

American Indian & Alaska Native Drug & Alcohol Mortality DATA BRIEF



Northwest Portland Area Indian Health Board

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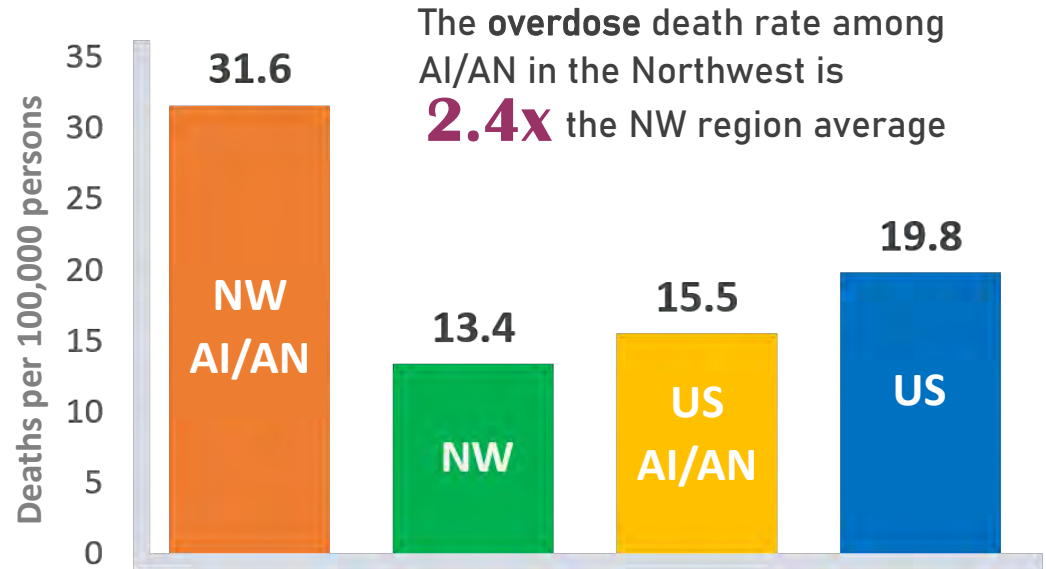
This report summarizes drug & alcohol mortality data for American Indian & Alaska Native (AI/AN) people in Washington, Oregon, and Idaho (the NW). Comparisons are made to the NW region overall, the US, and all AI/AN in the US.

2016 Drug Overdose Death Rates

Among AI/AN in the NW, the **death rate from drug overdose was 31.6 per 100,000** people in 2016.

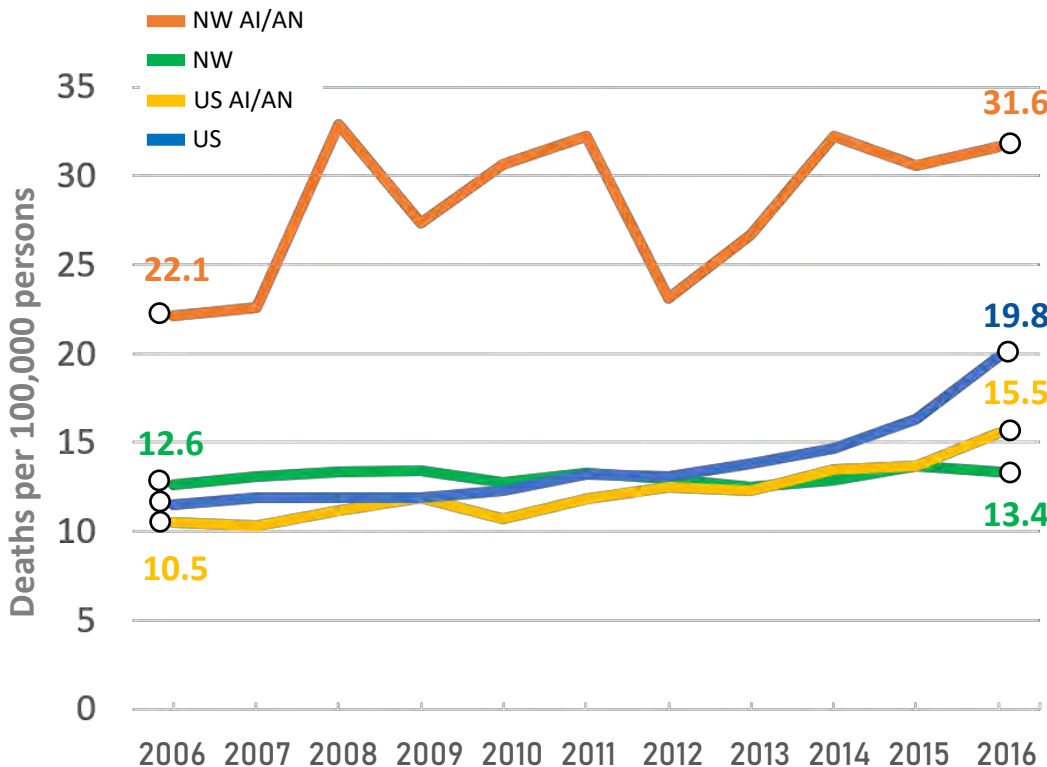
The NW AI/AN rate is:

