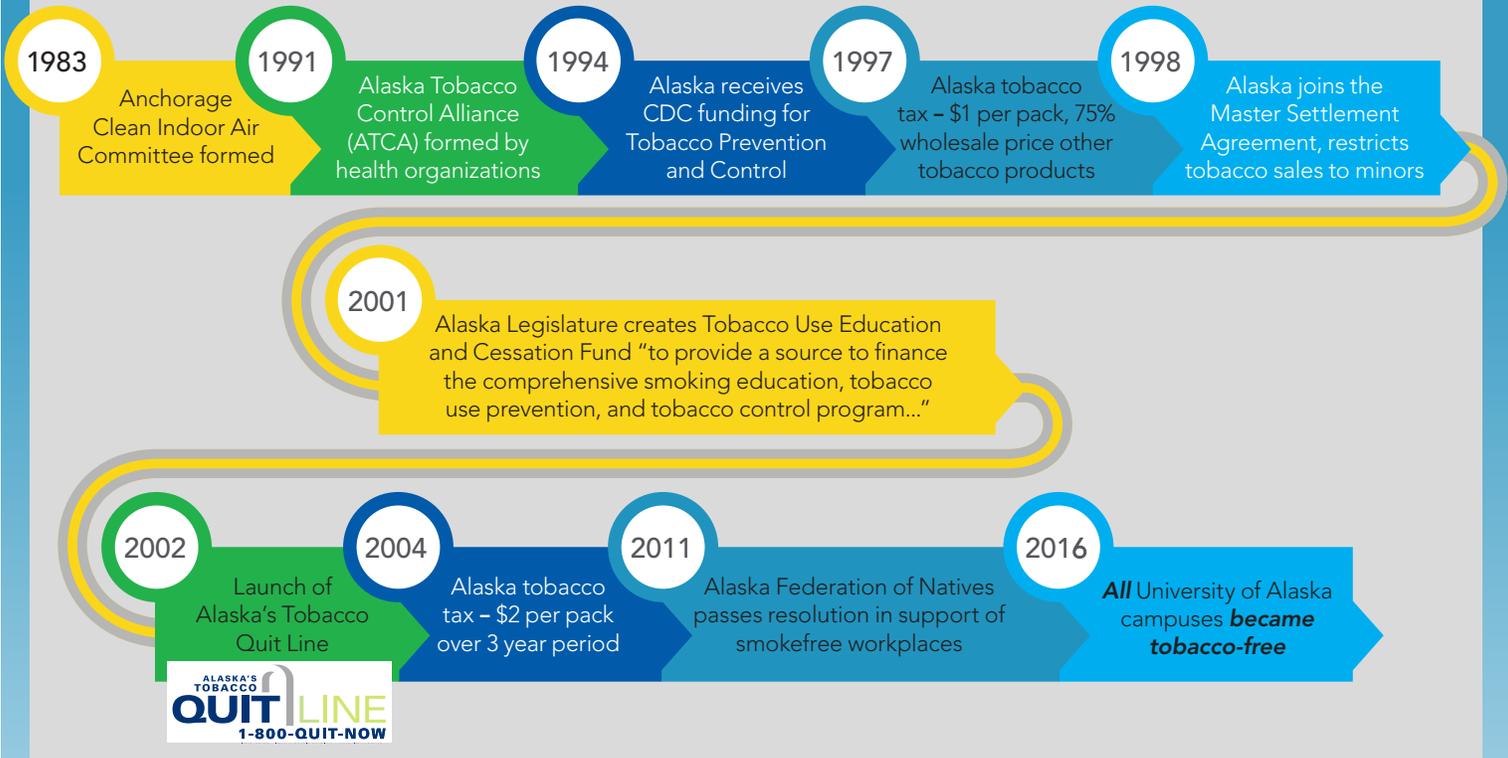
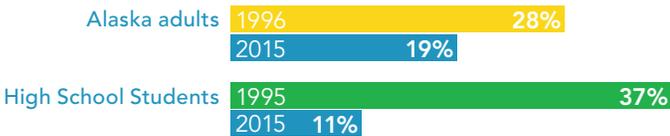


Timeline of Tobacco Prevention in Alaska – 1983-2016



Percentage of Alaska Adults and High School Students Who Smoke, by Year, 1995-2015



Source: Alaska Behavioral Risk Factor Surveillance System (BRFSS) Combined File, Alaska Youth Risk Behavior Survey (YRBS). Alaska YRBS data are only available for 1995, 2003, and 2007 to present. BRFSS estimates for 2007 and later use a newer weighting method; see Appendix B for more information.



