









# **Background Information**

The results of the Midwest High Intensity Drug Trafficking Area (HIDTA) 2025 Threat Assessment revealed that fentanyl and methamphetamine were again the top two drug threats to the region. <sup>[1]</sup> This conclusion was made utilizing Midwest HIDTA initiative responses to a law enforcement survey (LES) and public health partner responses to the public health survey (PHS), as well as drug trend and other related information collected over the past 12 months. This is the third year in a row fentanyl was ranked as the number one drug threat.

# **Ongoing Causes for Concern**

- Law enforcement initiatives in the Midwest HIDTA identify fentanyl as the region's primary drug concern. As the dominant synthetic opioid, fentanyl creates major risks in the area through its connection to criminal activity, widespread accessibility, and elevated overdose potential. [1]
- ➤ Drug Enforcement Administration (DEA) laboratory testing in 2024, revealed 5 out of 10 fentanyllaced counterfeit prescription pills now contain a potentially lethal dose of fentanyl, down from 7 out of 10 in 2023. [2]
- ➤ Fentanyl will likely continue to be the greatest driver of drug poisoning deaths. Adulterants such as xylazine and medetomidine are of great concern in the Midwest HIDTA area of responsibility (AOR) and will continue to be, especially as they have an increased impact on poisoning deaths in the region. <sup>[1]</sup>
- ➤ The trend continues of mixing fentanyl and other synthetic opioids into other drugs in the region's illicit drug supply, specifically cocaine and methamphetamine, as reported by both law enforcement and public health agencies. <sup>[1]</sup>
- ➤ Low-cost, high potency methamphetamine transported from the Southwest Border continues to saturate both rural and metropolitan drug markets, exemplified by methamphetamine being ranked the most available drug in the Midwest HIDTA AOR by LES respondents. <sup>[1]</sup>
- ➤ The level of violence and crime surrounding methamphetamine production, trafficking, and use will also remain a threat to both law enforcement officials and the public. <sup>[1]</sup>

# South Dakota Outlook

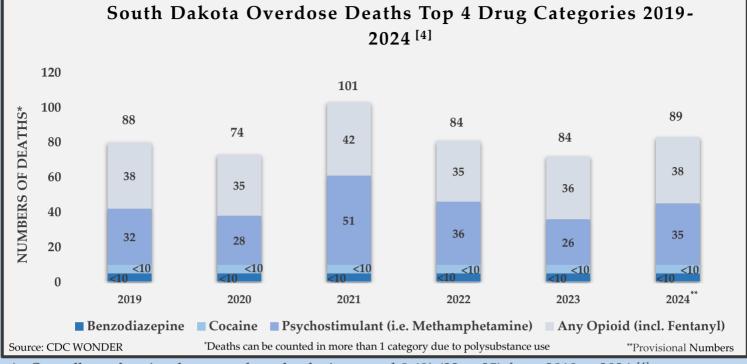
The LES responses for South Dakota varied slightly from the overall Midwest HIDTA results, with methamphetamine being ranked as the primary threat and fentanyl as the secondary threat, while the PHS responses also ranked methamphetamine as the primary threat. The South Dakota LES responses indicated that methamphetamine availability and usage were both "high." Similarly, the LES results pertaining to fentanyl in pill form were "high" for both availability and usage. Whereas the results regarding fentanyl in powder form showed its availability ranged from "moderate" (50%), to "high" (50%), and its usage was reported as "high." [1]

# South Dakota National Survey of Substance Abuse Treatment Services - 2023

As of March 31, 2023, which is the most current survey available, there were 46 treatment facilities in South Dakota, 25 of which were private non-profit (54.3%), 7 private for-profit (15.2%), 1 local/county/community (2.2%), 2 state (4.3%), 6 federally (13.0%), and 5 tribal (10.9%) government operated. These facilities were treating 2,659 clients, the majority of which were on an outpatient basis, 2,085 (78.4%). These facilities may accept more than 1 type of payment, the following are some of the payment options: cash or self-payment 39 (84.8%), private health insurance 25 (54.3%), Medicare 15 (32.6%), Medicaid 31 (67.4%), IHS/Tribal/Urban (ITU) funds 16 (34.8%), and treatment at no charge or minimal payment for clients who could not pay 33 (71.7%). [3]