- **2.4 times higher than the overall NW rate**
- **Over twice as high as the US AI/AN rate**
- **Over 1.5 times the US rate**



The **overdose** death rate among AI/AN in the Northwest is **2.4x** the NW region average

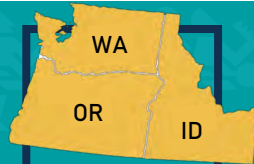
Drug Overdose Deaths Over Time



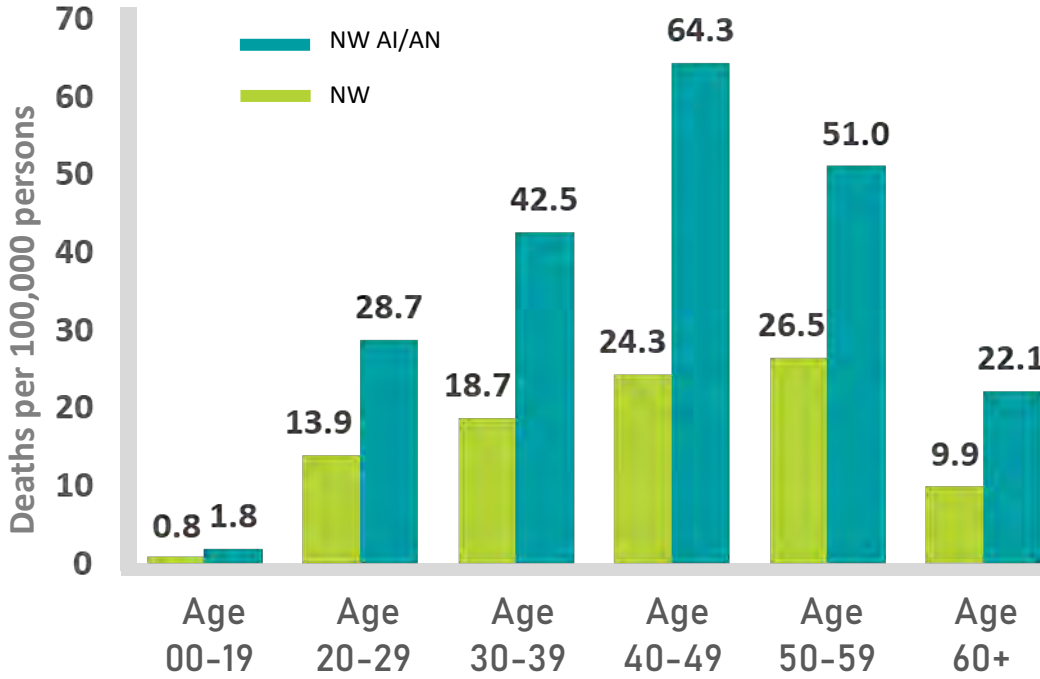
The drug overdose death rate in the NW has remained relatively stable over time, however **the rate among AI/AN in the NW increased 43% from 2006 to 2016.**

The US and US AI/AN rates have also increased, but not as much as the NW AI/AN rate and only over the past 5 years.