The Leading Preventable Cause of Disease & Death

Smoking remains the leading preventable cause of premature disease and death in the United States.¹ As more diseases are linked to tobacco use, the number of tobacco-related deaths have also increased – to nearly half a million annually in the U.S. Evidence now links smoking to diseases of nearly all organs of the body. More recently recognized smoking-related diseases include age-related macular degeneration, diabetes, colorectal cancer, liver cancer, tuberculosis, erectile dysfunction, cleft lip and cleft palate in infants, ectopic pregnancy, rheumatoid arthritis, and impaired immune function.¹ This new information allows us to better inform decision makers of the burden of tobacco use.

Nationwide, every year there are approximately 480,000 smoking-related deaths, of which 41,000 are caused by secondhand smoke. Exposure to secondhand smoke is now causally associated with increased risk for stroke, adding to the already-known effects of coronary heart disease, lower respiratory illness, sudden infant death syndrome (SIDS), reproductive effects in women, low birth weight, impaired lung function, and lung cancer.¹

Given the increased number of diseases linked to smoking, we now estimate that 680 Alaskans died every year due to smoking alone (not including exposure to secondhand smoke) between 2011 and 2015.

Strategy, Commitment & Action

Progress is being made in Alaska's ongoing work to address the leading cause of preventable death. The comprehensive Alaska Tobacco Prevention and Control (TPC) program continues to be resolute and strategic

in addressing the impacts of tobacco use. Strategies include engaging local health partners and advocates to employ evidence-based strategies in more than 300 communities across the state, educating the public of the health effects of tobacco use and exposure to secondhand smoke, and providing a confidential and accessible cessation service with free nicotine replacement therapy.

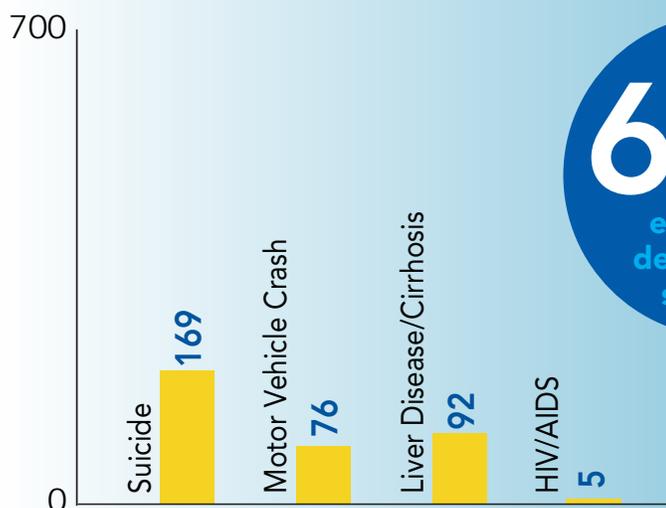
The TPC program provides technical assistance to health care organizations to implement proven strategies to increase tobacco screening and refer their patients to cessation services.

The TPC program also provides education to grantees and partners on strategies that reduce youth initiation, including price increases on tobacco products, placement of tobacco advertising, and tobacco-free campus policies for K-12 schools and post-secondary campuses.



As a result of the TPC program's efforts, Alaskans are taking action. Communities are changing norms by embracing policies that prevent youth from using tobacco, help smokers of all ages quit, and eliminate exposure to secondhand smoke in Alaska, with the end goals of reducing tobacco-related disparities, saving lives, and saving dollars.

Deaths Due to Selected Causes Per Year, Alaska 2011-2015²



(stroke) | Heart attack | Cancer | Bladder cancer | Cervical cancer | Esophageal cancer | Kidney cancer | Laryngeal cancer | Leukemia | Lung cancer | Oral cancer | Pancreatic cancer | Stomach cancer | Asthma | Respiratory infection (e.g. pneumonia) | Impaired lung growth | Early onset lung function decline | Reduced fertility | Low birth weight Pregnancy complications | Sudden Infant Death Syndrome | Blindness | Cataracts | Erectile dysfunction | Hip fractures | Dementia | Chronic obstructive pulmonary disease²

