

Alaska Health Status Indicators

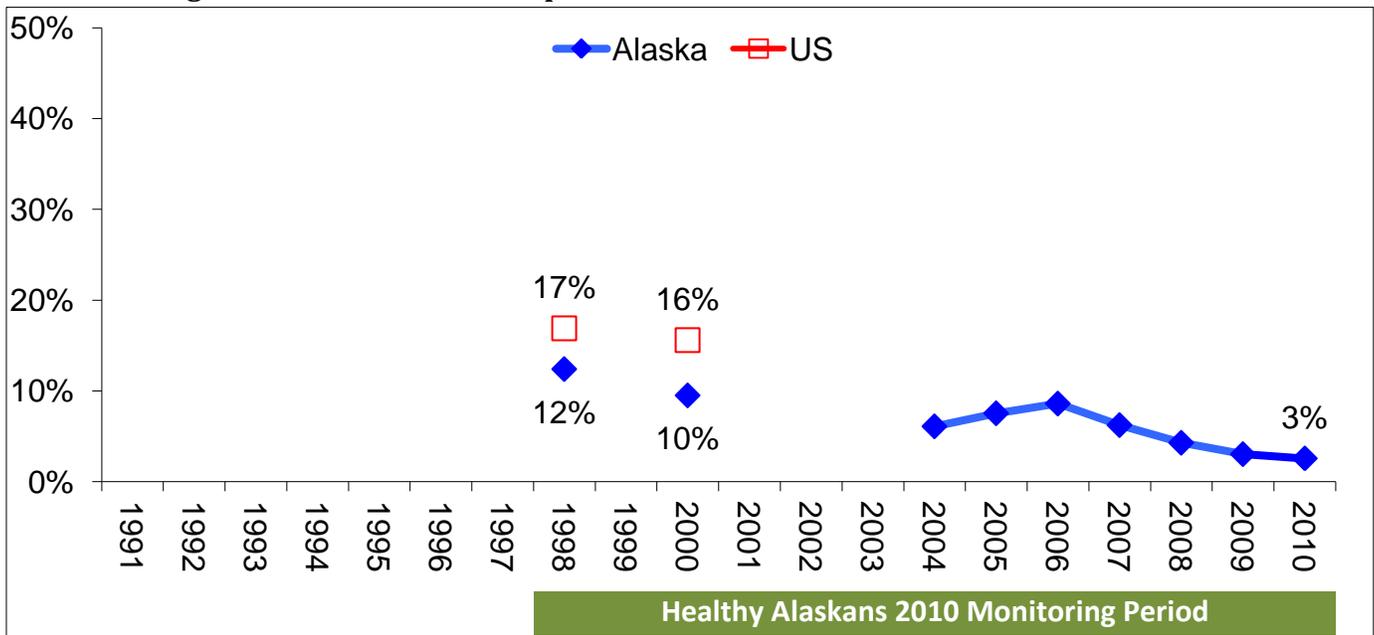
Indicator: *Adults Nonsmokers Exposed to Secondhand Smoke at Home*

Why is this important?

Tobacco use is the leading cause of preventable disease and death in the United States.¹ There have been over 12 million tobacco-related deaths in the United States since the landmark 1964 Surgeon General's report, which broadcast that smoking was a cause of cancer.² And smoking kills more than just those who choose to smoke. Exposure to secondhand smoke kills approximately 50,000 Americans every year.³ Tobacco smoke contains hundreds of toxic chemicals, including at least 69 known carcinogens.⁴ Secondhand smoke causes lung cancer and heart disease in adults as well as sudden infant death syndrome (SIDS) and acute respiratory infections among children.⁵ Any exposure to secondhand smoke presents a health risk; eliminating smoking in indoor spaces is the only approach that protects nonsmokers from secondhand smoke exposure.⁵

How are we doing?

Percentage of Adult Nonsmokers Exposed to Secondhand Smoke in Home: Alaska and the U.S.



The percentage of adult Alaskan nonsmokers who were exposed to secondhand smoke in their home has decreased from 12% in 1998 to 3% in 2010.

❖ How is Alaska Doing Relative to the *Healthy Alaskans 2010* Target?

No *Healthy Alaskans 2010* target was set for this indicator; the *Healthy People 2010* target for the percentage of nonsmoking adults exposed to secondhand smoke in any environment is 45% or lower. Since the baseline measurement of 12% in 1998, this indicator has continued to decline. **The *Healthy People 2010* target of 45% has been met.**

❖ How does AK compare with the US?

In the two years for which comparable US data were available, the Alaska rate was below the US rate of adult nonsmoker exposure to secondhand smoke in the home.

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❖ How are different populations affected?

The percentage of non-smoking adults exposed to secondhand smoke in their homes does not differ by region, socioeconomic status, or race/ethnicity.

What is the Alaska Department of Health and Social Services doing to improve this indicator?

In collaboration with partners statewide, the Alaska Tobacco Prevention and Control (TPC) program provides leadership, coordinates resources, and promote efforts that support Alaskans in living healthy and tobacco-free lives. Specifically, the Alaska TPC provides funding and technical assistance for community- based, school-based based and tobacco use cessation programs; provides media and other counter-marketing communications statewide; operates a tobacco quit-line that provides cessation counseling and nicotine replacement therapy (NRT) free of charge; ensures the ongoing surveillance of tobacco use trends in Alaska and the evaluation of program efforts; and supports tobacco-free partnership projects in Alaska. Additional information on current tobacco prevention efforts in Alaska is available at: <http://www.hss.state.ak.us/dph/chronic/tobacco/default.htm>.

Indicator Definition and Notes

Percentage of adult nonsmokers aged 18 years and older who answer “Yes” to the following question: *In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars, or pipes anywhere inside your home?* Nonsmokers are identified as those who answer “No” to the following question: *Have you smoked at least 100 cigarettes in your entire life?* or answer “Not at all” to the following question: *Do you now smoke cigarettes every day, some days, or not at all?*

Data Sources

Alaska: Alaska Behavioral Risk Factor Surveillance System, Alaska Department of Health and Social Services; US: Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention. Alaska data were obtained from the Standard AK BRFSS in 1998 and 2000, and from the Supplemental AK BRFSS survey from 2004 through 2010. The Supplemental BRFSS survey is conducted using identical methodology as the Standard BRFSS and allows a doubling of the BRFSS sample size for those measures included on both surveys.

References

1. U.S. 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.
2. U.S. Department of Health and Human Services. *The Health Consequences of Smoking: A Report of the Surgeon General*. 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; 2004.
3. U.S. Centers for Disease Control and Prevention (CDC). Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses-United States 2000-2004. *Morbidity and Mortality Weekly Report (MMWR)* 2008;57(45):1226-1228.
4. U.S. Department of Health and Human Services. *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: 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, 2010.
5. U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: 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, 2006.



Available at: <http://www.hss.state.ak.us/dph/chronic/>