The NW AI/AN rate has historically been **much higher than the NW region, the US AI/AN, and the US average.**



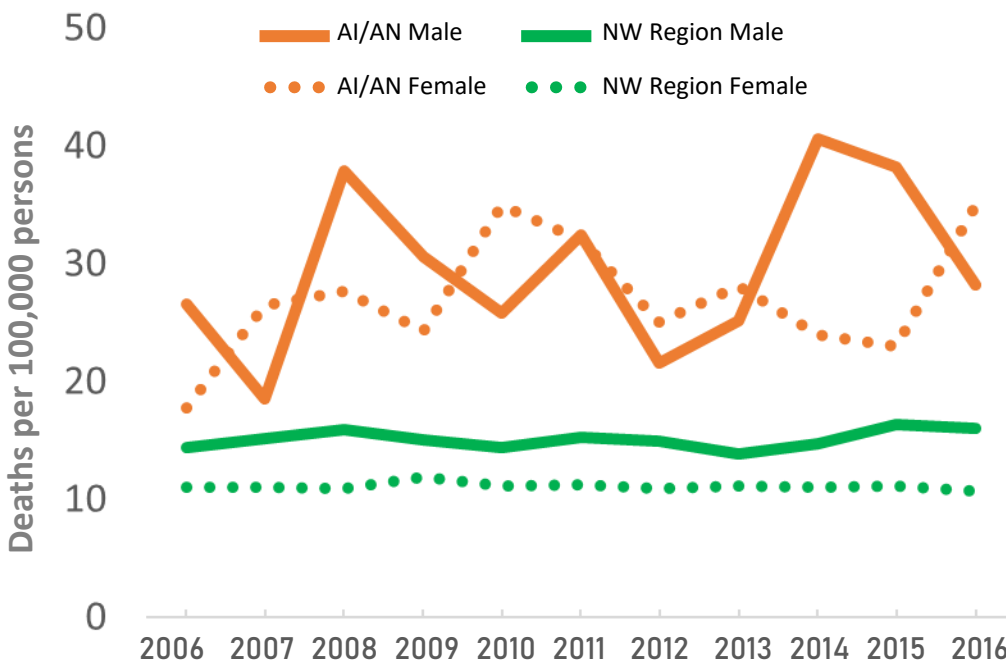
Overdose Deaths by Age Washington, Oregon, Idaho, 2012-2016



Drug overdose deaths are most common among NW AI/AN **between the ages of 30 and 59**. The rate is **highest among those aged 40 to 49**.

Among all age groups, the rate for **NW AI/AN is about double** the rate of the NW average, but **the overall age distribution is similar**.

Overdose Deaths by Sex Over Time Washington, Oregon, Idaho



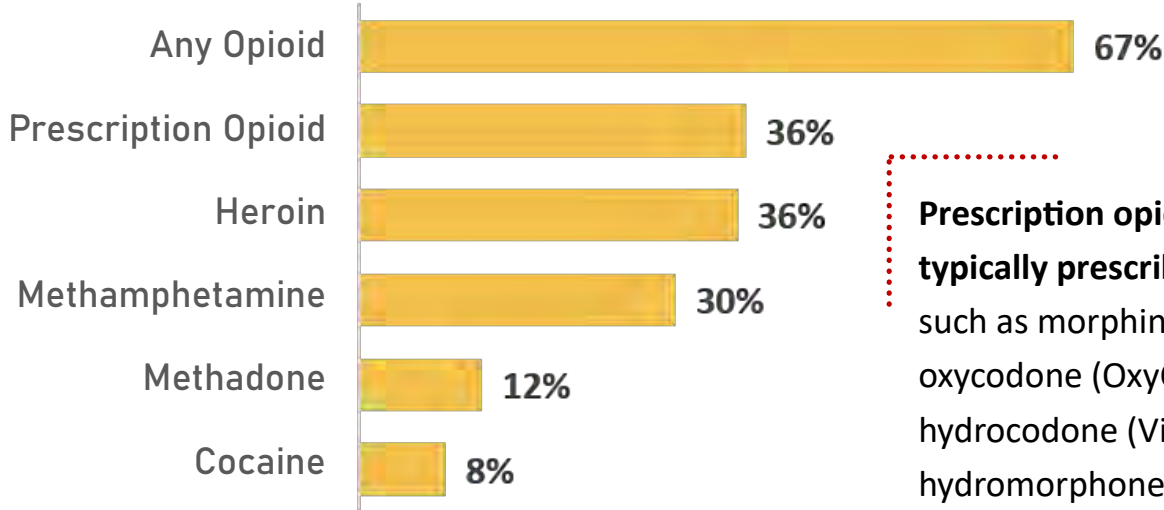
In the Northwest, **male and female AI/AN have similar overall rates** of drug overdose.

This is **different from what is seen nationally and in the NW region overall**, where the death rate among men is consistently higher than women.

