

**TOBACCO PREVENTION AND  
CONTROL REGIONAL PROFILE:  
SOUTHEAST**



TOBACCO-FREE ALASKA

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## PREFACE

Tobacco use remains Alaska's leading preventable cause of disease and death. More Alaskans die as a result of tobacco use than from infectious diseases, alcohol, car accidents, illegal drugs, murders and suicides combined. Tobacco use exacts an enormous burden on the State of Alaska and its residents, causing premature death and millions of dollars of avoidable medical care expenditures.<sup>1</sup> The single best thing that Alaskans who use tobacco can do to improve their health and the health of those around them is to quit using any tobacco products.

The Centers for Disease Control and Prevention (CDC) has identified tobacco use as 1 of the most important "winnable battles" in public health – priorities with large-scale impact on health and known, effective strategies to address them. The CDC offers guidance to states about how to reduce the burden of tobacco use through comprehensive tobacco prevention and control programs described in *Best Practices for Comprehensive Tobacco Control Programs-2007*. These evidence-based, comprehensive, sustained statewide tobacco control programs have been shown to reduce smoking rates, tobacco-related deaths and diseases caused by smoking.

Tobacco use remains a critical health issue in Alaska and disproportionately affects Alaska Native adults and youth, individuals of low socioeconomic status (SES) and young adults, leading to health inequities or disparities for these groups. However, Alaska has made considerable progress in reducing the burden of tobacco use by implementing a comprehensive tobacco prevention and control program consistent with CDC guidelines. Since the inception of the program in 1996, adult smoking rates have declined significantly to 23% in 2011, and youth smoking rates have been more than cut in half, to 14% in 2011.<sup>1</sup>

The State of Alaska Tobacco Prevention and Control (TPC) Program has achieved success by implementing an evidence-based comprehensive tobacco prevention and control program, including a tobacco quit line, counter-marketing media and grants to promote tobacco-free policies in community programs, schools and healthcare organizations. These program elements combine to address the 4 goals of the TPC Program:

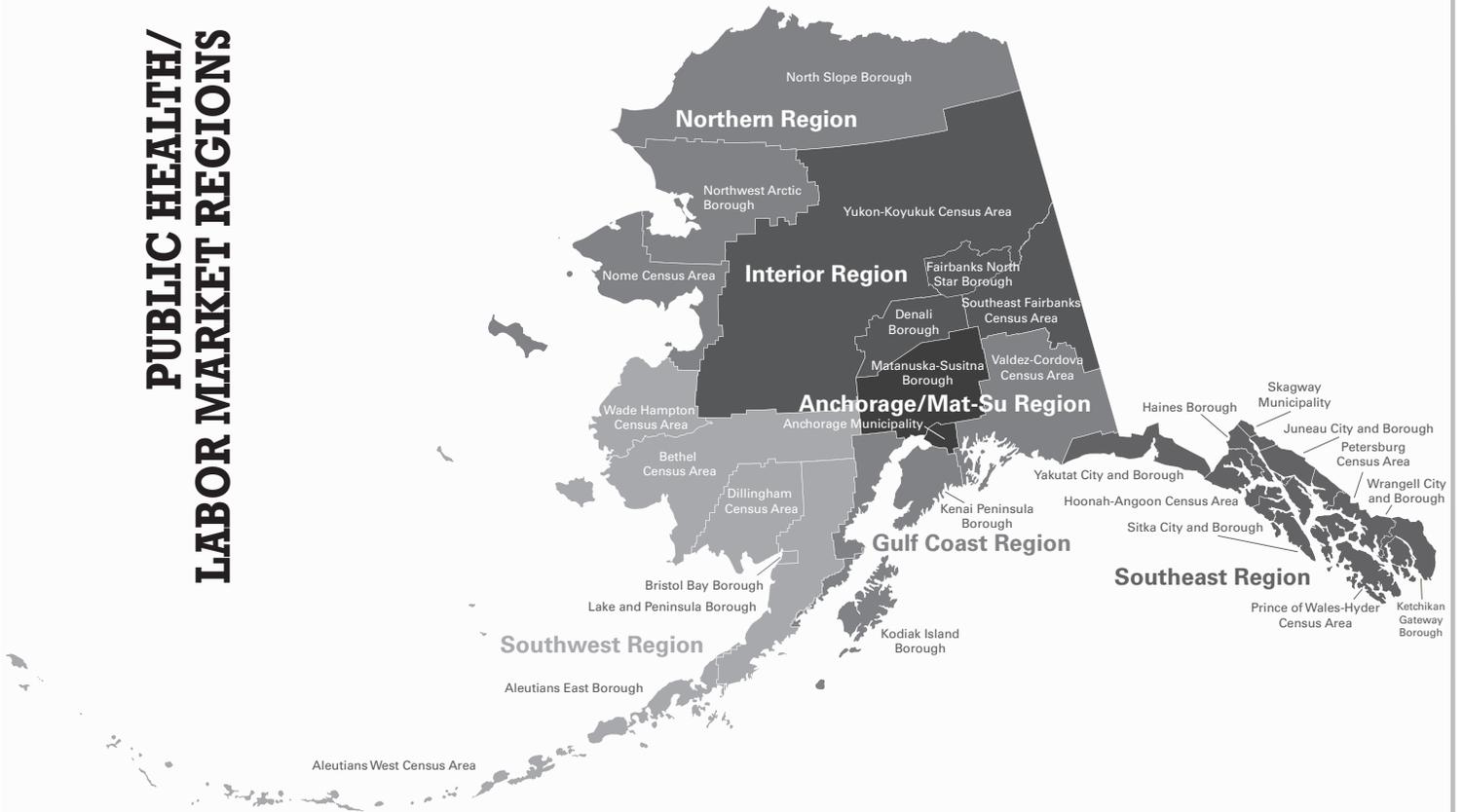
1. prevent the initiation of tobacco use among youth;
2. promote cessation for tobacco users;
3. eliminate exposure to secondhand smoke (SHS); and
4. identify and eliminate tobacco use disparities.

Until now, the TPC Program has offered 3 separate grant programs to fund work by community organizations, healthcare systems and K-12 schools toward these 4 goal areas. Beginning in FY14, the TPC Program provides a comprehensive, regional funding scenario to encourage all types of organizations to approach and coordinate tobacco control and prevention at the community level. Grantees will be working collaboratively on evidenced based strategies that change the community context around tobacco use within their Public Health Region and at a statewide level.

Regional profiles have been compiled to support this innovative streamlined approach to comprehensive tobacco prevention and control in Alaska. Tobacco use varies considerably by region, with twice the rates of smoking and 4 times the rates of smokeless tobacco use in some regions when compared with the statewide estimates. These regional profiles summarize key demographic data, tobacco indicators, tobacco-related policies in the region and potential

partner organizations and infrastructure that could support regional tobacco prevention and control efforts. While this report is specific to the Southeast region, data for the other regions and statewide are included in Appendix B, and regional reports are available for each of the 6 Public Health/Labor Market regions in Alaska (see map below).

**PUBLIC HEALTH/  
LABOR MARKET REGIONS**



## OVERVIEW

The 2010 US Census lists 71,664 people living in the Southeast region of Alaska, accounting for 10% of the total population in Alaska. The vast majority of people in this region (n=31,275) live in the City of Juneau; other populous places include Sitka (n=8,881) and Ketchikan (n=8,050). See Table A-1 in Appendix A for a list of specific communities in the Southeast region.

The Southeast region is composed of the cities and boroughs of Juneau, Sitka, Wrangell and Yakutat; the Haines and Ketchikan Gateway boroughs; the municipality of Skagway; and the Prince of Wales-Hyder, Hoonah-Angoon and Petersburg census areas. The annual average unemployment rate for the Southeast region in 2011 was 7.3%. The most common occupations in 2011 were retail sales and cashiers, while the government sector (state and local) and trade, transportation and utilities employed the most people.<sup>ii</sup>

There are 13 Alaska Native Regional Corporations (or ANCSA Corporations) in the State of Alaska. ANCSA Corporations were established when the US Congress passed the Alaska Native Claims Settlement Act (ANCSA), which settled land and financial claims made by the Alaska Natives and provided for the establishment of 13 regional corporations to administer those claims. The ANCSA Corporation and related Native association in the Southeast region is the Sealaska Corporation (Central Council Tlingit and Haida Indian Tribes of Alaska).<sup>iii</sup>

The Southeast region contains 18 school districts detailed in Table 1. Out of the 128,926 K-12th grade students in the state of Alaska, the Southeast region accounts for 9% of K-12th grade students in Alaska. Out of the 39,352 high school students in the state, the region also accounts for 10% of high school students.

