Behavior and lifestyle play an important part in determining our health status and lifespan. Although heredity and environment play a part, the leading causes of death in Alaska (heart disease, cancer and unintentional injuries) are closely related to lifestyle factors. Lifestyle and behavioral factors that affect health include such things as diet, exercise, use of alcohol and tobacco, and preventive health practices. Many premature deaths and disabilities could be prevented through better control of these behavioral risk factors.

The Behavioral Risk Factor Surveillance System

The Alaska Department of Health and Social Services implemented the Behavioral Risk Factor Surveillance System (BRFSS) in 1990. In cooperation with the Federal Centers for Disease Control and Prevention, the system gathers information about the health related lifestyle choices of Alaskan adults. With knowledge of the health related risk taking behavior of Alaskan residents, we can better plan and evaluate programs aimed at promoting health and preventing chronic disease and premature death in this State. Today, 50 states participate in the BRFSS program. The program is part of an on-going data collection system. Results are analyzed each year to improve our understanding of Alaskan health habits and to measure progress toward the National Year 2000 Health Objectives.

1995 Behavioral Risk Factor Survey Results

Beginning in January of 1995, 128 health interviews were conducted each month utilizing a standardized BRFSS questionnaire. The interviews were conducted over the telephone using randomly selected telephone numbers. Respondents were randomly selected from the adult members of the household (18 years of age and older). A total of 1535 interviews were completed by specially trained staff. This report highlights some of the information collected in 1995. These data have been analyzed by the Centers for Disease Control and Prevention and weighted to adjust the sample to represent the state population.

Health Status

In 1995, 26.7% of Alaskans reported their own health as “excellent” and 37.2% as “very good”. Another 27.8% of Alaskans rated their health “good”, 6.0% rated their health as “fair” and 2.3% rated their health as “poor”. Although Alaskan adults tended to report their own health as favorable, survey results show many Alaskans have risk factors which may affect their health.

Prevalence of Behavioral Risk Factors Among Alaskans in 1995
Lack of Safety Belt Use

Use of safety belts significantly reduces motor vehicle crash death rates. An estimated 33.1% of Alaskan adults do not always use safety belts. Males were more at risk than females (40.5% males vs. 24.8% of females)

Definition for this survey: Respondents reporting that they do not always use a safety belt when driving or riding in a car.

Overweight

Overweight people are at increased risk for heart disease, diabetes and for certain types of cancer. Survey results indicate that 31.3% of Alaskan adults were overweight based on body mass index compared to the national year 2000 goal of 20%. (31.1% of males vs. 31.6% of females)

Definition used for this survey, Body Mass Index (BMI): Females with body mass index (weight in kilograms divided by height in meters squared \( w/h^2 \)) >=27.3 and males with body mass index >= 27.8

Tobacco Use

Cigarette Smoking

Cigarette smoking is the single most preventable cause of death and disease in our society. It is a risk factor for five of the ten leading causes of death. The prevalence of smoking among Alaskan adults was 25.0% compared to the national year 2000 goal of 15%. The prevalence of smoking among males was 26.5% and among females was 23.3%.

Definition used for this survey: Respondents who have smoked at least 100 cigarettes in their entire life and now smoke.

Smokeless Tobacco

Among Alaskan adults, 6.7% reported using smokeless tobacco products such as chewing tobacco or snuff. More males than females reported using smokeless tobacco products (11.8% males versus 1.0% females)
Alcohol Use

Excessive alcohol intake is related to four of the ten leading causes of death in the United States - liver cirrhosis, motor vehicle and other accidents, suicides and homicides. Acute or binge drinking was reported by 19.2% of adults. More males than females engaged in binge drinking (26.5% of males versus 11.0% of females). Chronic drinking was a risk factor for 2.9% of adults. (4.6% of males vs. 1.1% of females)

Definitions for this survey,
Acute or binge drinking: Respondents who report having five or more drinks on an occasion, one or more times in the past month.
Chronic Drinking: Respondents who report an average of 60 or more alcoholic drinks in the past month.

Hypertension

Hypertension or high blood pressure increases the risk of heart disease, stroke, kidney failure and blindness. The survey showed that 19.3% of adults had been told that they have high blood pressure. Among males, 20.1% reported having high blood pressure and 18.4% of females reported having high blood pressure.

Definition used for this survey: Respondents who report they have been told they have high blood pressure.

Cholesterol Screening

A major risk factor for heart disease is high blood cholesterol. Among Alaskan adults 60.7% have had their cholesterol checked within the past five years. Among males 59.7% had their blood cholesterol checked within the past five years and among females, 61.8% had their blood cholesterol checked within the past five years.

Definition used for this survey: Respondents who have had their blood cholesterol checked within the past five years.
Health Care Coverage
Many Alaskans lack access to an ongoing source of primary health care as well as to essential clinical preventive services. According to this survey, 15.2% of Alaskan adults did not have any health care plan. Among males, 18.6% had no health care plan, and among females 11.5% had no health care plan.

50 BRFSS States/Range 5.70%-20.88% Median 11.93%

Cancer Screening
Breast Cancer Screening
Early detection of breast cancer greatly improves a woman’s chance of survival. A combination of annual clinical breast examinations and mammography can reduce breast cancer mortality by about one third for women ages 50 and older.

Of women aged 40 and older, 83% reported having ever had both a breast exam and a mammogram. Of women aged 50 and older, 70% reported having had both a breast exam and a mammogram in the past two years.

Cervical Cancer Screening
The pap test is highly effective in detecting early cancer of the cervix and greatly reduces the risk of mortality from invasive cervical cancer. Of Alaskan females aged 18 and older, 90.9% had a pap test within the past three years.

Colorectal Cancer Screening
Special examinations are recommended for persons over the age of 50 for the early detection of cancers of the colon and rectum. Of Alaskans aged 50 and older, 41% reported having had a proctoscopic exam. Of males, 46% reported having this exam and 35% of females reported having this exam.

HIV/AIDS
Health education, testing and risk reduction counseling are important steps to preventing the spread of HIV (the virus that causes AIDS).

Of Alaskans between the ages of 18 and 64, 48.7% had been tested for HIV. The reasons most people cited for being tested were to find out if they were infected (18.1%), for a routine check up (16.2%) and for military service (14.1%).

Of the 598 adults tested, 23.2% were tested at a private physician’s office, 19% were tested at a military site and 18.6% were tested at a hospital or emergency room. Of those tested, 83% received the results of their HIV test. Of those that received results, 33.5% received post test counseling.

Most Alaskans between the ages of 18 and 64 believed their own chances of getting the AIDS virus was low or none. Among those interviewed, 1.4% thought their chances were high, 3.7% medium, 28.8% thought their chances were low and 63.4% thought their chances were none.

The majority (72.8%) of respondents (aged 18 to 64) thought that children in school should receive education about AIDS between kindergarten and 6th grade.