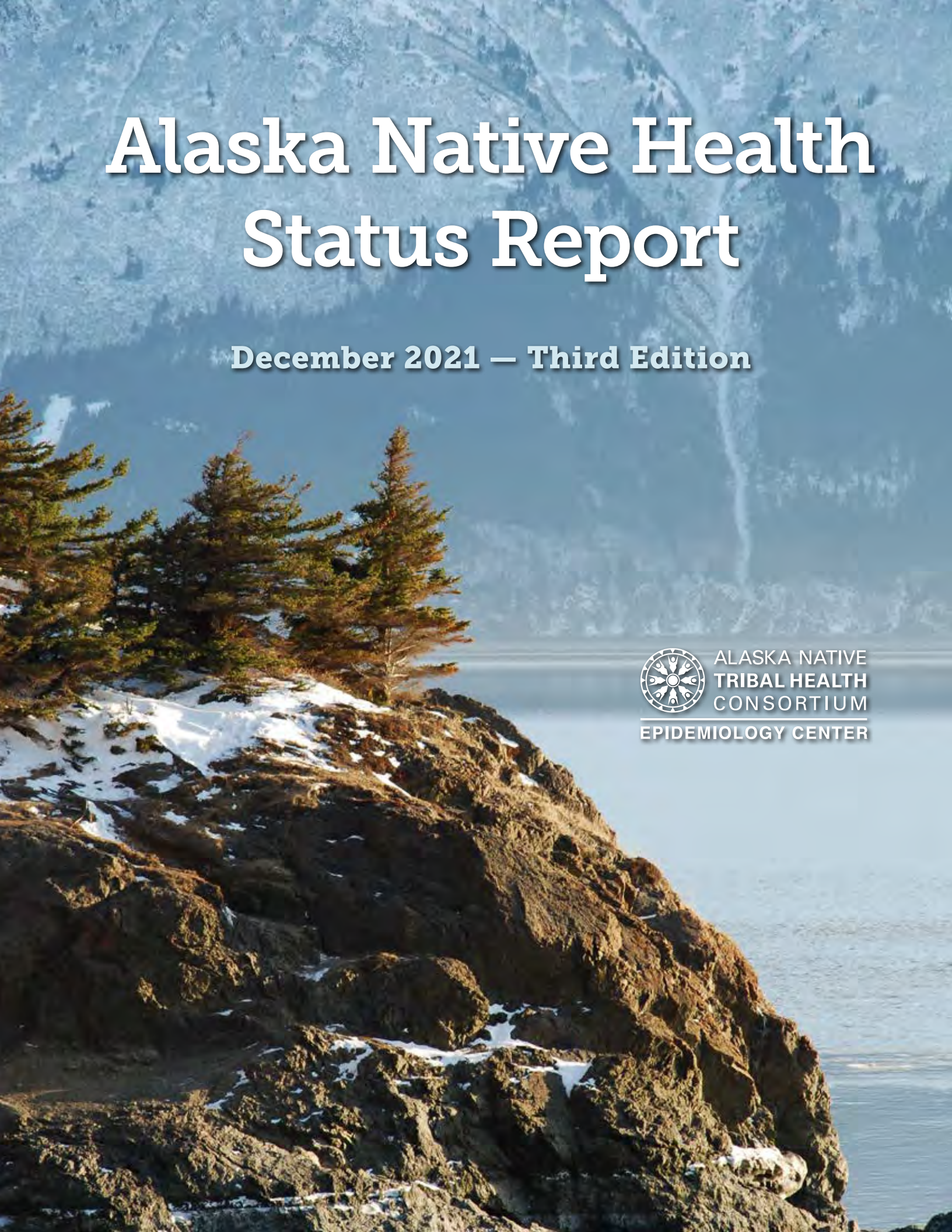
Alaska Native Health Status Report

December 2021 — Third Edition



ALASKA NATIVE TRIBAL HEALTH CONSORTIUM
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NOTICE!
UPDATED
PUBLICATION

This publication has been updated since the initial printing to reflect changes on the following pages:

Page 4
Page 22
Page 34
Page 70
Page 177

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Alaska Native Tribal Health Consortium

» Alaska Native Diabetes Registry
» Alaska Native Tumor Registry
» HIV/STD Prevention Program
» Immunization Program
» Injury Prevention Program

State of Alaska

» Alaska Behavioral Risk Factor Surveillance System (BRFSS)
» Alaska Birth Defects Registry
» Alaska Childhood Understanding Behaviors Survey (CUBS)
» Alaska Health Analytics and Vital Records Section
» Alaska Pregnancy Risk Assessment Monitoring System (PRAMS)
» Alaska Youth Risk Behavior Surveillance System (YRBS)
» Department of Labor and Workforce Development, Research and Analysis Section
» HIV/STD Program
» Informed Alaskans Initiative

Federal

» Alaska Area Indian Health Service

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This report provides a snapshot of where we are to guide advocacy, policy development, program planning, and evaluation.

Table of Contents

List of Figures

SOCIODEMOGRAPHICS

MORTALITY

MORBIDITY

List of Figures

MATERNAL, INFANT, & CHILD HEALTH

ADOLESCENT HEALTH

List of Figures

ADULT HEALTH

PREVENTATIVE CARE

List of Tables

SOCIODEMOGRAPHICS

MORTALITY

MORBIDITY

List of Tables

MOTHER, INFANT, & CHILD HEALTH

ADOLESCENT HEALTH

List of Tables

ADULT HEALTH

PREVENTATIVE CARE

ENVIRONMENTAL HEALTH

Introduction

Alaska Native Tribal Health Consortium

The vision of the Alaska Native Tribal Health Consortium is that "Alaska Native people are the healthiest people in the world." In order to know if we are moving towards that vision, continued monitoring of health metrics is needed. This report provides one way to help monitor the health of the Alaska Native population and how far we have come on the path to becoming "the healthiest people in the world." These data can help demonstrate significant health improvements that have been achieved among Alaska Native people. In addition, health areas of concern and inequities in health status can be readily identified for improvement efforts.

This report provides an overview of the health status of Alaska Native people living in Alaska statewide, as well as by tribal health regions. The Alaska Native Epidemiology Center has divided the state into 12 tribal health regions, which allows for the use of readily available data. In general, the tribal health regions closely align with the service areas of the regional tribal health organizations.

The health indicators reported are used as measures of various dimensions of health status and were selected based on their importance to population health; data availability; and relationship to key health issues within the Alaska Tribal Health System. Indicators include health outcomes, health risk behaviors, and health protective factors. The different measures assess different aspects of health, including measures that cover the lifespan and known determinants of health.

Most of the data presented in this report are for Alaska Native/American Indian people. Comparison groups, such as the Alaska or U.S. White population, are used to highlight areas where disparities may exist.

We recognize that data presented here tell only a small part of the story. There are areas for which reliable and local data are not readily available, and we recognize that this report is not comprehensive. To really know the whole picture of health in Alaska, one needs to talk to people living in each region because only they know things that numbers can't convey or collect. We also recognize that each data point represents individuals and their families, and that these are not just statistics. Furthermore, the information gained from the interpretation of data are only part of the story. Nevertheless, these data provide a snapshot of where we are to guide advocacy, policy development, program planning, and evaluation. We hope this document serves as a useful resource for those interested in Alaska Native health issues.

This report provides one way to help monitor the health of the Alaska Native population and how far we have come on the path to becoming "the healthiest people in the world."

Executive Summary

Sociodemographics

» In 2020, there were approximately 148,085 Alaska Native people living in Alaska. This includes people who identified as Alaska Native alone or in combination with other races.
» More than half of the Alaska Native population is under the age of 29 years.
» Since 2015, the largest growth in the Alaska Native population has been in the 65-79 years age group.
» Disparities exist for the Alaska Native population on a number of measures of socioeconomic status such as educational attainment, poverty, and household income, as compared with Alaska White populations.

Mortality

» Alaska Native life expectancy for both genders combined is 70.4 years.
» The leading causes of death for Alaska Native people are cancer, heart disease, and unintentional injury.
» Mortality rates have decreased for all-causes, cancer, heart disease, and unintentional injury during the past 35 years. Infant mortality rates have also decreased.
» There has been virtually no change in suicide mortality rates since the 1980's.
» COPD mortality rates have increased during the past 35 years.
» Unintentional injury accounts for nearly a quarter of all years of potential life lost; a measure of premature mortality.
» Disparities exist between Alaska Native people and Alaska non-Native populations on a number of mortality measures including life expectancy, infant mortality, and leading causes of death.

Morbidity

» Cancer incidence rates have increased significantly among Alaska Native people during the past 40 years.
» The leading types of cancer among Alaska Native people are colon/rectum, lung, and breast cancer.
» Approximately 6% of the Alaska Native population have been diagnosed with diabetes.
» Reported chlamydia and gonorrhea infection rates among Alaska Native people are higher than Alaska non-Native populations. The highest reported number of infections are among females aged 15-34 years.

Maternal, Infant, & Child Health

» Total birth and teen birth rates have decreased significantly during the past two decades.
» About two-thirds of Alaska Native mothers received documented prenatal care during the first trimester.
» More than 90% of Alaska Native mothers reported initiating breastfeeding, and more than 70% reported they were still breastfeeding their infant at 8 weeks postpartum.
» Almost a fourth of Alaska Native mothers reported using tobacco during pregnancy.

Executive Summary

Adolescent Health

» Almost half of Alaska Native adolescents reported having supportive adults in their lives that they could turn to for social support, a protective factor against negative health outcomes.
» Cigarette smoking has decreased significantly among Alaska Native adolescents since 2007. However, approximately 12% report smoking cigarettes and 20% report smokeless tobacco use.
» Alcohol use has also decreased significantly, with fewer Alaska Native adolescents reporting binge drinking or use of any alcohol compared to 2007.
» Approximately 43% of Alaska Native adolescents reported experiencing a major depressive episode during 2019.

Adult Health

» More than a third of Alaska Native adults report being in very good or excellent health.
» More than a third of Alaska Native adults report meeting the criteria for obesity based on body mass index.
» Cigarette smoking has declined, although not significantly, during the past two decades. More than a third of Alaska Native adults report being current smokers.
» Close to a third of Alaska Native adults have reported experiencing 4 or more adverse childhood experiences (ACEs).

Preventive Care

» Over 80% of Alaska Native women aged 50-74 years report being screened for breast cancer in 2018.
» Similarly, over 80% of Alaska Native women aged 21-65 years report being screened for cervical cancer in 2016.
» Approximately two-thirds of Alaska Native adults aged 50-75 years report being screened for colorectal cancer.
» Almost three-quarters of Alaska Native children aged 19-35 months have reportedly completed the recommended childhood vaccination series.
» Approximately a quarter of Alaska Native adults reportedly received a seasonal influenza vaccine during the 2017-2018 season.
» Over two-thirds of Alaska Native adults have reportedly been vaccinated against pneumococcal disease, and almost half have been vaccinated against shingles.

Environmental Health

» The proportion of households in rural Alaska Native communities that are served by water and sewer services has increased significantly since 2009.
» Approximately 85% of households in rural Alaska communities have access to water and sewer service.
» Approximately half of community water system users in Alaska receive water that is fluoridated for dental caries prevention.