**Table 1.** School District Enrollment in the Southeast Region as of October 1, 2011

<b>District Name</b>	<b>Total High School</b>	<b>Total K-12th</b>
Annette Island Schools	83	274
Chatham Schools	35	152
Craig City Schools	133	656
Haines Borough Schools	107	308
Hoonah City Schools	33	116
Hydaburg City Schools	12	43
Juneau Borough Schools	1,617	4,895
Kake City Schools	19	94
Ketchikan Gateway Borough Schools	715	2,167
Klawock City Schools	55	132
Mount Edgecumbe High School	396	396
Pelican City Schools	9	18
Petersburg City Schools	150	427
Sitka Borough Schools	413	1,350
Skagway Schools	22	64
Southeast Island Schools	56	161
Wrangell City Schools	112	391
Yakutat City Schools	35	108
<b>TOTAL</b>	<b>4,002</b>	<b>11,752</b>

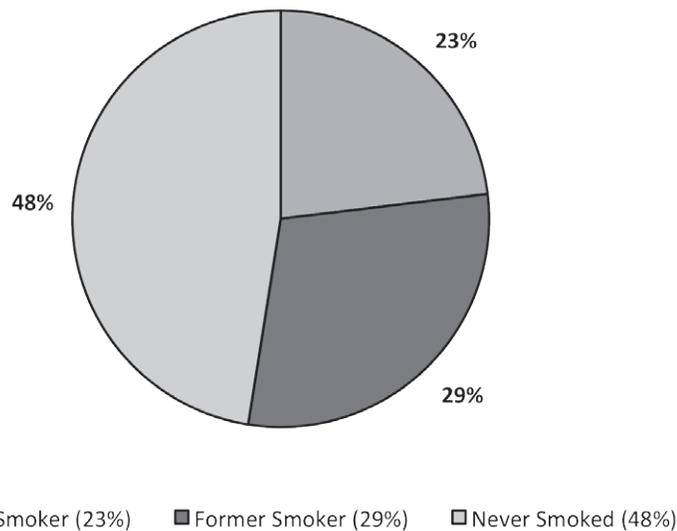
Source: Alaska Department of Education and Early Development: Assessment and Accountability, District Enrollment as of October 1, 2011 FY12. <http://education.alaska.gov/stats/>

## TOBACCO USE

### Adult Smoking

Adult tobacco use data are gathered using the Alaska Behavioral Risk Factor Surveillance System (BRFSS), pooling 2009 – 2011 data to calculate regional estimates. Over 1 in 5 adults (23% ± 3%) are estimated to currently smoke cigarettes in the Southeast region, similar to the statewide estimate of 22% (± 1%) for 2009 – 2011 pooled data. (See Appendix B for all regional and statewide estimates.)

**Figure 1.** Adult Smoking Status, Southeast Region, 2009-2011

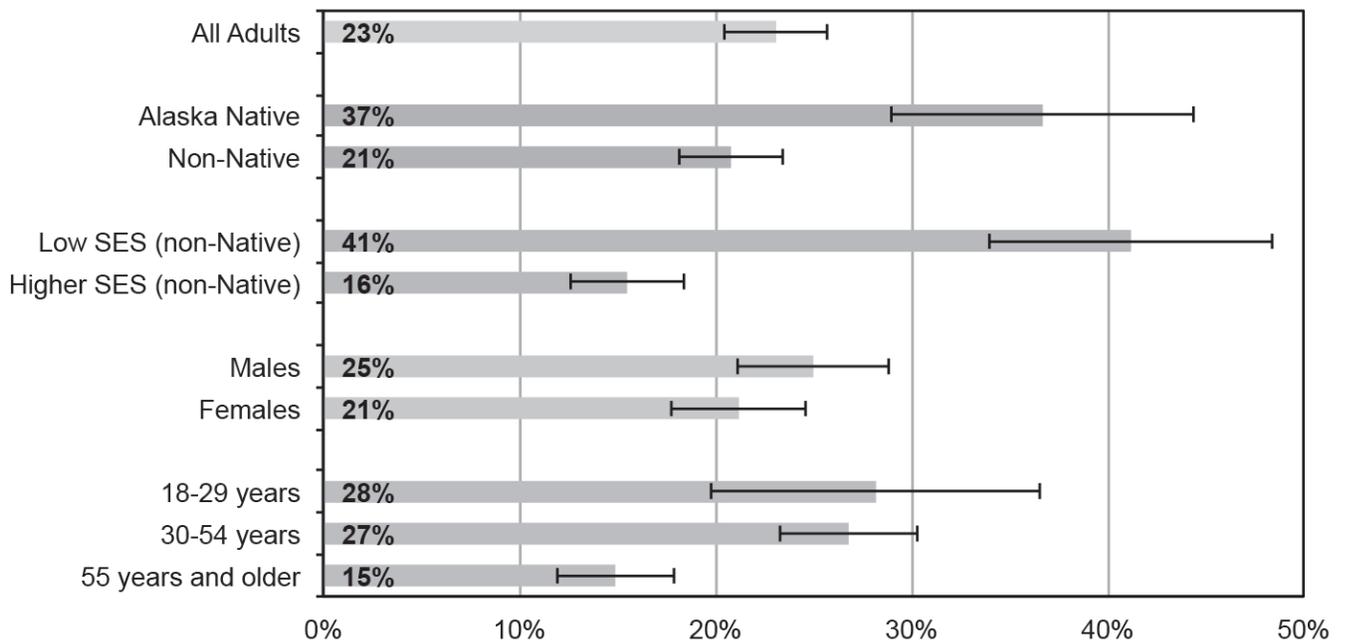


Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

Certain priority populations, including Alaska Natives, people with low socioeconomic status (SES) and young adults, may experience higher rates of tobacco use than others. The figure below summarizes data for specific population groups to monitor tobacco use in these populations and to help identify where to focus programmatic efforts for the TPC Program and its partners.

In the Southeast region, adult smoking prevalence was 23% ( $\pm 3\%$ ) overall. Among Alaska Natives, the smoking prevalence (37%  $\pm 8\%$ ) was significantly higher than the regional estimate (23%  $\pm 3\%$ ) as well as prevalence among non-Natives (21%  $\pm 3\%$ ). Likewise, the smoking prevalence was significantly higher among people with low SES (41%  $\pm 7\%$ ) as compared to the regional estimate (23%  $\pm 3\%$ ) as well as those with higher SES (16%  $\pm 3\%$ ). No gender or age differences were notable (see Figure 2).