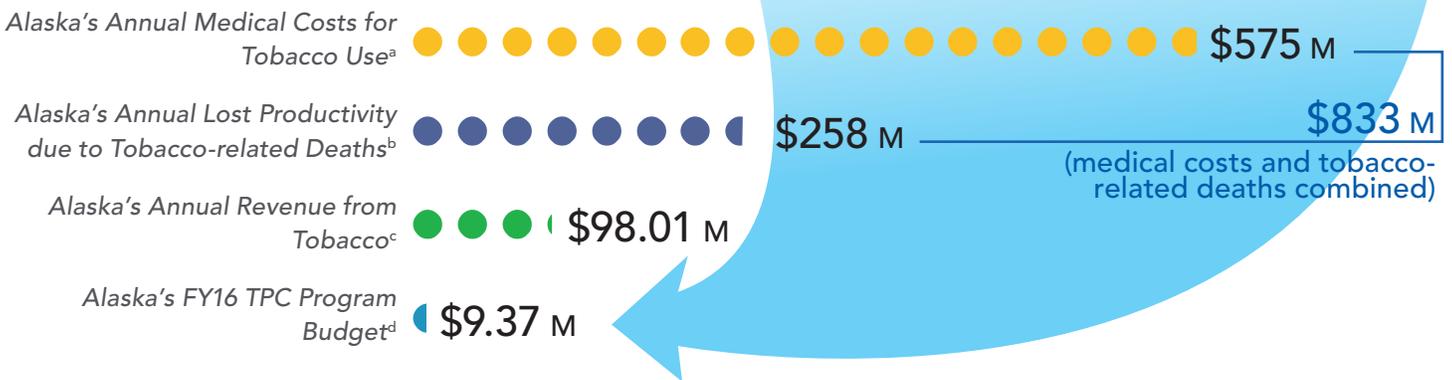
Fiscal Year 2017

“The purpose of the Tobacco Use Education and Cessation Fund is to provide a source to finance the comprehensive smoking education, tobacco use prevention, and tobacco control program...” (AS 37.05.580)

— HCS SB 1001 (FIN) am H, (enacted June 2004), The Tobacco Use Education and Cessation Fund was created to receive a small portion of the state’s tobacco-derived funds annually, which are then available for appropriation to support tobacco prevention efforts.

Cost of tobacco use, tobacco-derived revenue, investment in tobacco prevention (dollars in millions – M)

Alaska’s FY17 TPC program budget of \$9.37 million – or \$12.66 per capita (CDC recommends \$14 per capita) based on 2017 population estimate - and the cost of tobacco use to Alaska along with the state’s Tobacco-Derived Revenue, are shown below. Alaska’s annual losses due to medical costs and tobacco-related deaths are \$833 million combined.



^a Calculation based on smoking-attributable fractions of medical expenditures developed by CDC in 2004 and used in the 2014 Surgeon General Report, adjusted to 2014 dollars based on percent of annual increases in the SAE estimates. This calculation excludes the 9.6% of costs for services delivered to those 19 years or younger.³

^b Calculation based on methods from the 2014 Surgeon General report.¹ Estimates for lifetime productivity (total and market) were obtained from Grosse et al⁴ and updated to 2013 dollars using the Employment

Cost Index. Underestimated - does not include sickness or secondhand smoke-related deaths.

^c Annual Revenue equals FY17 taxes on tobacco products of \$68 million, plus FY17 Master Settlement payments of \$30.1 million (Revenue Sources Book, Fall 2017).

^d FY17 Tobacco Use Education and Cessation Fund appropriation of \$8.43 million plus FY17 CDC grants of \$.94 million.



Alaskans Adopt Tobacco-free & Smokefree Policies

It is no surprise that smokefree policies continue to be adopted and updated - currently the vast majority of Alaskans, including those who smoke, agree that:

1. secondhand smoke is harmful (**93% all adults and 85% smokers**),
2. **ALL** indoor work areas should be smokefree (88% and 76%) and
3. people should be protected from secondhand smoke (**90% and 84%**).²

Secondhand smoke is harmful



All indoor work areas should be smokefree



People should be protected from secondhand smoke



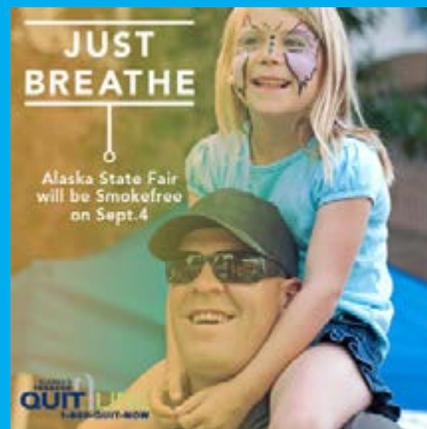
Smokefree air – protection from e-cigarette aerosol (“vapor”)