Data Summary

	Alaska Native People Statewide	Alaska Whites/ Non-Natives	Healthy Alaskans 2030/ - Healthy People 2030 Goal	Time Period (Alaska)
Sociodemographics				
High School or Higher Educational Attainment	83.0%	95.6%	90.0%	2015-19
Unemployment (all races/ethnicities)	7.8%	N/A	N/A	2020
Population Living in Poverty	24.0%	7.2%	10.0%	2015-19
Median Household Income	$49,959	$85,298	N/A	2015-19
Mortality				
Leading Cause of Death	Cancer	Cancer	N/A	2016-19
Life Expectancy in Years	70.4	79.3	N/A	2014-18
All-Cause Mortality Rate per 100,000 (Age-Adjusted)	1,077.7	635.9	N/A	2016-19
Infant Mortality Rate per 1,000 Live Births	10.3	2.9	5.0	2019
Years of Potential Life Lost per 100,000	14,395.9	6,207.1	N/A	2016-19
Cancer Mortality Rate per 100,000 (Age-Adjusted)	196.3	136.5	127.4	2016-19
Heart Disease Mortality Rate per 100,000 (Age-Adjusted)	183.3	120.8	71.1	2016-19
Unintentional Injury Mortality Rate per 100,000 (Age-Adjusted)	116.9	48.1	56.5	2016-19
COPD Mortality Rate per 100,000 (Age-Adjusted)	56.0	31.1	107.2	2016-19
Suicide Mortality Rate per 100,000 (Age-Adjusted)	39.9	20.3	25.0	2016-19
Morbidity				
Cancer Incidence Rate per 100,000 (Age-Adjusted)	497.6	450.9*	N/A	2014-18
Diabetes Prevalence (Age-Adjusted)	6.3%	7.5%**	N/A	2019
Chlamydia Incidence Rate per 100,000 (Age-Adjusted)	1,991.3	565.2	N/A	2018
Gonorrhea Incidence Rate per 100,000 (Age-Adjusted)	730.6	203.1	199.0	2018
Adult Tooth Loss	51.7%	36.5%	N/A	2018
Maternal, Infant, and Child Health				
Birth Rate per 1,000 Population	18.4	11.4	N/A	2019
Teen Birth Rate per 1,000 Females 15-19 Years	33.5	9.6	31.4	2019
Birth Defect Rate per 10,000 Live Births	651.2	266.4	N/A	2017
Preterm Birth	13.4%	7.7%	9.4%	2019
Low Birth Weight	7.6%	5.1%	N/A	2019
First Trimester Prenatal Care	68.1%	73.5%	81.8%	2019
Adequate Prenatal Care	54.2%	62.7%	80.5%	2019
Prenatal Tobacco Use	23.7%	6.6%	4.3%	2019
Prenatal Alcohol Use	5.6%	5.8%	7.8%	2019
Prenatal Intimate Partner Violence	6.1%	1.1%	N/A	2019
Breastfeeding Initiation	90.8%	96.8%	N/A	2019
Childhood Witness to Domestic Violence	38.3%	19.8%	N/A	2017
Dental Caries Among 3 Year Old Children	41.1%	7.3%	N/A	2018-19

* Data is for U.S. Whites only
** Data is for all races in Alaska in 2016
N/A – Not applicable or not available

Data Summary

	Alaska Native People Statewide	Alaska Whites/ Non-Natives	Healthy Alaskans 2030/ - Healthy People 2030 Goal	Time Period (Alaska)
Adolescent Health				
Social Support	46.4%	53.2%	50.0%	2019
Depression	43.1%	34.2%	31.0%	2019
Suicide Attempt	24.3%	15.1%	N/A	2019
Physical Activity	17.5%	21.2%	22.0%	2019
Obesity	17.5%	11.4%	15.5%	2019
Healthy Weight	66.3%	71.0%	N/A	2019
Current Smoking	12.6%	4.8%	3.4%	2019
Smokeless Tobacco Use	20.2%	3.4%	2.3%	2019
Current Drinking	16.7%	25.3%	6.3%	2019
Binge Drinking	10.8%	14.5%	8.4%	2019
Marijuana Use	27.8%	19.4%	5.8%	2019
Prescription Pain Medicine Abuse	13.7%	14.0%	N/A	2019
Soda Consumption	16.7%	10.2%	N/A	2019
Sexually Active	42.8%	35.7%	19.2%	2019
Bullying	31.8%	23.7%	N/A	2019
Intimate Partner Violence	14.0%	6.0%	6.6%	2019
Adult Health				
General Health Status	40.4%	54.2%	N/A	2015-18
Frequent Mental Distress	12.2%	10.2%	N/A	2014-18
Meets Physical Activity Recommendations	18.0%	23.1%	59.2%	2017
Obesity	36.3%	31.1%	36.0%	2015-18
Overweight	31.3%	35.6%	N/A	2015-18
Current Smoking	36.4%	15.8%	25.0%	2015-18
Smokeless Tobacco Use	12.7%	4.8%	25.0%	2015-18
Binge Drinking	19.1%	16.4%	25.4%	2015-18
Meets Fruit & Vegetable Consumption Recommendations	9.0%	5.6%	N/A	2017
Lifetime Intimate Partner Violence	29.7%	24.3%	N/A	2017
Adverse Childhood Experiences (ACEs) ≥ 4	30.2%	20.3%	N/A	2013-15
Preventive Care				
Dental Visit in Past Year	59.8%	66.5%	N/A	2014-18
Breast Cancer Screening Among Women 50-74 Years	83.4%	71.5%	77.1%	2018
Cervical Cancer Screening Among Women 21-65 Years	84.3%	76.0%	84.3%	2016
Colorectal Cancer Screening Among Adults 50+ Years	69.6%	63.8%	74.4%	2018
Environmental Health				
Rural Households with Water and Sewer Service	85.6%	N/A	90.0%	2021
Population Served by Fluoridated Community Water System (all races/ethnicities)	49.6%	73.0%	60.0%	2018

N/A – Not applicable or not available

Sociodemographics

Sociodemographic Highlights

Approximately one in five (20.3%) Alaskans were Alaska Native or American Indian in 2020.

In 2020 an estimated 148,085 Alaska Native people lived in Alaska.

The Alaska Native population increased by approximately 5% between 2010 and 2020.

More than a third of the Alaska Native population is under the age of 20 years.

Sociodemographic Highlights

High school completion among Alaska Native people has been increasing since 2009, and is currently estimated at 83.0%.

More than a third (37.2%) of Alaska Native adults have completed some college, or received a college degree.

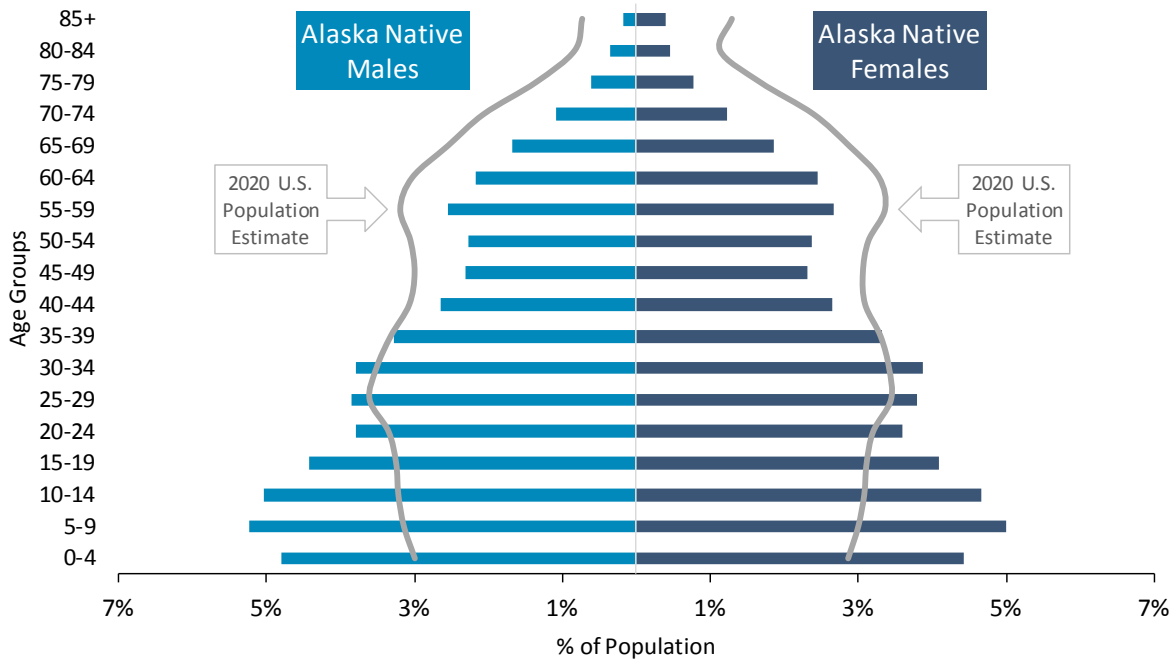
Since 2015, the largest growth in the Alaska Native population has been in the 65-79 year old age group.

Almost a quarter (24.0%) of Alaska Native people have a total family income that falls below the poverty threshold.

The estimated median household income for Alaska Native people is $49,959, significantly lower than Alaska Whites.

Population Pyramid

Figure 1. Population Pyramid, Alaska Native and U.S. Total Population, 2020



Data Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section; U.S. Census Bureau, American Community Survey Appendix Table C-1

Definition

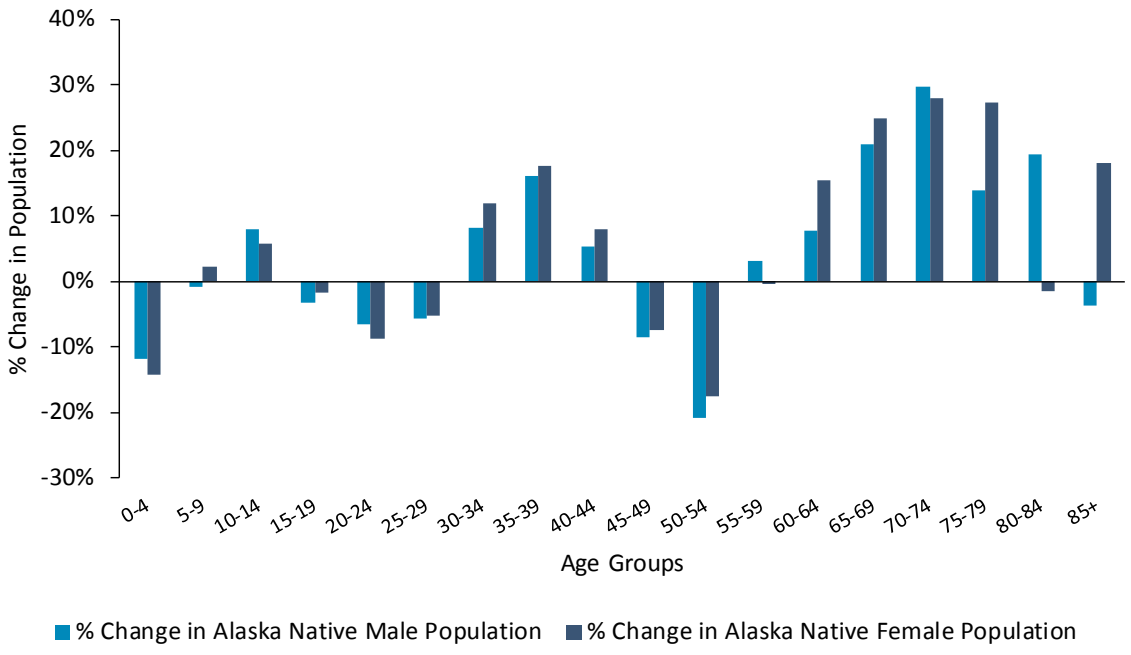
A population pyramid is a graphical representation of the age and sex distribution of a population. The proportion of Alaska Native males and females are displayed as horizontal bars. The gray lines show the estimated distribution of the U.S. total population based on 2020 U.S. Census population estimates.

Summary

- In 2020, a larger proportion (52.7%) of the Alaska Native population was aged 29 years or younger compared with the 2020 U.S. population estimate (38.3%).
- One in five (19.4%) Alaska Native persons are aged 9 years and younger compared with 12.2% of the U.S. population.
- Elders aged 65 years and older accounted for 8.6% of the total Alaskan Native population compared with 16.5% of the U.S. population.