**Figure 2.** Percent of Alaska Adults Who Currently Smoke, Southeast Region, 2009-2011

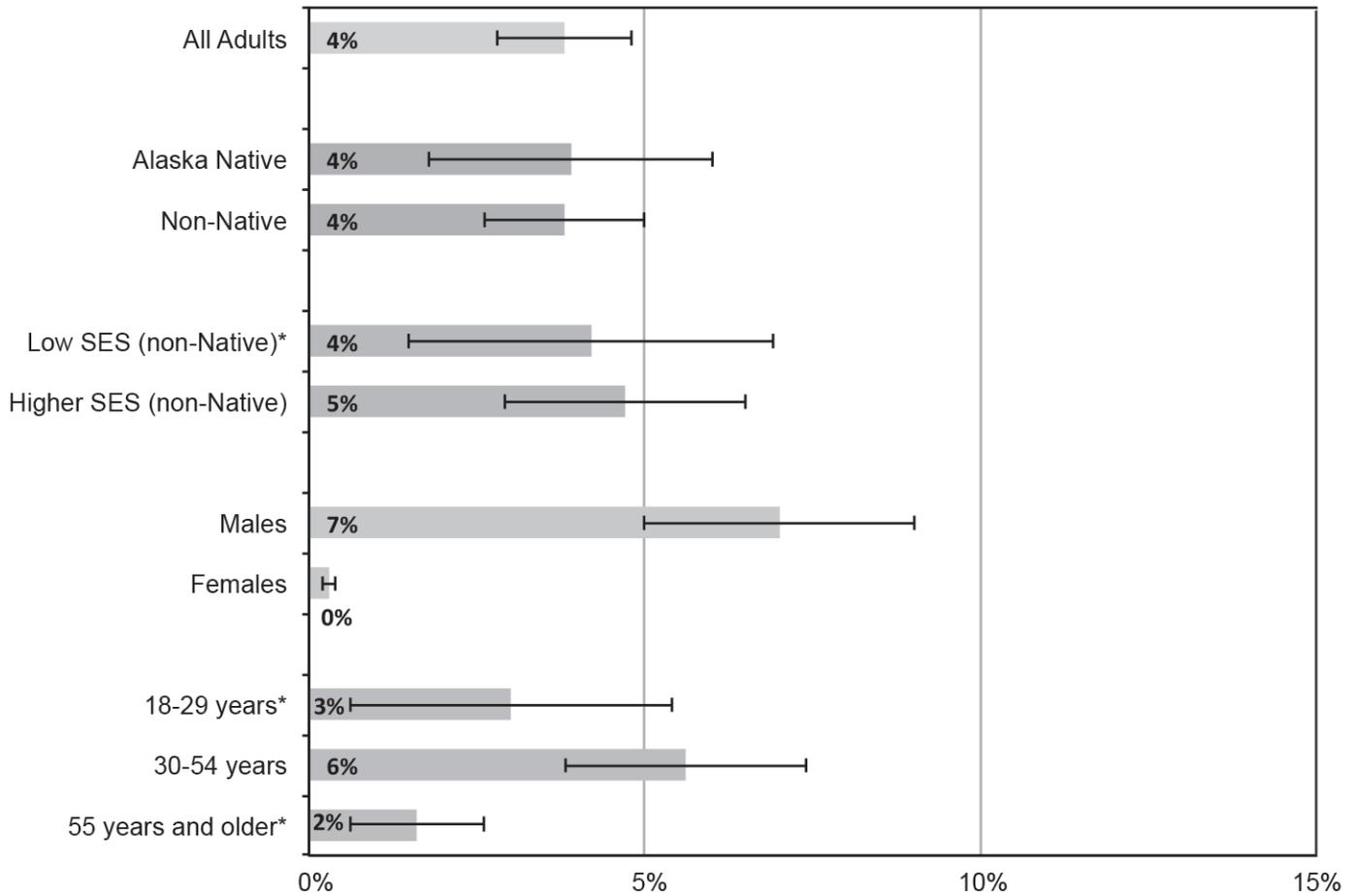


Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

### Adult Smokeless Tobacco Use

In the Southeast region, an estimated 4% ( $\pm 1\%$ ) of adults use smokeless tobacco, similar to the statewide estimate of 5% ( $\pm 1\%$ ) for 2009 – 2011 data. Males used smokeless tobacco significantly more than females in the Southeast region, 7% ( $\pm 2\%$ ) compared to 0.3% ( $\pm 0.1\%$ ). Figure 3 shows smokeless tobacco use rates in the Southeast region.

**Figure 3.** Percent of Alaska Adults Who Use Smokeless Tobacco, Southeast Region, 2009-2011



\*Interpret data with caution (For more information, see Table B-2 in Appendix B.)

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

## Youth Smoking

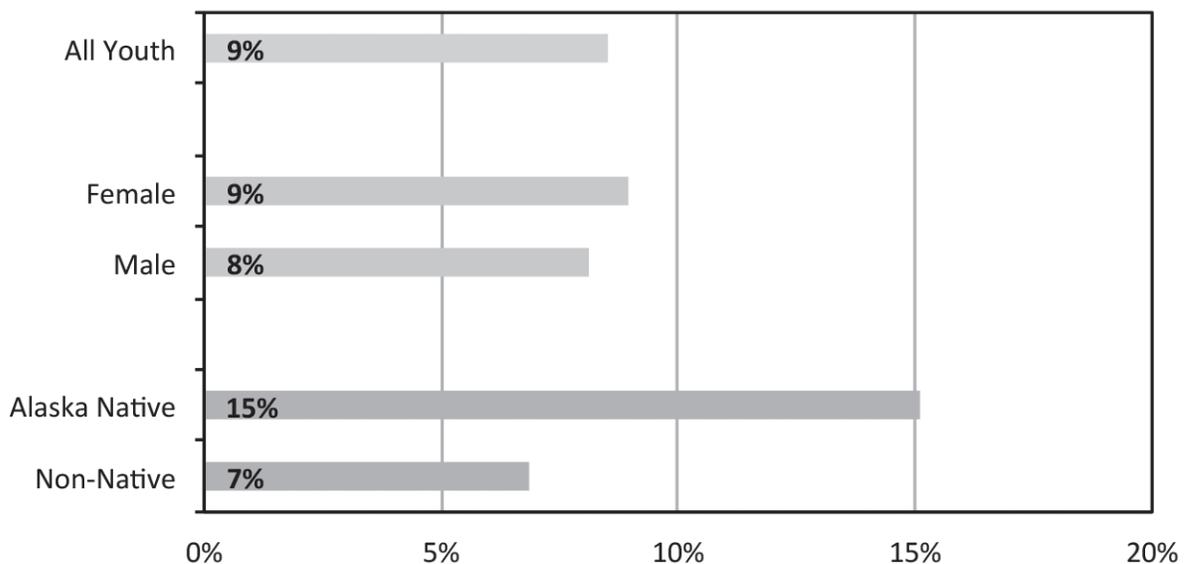
Information about youth tobacco use and other related indicators comes from the Youth Risk Behavior Survey (YRBS), conducted in a sample of high schools every other year. Although the official state estimates are based on a scientifically selected statewide sample of schools and students, the regional data include a combination of the scientific statewide sample and schools that volunteered or chose to participate as part of a local sample. (In Alaska, individual school districts can also conduct a local YRBS.) For this reason, regional estimates may not be generalizable to all students in the region (see Appendix F for additional detail). Because of the mixed sample, regional estimates are presented without confidence intervals (for example, “6%” rather than “6% ±2%” of students).

For district-specific information, contact your local school district for results. The data presented here only reflect statewide and regional YRBS data.

An estimated 9% of high school students surveyed in the Southeast region smoked cigarettes in the past 30 days, compared with the statewide weighted estimate of 14% in 2011. An estimated 3% of students surveyed smoked cigarettes on 20 or more of the past 30 days.

As seen in Figure 4, the estimates for cigarette use are similar in this region for males and females. However, more Alaska Native youth than non-Native youth reported smoking within the past 30 days in the Southeast region, 15% compared to 7%.

**Figure 4.** Youth Cigarette Use in Past 30 Days, Southeast Region, 2011

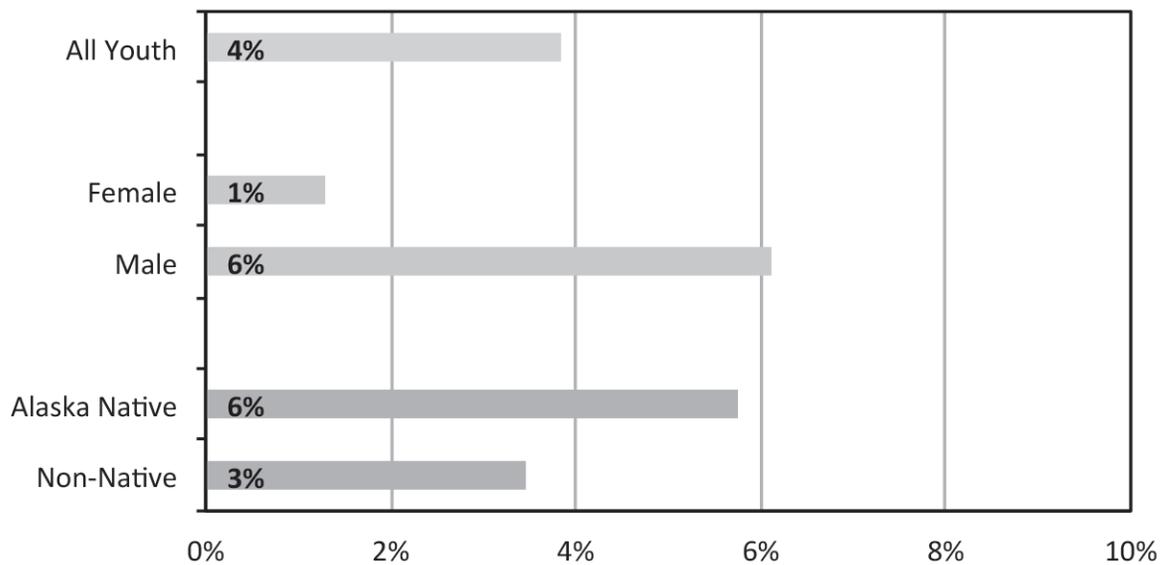


Source: Alaska Youth Risk Behavior Survey, 2011

## Youth Smokeless Tobacco Use

In 2011, an estimated 4% of high school students surveyed in the Southeast region used smokeless tobacco in the past 30 days, compared with the statewide weighted estimate of 8% in 2011. Male youth surveyed in the Southeast region were 6 times more likely than female youth surveyed to have used smokeless tobacco in the past 30 days. Like cigarette use, Alaska Native youth were twice as likely to have used smokeless tobacco in the past 30 days compared to non-Native youth, 6% compared to 3%.

**Figure 5.** Youth Smokeless Tobacco Use in Past 30 Days, Southeast Region, 2011



Source: Alaska Youth Risk Behavior Survey, 2011

## ELIMINATING EXPOSURE TO SECONDHAND SMOKE

### Secondhand Smoke (SHS) Indicators

There is no safe level of exposure to secondhand smoke. Creating completely smokefree indoor areas is the only way to protect nonsmokers from secondhand smoke. Policies establishing smokefree environments are the most effective way to eliminate secondhand smoke.<sup>iv</sup> In the Southeast region, there is overwhelming support for both smokefree restaurants and workplaces.