The overdose death rate is **higher among AI/AN men and women** than the region averages.



Drugs Involved in AI/AN Overdose Deaths* Washington, Oregon, Idaho, 2012-2016



Prescription opioids are drugs typically prescribed for pain relief, such as morphine, codeine, oxycodone (OxyContin, Percocet), hydrocodone (Vicodin), hydromorphone (Dilaudid), and oxymorphone (Opana).

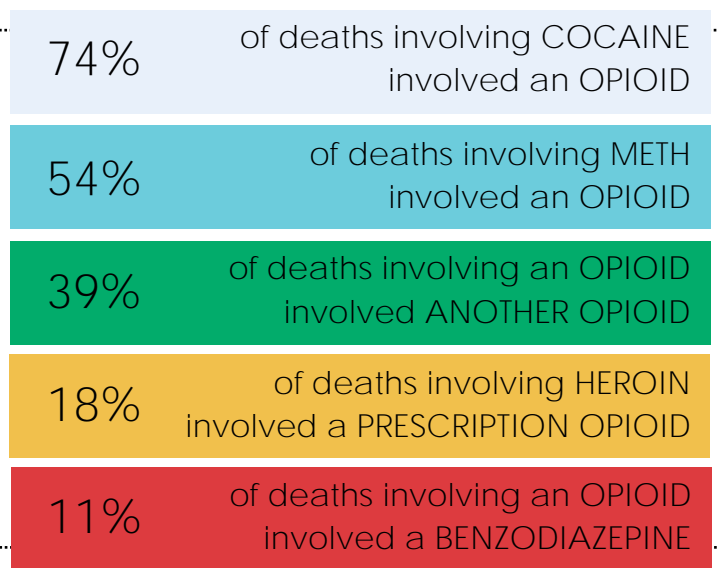
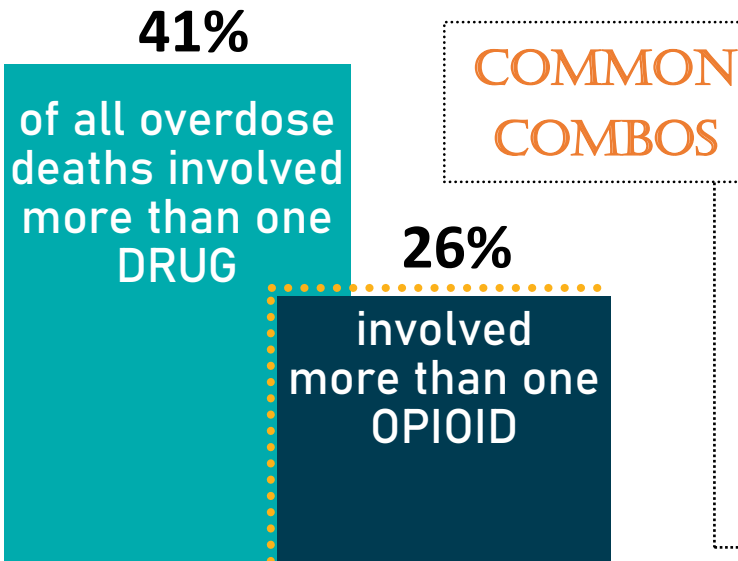
The individual may or may not have had a valid prescription for the drug.