Population Change

Figure 2. Population Change by Sex, Alaska Native People, 2015 to 2020



Data Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section
Appendix Table C-2 & Table C-3

Definition

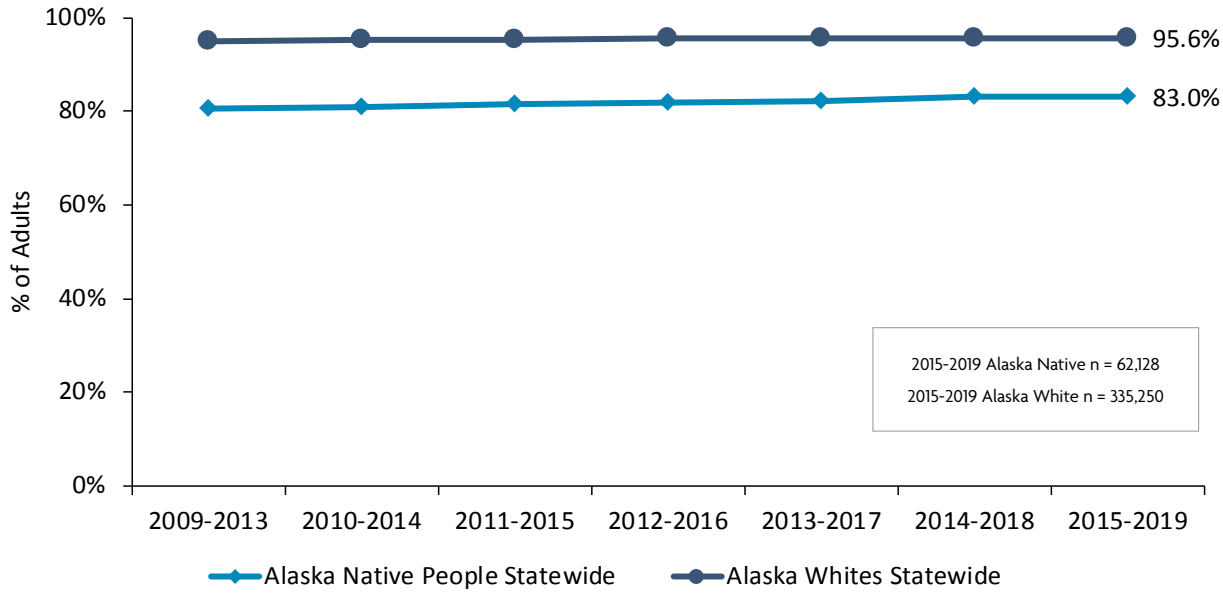
Population change is the change in the size of a population over time, and is calculated by taking the difference between the size of the population at the end and beginning of a time period. Population change reflects differences in the size of the population based on both natural changes in size (i.e., births and deaths), as well as net migration.

Summary

- Statewide, the Alaska Native male population marginally decreased by 0.01% and the overall Alaskan male population decreased 1.3% between 2015 and 2020.
- The largest decrease in the male Alaska Native population was observed among those aged 50–54 years.
- Statewide, the Alaska Native female population increased 1.2% and the total female population increased 0.1% between 2015 and 2020.
- The largest increase in the female Alaska Native population was observed among those aged 65–79 years.

Educational Attainment

Figure 3a. Adults Aged 25 Years and Older Who Completed at Least High School, 2009-2013 to 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-4

Definition

Educational attainment refers to the highest level of education that an individual has completed. Educational attainment improves socioeconomic status and is also protective against adverse health risks over the life span.[1]

Related Objectives

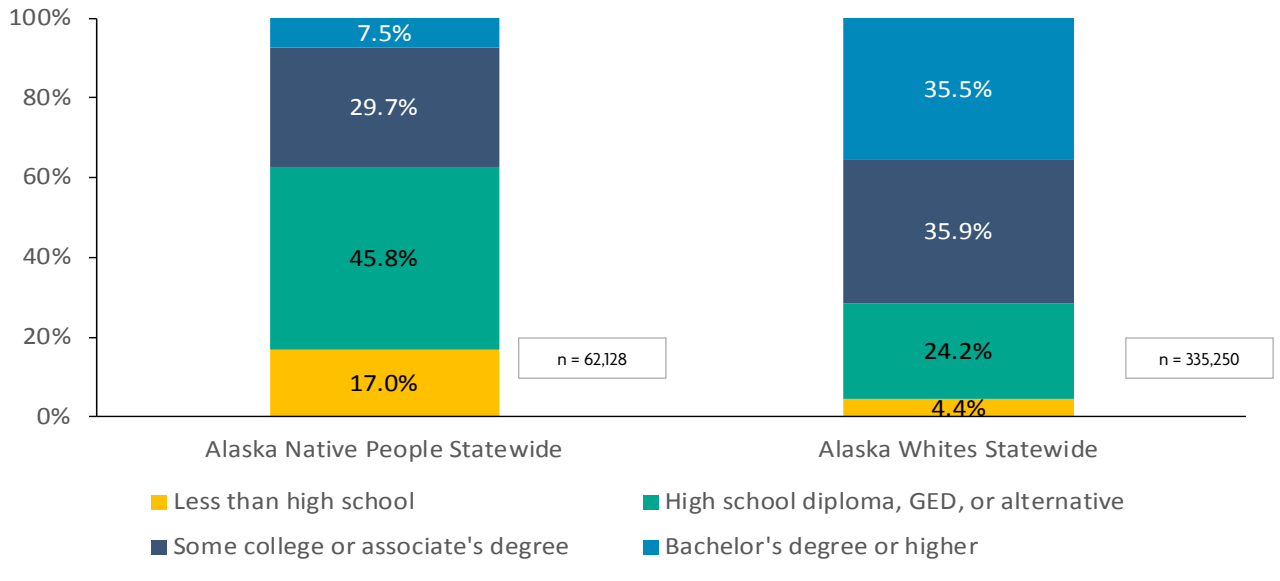
Increase the percent of high school students who graduate within four years of starting 9th grade to 90.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #19*. Increase the proportion of high school students who graduate in 4 years to 90.7%. - *HEALTHY PEOPLE 2030, OBJECTIVE AH-08.*

Summary

- The estimated proportion of Alaska Native adults (25 years and older) who completed high school (or equivalent) or a higher level of education increased 1.5% from 81.5% in 2011–2015 to 83.0% in 2015–2019.
- During 2015–2019, 37.2% of Alaska Native adults completed some college, an associates degree, or achieved a bachelor's degree or higher.

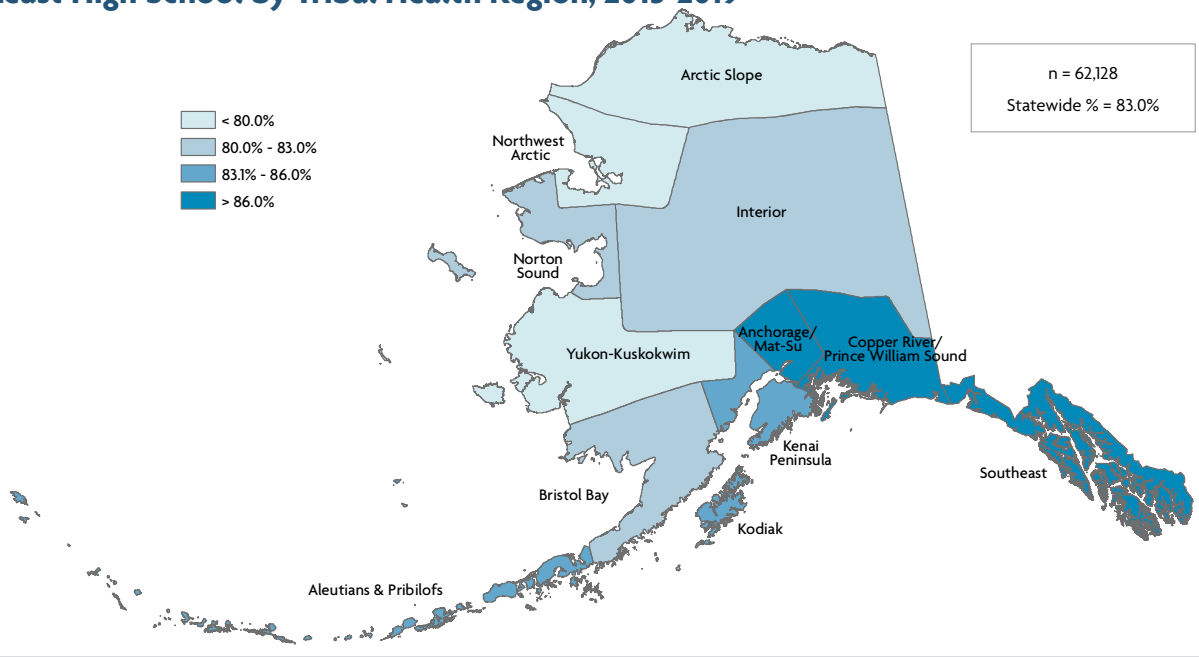
Educational Attainment

Figure 3b. Highest Educational Attainment, Adults 25 Years and Older, 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-5

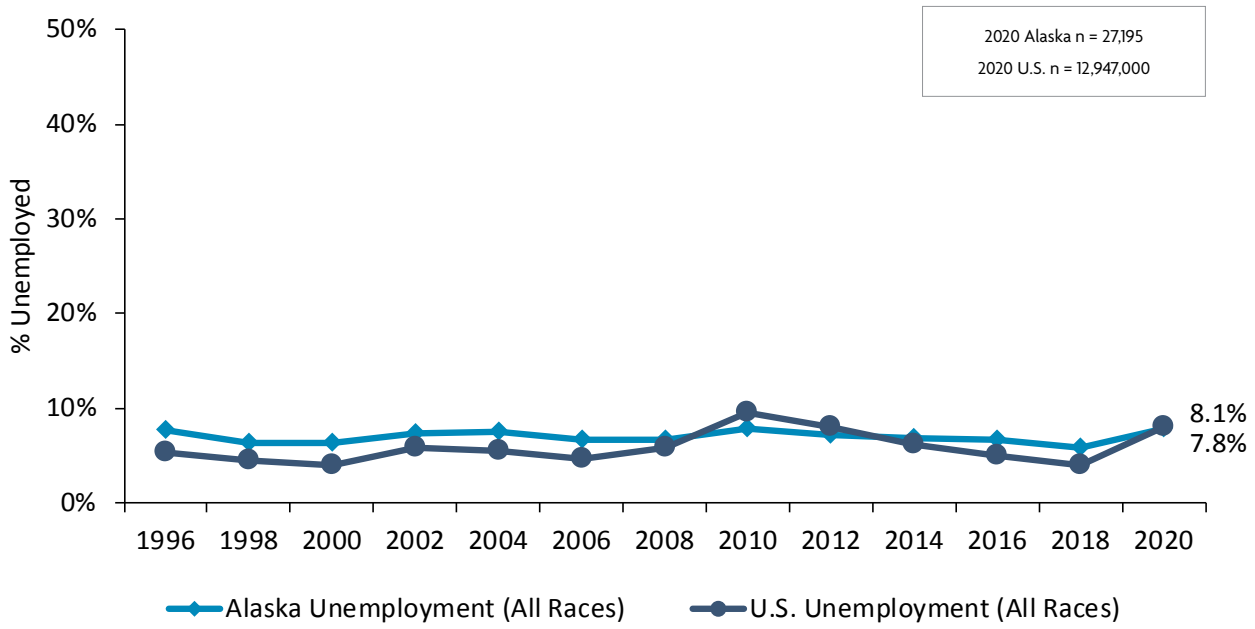
Figure 3c. Percent of Alaska Native Adults Aged 25 Years and Older Who Completed at Least High School by Tribal Health Region, 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-6

Unemployment

Figure 4a. Unemployment by Year, All Races, 1996-2020



Data Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section; U.S. Census Bureau, Current Population Survey Appendix Table C-7

Definition

Unemployment includes anyone over the age of 16 years who has made an active attempt to find work in the four week period up to and including the week that includes the 12th of the referenced month. Due to the scarcity of employment opportunities in rural Alaska, many individuals do not meet the official definition of unemployed because they are not conducting active job searches.