**Table 2.** Adult Secondhand Smoke (SHS) Indicators, Southeast Region, 2009-2011

	<b>Prevalence (95% CI)*</b>
Has home smoking ban	87.3% (±3.1%)
No home SHS exposure	88.3% (±3.4%)
Support for smokefree workplaces	78.2% (±3.9%)
Support for smokefree restaurants	74.6% (±4.0%)
Smoking not allowed in work areas (indoor workers)	84.6% (±5.0%)
No indoor workplace SHS exposure (all workers)**	91.5% (±4.5%)
No indoor workplace SHS exposure (indoor workers)	94.5% (±2.7%)

\*95% Confidence Interval

\*\*Estimate from 2010-2011; not available from earlier years.

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

Although the vast majority of adults did not report secondhand smoke exposure in homes and workplaces, an estimated 31% of high school students surveyed in the Southeast region in 2011 reported being in the same room with someone who was smoking in the past 7 days.<sup>v</sup>

### **Tribal Resolutions**

Several tribes across Alaska have adopted 100% comprehensive model smokefree or tobacco-free resolutions. In the Southeast region, the Chilkat Indian Tribe (Haines), the Petersburg Indian Association and the Skagway Tribal Council all have smokefree workplace Tribal resolutions. The Native Village of Hydaburg has adopted a tobacco-free workplace Tribal resolution; although there is an exemption for bingo halls. Alaska Native Brotherhood and Alaska Native Sisterhood Grand Camp and the Organized Village of Kasaan both have adopted Tribal resolutions in support of statewide smokefree workplaces.<sup>vi</sup>

### **Smokefree Workplace Laws**

Six smokefree workplace laws have passed in the Southeast region through December 31, 2012, as described in Table 3. Four of these laws are 100% comprehensive, covering all workplaces, restaurants and bars with no exemptions.

**Table 3.** Smokefree Workplace Laws Through December 31, 2012 in the Southeast Region

Jurisdiction	Date	Law covers the following:		
		Workplaces	Restaurants	Bars
Haines Borough	2009	Yes	Yes	Yes
Juneau	2008	No	Yes	Yes
Klawock	2007	Yes	Yes	Yes
Petersburg	2010	Yes	Yes	Yes
Sitka	2005	Yes	Yes	No
Skagway Borough	2011	Yes	Yes	Yes

Source: State of Alaska Tobacco Prevention and Control Program

### Regional Housing Authorities

Public housing residents often have limited housing choices and without smokefree policies in place, their housing options may include secondhand smoke exposure. In July 2009, the US Department of Housing and Urban Development (USD-HUD) published a notice strongly encouraging implementation of smokefree policies in public housing to advance tobacco prevention and control efforts among low income and vulnerable populations.<sup>vii</sup> There are 8 regional housing authorities in the Southeast region detailed in Table 4. According to TPC Program records, as of December 31, 2012, Ketchikan Indian Community Housing Authority, Petersburg Indian Association and the Tlingit-Haida Regional Housing Authority are the only regional housing authorities in the Southeast region with a comprehensive smokefree policy that includes all residents, visitors and staff within all housing authority property.

**Table 4.** Regional Housing Authorities in the Southeast Region

Regional Housing Authority	Smokefree Policy?
Baranof Island Housing Authority	No
Chilkat Indian Village	No
Hoonah Indian Association	No
Hydaburg Cooperative Association	No
Ketchikan Indian Community Housing Authority	Yes
Metlakatla Housing Authority	No
Petersburg Indian Association	Yes
Tlingit-Haida Regional Housing Authority	Yes

Source: Alaska Community Database (Department of Commerce, Community, and Economic Development) and State of Alaska Tobacco Prevention and Control Program

## PREVENT THE INITIATION OF TOBACCO USE

### Youth Prevention Indicators

The YRBS data offer key indicators for tracking youth initiation of tobacco use and youth perceptions of the social norms around tobacco use. An estimated 4% of high school students surveyed in the Southeast region used some type of tobacco (either cigarettes or smokeless tobacco) on school property within the past 30 days in 2011. Although nearly all of the youth reported that their parents would consider it wrong for them to smoke cigarettes, over 10% thought that smoking one or more packs per day posed no or slight risk to their health.

**Table 5.** Youth Tobacco Prevention Indicators, Southeast Region, 2011

	<b>Percent (%) (Total Respondents)</b>
Used tobacco on school property*	4.2% (1,184)
Initiated smoking prior to age 13	8.5% (1,115)
Perceives no or only slight risk from smoking**	11.7% (1,187)
Thinks parents consider it wrong for child to smoke	97.4% (1,166)

\*Smoking or using smokeless tobacco within the past 30 days.

\*\*Students who think smoking one or more packs of cigarettes per day is no or slight risk.

Source: Alaska Youth Risk Behavior Survey, 2011

### Tobacco Taxes

Numerous economic studies have documented that tobacco tax or price increases reduce both adult and underage smoking. Alaska's statewide cigarette tax is \$2.00 for a pack of 20 cigarettes and 75% of wholesale price of other tobacco products, including cigars and chewing tobacco. Municipalities and boroughs are allowed to also levy a tax on other tobacco products, including cigars and chewing tobacco. As of December 31, 2012, 2 cigarette taxes have passed in the Southeast region, in the cities of Juneau and Sitka (\$1.00/pack).

**Table 6.** Tobacco Tax Rates Through December 31, 2012 in the Southeast Region

<b>Community</b>	<b>Local Tax</b>	<b>State Base Tax</b>	<b>Total Tax per Pack</b>	<b>Other Tobacco Product Tax</b>
Sitka	\$1.00	\$2.00	\$3.00	45% of wholesale
Juneau	\$1.00	\$2.00	\$3.00	45% of wholesale

Sources: Sitka General Code, Chapter 4.26, City and Borough of Juneau, Alaska, Code of Ordinances, Chapter 69.08

## School District Policy Reports

In an effort to promote tobacco-free schools, the TPC Program developed a gold standard tobacco-free schools policy and conducted an analysis of existing school district tobacco policies. Seven school districts have adopted the Gold Standard tobacco-free school district policies. Annette Island School District, Chatham School District, Juneau School District, Mount Edgecumbe High School, Sitka School District, Wrangell Public School District and Yakutat School District have all passed tobacco-free school district policies. (See Table D-2 in Appendix D for more information about the 8 required standard policy elements.)

School policies are subject to change. The policy summaries presented here are current as of November 7, 2012. Table 7 summarizes the number and percent of school districts in the Southeast region that meet the 8 minimum elements of a tobacco-free school policy. Table 8 summarizes the number and percent of school districts in the Southeast region that meet the gold, silver or bronze tobacco-free campus standard. The TPC Program reviews and updates school district tobacco policies quarterly. For the most current regional school district policy report visit <http://www.redegroupp.co/alaska-school-district-reports>.

**Table 7.** School Policy Report for the Southeast Region: Minimum Standard Data Elements Met as of November 7, 2012

<b>Number of School Districts</b>	<b>Percent (%) of School Districts</b>	<b>Minimum Data Element</b>
6	33%	Tobacco-free school district – Minimum standard elements (8 total)
11	61%	Incomplete – Policy lacks 1 or more key elements to meet the tobacco-free school standard
1	6%	Missing – Policy has not been submitted

Source: State of Alaska Tobacco Prevention and Control Program

See Table D-3 in Appendix D for more information about the additional policy elements.

**Table 8.** School Policy Report for the Southeast Region: Gold, Silver or Bronze School Districts as of November 7, 2012

<b>Number of School Districts</b>	<b>Percent (%) of School Districts</b>	<b>Minimum Data Element</b>
6	33%	Gold star – Minimum standard plus at least 10 additional elements
0	0%	Silver star – Minimum standard plus 5 - 9 additional elements
0	0%	Bronze star – Minimum standard plus 1 - 4 additional elements

Source: State of Alaska Tobacco Prevention and Control Program

Table 9 displays the current status of each school district in the Southeast region as of November 7, 2012.

**Table 9.** School Policy Report for the Southeast Region: Current Status as of November 7, 2012

<b>School District</b>	<b>Current Status</b>
Annette Island Schools	Gold Star
Chatham Schools	Incomplete
Craig City Schools	Incomplete
Haines Borough Schools	Incomplete
Hoonah City Schools	Incomplete
Hydaburg City Schools	Missing
Juneau Borough Schools	Gold Star
Kake City Schools	Incomplete
Ketchikan Gateway Borough Schools	Incomplete
Klawock City Schools	Incomplete
Mount Edgecumbe High School	Gold Star
Pelican City Schools	Incomplete
Petersburg City Schools	Incomplete
Sitka Borough Schools	Gold Star
Skagway Schools	Incomplete
Southeast Island Schools	Incomplete
Wrangell City Schools	Gold Star
Yakutat City Schools	Gold Star

Source: State of Alaska Tobacco Prevention and Control Program

## EVIDENCE-BASED TOBACCO CESSATION INTERVENTIONS

### Cessation Indicators

Quitting tobacco provides health benefits at any age.<sup>viii-ix</sup> Additionally, tobacco cessation programs are cost-effective and increase longevity while reducing healthcare costs.<sup>x</sup> In the Southeast region, approximately 60% of adults aged 25 or more who have ever smoked regularly have quit (i.e., quit ratio, as shown in Table 10). Among adults who currently smoke, nearly 60% have attempted to quit smoking in the past 12 months.