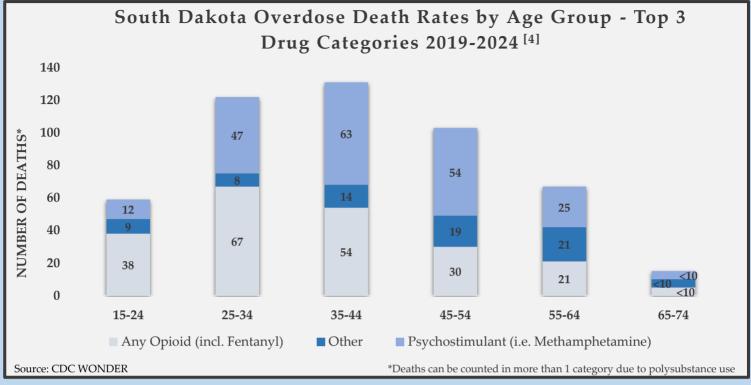
- ➤ Overall psychostimulant overdose deaths increased 9.4% (32 to 35) from 2019 to 2024. [4]
- ➤ Overall opioid overdose deaths did not increase/decrease from 2019 to 2024 (38 to 38). Of these opioid overdoses, 74.1% (166 of 224) were attributed to synthetic opioids. [4]
- From 2019 to 2024, the overall overdose numbers increased 1.1% (88 to 89). Psychostimulants and Opioids were attributed to 83% of the total overdose deaths from 2019 to 2024 (432 of 520), with psychostimulants comprising 40% (208 of 520) and opioids 43% (432 of 520) of the total .<sup>[4]</sup>



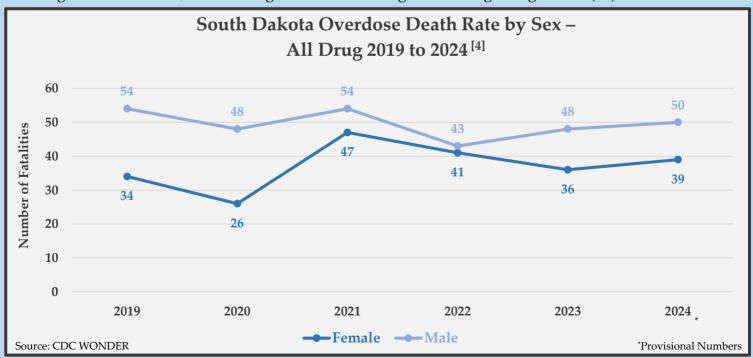
The above heatmap is a visual representation of the 1,599 suspected overdoses **reported to** ODMAP from October 1, 2024 to September 30, 2025. The use of naloxone was reported at 464 of these incidents.







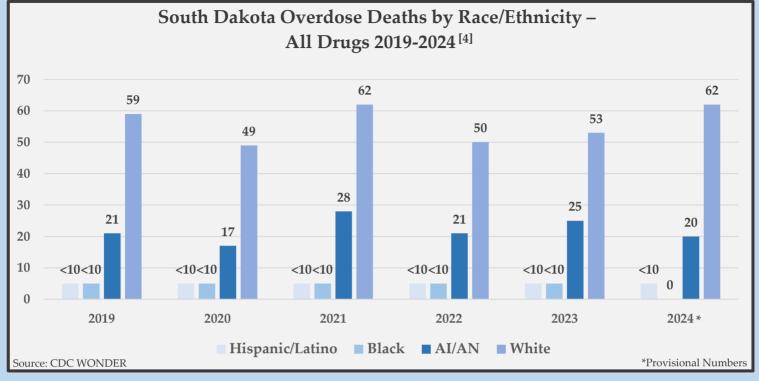
- ➤ From 2019 to 2024, 71% (159 of 224) of the opioid overdose deaths were from the ages ranging from 15-24 to 35-44, with the highest number being from the age range 25-34 (67). [4]
- ➤ From 2019 to 2024, 71% (142 of 208) of the psychostimulant overdose deaths were from the age ranges 35-44 to 55-64, with the highest number being from the age range 35-44 (63). [4]



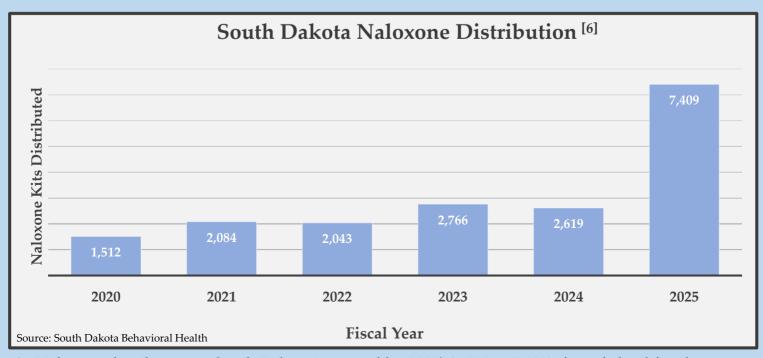
- ➤ From 2019 to 2024, the number of male overdose fatalities decreased 7.4% (54 to 50), with the largest year to year changes being 2020/2021, +12.5% (48 to 54), and -20.4% (54 to 43) from 2021/2022 [4]
- From 2019 to 2024, the number of female overdose fatalities increased 14.7% (34 to 39), with the largest year to year changes being 2020/2021, +80.8% (26 to 47), and -23.5% (34 to 26) from 2019/2020 [4]
- From 2019 to 2024, there were a total of 520 overdose deaths in South Dakota, 57% were male (297 of 520) and 43% were female (223 of 520). [4]