MOST overdose deaths involved an OPIOID

Heroin & Prescription Opioids were most common

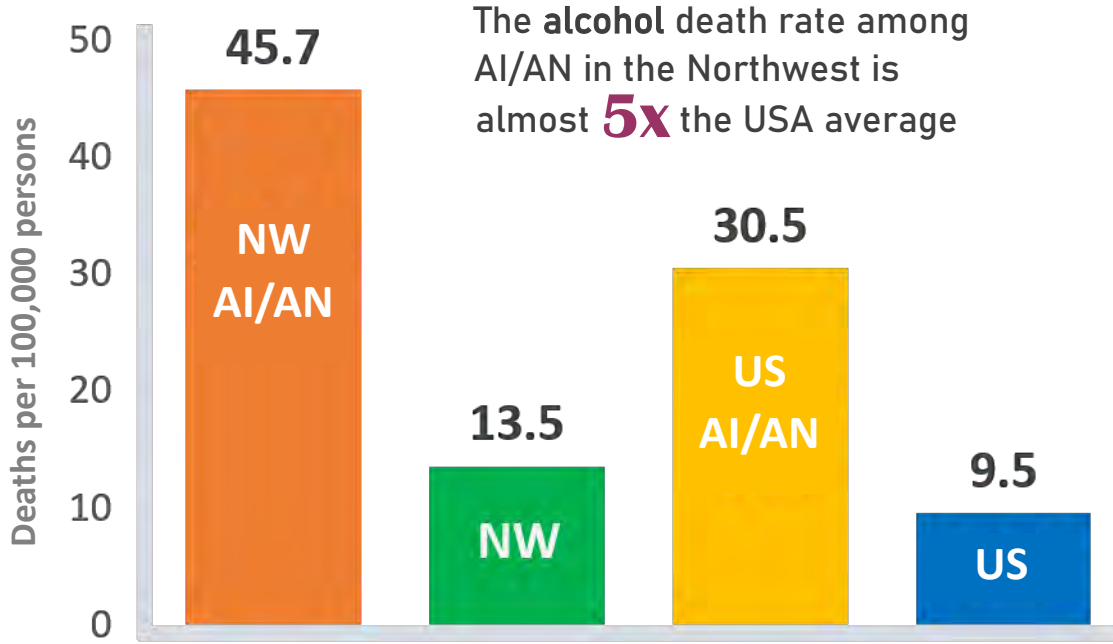
*More than one drug may be involved in an overdose; therefore categories do not equal 100%

AI/AN Polysubstance Deaths Washington, Oregon, Idaho, 2012-2016





2016 Alcohol Death Rates

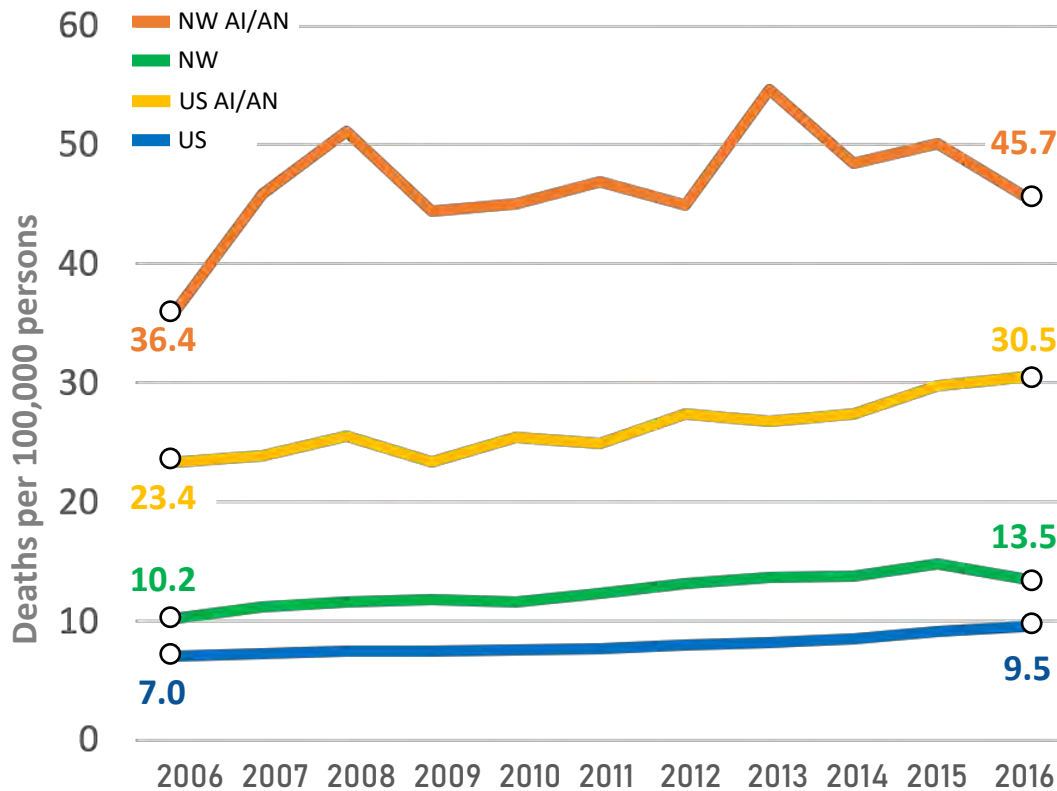


The alcohol death rate among AI/AN in the Northwest is almost **5x** the USA average

The death rate from alcohol among NW AI/AN was **45.7 per 100,000** people in 2016.