**Table 10.** Adult Cessation Indicators, Southeast Region, 2009-2011

	<b>Prevalence (95% CI)*</b>
Quit ratio (among ever smokers age 25 and older)	59.3% (±3.7%)
Attempted to quit (among current smokers)	58.8% (±6.7%)
Quit for 3+ months (among past year smokers)	6.7%† (±5.1%)
Aware of quit line (among current smokers)	78.5% (±7.0%)
Advised to quit by healthcare provider (among smokers who had a healthcare visit in the past year)	79.2% (±7.9%)

\*95% Confidence interval (CI)

†Interpret data with caution. (For more information, see Table E-1 in Appendix E)

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

## Alaska's Tobacco Quit Line

Alaska's Tobacco Quit Line provides free, phone based counseling and nicotine replacement therapy to all Alaskans. In 2012, 3,215 Alaska residents called the quit line, and 12% of the callers (396 callers) were from the Southeast region. Nearly all calls (99%; 393 callers) from the Southeast region were tobacco users who requested a cessation intervention.

**Table 11.** Alaska's Tobacco Quit Line: Summary of Services, Southeast Region, 2012

	Number of Callers (%)
Live transfers*	‡
General questions	‡
Intervention requested	393 (99%)
Materials only	‡
<b>TOTAL</b>	<b>396 (100%)</b>

\*A live transfer to Alere Wellbeing's Commercial Line, which is part of a defined employee benefit package (e.g., ConocoPhillips Alaska, Inc.).

‡Data suppressed because there were less than 5 callers.

Source: Alaska's Tobacco Quit Line, 2012

The majority of tobacco users in the Southeast region who called the quit line to request an intervention were non-Native callers, although there was no gender difference in callers (see Table 12 and 13).

**Table 12.** Alaska's Tobacco Quit Line: Total Number of Tobacco Users Who Requested an Intervention by Sex, Southeast Region, 2012

	Number of Callers (%)
Female	193 (49%)
Male	199 (51%)
<b>TOTAL</b>	<b>392 (100%)</b>

Source: Alaska's Tobacco Quit Line, 2012

**Table 13.** Alaska’s Tobacco Quit Line: Total Number of Tobacco Users Who Requested an Intervention by Alaska Native vs. Non-Native, Southeast Region, 2012

	<b>Number of Callers (%)</b>
Alaska Native	58 (15%)
Non-Native	327 (85%)
<b>TOTAL</b>	<b>385 (100%)</b>

Source: Alaska’s Tobacco Quit Line, 2012

Of the estimated total number of all tobacco users in the Southeast region, approximately 3% called the quit line and requested an intervention in 2012; the comparable national estimate is 2%.<sup>xi</sup>

### **Resources and Systems for Tobacco Cessation Interventions**

The TPC Program works to engage all healthcare systems to implement tobacco control policies consistent with the *U.S. Public Health Services Clinical Practice Guidelines Treating Tobacco Use and Dependence*, including working with all health systems to ask, advise, refer and document tobacco use and follow-up while minimizing barriers to treatment. According to the Alaska Department of Commerce, Community and Economic Development, the Southeast Alaska Regional Health Consortium operates as the regional Native health corporation in the Southeast region. In addition, there are numerous hospitals, clinics, tribal health organizations and community health centers in the Southeast region. There are also a variety of mental health and substance abuse facilities in the region. Appendix E (Table E-2 and E-3) summarizes these healthcare facilities, offering partnership opportunities for tobacco cessation intervention services in the Southeast region.

## APPENDICES

### Appendix A: Overview

**Table A-1.** Community Population in the Southeast Region, 2010

Community	Borough/Census Area	2010 Census Population
Juneau	City and Borough of Juneau	31,275
City and Borough Subtotal		31,275
Sitka	City and Borough of Sitka	8,881
City and Borough Subtotal		8,881
Wrangell	City and Borough of Wrangell	2,369
City and Borough Subtotal		2,369
Yakutat	City and Borough of Yakutat	662
City and Borough Subtotal		662
Covenant Life	Haines Borough	86
Excursion Inlet	Haines Borough	12
Haines CDP*	Haines Borough	1,713
Lutak	Haines Borough	49
Mosquito Lake	Haines Borough	309
Mud Bay	Haines Borough	212
Balance**	Haines Borough	127
Borough Subtotal		2,508
Angoon	Hoonah-Angoon Census Area	459
Elfin Cove	Hoonah-Angoon Census Area	20
Game Creek	Hoonah-Angoon Census Area	18
Gustavus	Hoonah-Angoon Census Area	442
Hobart Bay	Hoonah-Angoon Census Area	1
Hoonah	Hoonah-Angoon Census Area	760
Klukwan	Hoonah-Angoon Census Area	95
Pelican	Hoonah-Angoon Census Area	88

**Table A-1 (continued).** Community Population in the Southeast Region, 2010

Tenakee Springs	Hoonah-Angoon Census Area	131
Whitestone Logging Camp	Hoonah-Angoon Census Area	17
Balance**	Hoonah-Angoon Census Area	119
Census Area Subtotal		2,150
Ketchikan	Ketchikan Gateway Borough	8,050
Koring CDP*	Ketchikan Gateway Borough	4
Saxman	Ketchikan Gateway Borough	411
Balance**	Ketchikan Gateway Borough	5,012
Borough Subtotal		13,477
Skagway CDP*	Municipality of Skagway	920
Balance**	Municipality of Skagway	48
Municipality Subtotal		968
Kake	Petersburg Census Area	557
Kupreanof	Petersburg Census Area	27
Petersburg	Petersburg Census Area	2,948
Port Alexander	Petersburg Census Area	52
Balance**	Petersburg Census Area	231
Census Area Subtotal		3,815
Coffman Cove	Prince of Wales-Hyder Census Area	176
Craig	Prince of Wales-Hyder Census Area	1,201
Edna Bay	Prince of Wales-Hyder Census Area	42
Hollis	Prince of Wales-Hyder Census Area	112
Hydaburg	Prince of Wales-Hyder Census Area	376
Hyder	Prince of Wales-Hyder Census Area	87
Kasaan	Prince of Wales-Hyder Census Area	49
Klawock	Prince of Wales-Hyder Census Area	755
Metlakatla	Prince of Wales-Hyder Census Area	1,405

**Table A-1 (continued).** Community Population in the Southeast Region, 2010

Naukati Bay	Prince of Wales-Hyder Census Area	113
Point Baker	Prince of Wales-Hyder Census Area	15
Port Protection	Prince of Wales-Hyder Census Area	48
Thorne Bay	Prince of Wales-Hyder Census Area	471
Whale Pass	Prince of Wales-Hyder Census Area	31
Balance**	Prince of Wales-Hyder Census Area	678
Census Area Subtotal		5,559
<b>REGION TOTAL</b>		<b>71,664</b>

\*Census designated place (CDP) is the the statistical counterpart of incorporated places and are delineated to provide data for settled concentrations of population that are identifiable by name but are not legally incorporated under the laws of the state. CDPs are delineated cooperatively by state and local officials and the Census Bureau, following Census Bureau guidelines.

\*\*Balance refers to a population that lives in an unincorporated remote or rural area (sometimes referred to as "off the grid").