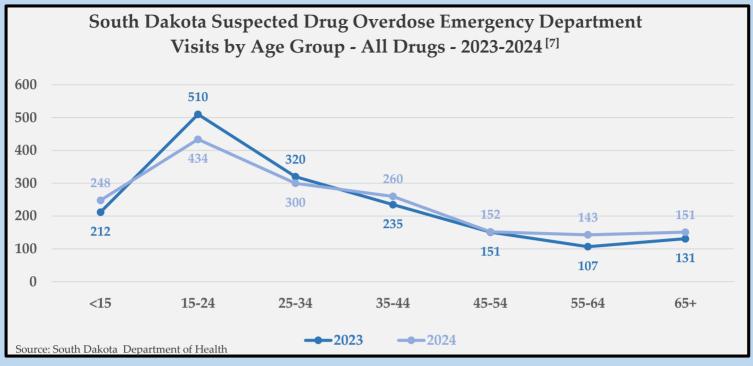
- From 2020 to 2021, the "AI/AN" (American Indian/Alaska Native) ethnicity group had an increase of 64.7% (17 to 28); this ethnicity group had a decrease of 28.6% (28 to 20) from 2021 to 2022 [4]
- From 2020 to 2021, the "White" ethnicity group had its largest percentage increase, 26.5% (49 to 62); this age group had a decrease of 19.4% (62 to 50) from 2021 to 2022 [4]
- According to the United States Census Bureau in July 2024, 84.1% of South Dakotans identify as White, 8.5% identify as AI/AN, 5.4% as Hispanic, and 2.7% as Black. [5] In 2024 the relatively low percentage of the American Indian population in South Dakota (8.5%), when compared to their comprising 25.3% of the deaths from 2019 to 2024 (132 of 520), underscores the severity of the issue within the American Indian communities. [4]



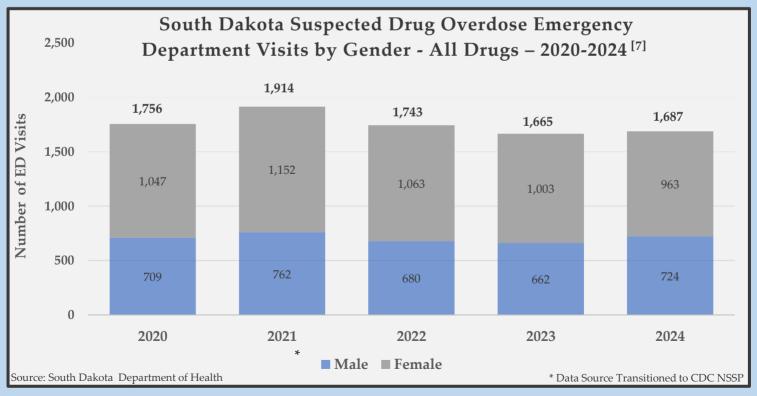
Naloxone distribution in South Dakota increased by 390% (1,512 to 7,409), from federal fiscal year 2020 to 2025; the largest percentage increase took place from 2024 to 2025, 182.9% (2,619 to 7,409). [6]







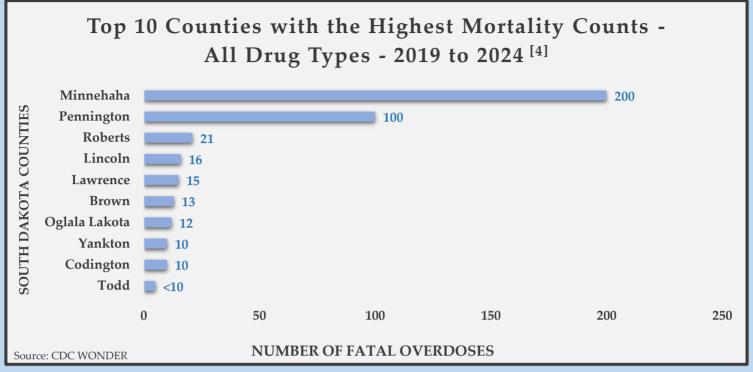
➤ The combined numbers for age ranges 15-24 and 25-34 (1,564), accounted for 46.6% of the emergency department total visits for 2023 and 2024 (3,354), with the age range 15-24 having the highest number in both years, 510 and 434 respectively. [7]



