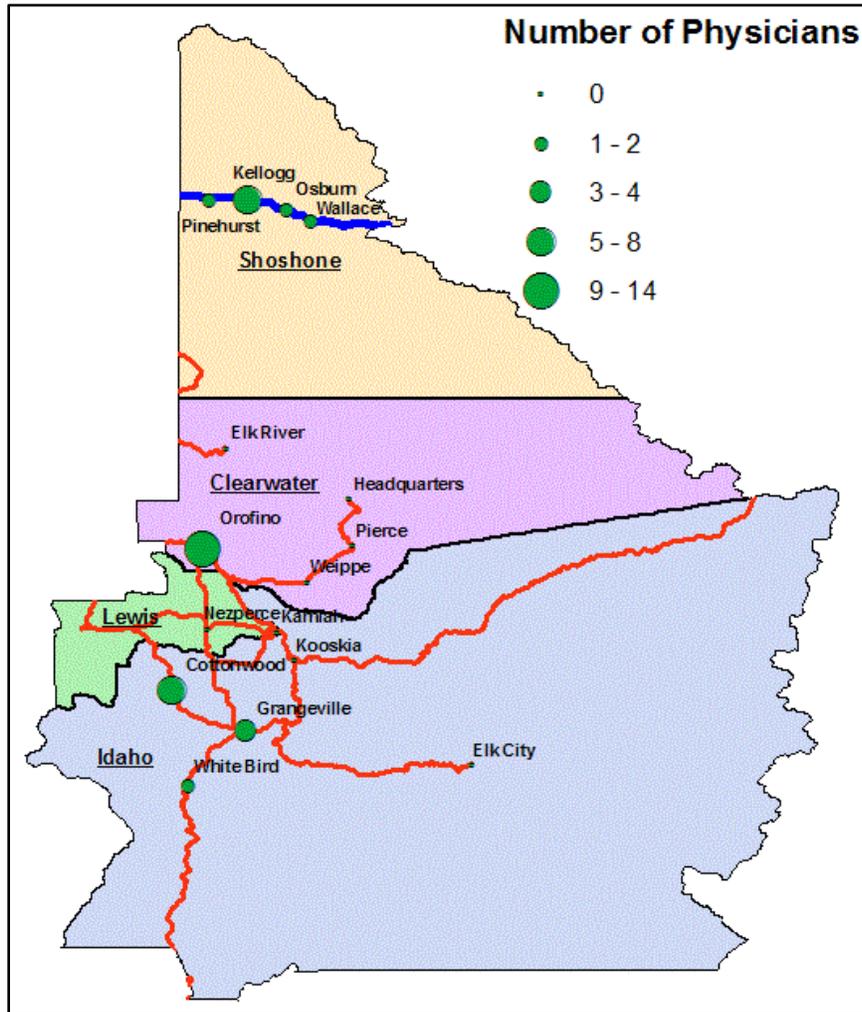
\*Only includes those substances listed on an Idaho death certificate in 2005, 2006, or 2007.

Data may differ from previously published data due to updates in the data base or coding practices.

Source: Idaho Department of Health and Welfare, Bureau of Vital Records and Health Statistics (12/2008).

**Appendix 3**

**Number and Location of Physicians in Frontier Counties**



Source: Idaho Medical Association.

**Appendix 4****Source List of All Relevant Data**

<b>Section</b>	<b>Page</b>	<b>Indicator</b>	<b>Description</b>	<b>Data Source</b>
Transportation	11	Population	Population of selected towns in the Frontier Counties	U.S. Census Bureau (2000)
Race and Ethnic Demographics	17	Population Breakdown	Percentage of population broken down by race, ethnicity, education and economic level.	Bureau of Vital Records and Health Statistics and US Census Bureau (2008, 2000)
Alcohol & Other Drug Use	30	Liquor Licenses	Rate of Liquor Licenses per 1,000 Population, State Versus Frontier Counties	Idaho State Police Alcohol and Beverage Control Bureau (2005-2007)
	31	Binge & Heavy Drinking	Drinking and Heavy Drinking (2005-2007), Aggregated	Bureau of Vital Records and Health Statistics (2008)
	32	Frontier County Liquor Dispensary Sales	Liquor sales and distributions aggregated by county and city for the frontier	Idaho State Liquor Dispensary (2007)
	33	Idaho State Liquor Dispensary Sales and Distributions Totals	Liquor sales and distributions aggregated state wide and compared to frontier	Idaho State Liquor Dispensary (2007)

Section	Page	Indicator	Description	Data Source
Alcohol & Other Drug Use	35	Current Alcohol Users Grades 6, 8, 10 and 12	Results from the SUSSCS regarding 30-day alcohol use aggregated into one measure	IDHW Statewide Needs Assessment Benchmark Research & Safety, Inc. (2008)
	37	Smoking and Illicit Drug Use Prevalence	Smoking and Illicit Drug Use Prevalence for Idaho and for Clearwater, Idaho, Lewis, and Shoshone Counties aggregated	Bureau of Vital Records and Health Statistics (2008)
Criminal Justice	47	Drug and Alcohol Related Arrests	Drug and Alcohol Arrest per 10,000	Idaho State Police (2008)
	47	Arrests Related to Marijuana, Meth and Other Drugs	Proportion of frontier counties arrests aggregated by related substance	Idaho State Police (2008)
	48	Value of Drug Equipment Seized	Cash value of Drug Equipment Seized by year broken down by each frontier county	Idaho State Police (2008)
	49	Drug Court Participants	Percentage of Drug Court Participants by Primary Drug of Choice for Idaho and the Frontier Counties	Idaho Supreme Court (2008)