Source: Alaska Community Database (Department of Commerce, Community, and Economic Development) and US Census

## Appendix B: Adult Tobacco Use

**Table B-1.** Prevalence (and 95% Confidence Interval) of Smoking Among Alaska Adults, Public Health Regions, 2009-2011

	<b>Anchorage/ Mat-Su</b>	<b>Gulf Coast</b>	<b>Interior</b>	<b>Northern</b>	<b>Southeast</b>	<b>Southwest</b>	<b>Statewide Total</b>
All Adults	19.3%† ± 2.0%‡	22.0% 2.3%	22.8% 2.2%	45.9% 5.3%	23.1% 2.6%	32.6% 4.1%	22.1% 1.2%
Alaska Native	32.3% ± 9.1%	34.5% 7.8%	45.5% 7.1%	53.8% 6.0%	36.7% 7.7%	37.5% 5.2%	39.1% 3.4%
Non-Native	18.1% ± 2.0%	20.7% 2.5%	20.1% 2.3%	22.9% 9.9%	20.8% 2.7%	20.1% 5.8%	19.1% 1.3%
Low SES (non-Native)	32.7% ± 5.5%	31.1% 5.7%	34.6% 6.2%	25.5%* 17.5%	41.2% 7.2%	39.7%** 18.6%	33.7% 3.4%
Higher SES (non-Native)	15.2% ± 2.4%	18.8% 3.0%	16.5% 2.5%	24.3% 12.2%	15.5% 2.9%	19.3% 7.1%	16.0% 1.5%
Males	20.6% ± 3.2%	21.1% 3.4%	22.2% 3.1%	51.7% 7.4%	25.0% 3.9%	37.6% 5.9%	23.4% 1.9%
Females	17.9% ± 2.5%	22.9% 3.1%	23.5% 3.1%	37.8% 6.4%	21.2% 3.4%	25.9% 5.3%	20.6% 1.6%
Age 18-29	26.9% ± 5.9%	20.6% 6.8%	29.8% 5.6%	43.8% 11.4%	28.2% 8.4%	41.9% 10.1%	28.6% 3.5%
30-54	19.2% ± 2.6%	25.2% 3.3%	22.2% 3.1%	49.7% 6.9%	26.8% 3.5%	33.5% 5.5%	22.7% 1.6%
55 and older	12.7% ± 2.3%	18.2% 3.1%	16.1% 2.6%	40.5% 9.9%	14.9% 3.0%	19.5% 4.9%	15.3% 1.4%

\*Inadequate sample size for normal approximation. For means and proportions based on commonly occurring events (where  $0.25 < P < 0.75$ ), an estimate is flagged if it is based on a cell size of less than 30 times a "broadly calculated average design effect."

\*\*Inadequate sample size for uncommon or very common events. For proportions below 0.25 or above 0.75, the criteria for statistical reliability is that the cell size be sufficiently large that the minimum of  $nP$  and  $n(1-P)$  be greater than or equal to eight times a broadly calculated average design effect, where  $n$  is the cell size and  $P$  is the estimated proportion. (I.e., an estimate is flagged when  $n < 8 * (\text{avg. design effect}) / \min(P, 1-P)$ ). The coefficient of variation is not used in these cases.

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

**Table B-2.** Prevalence (and 95% Confidence Interval) of Smokeless Tobacco Use Among Alaska Adults, Public Health Regions, 2009-2011

	<b>Anchorage/ Mat-Su</b>	<b>Gulf Coast</b>	<b>Interior</b>	<b>Northern</b>	<b>Southeast</b>	<b>Southwest</b>	<b>Statewide Total</b>
All Adults	3.1%† ± 0.8%‡	6.9% 1.7%	6.5% 1.4%	7.8% 3.1%	3.8% 1.0%	23.0% 3.6%	5.3% 0.6%
Alaska Native	5.1%* ± 3.4%	11.7% 6.3%	10.5% 4.4%	9.9% 4.2%	3.9% 2.1%	32.4% 5.0%	13.3% 2.0%
Non-Native	2.9% ± 0.9%	6.5% 1.8%	6.0% 1.5%	2.7%* 2.3%	3.8% 1.2%	3.1% 1.4%	4.0% 0.6%
Low SES (non-Native)	4.1%* ± 2.4%	5.0% 2.5%	3.9% 2.2%	DNC DNC	4.2%* 2.7%	3.8% 2.4%	4.1% 1.5%
Higher SES (non-Native)	3.0% ± 1.0%	6.6% 2.4%	6.0% 1.7%	3.6%* 3.0%	4.7% 1.8%	3.1%* 1.8%	4.1% 0.7%
Males	5.6% ± 1.6%	12.3% 3.1%	11.1% 2.5%	12.1% 5.1%	7.0% 2.0%	25.3% 5.4%	8.8% 1.1%
Females	0.5%* ± 0.4%	0.9%** 0.7%	1.0%* 0.8%	2.0%* 1.7%	0.3% 0.1%	19.8% 4.7%	1.5% 0.4%
Age 18-29	2.7%* ± 2.1%	9.3%* 5.6%	9.7% 4.0%	14.0%* 8.9%	3.0%* 2.4%	28.4% 9.5%	6.7% 1.7%
30-54	4.2% ± 1.3%	8.7% 2.7%	6.2% 1.7%	6.7% 3.1%	5.6% 1.8%	21.5% 4.4%	6.1% 0.9%
55 and older	1.4%** ± 0.8%	3.2% 1.4%	3.4% 1.2%	2.6%* 2.7%	1.6%** 1.0%	18.8% 6.1%	2.8% 0.6%

DNC: Data Not Collected

\*Inadequate sample size for normal approximation. For means and proportions based on commonly occurring events (where  $0.25 < P < 0.75$ ), an estimate is flagged if it is based on a cell size of less than 30 times a "broadly calculated average design effect."

\*\*Large coefficient of variation. Estimates are flagged if the coefficient of variation (ratio of the standard error to the mean expressed as a percent) is greater than 30.

SOURCE: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

## Appendix C: Eliminating Exposure to Secondhand Smoke

**Table C-1.** Prevalence (and 95% Confidence Interval) of Secondhand Smoking (SHS) Indicators Among Alaska Adults, Public Health Regions, 2009-2011

	<b>Anchorage/ Mat-Su</b>	<b>Gulf Coast</b>	<b>Interior</b>	<b>Northern</b>	<b>Southeast</b>	<b>Southwest</b>	<b>Statewide Total</b>
Has home smoking ban ±	91.2%* 2.0%**	86.3% 3.2%	87.1% 2.5%	89.4% 4.6%	87.3% 3.1%	92.7% 2.8%	89.6% 1.3%
No home SHS exposure ±	91.1% 2.3%	87.2% 3.3%	89.4% 2.3%	89.4% 4.8%	88.3% 3.4%	92.8% 3.5%	90.1% 1.4%
Support for smokefree workplaces ±	82.1% 3.1%	81.7% 3.2%	80.6% 3.0%	85.1% 5.3%	78.2% 3.9%	86.2% 4.7%	81.7% 1.8%
Support for smokefree restaurants ±	82.1% 3.0%	81.1% 3.3%	72.3% 3.7%	84.8% 5.8%	74.6% 4.0%	88.6% 3.9%	80.0% 1.8%
Workplace smokefree policy ±	87.0% 4.3%	82.7% 4.5%	81.7% 4.5%	81.2% 8.1%	84.6% 5.0%	82.3% 7.6%	85.1% 2.7%
No indoor workplace SHS exposure (all workers)† ±	93.1% 2.8%	90.8% 3.8%	90.6% 3.2%	91.8% 5.4%	91.5% 4.5%	95.2% 2.8%	92.3% 1.7%
No indoor workplace SHS exposure (indoor workers) ±	95.2% 2.1%	90.6% 3.0%	92.0% 2.7%	89.5% 6.0%	94.5% 2.7%	96.5% 2.4%	94.0% 1.3%

†Estimate from 2010-2011; not available from earlier years.

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

## Appendix D: Prevent the Initiation of Tobacco Use

**Table D-1.** Youth Tobacco Prevention Indicators, Public Health Regions, 2011

		<b>Anchorage/ Mat-Su</b>	<b>Gulf Coast</b>	<b>Interior</b>	<b>Northern</b>	<b>Southeast</b>	<b>Southwest</b>
Used tobacco on school property*	Percent	6.0%	6.4%	4.5%	20.6%	4.2%	19.7%
	Total Respondents	1,650	1,829	448	737	1,184	378
Initiation of smoking prior to age 13	Percent	9.3%	10.3%	9.4%	23.3%	8.5%	22.1%
	Total Respondents	1,564	1,740	428	685	1,115	359
Perceives no or only slight risk from smoking**	Percent	14.1%	10.6%	9.2%	30.0%	11.7%	23.5%
	Total Respondents	1,660	1,828	457	745	1,187	380
Thinks parents consider it wrong for child to smoke	Percent	98.3%	97.7%	98.5%	95.9%	97.4%	96.9%
	Total Respondents	1,636	1,807	447	705	1,166	375

\*Smoking or using smokeless tobacco within the past 30 days.

\*\*Students who think smoking one or more packs of cigarettes per day is no or slight risk.