- ➤ Emergency Department visits for suspected drug overdoses in South Dakota decreased 3.9% (1,756 to 1,687) between 2020 and 2024; male visits increased 2.1% (709 to 724), while female visits declined 8% (1,047 to 963). [7]
- ➤ The largest year to year changes for females were 2020/2021, +10% (1,047 to 1,152), and -7.7% (1,152 to 1,063) from 2021/2022 [7]
- ➤ The largest year to year changes for males were 2023/2024, +9.4% (662 to 724), and -10.8% (762 to 680) from 2021/2022 [7]







Seven of the top ten counties with the highest fatal overdose counts were also in the top ten most populated counties in South Dakota, with the exceptions being Roberts, Oglala Lakota, and Todd counties, which were ranked 18, 15, and 22 respectively in population based on 2025 estimates. [8] Several of these counties were also among the highest-ranking counties for fentanyl and methamphetamine seizures reported through September of 2025:

- ➤ Top 10 fentanyl seizure rankings: Pennington (1,470,619mg), Minnehaha (575,670mg), Yankton (39,105mg), Roberts (25,275mg), Lawrence (3,891mg), Brule (3,010mg), Beadle (2,100mg), Meade (1,425mg), Lincoln (1,304mg), and Turner (1,210mg); statewide total 2,124,899mg. [9]
- ➤ Top 10 methamphetamine seizure rankings: Minnehaha (25,831 g), Pennington (9,461 g), Union (554 g), Yankton (329 g), Davison (130 g), Brown (125 g), Todd (80 g), Lincoln (66 g), Lawrence (52 g), and Brookings (42 g); statewide total 36,841 g. [9]

HIDTA INITIATIVE	SEIZED DRUG - YEAR - AMOUNT								
	FENTANYL (GRAMS)			FENTANYL PILLS (GRAMS)			METH/ICE (GRAMS)		
	2023	2024	TOTAL	2023	2024	TOTAL	2023	2024	TOTAL
SIOUX FALLS DRUG TASK FORCE	1,567	2,423	3,990	1,553	2,693	4,246	34,342	41,023	75,365
SD INTERDICTION SUPPORT	1,907	3,089	4,996	183	1	184	50,455	31,009	81,464
UNIFIED NARC ENFORCEMENT TEAM	1,350	2,221	3,571	172	5,820	5,992	10,514	25,563	36,077
TOTALS	4,824	7,733	12,557	1,908	8,514	10,422	95,311	97,595	192,906

- Approximately 4.2 lbs. of fentanyl pills were seized in 2023 (a lb. of pills converts to approximately 4,500 dosage units (DU)); this equates to 18,900 DU (with 70% containing a lethal dose in 2023) totaling approximately 13,230 potential lethal doses [10]
- Approximately 18.8 lbs. of fentanyl pills were seized in 2024; this equates to 84,600 DU (with 50% containing a lethal dose in 2024) totaling approximately 42,300 potential lethal doses [10]
- ➤ Combining the potential lethal doses of non-pill form fentanyl, 6,278,000 doses (2mg is a potential lethal dose per the DEA laboratory), with the total number of potential lethal DU (55,530), equals approximately 6,334,030 potentially lethal doses of fentanyl seized in 2023 and 2024. [10]





# South Dakota Overdose Response Strategy

# 2025 Activity Summary / Collaborative Efforts

South Dakota has expanded access to the life-saving opioid reversal medication naloxone through a multiagency partnership between the Attorney General's Office and the Department of Social Services, utilizing \$500,000 in Opioid Settlement Funds to acquire 20,000 naloxone kits. Emily's Hope, a non-profit organization, spearheaded this first-of-its-kind statewide distribution effort through AED retrofits and newspaper style distribution boxes to deliver larger quantities of naloxone to areas with the greatest need.

The South Dakota Overdose Response Strategy (ORS) team has supported this partnership by connecting with local organizations and agencies possessing the knowledge and insight to identify optimal locations for naloxone placement. To date, 10,385 kits (20,770 doses) have been distributed across South Dakota. A total of 28 naloxone boxes have been installed statewide, including six locations on tribal reservations—Rosebud (1), Pine Ridge (3), and Lake Traverse Reservation (2).

