Introduction

Modifying risk behaviors contributing to chronic disease, premature death and impaired quality of life is an important public health challenge. The Behavioral Risk Factor Surveillance System (BRFSS) collects information on risk factors, chronic disease prevalence and preventive practices that is essential for chronic disease prevention planning. The BRFSS is conducted in all 50 states, the District of Columbia, Guam, Puerto Rico and the US Virgin Islands and is now the longest running and largest telephone health survey in the world. The State of Alaska began surveillance using the Standard BRFSS in 1991 and has continued yearly since. The Alaska Standard BRFSS is a collaborative project of the Centers for Disease Control and Prevention and the Alaska Division of Public Health.

For this report, indicators from the Standard BRFSS data were combined with data from a second survey, the Alaska Supplemental BRFSS. Funded largely by the Alaska Tobacco Prevention and Control Program, this second survey was state-developed and focuses largely on tobacco use and attitudes. It has been collected in Alaska since 2004. The Supplemental BRFSS uses the same sample design and data collection methodology as the Standard BRFSS. Combining the Supplemental BRFSS survey with the Standard BRFSS where possible allows for a larger sample size for analysis and more stable estimates. Please note that because the combined Standard and Supplemental BRFSS data were used, estimates will not match those provided by the CDC for the indicators in this document.

In 2010, 1,964 health interviews were conducted using the Standard BRFSS questionnaire and 1,273 were conducted using the Supplemental BRFSS. The interviews were conducted over the telephone from the Health Survey Lab in Juneau using randomly selected telephone numbers. Households were contacted and one adult of age 18 years or older was randomly selected to complete the survey. All data were weighted to represent the state adult population age 18 years and older.
**TOBACCO USE**

Current smokers were those respondents that had smoked at least 100 cigarettes in their lifetime and reported they currently smoke either some days or every day. In 2010, 21% of Alaska adults reported current smoking, which is higher than the Healthy Alaskans 2010 goal of 14%. The prevalence of smoking among Alaska Natives (41%) is significantly higher than other race groups (data not shown).

Current smokeless tobacco users were those respondents who reported currently using any smokeless tobacco products such as chewing tobacco, snuff or Iq’mik. Five percent of Alaska adults reported using smokeless tobacco in 2010.

**BINGE DRINKING**

Binge drinking was defined as having had 5 or more drinks (for men) or 4 or more drinks (for women) on one or more occasions in the past 30 days. Binge drinking is associated with injury, both intentional and unintentional. Twenty-one percent of Alaska adults reported binge drinking on the 2010 BRFSS survey*; the Healthy Alaskans 2010 goal for binge drinking is 13%. Binge drinking among males (28%) was significantly higher than among females (13%).

*Note: data for this indicator were collected only as part of the Standard BRFSS survey in 2010.

**OVERWEIGHT AND OBESITY**

People who are overweight or obese are at increased risk of chronic disease and premature death. In 2010, 40% of Alaska adults were overweight and 27% were obese based on body mass index (BMI). Respondents with a BMI of 25.0 to less than 30.0 were considered overweight and those with a BMI of 30.0 or greater were considered obese. Each of these indicators is greater than their Healthy Alaskans 2010 goals (30% overweight and 18% obese).
**DIABETES**
Diabetes increases the risk for heart disease and stroke and can result in blindness and renal disease. In 2010, 6% of Alaska adults reported being told they have diabetes. There was no difference between men and women in the prevalence of diabetes.

**ASTHMA**
Asthma is a leading cause of restricted activity. In 2010*, 14% of Alaska adults reported ever being told they have asthma. More women than men reported a lifetime diagnosis of asthma.

*Note: data for this indicator were collected only as part of the Standard BRFSS survey in 2010.

**CARDIOVASCULAR AND CEREBROVASCULAR DISEASE**
Heart disease is a leading cause of death in Alaska and the US as a whole. The BRFSS surveys ask respondents if they have ever been told by a doctor, nurse or other health professional they have had a heart attack, have coronary heart disease or had a stroke. In 2010, 3% of Alaska adults said they have had a heart attack, 2% said they have coronary heart disease and 2% said they have had a stroke.
PHYSICAL ACTIVITY

Regular physical activity can reduce the risk of chronic disease and help in maintaining current weight or with losing weight. In 2010, 20% of Alaska adults reported no leisure time physical activity in the past 30 days, slightly above the Healthy Alaskans 2010 Goal of 18%.

HEALTH CARE COVERAGE

Many Alaskans lack access to primary health care and preventive services. Reasons include distance from sources of care and lack of health care coverage. On the 2010 BRFSS surveys, 18% of Alaska adults age 18 to 64 years reported not having health care coverage. The goal of Healthy Alaskans 2010 is to reduce the proportion of Alaskans without health care coverage to 5%.

More information about the Alaska Behavioral Risk Factor Surveillance System can be found at www.hss.state.ak.us/dph/chronic/hsl/default.htm.

All Alaska Behavioral Risk Factor Survey Annual Reports can be downloaded from www.hss.state.ak.us/dph/chronic/hsl/brfss/publications.htm.

References:


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