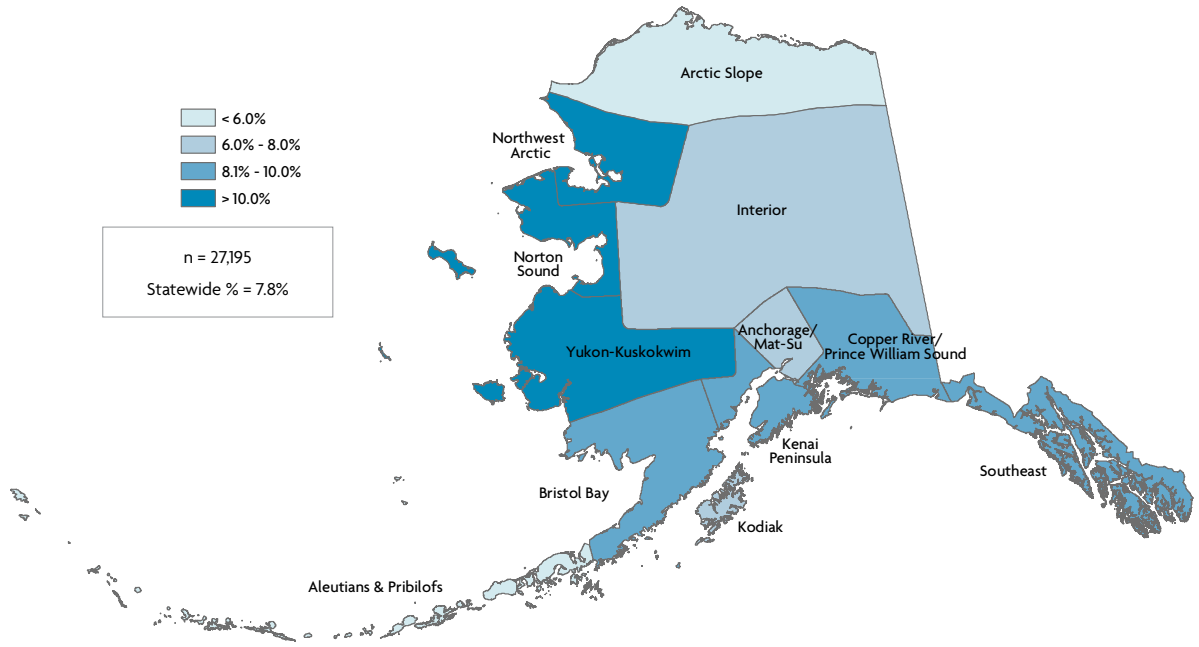
Summary

- With 2009–2012 being the exception, the unemployment rate in Alaska has historically been higher than the national rate. During 2020 however the Alaska unemployment rate was lower than the national rate.
- Unemployment rates varied widely by Tribal health region in 2020, with a low of 4.3% in the Aleutian and Pribilofs region to a high of 13.5% in the Yukon-Kuskokwim region.

Note: The data presented here are for all races and are not seasonally adjusted.

Unemployment

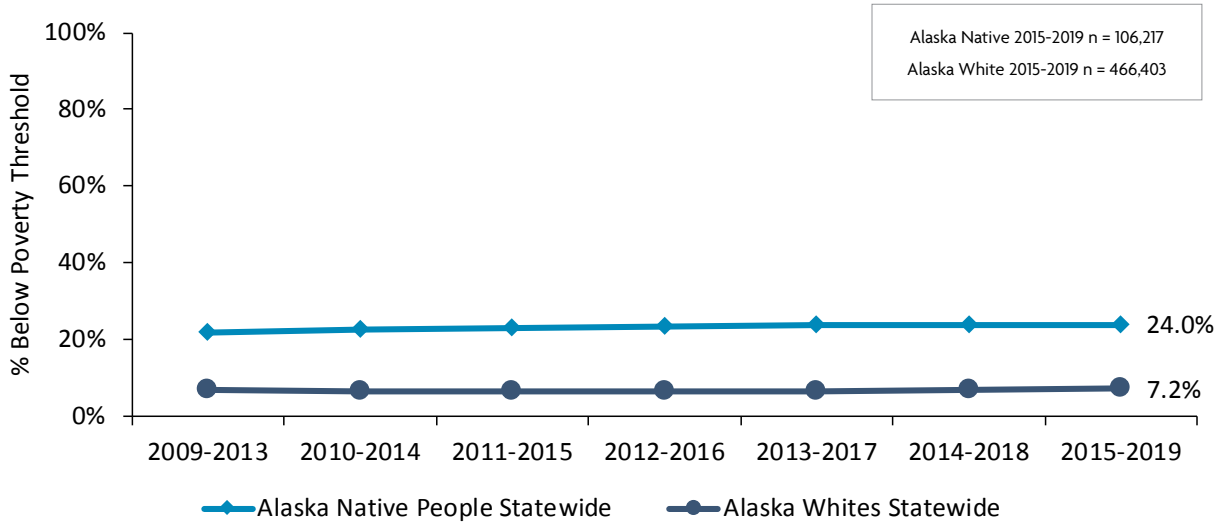
Figure 4b. Percent of Population That Is Unemployed by Tribal Health Region, All Races, 2020



Data Source: Alaska Department of Labor and Workforce Development
Appendix Table C-8

Poverty

Figure 5a. Estimated Percent of People Living Below the Poverty Threshold, All Ages, 2009–2013 to 2015–2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C–9

Definition

The U.S. Census Bureau uses a set of income thresholds that vary by family size and composition to determine the poverty thresholds. If a family's total income is less than the poverty threshold, then the family members are considered to be living in poverty. The official poverty thresholds are updated for inflation using the Consumer Price Index, but they do not vary geographically. The official poverty definition uses money income before taxes and does not include capital gains or non-cash benefits (such as public housing, Medicaid, Medicare, or food stamps).

Related Objectives

Increase the percentage of residents (all ages) living above the federal poverty level (as defined for Alaska) to 90.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #21.* Reduce the proportion of people living in poverty to 8.0%. - *HEALTHY PEOPLE 2030, OBJECTIVE SDOH-01*

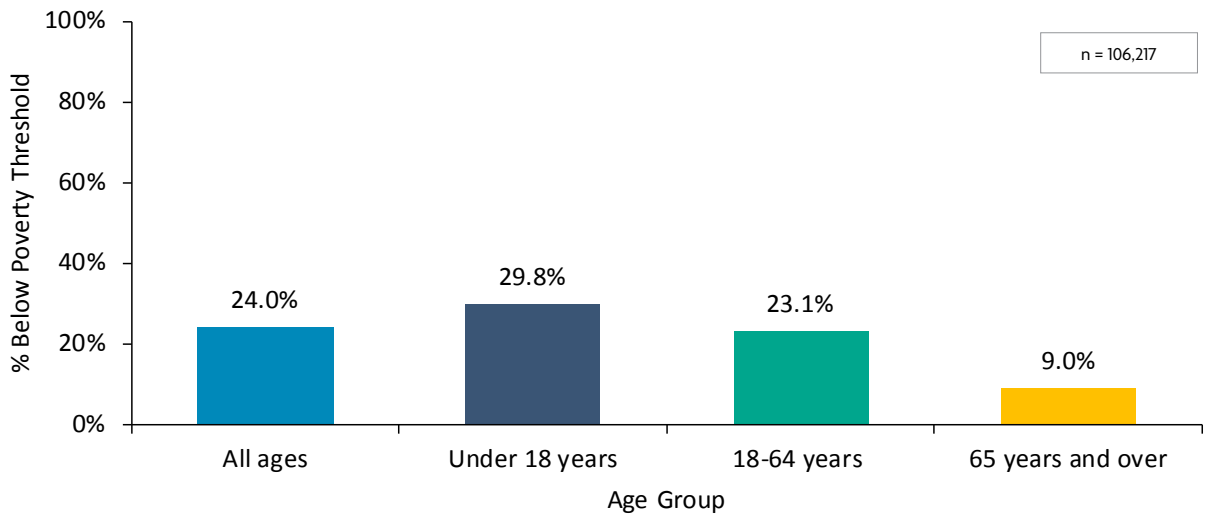
Summary

- The estimated percent of Alaska Native people living in poverty has increased 2.2% since 2009–2013.
- During 2015–2019, approximately 1 in 3 (29.8%) Alaska Native children under the age of 18 years were living in poverty.
- During 2015–2019, the percent of Alaska Native people living in poverty varied from 15.6% to 34.9% by Tribal health region.

Note: The Healthy Alaskans 2030 goal, when referencing the "federal poverty level", is referring to the poverty guidelines issued by the U.S. Department of Health and Human Services. The guidelines are a simplified version of the poverty threshold and does vary geographically.

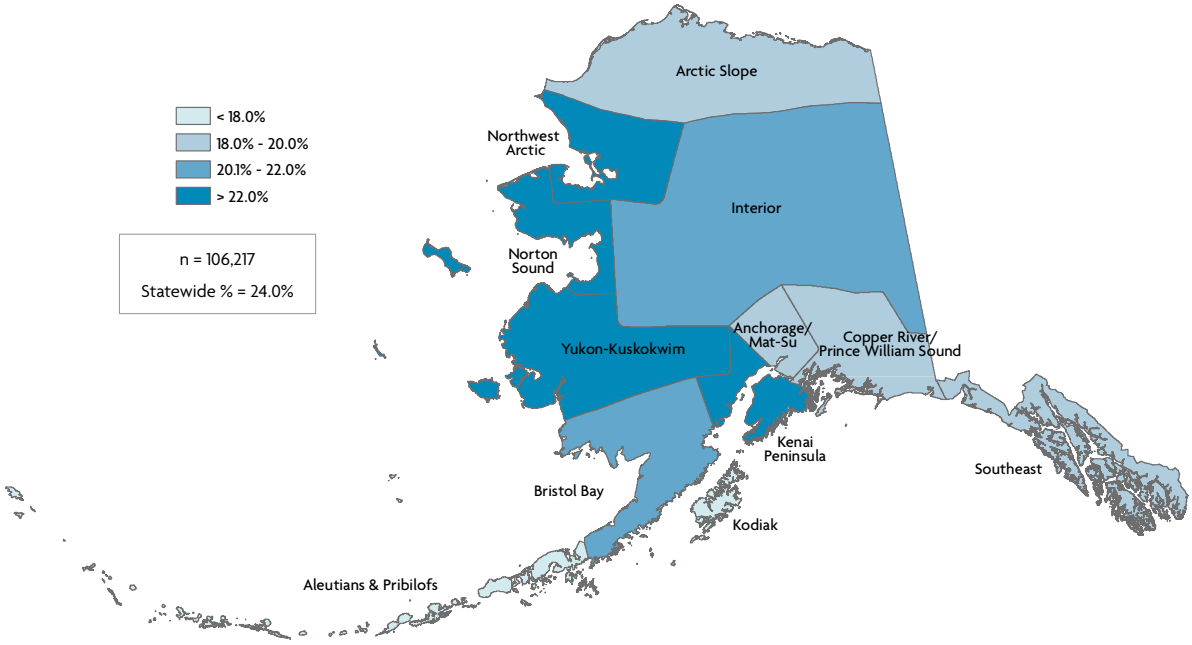
Poverty

Figure 5b. Estimated Percent of Alaska Native People Living Below the Poverty Threshold by Age Group, 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-10