<b>Section</b>	<b>Page</b>	<b>Indicator</b>	<b>Description</b>	<b>Data Source</b>
Criminal Justice	50	Felony Court Commitments	Felony Court Commitments by Fiscal Year and Status for Frontier Counties and Idaho	Idaho Department of Corrections (2008)
	51	Offender Populations	Both general and substance abuse related offender populations of the Frontier Counties by Status and Gender	Idaho Department of Corrections (2008)
Health Impact of Substance Use	52	Alcohol Induced Death Rate	Alcohol Induced Death Rate in Frontier Counties and Idaho	Bureau of Vital Records and Health Statistics (2007)
	53	Drug Induced Death Rate	Drug Induced Death Rate in Frontier Counties and Idaho	Bureau of Vital Records and Health Statistics (2007)
	54	Smoking Attributable Mortality	Idaho and Frontier Counties Smoking Attributable Mortality per 100,000 population	Bureau of Vital Records and Health Statistics (2007)

## Figures

Figure 1: State of Idaho.....	6
Figure 2: Idaho Frontier Counties (based on 2006 census estimates) .....	7
Figure 3: Relief map of Idaho Showing Frontier Counties .....	8
Figure 4: Relief Map of Frontier Counties with Location of Treatment Facilities and Major Roads.....	9
Figure 5: Location of Prevention Programs in Frontier Counties.....	10
Figure 6: County and Transportation Map of Frontier Counties .....	11
Figure 7: Idaho Population Levels per Square Mile.....	13
Figure 8: Idaho per Capita Annual Income.....	14
Figure 9: Idaho Physicians per Square Mile.....	15
Figure 10 Primary Care Physicians per 1,000 Population .....	15
Figure 11: Idaho Primary Industry by County .....	16
Figure 12: Idaho Resident Population Breakdown .....	18
Figure 13: Rate of Liquor Licenses per 1,000 Population, State Versus Frontier Counties .....	31
Figure 14: Binge Drinking and Heavy Drinking (2005-2007), Aggregated.....	32
Figure 15: Current Alcohol Users Grades 6, 8, 10 and 12.....	35
Figure 16: Smoking and Illicit Drug Use Prevalence for Idaho and for Clearwater, Idaho, Lewis, and Shoshone Counties, 2005-2007, Aggregated .....	37
Figure 17: Location of Treatment Facilities in Frontier Counties .....	38
Figure 18: 2007 Adult Treatment Admissions for the Frontier Counties (primary drug of choice).....	40
Figure 19: 2007 Youth Treatment Admissions for the Frontier Counties (primary drug of choice).....	40
Figure 20: Adult Alcohol Treatment Admissions.....	41
Figure 21: Youth Alcohol Treatment Admissions .....	42
Figure 22: Adult Methamphetamine Treatment Admissions.....	43
Figure 23: Youth Methamphetamine Treatment Admissions.....	44
Figure 24: Adult Marijuana Treatment Admissions.....	45
Figure 25: Youth Marijuana Treatment Admissions .....	46
Figure 26: Drug and Alcohol Related Arrests per 10,000.....	47
Figure 27: Drug Court Participants by Primary Drug of Choice, FY2008.....	49
Figure 28: Alcohol Induced Death Rate in Frontier Counties and Idaho (1999-2007) .....	52
Figure 29: Drug Induced Death Rate in Frontier Counties and Idaho (1999-2007) .....	53
Figure 30: Idaho and Frontier County Smoking Attributable Mortality (SAM) .....	54

## Tables

Table 1: Sample Distance and Travel Time between Towns .....	12
Table 2: Population of Selected Towns in the Frontier Counties (2000 census) .....	12
Table 3: Population Trends .....	13
Table 4: Frontier County Income Trends.....	14
Table 5: Clearwater County Prevention Locations .....	20
Table 6: Safe and Drug Free Schools Budget in Clearwater County .....	21
Table 7: Idaho County Prevention Locations.....	23
Table 8: Safe and Drug Free Schools Budget in Idaho County.....	24
Table 9: Lewis County Prevention Locations .....	26
Table 10: Safe and Drug Free Schools Budget in Lewis County.....	27
Table 11: Clearwater County Prevention Locations .....	29
Table 12: Safe and Drug Free Schools Budget in Shoshone County.....	30
Table 13: Frontier County Liquor Dispensary Sales.....	33
Table 14: Idaho State Liquor Dispensary Sales and Distributions Totals.....	34
Table 15: Proportion of each County's Arrests Related to Marijuana, Meth, or other Drugs (2007).....	47
Table 16: Total Value of Drug Equipment Seized 2002 through 2007 .....	48
Table 17: Felony Court Commitments by Fiscal Year and Status for Frontier Counties with Idaho Totals for Comparison .....	50
Table 18: Frontier County Offender Populations by Status and Gender .....	51
Table 19: Frontier Offenders with Substance Abuse Issues by Gender and Status.....	51
Table 20: Portion with Substance Abuse Issues by Gender and Status in Frontier Counties.....	51

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