The TPC program has delivered sustained public education over the past several years regarding the health harms from the toxic elements in e-cigarette aerosol. This effort has supported the increase in smokefree and tobacco-free policies adopted across Alaska that include protection from e-cigarette aerosol. In FY17 there were 18 new or updated policies, in the following categories - tribal policy, school districts, businesses, multi-unit housing, community workplaces and events - with a majority prohibiting use of e-cigarettes.



Smokefree Alaska Fairs

In 2017 the **Alaska State Fair** celebrated its second year with a completely smokefree environment during the entire fair. Following suit, in 2017 program grantees National Council on Alcoholism & Drug Dependence (NCADD) and SouthEast Alaska Regional Health Consortium (SEARHC), members of the Southeast Partnership regional coalition, supported the **Southeast Alaska State Fair in Haines** to implement a smokefree policy for the entire fair.⁵



Smokefree Multi-unit Housing

Added to Alaska's roster of smokefree multi-unit housing are 3 properties of Kodiak Island Housing Authority, Neighborworks Anchorage properties, Wrangell City Apartments, and the Wrangell Senior Apartments.



since 2007 **223**

Smokefree & Tobacco-Free Tribes

A total of **136** tribes in Alaska have adopted smokefree and tobacco-free resolutions. This includes 58% (135) of the **229** federally recognized tribes in Alaska, along with one tribe not yet federally recognized.⁵

136
Alaska Tribes with resolutions

TOBACCO FREE

NO TOBACCO USE INCLUDING ELECTRONIC CIGARETTES ON PROPERTY OR WITHIN 20 FEET OF ENTRANCE

Alaska Tobacco Prevention Policies

Public Health Region View

Statewide Outreach Partners

- American Lung Association in Alaska
- Alaska School Activities Association
- Rural Alaska Community Action Program
 - Headstart
 - AmeriCorps RAY Volunteers
 - Youth Ambassadors
- Alaska Native Tribal Health Consortium – Behavioral Health Program

Legend

- Tribal Tobacco-free/Smokefree Resolution [136 out of 229]
- Strong Community Smokefree Workplace Law [18]

Tobacco-Free School Districts

Complete policies must include elements that protect:

- all students, staff and visitors on
- all school grounds and school sponsored events
- at all times

Gold, Silver and Bronze awards reflect increasing protective elements, with Gold as the desired status.

Alaska's 54 School District Policies:

- Gold (35)
- Silver (5)
- Bronze (2)
- Incomplete (11)

As of 12-13-17



Southwest Partners

- Yukon-Kuskokwim Health Corporation
- Bristol Bay Area Health Corporation
 - Aleutian Pribilof Island Association
- Southcentral Foundation



Northern Region Partners

Maniilaq Association
 Norton Sound Health Corporation
 North Slope Borough

Interior Region Partners

Tanana Chiefs Conference
 Railbelt Mental Health & Addictions
 American Lung Association in Alaska

Southcentral Region Partners

Alaska Family Services/Akeela Inc.
 Mat-Su Borough School District
 American Lung Association in Alaska
 University of Alaska Anchorage
 – Department of Health Sciences

Gulf Coast Region Partners

Kenaitze Indian Tribe
 Chugachmiut, Incorporated
 – Kenai Peninsula Borough School District Alternative Program
 Kodiak Area Native Association
 Copper River Native Association

Southeast Region Partners

National Council on Alcoholism & Drug Dependence
 Southeast Prevention Services
 Petersburg Indian Association
 SouthEast Alaska Regional Health Consortium
 Hoonah Indian Association