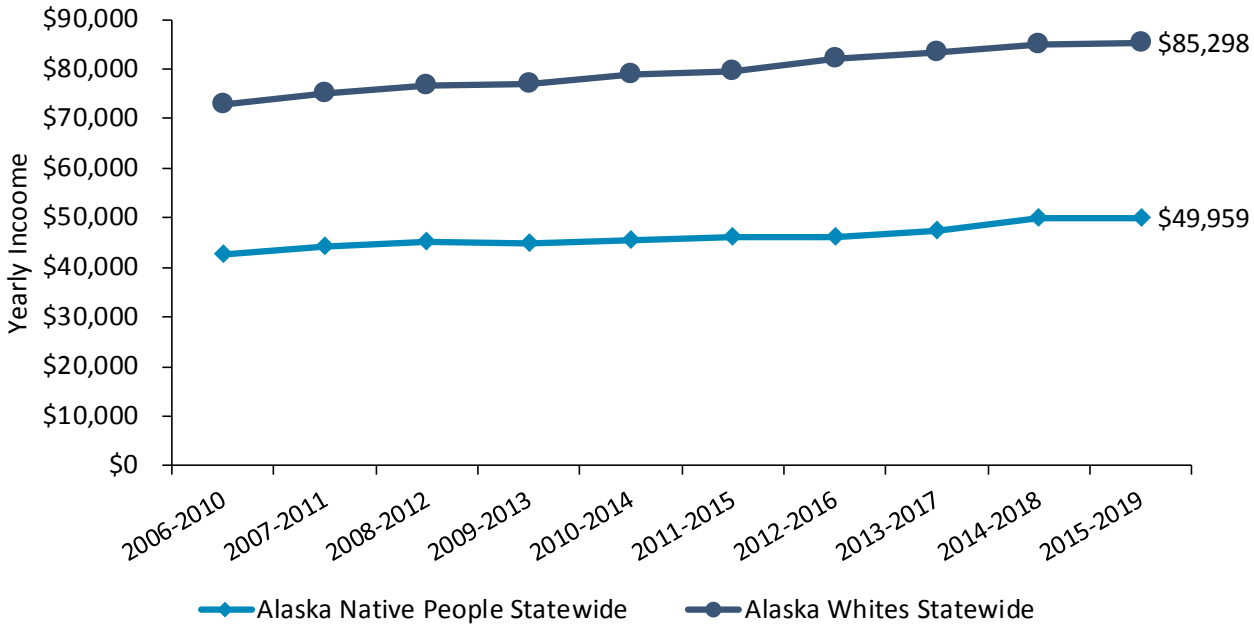
Figure 5c. Estimated Percent of Alaska Native People Living Below the Poverty Threshold by Tribal Health Region, 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-11

Household Income

Figure 6. Estimated Median Household Income, 2006-2010 to 2015-2019



Data Source: U.S. Census Bureau, American Community Survey
Appendix Table C-12

Definition

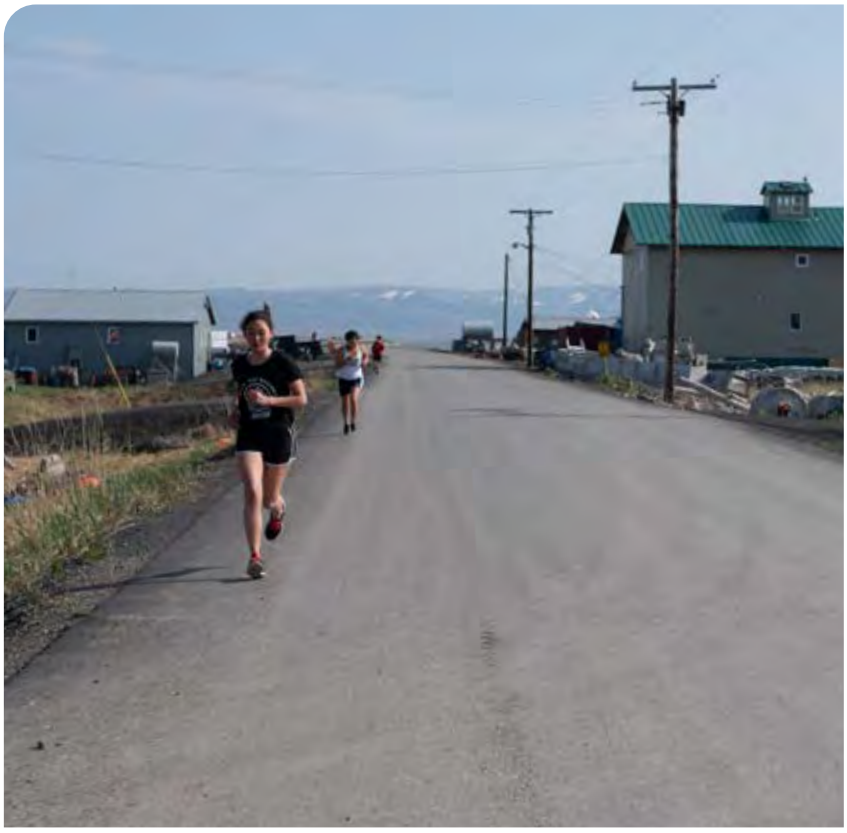
Household income is determined by the reported household income of the persons who completed the American Community Survey. Income includes all monetary sources including wages, the Permanent Fund Dividend, corporation dividends and public assistance. Income does not include subsistence resources.

Summary

- During 2015–2019, the estimated household income for Alaska Native people statewide was $49,959.
- The estimated household income for Alaska Native people increased between 2011–2015 and 2015–2019, however it remained significantly lower than the median income for the Alaska White population.

Mortality

Mortality Highlights



Life expectancy for Alaska Native people has been increasing since the 1980's and is now 70.4 years.

Unintentional injuries account for nearly a quarter of all years of potential life lost from premature death.

The three leading causes of death for Alaska Native people were cancer, heart disease, and unintentional injury.

Alaska Native COPD mortality rates have increased since the 1980's.

Mortality Highlights

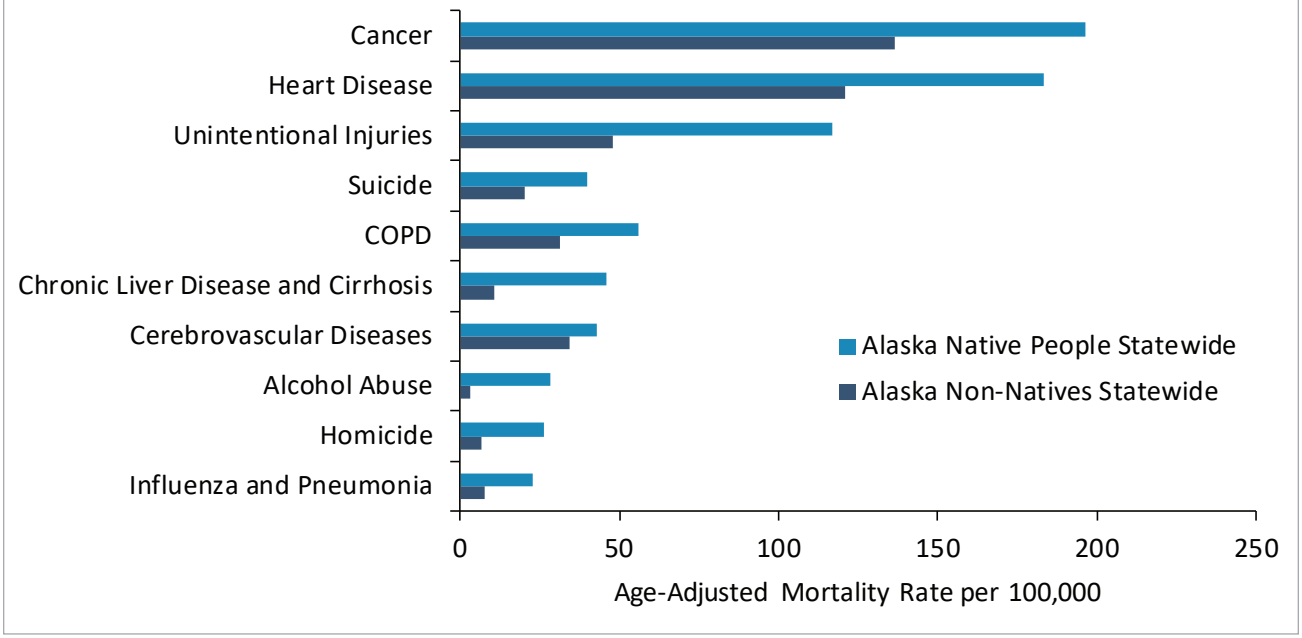
Alaska Native infant mortality rates have decreased since the 1980's. The infant mortality rate is currently 10.3 infant deaths per 1,000 live births.

Alaska Native mortality rates for suicide have remained virtually unchanged since the 1980's.

Alaska Native mortality rates from all-causes, cancer, heart disease, and unintentional injury have decreased since the 1980's.

Leading Causes of Death

Figure 7a. Leading Causes of Death, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-13

Definition

The leading causes of death are the underlying causes of death that account for the highest number of all deaths in a population in a given time period. The leading causes of death are presented in rank order and are ranked according to the number of deaths. Ranking the leading causes of death is a common way to look at mortality data and to monitor the burden of various diseases and behaviors. For the International Classification of Diseases-10 (ICD-10) code categorization used for each cause, see Appendix D.

Summary

» During 2016–2019 cancer, heart disease, and unintentional injuries were the leading causes of death for Alaska Native people. These three causes of death accounted for nearly half (47.2%) of all deaths during this time period.

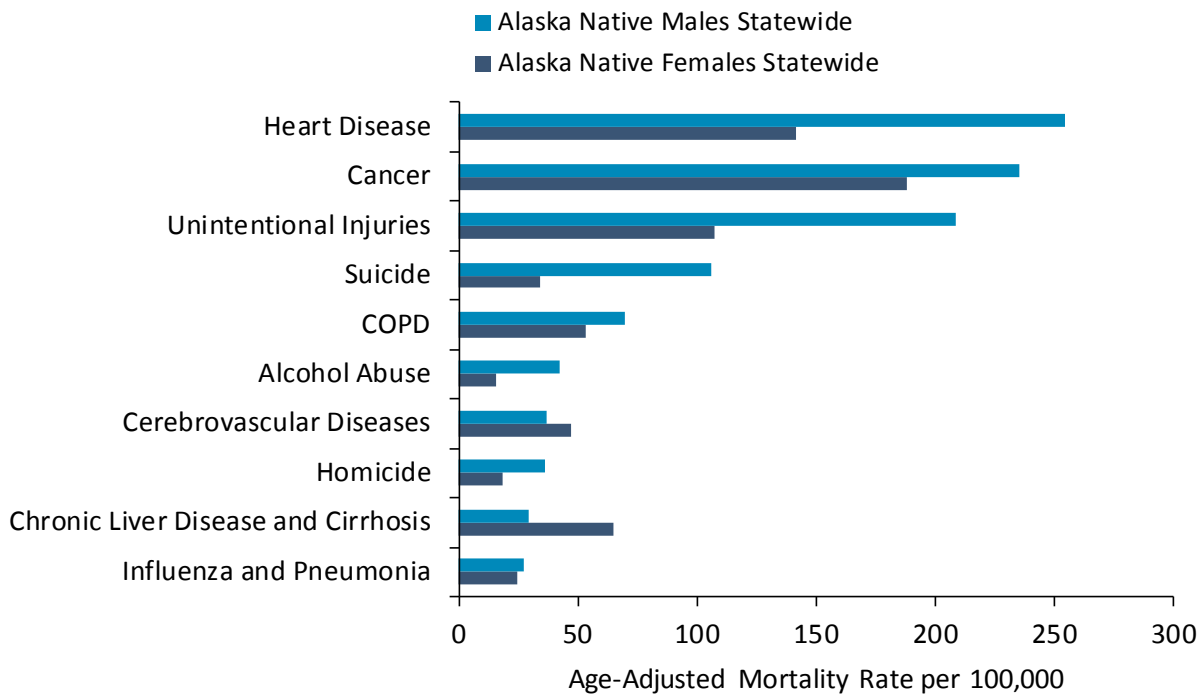
» The Alaska Native mortality rates were significantly higher than the Alaska non-Native rates for all ten leading causes of death.

» Compared with Alaska non-Native males, Alaska Native male mortality rates were significantly higher for nine of the ten leading causes of death (heart disease, cancer, unintentional injury, suicide, COPD, alcohol abuse, homicide, chronic liver disease/cirrhosis and influenza/pneumonia).

» Compared with Alaska non-Native females, Alaska Native female mortality rates were significantly higher for nine of the ten leading causes of death (cancer, heart disease, unintentional injury, chronic liver disease/cirrhosis, COPD, cerebrovascular diseases, suicide, influenza/pneumonia and homicide).