An opportunity was also identified by the Overdose Response Strategy team to expand naloxone access during the Sturgis Rally, a large-scale event that welcomes over half-a-million attendees. The ORS team facilitated the planning meetings, coordination, and logistical support necessary to bring this effort to fruition and ultimately marked the first time naloxone was distributed at the Sturgis Rally. The initiative was implemented through a multi-agency, cross-state collaboration between the ORS, Action for the Betterment of our Community (ABC), and Emily's Hope, showcasing the power of coordinated partnerships to improve public health and community safety.

During the Rally, a total of 461 kits were distributed throughout the community via strategically placed distribution boxes and partnerships with local businesses, including bars, campgrounds, and restaurants. A total of 47 businesses participated in the distribution effort. Key activities included weekly coordination calls, outreach to all county campgrounds and major downtown bars, logistical planning of naloxone delivery and placement, direct delivery of kits to county campgrounds and concert venues, and an organized day of inperson distribution to downtown businesses and vendors.

In collaboration with the Sturgis Police Department and Meade County Sheriff's Office, 50 kits were provided to downtown foot patrol teams to ensure accessibility throughout the event. Additionally, a distribution box was maintained at the Sturgis Armory, from which 182 kits were taken during the Rally. The box was later relocated to a local hospital for post-Rally distribution, where an additional 39 kits have been dispensed. Importantly, there were three reported instances in which naloxone was utilized to reverse an opioid overdose, directly saving lives during the event.

Another important outcome of this project was the insight gained through direct engagement with local businesses during naloxone distribution efforts. While many business owners welcomed the opportunity to participate, others expressed concerns about liability, stigma, and perceived relevance. Common reasons for declining participation included beliefs that their patrons did not use illicit substances, fears that offering naloxone could be seen as endorsing drug use, and misconceptions that the presence of naloxone might enable substance use rather than prevent overdose deaths. These conversations provided valuable information for future outreach strategies, emphasizing the need for ongoing stigma reduction, targeted education, and support for business owners who may be hesitant to engage.

These collective efforts highlight the power of collaboration among public health agencies, law enforcement, and community partners in expanding naloxone accessibility across South Dakota. Through the partnership with Emily's Hope, and coordinated support from ORS and ABC, this initiative strengthened local networks, enhanced cross-state coordination, and ensured that life-saving resources reached communities and events where they were needed most.





## **REFERENCES:**

- 1. Midwest HIDTA 2025 Threat Assessment Report; Midwest HIDTA Intelligence Support Center; pages 4, 11-29.
- 2. Drug Enforcement Administration, Press Release (December 16, 2024), *Overdose Deaths Decline, Fentanyl Threat Looms*; <a href="https://www.dea.gov/press-releases/2024/12/16/overdose-deaths-decline-fentanyl-threat-looms">https://www.dea.gov/press-releases/2024/12/16/overdose-deaths-decline-fentanyl-threat-looms</a>
- 3. Substance Abuse and Mental Health Service Administration, National Substance Use and Mental Health Services Survey, 2023 South Dakota State Profile; <a href="https://www.samhsa.gov/data/report/2023-n-sumhss-state-profiles">https://www.samhsa.gov/data/report/2023-n-sumhss-state-profiles</a>
- 4. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Provisional Mortality on CDC WONDER Online Database. Data are from the final Multiple Cause of Death Files, 2019-2023, and from provisional data for years 2024-2025, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <a href="http://wonder.cdc.gov/mcd-icd10-provisional.html">http://wonder.cdc.gov/mcd-icd10-provisional.html</a> in October, 2025
- 5. United States Census Bureau, Quick Facts, South Dakota; <a href="https://www.census.gov/quickfacts/fact/table/SD,US">https://www.census.gov/quickfacts/fact/table/SD,US</a>
- 6. South Dakota Behavioral Health, Substance Use Prevention Program, Naloxone Kits Distributed (November 17, 2025).
- 7. South Dakota Behavioral Health, Department of Health and Social Services, "Let's Be Clear" website, accessed October 2025; https://letsbeclearsd.com/key-data
- 8. World Population Review, Population of Counties in South Dakota (2025); https://worldpopulationreview.com/states/south-dakota
- 9. South Dakota Division of Criminal Investigation, Statistical Analysis Center, 2025 Statewide Monthly Fentanyl and Methamphetamine Statistics (October 21, 2025); Unpublished Data.
- 10. Frazier, R. (October 2025), Midwest HIDTA Performance Management Process Data, 2024. Kansas City; Midwest HIDTA