Tobacco-Free Schools, Businesses, Organizations

- The American Lung Association (ALA), following up on the successful campaign for a tobacco-free University of Alaska campus (led by student leaders and professors), provided support to the Alaska Pacific University (APU) student leaders, who achieved a unanimous vote of the APU Board of Directors to implement a smoke- and tobacco-free campus by August 2017.⁵
- Out of Alaska's 54 public school districts, 42 now have tobacco-free policies in place, with Nome, Unalaska, and Kashunamiut school districts added in FY17.⁵
- The Alaska School Activities Association continues to engage community partners, most recently the Alaska Association of Student Governments, to implement tobacco-free policies in all Alaska school districts.⁵
- Organizations adopting or enhancing a tobacco-free campus policy include: Wrangell's Parks and Recreation, and the Wrangell Bearfest Marathon, the North Slope Borough Health Department, and the Camai Festival in Bethel.⁵
- The Denali region saw 5 new workplaces adopt smokefree policies: Alaskan Coffee Bean, Denali Glacier Scoops, Park Mart, Subway, and Rapid Exposure Photo lab.⁵
- Smokefree environment policies were adopted or updated by more than 20 healthcare campuses, most recently the Yukon-Kuskokwim Health Corporation, the Ketchikan Indian Community Tribal Health Clinic, Central Peninsula Hospital Serenity House, the Aleutian Pribilof Island Association, SouthEast Regional Health Corporation, and Anchorage Community Mental Health Services – notably the largest community mental health provider in Alaska. Most campus policies also prohibited the use of e-cigarettes.⁵

BENEFITS OF BEING A TOBACCO-FREE CAMPUS

By joining the ranks of the more than 1,500 U.S. colleges and universities that have implemented smokefree/tobacco-free campus policies, the University of Alaska is:

CREATING a healthier learning/work environment free from exposure to the toxic chemicals found in secondhand smoke

BUILDING a supportive environment that will reduce tobacco use initiation among the student body population and support the majority of tobacco users who are interested in quitting

BETTER PREPARING STUDENTS to enter today's workforce where tobacco-free policies have become the norm

EXPECTING TO SEE A REDUCTION in facilities/maintenance cleaning costs associated with cigarette butt litter disposal and fire damage

HOPING in the long term, to see a reduction in employee medical insurance costs associated with the treatment of tobacco-related disease

Grant Community Outreach

TPC program grantees engage more than 300 communities across Alaska through education with local media, supporting coalition events, and providing model policies and cessation materials. The grantees work in multiple strategies to increase access to evidence-based cessation treatments, reduce disparities experienced by priority populations, and reduce youth access to tobacco products. Together with the TPC program, these grantees have the ability to impact their communities by introducing evidence-based strategies to educate and provide awareness of the health harms of tobacco use.⁵

Youth engagement

- **RurAL CAP** continues to expand their tobacco prevention outreach across rural Alaska by:
 - Training youth leaders as Teen Ambassadors whose projects and leadership efforts engage their communities and schools in tobacco prevention, cessation, and policy development. Across Alaska, the most recent youth participants for this program came from Nenana, Hooper Bay, Soldotna, Kenai, Eagle, Fairbanks, Anchorage, Selawik, Manokotak, Kotzebue, New Stuyahok, Levelock, Chalkytitsik, Iguigig, Chevak, Kotlik, Stebbins, Tetlin, Russian Mission, and Brevig Mission.
 - Publishing a newsletter that reaches rural Alaska communities that includes cessation and prevention information and features highlights of the teen ambassador projects.
- Nenana's Railbelt Mental Health and Addictions' "People In Need of Knowledge (PINK)" youth movement has fostered a number of youth leaders. Most recently, student Leena Robinson was honored with the Prudential Spirit of Community Award at their national ceremony in Washington D.C. She was also recognized by the Alaska Legislature and Alaska's Spirit of Youth program.
- The North Slope Borough Health Department's Tobacco Prevention and Control program partnered with the borough's high school football team, The Barrow Whalers, to tackle tobacco use in Utqiagvik youth. "We taught our football players that putting tobacco in your body will limit their athletic ability to do their best on the field. Also, we want our players to be a role model in the community," said Chris Battle, head football coach for the Whalers.



Cessation Support for Alaska Adults



Alaska's Tobacco Quit Line is ready to support tobacco users who want to quit. In Alaska, that means 68% of current adult smokers.² Already, more Alaskans have quit tobacco (27%) than are currently using tobacco (20%). The ratio of former to current smokers (or "quit ratio") has increased significantly since 1996. The proportion of ever smokers age 25 or older who have quit smoking increased from 51% in 1996 to 59% in 2014.²

Tobacco Consumption in Alaska

Cigarette consumption in Alaska has steadily declined. There has been a 61% drop in the number of cigarette packs sold per adult in Alaska between 1996 and 2015. This translates into 505 million fewer cigarettes sold in Alaska in 2015 than in 1996. Conversely, spending on other tobacco products (OTP) increased between 2001 and 2016.