Leading Causes of Death

Figure 7b. Leading Causes of Death by Sex, Alaska Native People, 2016–2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-14

Leading Causes of Death

Figure 7c. Leading Causes of Death and Age-Adjusted Mortality Rates per 100,000 by Population Group, 2016-2019

	Alaska Native People Statewide	Alaska Native Males	Alaska Native Females	Alaska Non-Natives Statewide
1	CANCER 196.3	HEART DISEASE 254.3	CANCER 188.2	CANCER 136.5
2	HEART DISEASE 183.3	CANCER 235.5	HEART DISEASE 141.7	HEART DISEASE 120.8
3	UNINTENTIONAL INJURIES 116.9	UNINTENTIONAL INJURIES 208.7	UNINTENTIONAL INJURIES 107.1	UNINTENTIONAL INJURIES 48.1
4	SUICIDE 39.9	SUICIDE 105.8	LIVER DISEASE & CIRRHOSIS 64.9	COPD 31.1
5	COPD 56.0	COPD 69.6	COPD 53.1	CEREBROVASCULAR DISEASES 34.5
6	LIVER DISEASE & CIRRHOSIS 46.0	ALCOHOL ABUSE 42.3	CEREBROVASCULAR DISEASES 46.9	SUICIDE 20.3
7	CEREBROVASCULAR DISEASES 43.0	CEREBROVASCULAR DISEASES 36.7	SUICIDE 34.1	LIVER DISEASE & CIRRHOSIS 10.5
8	ALCOHOL ABUSE 28.4	HOMICIDE 36.2	INFLUENZA & PNEUMONIA 24.2	HOMICIDE 6.9
9	HOMICIDE 26.2	LIVER DISEASE & CIRRHOSIS 29.6	ALZHEIMER'S DISEASE 27.8	INFLUENZA & PNEUMONIA 20.4
10	INFLUENZA & PNEUMONIA 23.0	INFLUENZA & PNEUMONIA 27.3	HOMICIDE 18.5	ALCOHOL ABUSE 3.0

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-13 and Table C-14

Alcohol Abuse · Alzheimer's Disease · Cancer · Cerebrovascular Diseases · Heart Disease · Homicide · Influenza & Pneumonia · Liver Disease & Cirrhosis · Suicide · Unintentional Injuries

Leading Causes of Death

Figure 7d. Leading Causes of Death and Age-Specific Mortality Rates per 100,000 by Age Group, Alaska Native People, 2016-2019

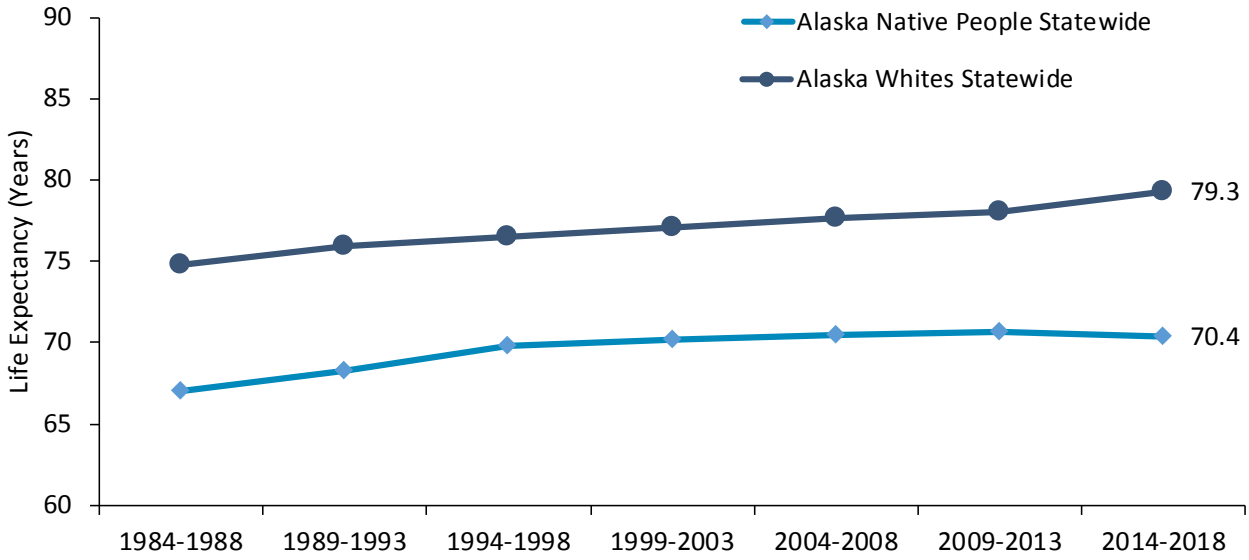
	0-4 Years	5-14 Years	15-24 Years	25-44 Years	45-54 Years	55-64 Years	65-74 Years	75+ Years
1	PERINATAL CONDITIONS	UNINTENTIONAL INJURIES	SUICIDE	UNINTENTIONAL INJURIES	UNINTENTIONAL INJURIES	CANCER	CANCER	HEART DISEASE
#	23	13	102	252	90	195	241	309
Rate	38.8	11.0	106.7	160.2	152.1	339.5	773.2	2,041.2
2	CONGENITAL MALFORMATION	SUICIDE	UNINTENTIONAL INJURIES	SUICIDE	HEART DISEASE	HEART DISEASE	HEART DISEASE	CANCER
#	21	9	70	137	89	148	142	242
Rate	35.4	7.6	73.2	87.1	150.4	257.6	455.6	1,598.6
3	UNINTENTIONAL INJURIES	CANCER	HOMICIDE	LIVER DISEASE & CIRRHOSIS	CANCER	UNINTENTIONAL INJURIES	COPD	COPD
#	16	6	21	64	78	80	74	102
Rate	27.0	5.1	22.0	40.7	131.8	139.3	237.4	673.8
4	INFLUENZA & PNEUMONIA			HOMICIDE	LIVER DISEASE & CIRRHOSIS	LIVER DISEASE & CIRRHOSIS	CEREBROVASCULAR DISEASES	CEREBROVASCULAR DISEASES
#	5			60	56	43	34	102
Rate	8.4			38.2	94.6	74.9	109.1	673.8
5				HEART DISEASE	ALCOHOL ABUSE	COPD	UNINTENTIONAL INJURIES	ALZHEIMER'S DISEASE
#				54	21	41	25	55
Rate				34.3	35.5	71.4	80.2	363.3
6				CANCER	SUICIDE	ALCOHOL ABUSE	ALCOHOL ABUSE	UNINTENTIONAL INJURIES
#				35	20	40	24	54
Rate				22.3	33.8	69.6	77.0	356.7
7				ALCOHOL ABUSE	HOMICIDE	CEREBROVASCULAR DISEASES	LIVER DISEASE & CIRRHOSIS	INFLUENZA & PNEUMONIA
#				21	13	22	19	48
Rate				13.4	22.0	38.3	61.0	317.1
8				CEREBROVASCULAR DISEASES	DIABETES MELLITUS	DIABETES MELLITUS	DIABETES MELLITUS	DIABETES MELLITUS
#				8	11	13	16	26
Rate				5.1	18.6	22.6	51.3	171.8
9				INFLUENZA & PNEUMONIA	COPD	INFLUENZA & PNEUMONIA	INFLUENZA & PNEUMONIA	NEPHRITIS
#				7	9	11	16	26
Rate				4.5	15.2	19.1	51.3	171.8
10				LEGAL INTERVENTION	CEREBROVASCULAR DISEASES	SUICIDE	SEPTICEMIA	ESSENTIAL HYPERTENSION
#				5	7	10	13	22
Rate				3.2	11.8	17.4	41.7	145.3

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

- Alcohol Abuse
- Alzheimer's Disease
- Cancer
- Cerebrovascular Diseases
- Congenital Malformation
- COPD
- Diabetes Mellitus
- Essential Hypertension
- Heart Disease
- Homicide
- Influenza & Pneumonia
- Legal Intervention
- Liver Disease & Cirrhosis
- Nephritis
- Perinatal Conditions
- Septicemia
- Suicide
- Unintentional Injuries

Life Expectancy

Figure 8a. Life Expectancy at Birth, 1984-1988 to 2014-2018



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-15

Definition

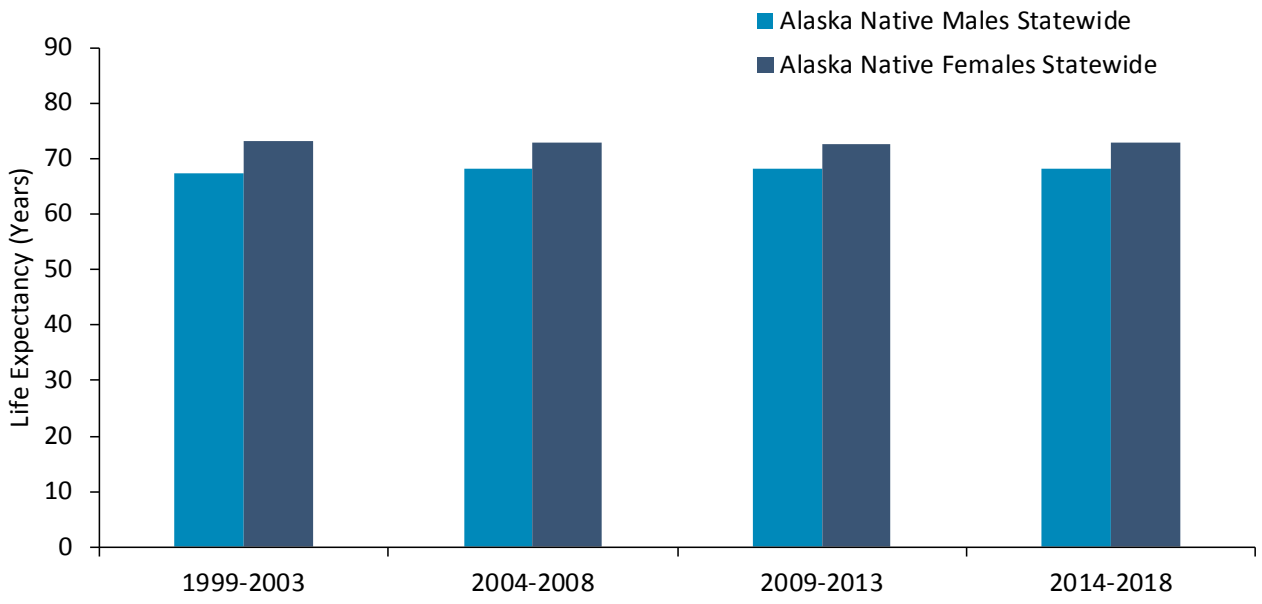
Life expectancy at birth is the average number of years a person is expected to live from birth, based on the year in which they were born. Life expectancy is an indicator of the overall mortality at all ages for a population.

Summary

- Life expectancy at birth among Alaska Native people increased by 4.5 years since 1984–1988, reaching 70.4 years during 2014–2018.
- Despite the increase in life expectancy among Alaska Native people, a gap of 8.9 years existed between Alaska Native and Alaska White life expectancies during 2014–2018.
- Alaska Native females have a higher average life expectancy compared with males. This gender gap has remained stable since 1999–2003.
- Life expectancy varied by Tribal health region, ranging from 68.2 to 74.4 years.