This rate is **almost 5 times higher than the national average**, 3.4 times higher than the NW region average, and 1.5 times higher than the USA AI/AN rate.

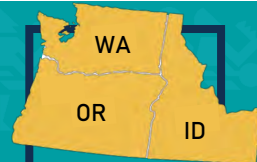
Alcohol Deaths Over Time



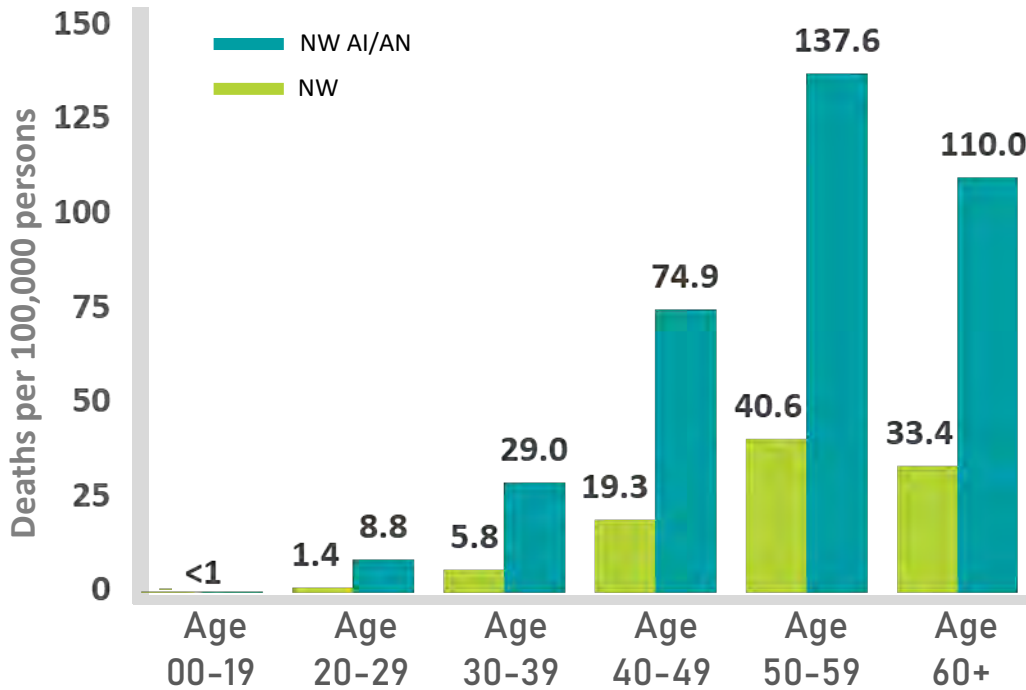
The alcohol death rate among NW AI/AN has historically been **much higher than NW region, US AI/AN, and national averages.**

The rates for **all groups** have increased over time.

The overall NW and US alcohol death rates are increasing at a faster rate than the NW AI/AN and US AI/AN alcohol death rates.



Alcohol Deaths by Age Washington, Oregon, Idaho, 2012-2016



Alcohol deaths are most common among NW AI/AN aged 40 or older. The **highest rates are among AI/AN in their 50s.**