1996	2015
129	50

Drop in Annual Cigarette Packs Sold per Alaska Adult by Fiscal Year

↓61%

Increase in Annual Spending on Other Tobacco Products (Excluding Electronic Cigarettes) per Alaska Adult by Fiscal Year*

1996	2015
\$16.79	\$34.17

↑2X+

*Department of Revenue data on OTP sales has been tracked since 2001

Increasing Cessation Referrals

- **AKEELA** worked to increase cessation options for Alaskans with mental health and substance use disorders, a population that is more likely to smoke than the general population, by collaborating with the Alaska Division of Behavioral Health to improve tobacco treatment in their funded facilities.
- **SOUTHEAST REGIONAL HEALTH CORPORATION (SEARHC)** transitioned to a new electronic health record system in February 2017. They also instituted a brief intervention policy for every patient at every visit with providers, referring tobacco users to in-house cessation counseling or Alaska's Tobacco Quit Line. Since June, in-person provider trainings to 77 employees have been conducted across the region. Providers are also encouraged to access the "Helping Alaskans Quit" Brief Tobacco Intervention Continuing Medical Education training (www.akbriefintervention.org) developed and provided by the Alaska TPC program.

“Tobacco use screening and brief intervention by clinicians not only is a top-ranked clinical preventive service ... but also is a cost-saving measure ... more cost-effective than other commonly provided clinical preventive services, including mammography, colon cancer screening, Pap tests, treatment of mild to moderate hypertension, and treatment of high cholesterol.”

— Centers for Disease Control and Prevention. *Best Practices for Comprehensive Tobacco Control Programs – 2007*. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; October 2007.



FY17 Successes and Challenges

Smokefree Places

- **SUCCESSSES:** In FY17, 18 organizations passed or updated smoke- or tobacco-free policies.
- **CHALLENGES:** Although most Alaska adults (90%) agree that people should be protected from secondhand smoke, only half of Alaska's population is covered by a local smoke free workplace law. Alaska municipalities have varying levels of governance, and many of the remaining Alaskan communities do not have the appropriate health powers to enact such a law.

Providing cessation support

- **SUCCESSSES:** Health care organizations such as Akeela, SEARHC, and YKHC are examples of how health care organizations have implemented strategies to increase tobacco screening and refer their patients to cessation services.
- **CHALLENGES:** In 2015, only 65% of Alaska adult smokers who saw a healthcare provider in the past year were advised to quit.² Moving forward, the TPC program strategy will continue to promote systematic electronic referrals within healthcare systems and practices by utilizing e-referral to tobacco cessation programs.



Youth Tobacco Use

- **SUCCESSSES:** Cigarette smoking declined among high school students between 1995 (37%) and 2015 (11%).
- **CHALLENGES:** More high school students use e-cigarettes (18%) than regular cigarettes, and smokeless tobacco use has remained flat since 2013. The percentage of students who perceive great risk of harm in smoking one or more packs of cigarettes per day significantly declined between 2013 (65%) and 2017 (54%). The development and popularity of new tobacco and nicotine products present challenges for addressing youth initiation with existing resources.



Sources:

¹ U.S. Department of Health and Human Services. The Health Consequences of Smoking -50 years of Progress. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and

Health, 2014. <http://www.surgeongeneral.gov/library/reports/50-years-of-progress/indexhtml>.

² Alaska Tobacco Facts, 2017 Update. http://dhss.alaska.gov/dph/Chronic/Documents/Tobacco/PDF/2017_AKTobaccoFacts.pdf.

³ Bui, A.L. et al. (2017). Spending on Children's Personal Health Care in the United States, 1996-2013. *JAMA Pediatr.* 171(2): p. 181-189.

⁴ Grosse, S.D. et al. (2009). Economic Productivity by Age and Sex, 2007 Estimates for the United States. *Medical Care.* 47: p. S94-S103.

⁵ Alaska Tobacco Prevention and Control program records.

⁶ Alaska Youth Risk Behavior Survey. <http://dhss.alaska.gov/dph/Chronic/Pages/yrbs/yrbs.aspx>.



State of Alaska
Bill Walker, Governor

Department of Health and Social Services
Valerie Nurr'araaluk Davidson, Commissioner

Jay C. Butler, MD, Chief Medical Officer
and Division of Public Health Director

February, 2018

www.dhss.alaska.gov/dph/Chronic/Pages/Tobacco/