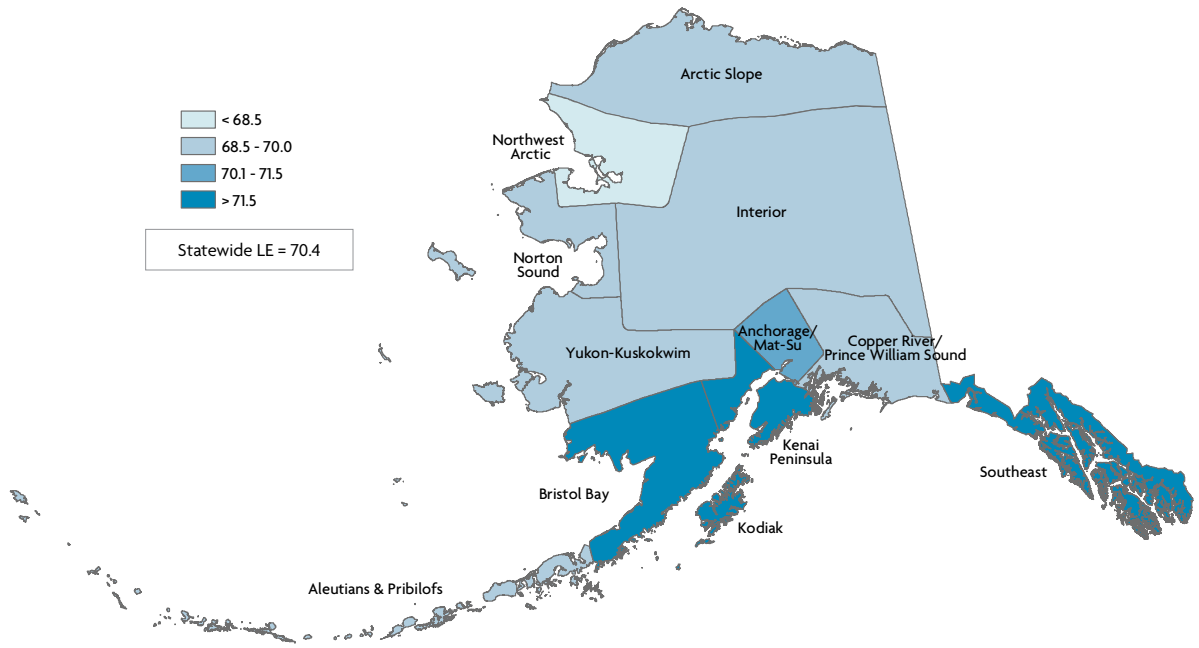
Life Expectancy

Figure 8b. Alaska Native Life Expectancy by Sex, 1999-2003 to 2014-2018



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

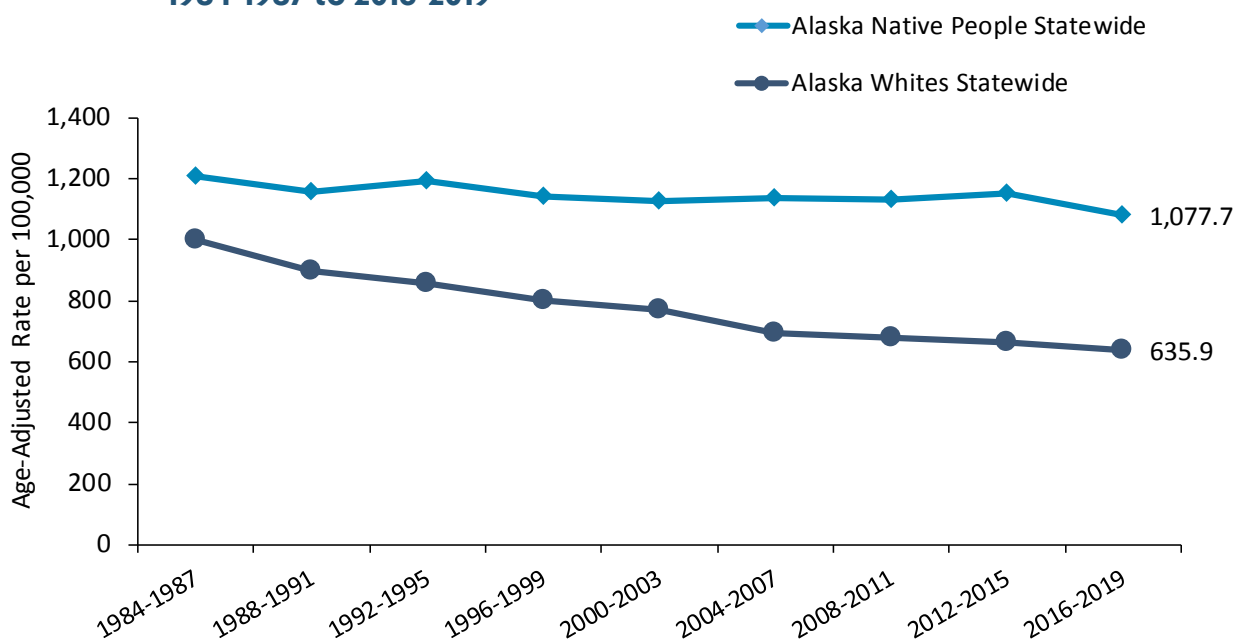
Figure 8c. Alaska Native Life Expectancy in Years by Tribal Health Region, 2014-2018



Data Source: Alaska Health Analytics and Vital Records Section
Appendix Table C-16

All-Cause Mortality

Figure 9a. Age-Adjusted All-Cause Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-17

Definition

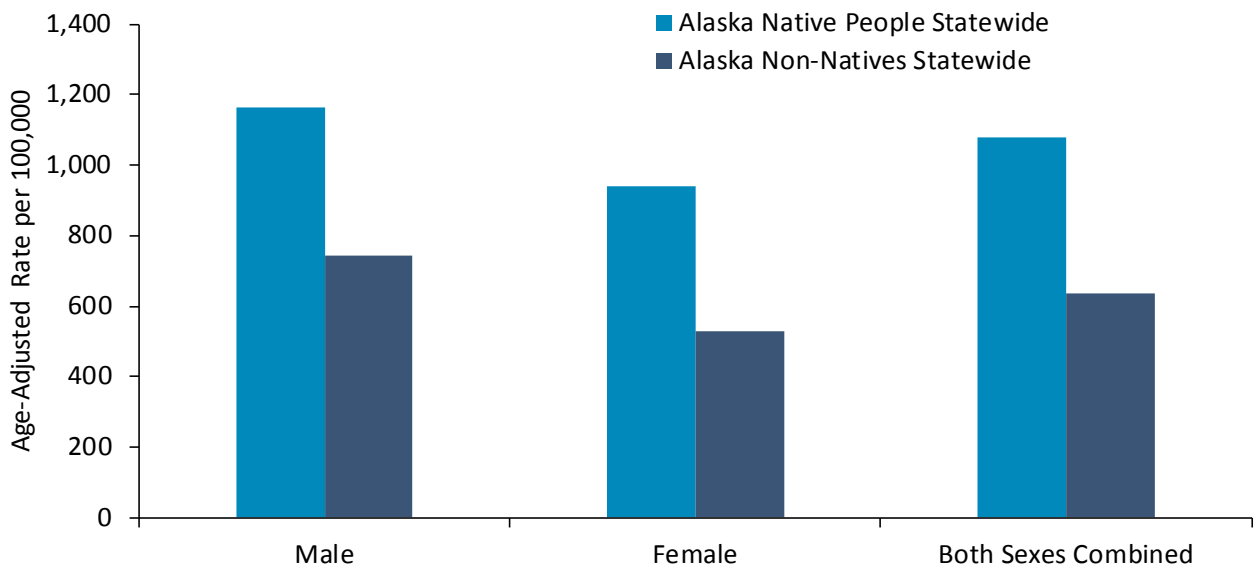
All-cause mortality is the death rate from all causes of death for a population in a given time period.

Summary

- During 2016–2019, the all-cause mortality rate among Alaska Native people was 1,077.7 per 100,000 population.
- Between 1984–1987 and 2016–2019, the all-cause mortality rate among Alaska Native people has decreased.
- Between 1984–1987 and 2016–2019, a greater rate of decrease in the all-cause mortality rate among Alaska non-Native people compared with Alaska Native people widened the disparity between populations. The Alaska Native all-cause mortality rate was 1.7 times higher than the non-Native rate during 2016–2019.
- The 2016–2019 all-cause mortality rate varied by Tribal health region, ranging from 847.5 to 1,299.4 deaths per 100,000.

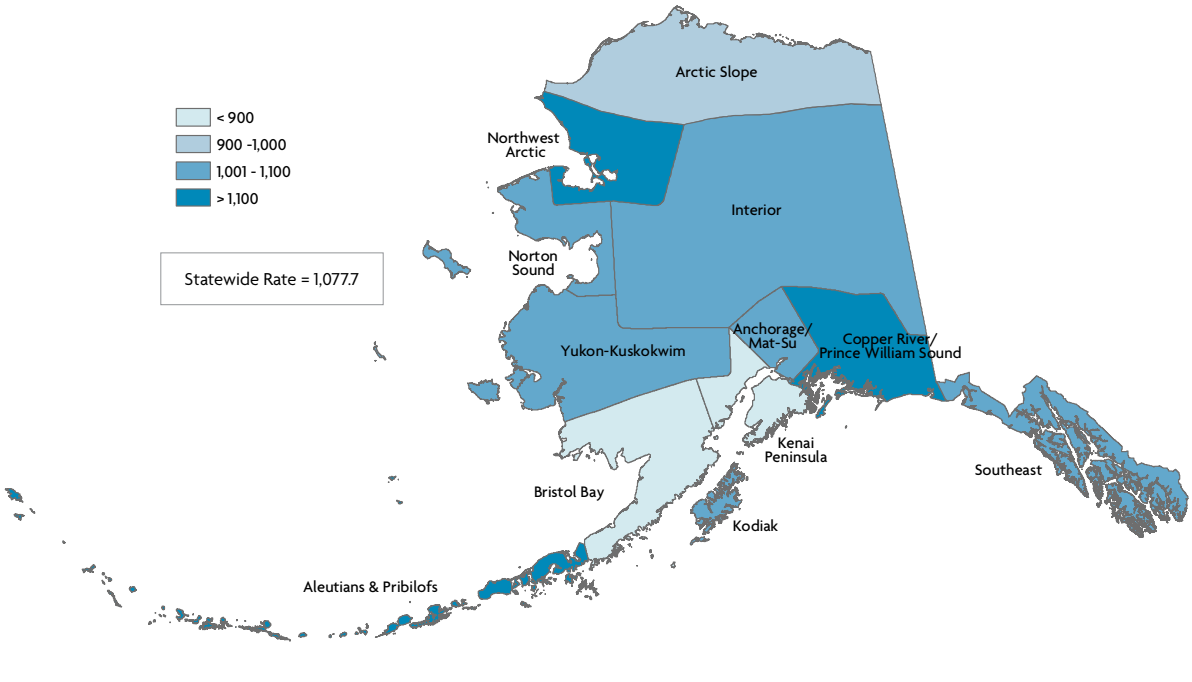
All-Cause Mortality

Figure 9b. Age-Adjusted All-Cause Mortality Rate by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-18

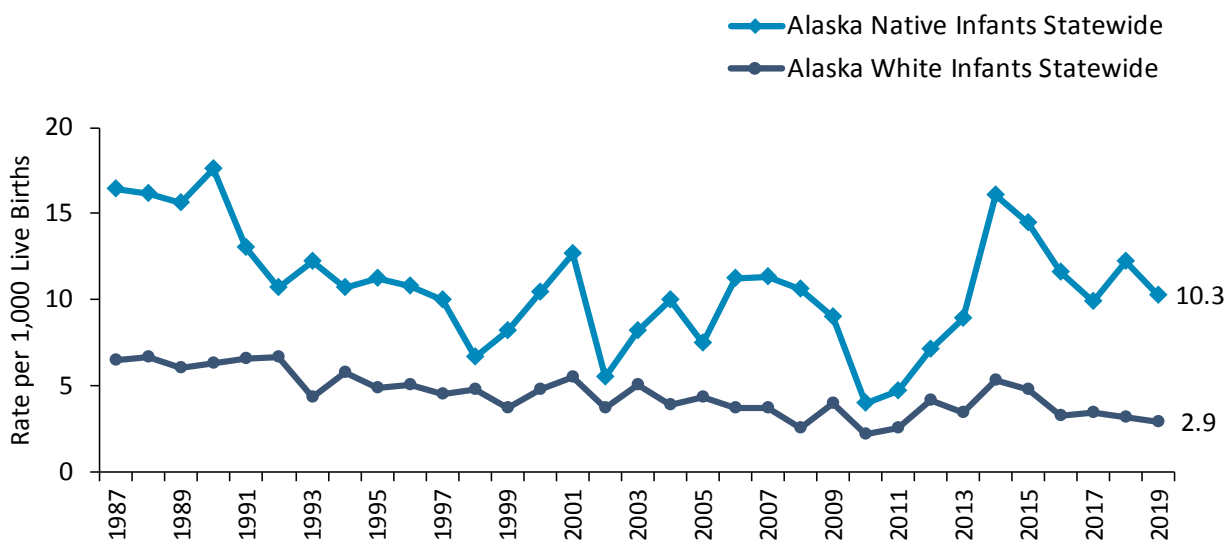
Figure 9c. Age-Adjusted Alaska Native All-Cause Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-19