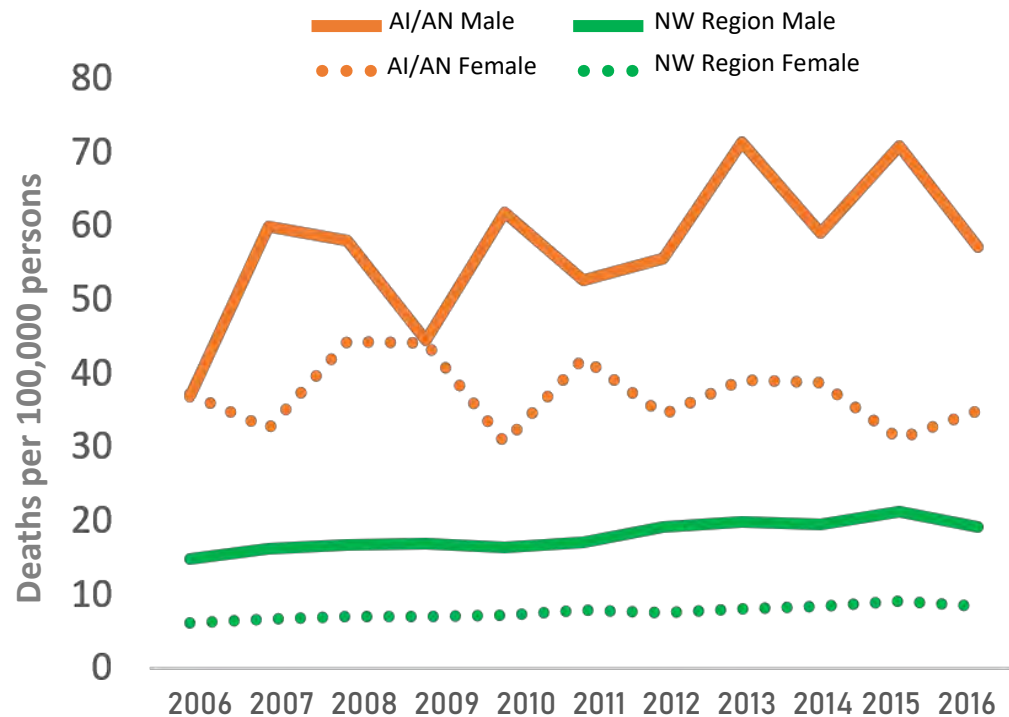
While the rates are lower among AI/AN in their **20s and 30s**, these rates are **5.0 and 6.4 times as high** as the NW region averages for these age groups.

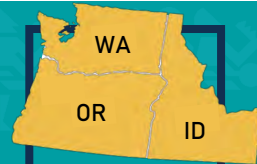
Alcohol Deaths by Sex Over Time Washington, Oregon, Idaho

The alcohol death rate has historically been **higher among AI/AN men and women** than the NW male and female averages.

In 2016, the rate for female AI/AN was **4.2 times higher** than the NW female average. The rate for male AI/AN was **3.0 times higher** than the NW male average.

Over time, the **rate for female AI/AN has slightly decreased**, whereas the rates for all other groups have increased.





About the Data

AI/AN people are often misclassified as another race in health data. For example, an AI/AN person may be incorrectly recorded as “white” (or another race) at their doctor’s office, in their hospital visit record, or on their death certificate. While this type of misclassification can happen to anyone, it happens more often for AI/AN people.

This incorrect race information often causes AI/AN health reports to become inaccurate because they do not include all the AI/AN people who were recorded as another race. This can make it difficult for Tribes to set health priorities and track changes in their communities’ health over time.

The Northwest Portland Area Indian Health Board’s IDEA-NW project works to address racial misclassification of AI/AN people by identifying incorrect race information in health datasets. **The race information is corrected and used to create more accurate health reports for AI/AN communities.** This report was made using race-corrected death certificate information.

Without race correction, this report would have excluded:

97 Overdose Deaths & **82** Alcohol Deaths

The rates for AI/AN would have been incorrectly lower by:

23% Overdose Rate & **20%** Alcohol Rate

- **Northwest States Data Sources:** Death certificates from Washington, Oregon, and Idaho, corrected for AI/AN racial misclassification
- **National Data Source:** Centers for Disease Control and Prevention, National Center for Health Statistics, Multiple Cause of Death 1999-2016 on CDC Wonder Online Database
- Overdose deaths include records with the following ICD-10 codes for underlying cause of death: X40-X44, X60-X64, X85, Y10-Y14
- Alcohol deaths include records with the following ICD-10 codes for underlying cause of death: X45, X65, Y15, F10, K70, E24.4, G31.2, G62.1, G72.1, I42.6, K29.2, K85.2, K86.0
- The data presented in this brief may not be comparable to information published by state or federal agencies due to differences in racial classification

NORTHWEST TRIBAL SUBSTANCE RESOURCES

INDIAN COUNTRY ECHO Substance Use Disorders (SUD)

This program increases access to treatment and recovery services for persons with SUD in tribal communities by training providers on best practices and evidence-based treatments, including DATA Waiver certification, telehealth sessions, and more.

Contact David Stephens at dstephens@npaih.org for more information.

TRIBAL OPIOID RESPONSE Consortium (TOR)

This project assists NW Tribes in developing the capacity to implement a complex, comprehensive opioid response, including increasing awareness of and preventing SUD, as well as developing a Tribal Opioid Strategic Plan.

Contact Colbie Caughlan at ccaughlan@npaih.org for more information.



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