Source: Alaska Youth Risk Behavior Survey, 2011

**Table D-2.** School Policy Report for the Southeast Region: Minimum Standard Elements of a Tobacco-Free Policy as of November 7, 2012

<b>Number of School Districts</b>	<b>Percent (%) of School Districts</b>	<b>Policy Elements</b>
8	44%	Prohibits use of tobacco products on all school property (including grounds, buildings, parking areas and residencies where applicable)
15	83%	Prohibits use of tobacco products in school vehicles
7	39%	Prohibits use of tobacco products at any school-sponsored event (on- or off-campus)
6	33%	Defines tobacco to mean all forms of tobacco and tobacco use (all smoking products, smokeless tobacco products and non treatment related nicotine delivery devices)
8	44%	Applies to all students, staff, and visitors
14	78%	Requires the posting of signs informing students, staff and visitors that school grounds are tobacco-free
7	39%	Identifies specific enforcement procedures and consequences for violating school policies
8	44%	Remains in force 24 hours a day, 7 days a week, 365 days a year

Source: State of Alaska Tobacco Prevention and Control Program

**Table D-3.** School Policy Report for the Southeast Region: Additional Policy Elements of a Tobacco-Free Policy as of November 7, 2012

<b>Number of School Districts</b>	<b>Percent (%) of School Districts</b>	<b>Policy Element</b>
16	89%	Includes a rationale for being tobacco-free
15	83%	States that tobacco possession by a person under age 19 is against the law
8	44%	Includes language restricting items from school property that might contribute to tobacco use and acceptability (such as lighters, clothing with logos)
2	11%	Includes a requirement for evidence-based tobacco prevention education for all students
6	33%	Includes provisions against accepting tobacco industry funds or free giveaways
14	78%	Includes language prohibiting tobacco advertising in school buildings and school functions
8	44%	Includes progressive consequences for violating school tobacco policy (such as an education program or in school suspension versus suspension for student's first offense)
3	17%	Includes provisions to refer students and staff to local or statewide programs to help them quit using tobacco
7	39%	Includes language prohibiting distribution of tobacco products
5	28%	Includes language specifically prohibiting tobacco use by contractors
7	39%	Includes procedures for communicating the policy to students
6	33%	Includes procedures for communicating the policy to staff
7	39%	Includes procedures for communicating the policy to visitors

Source: State of Alaska Tobacco Prevention and Control Program

## Appendix E: Evidence-Based Tobacco Cessation Interventions

**Table E-1.** Prevalence (and 95% Confidence Interval) of Cessation Indicators Among Alaska Adults, Public Health Regions, 2009-2011

	<b>Anchorage/ Mat-Su</b>	<b>Gulf Coast</b>	<b>Interior</b>	<b>Northern</b>	<b>Southeast</b>	<b>Southwest</b>	<b>Total</b>
Quit ratio (among ever smokers age 25 and older)	60.7%‡ ± 3.5%§	57.3% 3.6%	58.2% 3.4%	30.8% 5.5%	59.3% 3.7%	47.8% 5.5%	57.8% 2.0%
Attempted to quit (among current smokers)	58.2% ± 6.0%	57.7% 5.8%	57.1% 5.6%	53.1% 8.2%	58.8% 6.7%	56.3% 8.0%	57.5% 3.2%
Quit for 3+ months (among past year smokers)	11.0%* ± 5.3%	9.2% 5.1%	7.6%† 4.6%	1.9%*† 2.2%	6.7%† 5.1%	7.6%† 5.0%	8.9% 2.8%
Aware of quit line (among current smokers)	69.8% ± 9.0%	80.7% 6.7%	66.6% 8.9%	53.6% 13.6%	78.5% 7.0%	71.6% 11.9%	70.4% 4.8%
Advised to quit by healthcare provider (among smokers who had a healthcare visit in the past year)	69.7%* ± 11.6%	64.9% 10.3%	61.6% 10.9%	67.7% 19.2%	79.2% 7.9%	56.8% 15.8%	67.9% 6.2%

\* Inadequate sample size for normal approximation. For means and proportions based on commonly occurring events (where  $0.25 < P < 0.75$ ), an estimate is flagged if it is based on a cell size of less than 30 times a "broadly calculated average design effect."

† Large coefficient of variation. Estimates are flagged if the coefficient of variation (ratio of the standard error to the mean expressed as a percent) is greater than 30.

Source: Alaska Behavioral Risk Factor Surveillance System, 2009 – 2011

**Table E-2.** State of Alaska (Funded by the Division of Behavioral Health) Mental Health and Substance Abuse Facilities in the Southeast Region, FY13

Agency	Service Area	Provider Type		
		Community Behavioral Health Center	Mental Health	Substance Abuse
Alaska Island Community Services	Wrangell	•	•	•
Catholic Community Services, Inc.	Juneau		•	
Community Connections	Ketchikan		•	
Gastineau Human Services	Juneau			•
Gateway Center for Human Services (Akeela, Inc.)	Ketchikan	•	•	•
Juneau Alliance for Mental Health, Inc.	Juneau	•	•	
Juneau Youth Services	Juneau		•	•
Ketchikan Indian Community	Ketchikan			•
Lynn Canal Counseling Services	Haines	•	•	•
Metlakatla Indian Community	Metlakatla		•	
Petersburg Mental Health Services	Petersburg	•	•	
Polaris House	Juneau		•	
Rainforest Recovery Center	Juneau			•
Sitka Counseling and Prevention Services	Sitka	•	•	•
SouthEast Alaska Regional Health Consortium	SEARHC Region	•	•	•
SouthEast Alaska Regional Health Consortium - JYS	Juneau		•	
Youth Advocates of Sitka	Sitka		•	
Alaska Youth and Family Network	Statewide		•	

Source: State of Alaska Department of Behavioral Health

**Table E-3.** Healthcare Systems in the Southeast Region; Department of Commerce, Community and Economic Development Listing\*

<b>Healthcare Organization</b>	<b>Borough/Census Area</b>
Healthcare Organization	Borough/Census Area
Alcia Roberts Medical Center	Prince of Wales-Hyder Census Area
Bartlett Regional Hospital	City and Borough of Juneau
Craig Family Medical Clinic	Prince of Wales-Hyder Census Area
Dahl Memorial Medical Clinic	Municipality of Skagway
Ethel Lund Medical Center	City and Borough of Juneau
Front Street Clinic	City and Borough of Juneau
Gustavus Community Clinic	Hoonah-Angoon Census Area
Haines Health Center	Haines Borough
Haines Medical Clinic	Haines Borough
Hoonah Health Center	Hoonah-Angoon Census Area
Hoonah Medical Clinic	Hoonah-Angoon Census Area
Hydaburg Health Center	Prince of Wales-Hyder Census Area
Jessie Norma Jim Health Center	Hoonah-Angoon Census Area
Juneau Public Health Center	City and Borough of Juneau
Kake Health Center	Petersburg Census Area
Kasaan Health Center	Prince of Wales-Hyder Census Area
Ketchikan Indian Community Tribal Health Clinic	Ketchikan Gateway Borough
Ketchikan Public Health Center	Ketchikan Gateway Borough
Klukwan Health Center	Hoonah-Angoon Census Area
PeaceHealth Ketchikan Medical Center	Ketchikan Gateway Borough
PeaceHealth Medical Group - Ketchikan Clinic Carlanna Road	Ketchikan Gateway Borough
PeaceHealth Medical Group - Ketchikan Clinic Tongass Ave	Ketchikan Gateway Borough
PeaceHealth Medical Group Prince of Wales	Ketchikan Gateway Borough
Pelican Health Center	Hoonah-Angoon Census Area

**Table E-3 (continued).** Healthcare Systems in the Southeast Region; Department of Commerce, Community and Economic Development Listing\*

Petersburg Medical Center	Petersburg Census Area
Petersburg Medical Center	Petersburg Census Area
Petersburg Public Health Center	Petersburg Census Area
Prince of Wales Public Health Center	Prince of Wales-Hyder Census Area
S'áxt' Hít / Mt. Edgecumbe Hospital	City and Borough of Sitka
SEARHC Klukwan Clinic	Hoonah-Angoon Census Area
Seaview Medical Center	Prince of Wales-Hyder Census Area
Seaview Medical Center	Prince of Wales-Hyder Census Area
Sitka Community Hospital	City and Borough of Sitka
Tenakee Springs Health Clinic	Hoonah-Angoon Census Area
Thorne Bay Clinic	Prince of Wales-Hyder Census Area
TideLine Clinic (AICS)	City and Borough of Wrangell
U.S. Coast Guard Base Ketchikan Clinic	Ketchikan Gateway Borough
Wrangell Medical Center	City and Borough of Wrangell
Wrangell Public Health Center	City and Borough of Wrangell
Yakutat Community Health Center	City and Borough of Yakutat

Source: Alaska Community Database (Department of Commerce, Community, and Economic Development)

\*NOTE: The healthcare system data presented in Table E-3 were compiled by the Department of Commerce, Community, and Economic Development. The list may not be comprehensive and additional healthcare clinics and hospitals may exist in the region beyond those included in this table.

## Appendix F: Data Sources

### *Alaska's Tobacco Quit Line*

The State of Alaska contracts with Alere Wellbeing to provide quit line services to the state. Each month, Alere Wellbeing provides monthly, quarterly and annual reports on general utilization. The state also receives monthly utilization datasets. Quit line utilization data is then analyzed to produce detailed unique reports quarterly and annually.

To calculate the quit line reach ratio, we used the total number of quit line callers who were a tobacco user and requested an intervention as the numerator. To obtain the denominator, we used SPSS Complex Samples to obtain raked weighted estimates of the tobacco use population in each public health region from the Alaska Behavioral Risk Factor Surveillance System (2011).

### *Youth Behavioral Risk Factor Surveillance System (YRBS)*

The YRBS is a systematic survey of high school students that assesses prevalence of behaviors related to the leading causes of mortality, morbidity and social problems among youth. The Centers for Disease Control and Prevention sponsors national and state surveys every 2 years, most recently in 2011.

The statewide Alaska YRBS is conducted using a two-stage sampling design. The sampling frame is regular public schools containing grades 9, 10, 11, or 12. Schools are selected first with a probability of inclusion proportional to the size of their enrollment. Once a school is chosen, classes are selected, with each student having an equal opportunity for inclusion. From 2003 through 2011, active parental consent was required for each student participating in the YRBS. On the appointed survey day students completed written questionnaires and returned them in class in unmarked, sealed envelopes.

In a typical YRBS administration, about 1,250 to 1,350 students are surveyed from about 40 to 45 high schools that are scientifically selected to represent all public high schools (excluding boarding schools, alternative schools, correspondence and home study schools, and correctional schools) in Alaska. These results are considered to be representative of Alaska's more than 33,000 high school students grades 9-12 in traditional public high schools. Data are weighted to reflect the true distribution of Alaska high school students by gender and grade level, but not by region of the state.

The traditional school-based YRBS does not estimate risk behaviors associated with youth who drop out of school or do not attend school. However, for the first time in 2009, about 1,000 students from 15 alternative high schools in Alaska were surveyed to evaluate and address the health risks of this unique population. This process was repeated in 2011. Further information about the YRBS, including survey results for the statewide traditional sample, the alternative schools sample and the correctional schools sample is available at <http://www.hss.state.ak.us/dph/chronic/school/YRBSresults.htm>.

### Reporting by Region

With the 2011 YRBS data, regional information is available for public health program planning for the first time. For regional reporting, the sampling frame is considered to be 'ad hoc', because it includes all regular public schools containing grades 9, 10, 11, or 12 who participated in the

survey, whether they were part of the statewide official sample, or chose to participate for other reasons. Schools were not systematically and randomly selected and the regional group of participants may not be very representative of schools within their region. However, in each region, students from 2 or more of school districts participated in the survey.

Data were weighted by school enrollment by gender and grade only if the participation rate for the school achieved the 60% response rate established by the CDC for samples or the 50% response rate when all eligible students are surveyed. Not all of the participating schools met these requirements. Therefore, the regional estimates are based on a combination of weighted and unweighted responses. Due to the sampling limitations, confidence intervals are not assessed for these regional data.

The regional YRBS data are based upon aggregated school districts and do not reveal information on a single school district. Prevalence rates are based upon a minimum of 100 responses or the results are suppressed as Data Statistically Unreliable (DSU). Based upon these measures to protect the anonymity of school districts and students, the data may be publicly distributed.

#### Reporting by Race Group Within Region

In this profile, we report race/ethnicity by whether the survey participant reported being Alaska Native or not. All YRBS survey participants who report being Alaska Native, either alone or in combination with other race groups or Hispanic ethnicity, are categorized in this report as being Alaska Native. We combine all other race groups to report a category "non-Native". This category includes students who report being White, Hispanic, African American, Asian, Hawaiian or Other Pacific Islander, or who report multiple race groups (except for Alaska Native). Those who did not report a race group are not included in the race group reporting.

#### *Behavioral Risk Factor Surveillance System (BRFSS)*

The BRFSS is an anonymous telephone survey conducted by the Alaska Division of Public Health in cooperation with the Centers for Disease Control (CDC). It aims to estimate the prevalence of behavioral risk factors in the general population that are known to be associated with the leading causes of morbidity and mortality in adults. The BRFSS has operated continuously in Alaska since it began in 1991.

The BRFSS uses a probability (or random) sample in which all Alaska households with landline telephones have a known, nonzero chance of selection. The sample is stratified into regions, with roughly equal numbers of interviews conducted in each region. This method deliberately over-samples rural areas of the state. Respondents are randomly selected from among the adult members of each household reached through a series of random telephone calls. Historically, those living in institutions (i.e., nursing homes, dormitories) are not surveyed. In 2011, the sample was stratified into 6 geographic regions. In addition, the sampling frame was expanded to include cell phones as well as landline or household phones. This step was important because the proportion of households served only by cellular telephones has increased rapidly. By June 2010, about 20% of Alaska households were cell-only.<sup>xii</sup> In 2011, Alaska's cell phone sample was large enough to include it in weighting and reporting of data.

Interviews are conducted by trained interviewers during weekdays, evenings and weekends throughout the year. In addition to tobacco use, the BRFSS questionnaire covers such topics as general health status, healthcare access, nutrition, physical activity, diabetes, alcohol use,

women's health, injury prevention and HIV/AIDS awareness. There are also questions on the demographic characteristics of respondents.

Alaska presently conducts 2 BRFSS surveys: the standard BRFSS and a supplemental BRFSS. The supplemental survey contains most of the additional tobacco-related questions, some of which have been adapted from the CDC's Adult Tobacco Survey. Both surveys are conducted throughout the year, using separate samples drawn using the same methodology. In 2011, approximately 210 Alaska adults were interviewed each month for the standard BRFSS, to reach an annual sample size of 2,500 (500 per region); the same number were interviewed for the supplemental BRFSS. Because sample size is lower per region and some subpopulation reporting groups, data from 2009 to 2011 have been combined to report some key indicators.

BRFSS data are weighted to adjust the distribution of the sample data so that it reflects the total population of the sampled area, and to compensate for the over-representation or under-representation of persons in various subgroups. Beginning with the 2011 BRFSS, the CDC is using a new weighting method known as iterative proportional fitting, or raking. Raking allows for the inclusion of several key demographic factors in adjusting survey data to the adult population totals. The changes that have been made will help ensure that the BRFSS can continue to be a valuable source of information for health planning and improvement.

Although point estimates produced when cell phones are included in the sample and weighting is done by raking differ somewhat from those previously reported using old methods, the differences are often minimal. To provide additional context for interpretation about changes in prevalence estimates over time, raking was applied to data from 2007 and 2010, and data including both landline and cell phone respondents will be available from 2011 on.

Both the standard and supplemental BRFSS are weighted (separately) for analysis of items that occur only in 1 version. In addition, a combined dataset (standard plus supplemental) is created and weighted for analysis of questions that occur in both versions, so that some data can be reported for a total of about 5,000 survey respondents each year since 2004. The larger sample sizes allow for more precision in the estimates. For tobacco-related items, this includes smoking and SLT use prevalence.

#### Regional Reporting

Alaska Public Health Regions were defined using borough designation. Although the BRFSS survey data do not provide enough representation for reporting by most of the individual boroughs, combining boroughs provides a useful geographic factor for analyses.

Regional groups for this report are as follows:

- 1) Anchorage/Mat-Su – Municipality of Anchorage and Matanuska-Susitna Borough
- 2) Gulf Coast – Kenai Peninsula Borough, Kodiak Island Borough and Valdez-Cordova Census Area
- 3) Interior – Denali Borough, Fairbanks North Star Borough, Southeast Fairbanks Census Area and Yukon-Koyukuk Census Area
- 4) Northern – Nome Census Area, North Slope Borough, and Northwest Arctic Borough

- 5) Southeast – Haines Borough, Hoonah-Angoon Census Area, Juneau City and Borough, Ketchikan Gateway Borough, Petersburg Census Area, Prince of Wales-Hyder Census Area, Sitka City and Borough, Skagway Municipality, Wrangell City and Borough, and Yakutat City and Borough
- 6) Southwest – Aleutians East Borough, Aleutians West Census Area, Bethel Census Area, Bristol Bay Borough, Dillingham Census Area, Lake and Peninsula Borough and Wade Hampton Census Area

#### Reporting by Race Group

Information by race group is reported by Alaska Native and non-Native status. For this report, Alaska Native includes all survey respondents who report “Alaska Native/American Indian” as their primary or only race group. Those who report being Hispanic or reported their race as something other than Alaska Native or American Indian are included in the “non-Native” group.

#### Data Suppression Guidelines

In this report BRFSS information is suppressed or flagged based on statistical guidelines developed by Alaska’s Division of Public Health in the Department of Health and Human Services, which are based upon the national Joint Policy of Variance Estimation and Statistical Reporting Standards for the National Health and Nutrition Examination Survey (NHANES-III) and the Continuing Survey of Food Intake by Individuals (CSFII) Reports. An asterisk is used to indicate that the estimate may lack statistical precision. Estimates are flagged if the coefficient of variation (ratio of the standard error to the mean expressed as a percent) is greater than 30. In some cases, the flag also denotes that estimates are based on an inadequate sample size, as determined by whether the event, or risk factor, is very common, common or very uncommon. Finally, information is suppressed if the unweighted sample size for the denominator (N) is less than 30, or if the numerator (n) is less than 5.

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