Infant Mortality

Figure 10a. Infant Mortality Rate, 1987-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-20

Definition

The infant mortality rate (IMR) is the number of children under one year of age who died divided by the number of live births during the year. It is used to compare and monitor the health and well-being of populations throughout the world.2 Specifically, this rate may be an indicator of the quality and accessibility of primary health care available to pregnant women and infants as well as reflecting on the impact poverty and substandard living conditions have on maternal and infant health.[3] Infant mortality can be affected by factors such as level of education of the mother, household income, sanitary conditions, prenatal and postnatal care, and other factors.[2,4]

Related Objectives

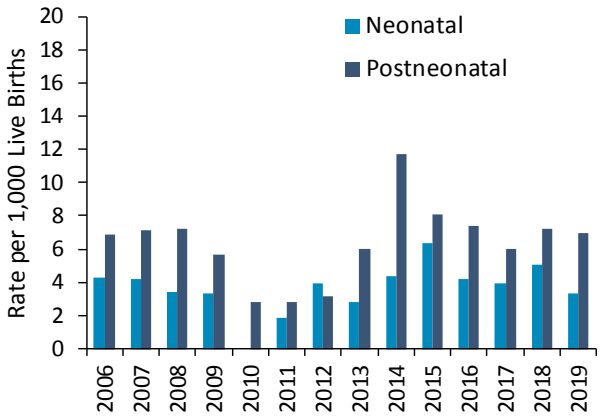
Reduce the rate of infant deaths to 5.0 infant deaths per 1,000 live births. - *HEALTHY PEOPLE 2030, OBJECTIVE MICH-02*

Summary

- Between 1987 and 2019, the Alaska Native infant mortality rate declined 37.2% to 10.3 infant deaths per 1,000 live births.
- Alaska Native infants experienced higher mortality in the post-neonatal period (28 days to 1 year of age) than in the neonatal period (<28 days of age).
- The leading causes of Alaska Native infant deaths during 2005–2019 were perinatal conditions (22.2%), congenital malformations (16.1%), and sudden infant death syndrome (SIDS) (16.1%).
- During 2015–2019, rates of infant mortality varied by Tribal health region, ranging from 8.5 to 18.2 per 1,000 live births.

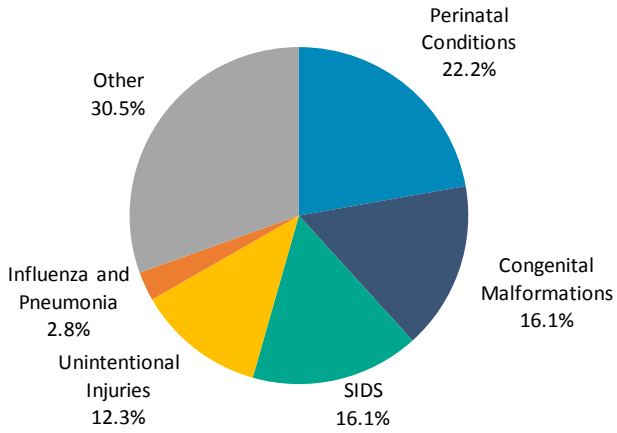
Infant Mortality

Figure 10b. Alaska Native Neonatal and Postneonatal Deaths, 2006-2019



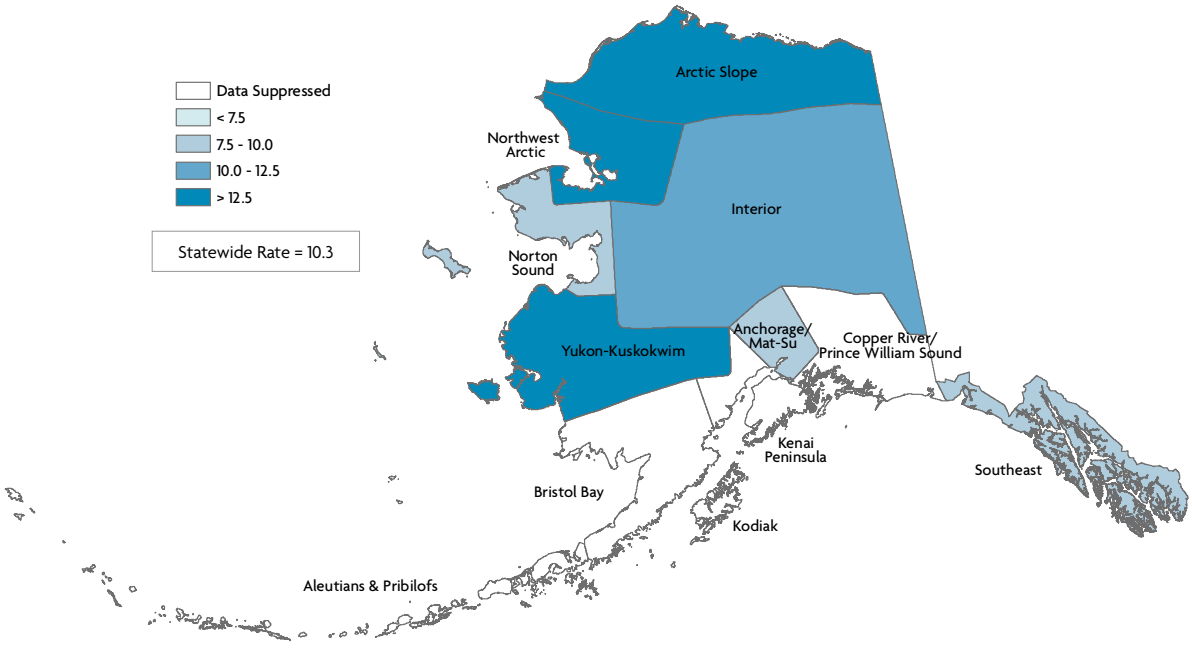
Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-21

Figure 10c. Leading Causes of Alaska Native Infant Mortality, 2005-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-22

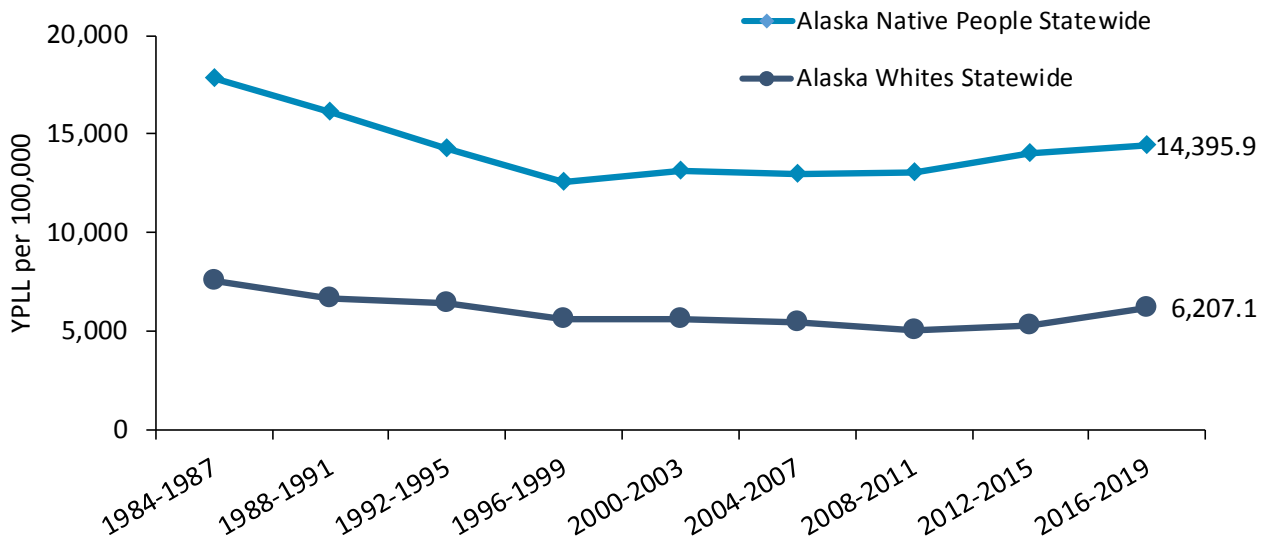
Figure 10d. Alaska Native Infant Mortality Rate per 1,000 Live Births by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-23

Years of Potential Life Lost

Figure 11a. Age-Adjusted All-Cause Years of Potential Life Lost per 100,000, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-24

Definition

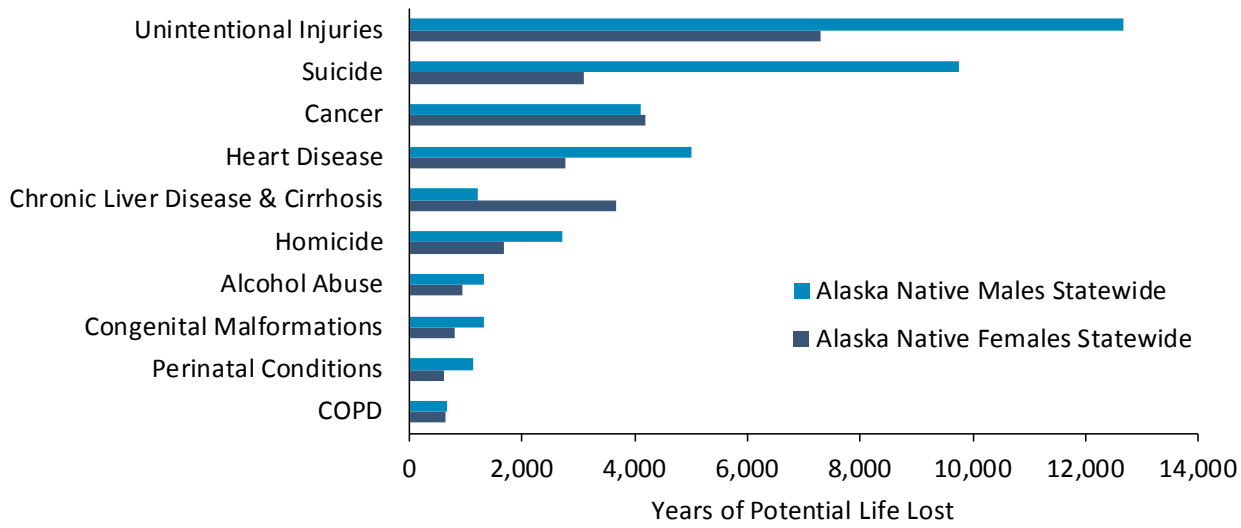
Years of potential life lost (YPLL) measures premature mortality. It represents the total number of years not lived by persons who died before the age of 75 years. YPLL is an alternative measure of mortality that places more emphasis on deaths that occur at younger ages. The leading causes of YPLL are the leading causes of death ranked according to those that accounted for the highest number of YPLL.

Summary

» During 2016–2019, there were 85,393 Alaska Native YPLL from all causes.
» The rate of Alaska Native YPLL has appeared to be increasing since 2012–2015.
» Alaska Native people experienced significantly higher YPLL rates as compared to Alaska non-Natives in all time periods.
» The leading causes of YPLL among Alaska Native people, in rank order, were unintentional injuries, suicide, cancer and heart disease. These causes contributed to the highest number of YPLL of all causes. Unintentional injuries accounted for nearly a quarter (23.4%) of all YPLL.

Years of Potential Life Lost

Figure 11b. Leading Causes of Years of Potential Life Lost by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-25

Figure 11c. Leading Causes of Years of Potential Life Lost, by Population Group, Mean Years of Life Lost, 2016-2019

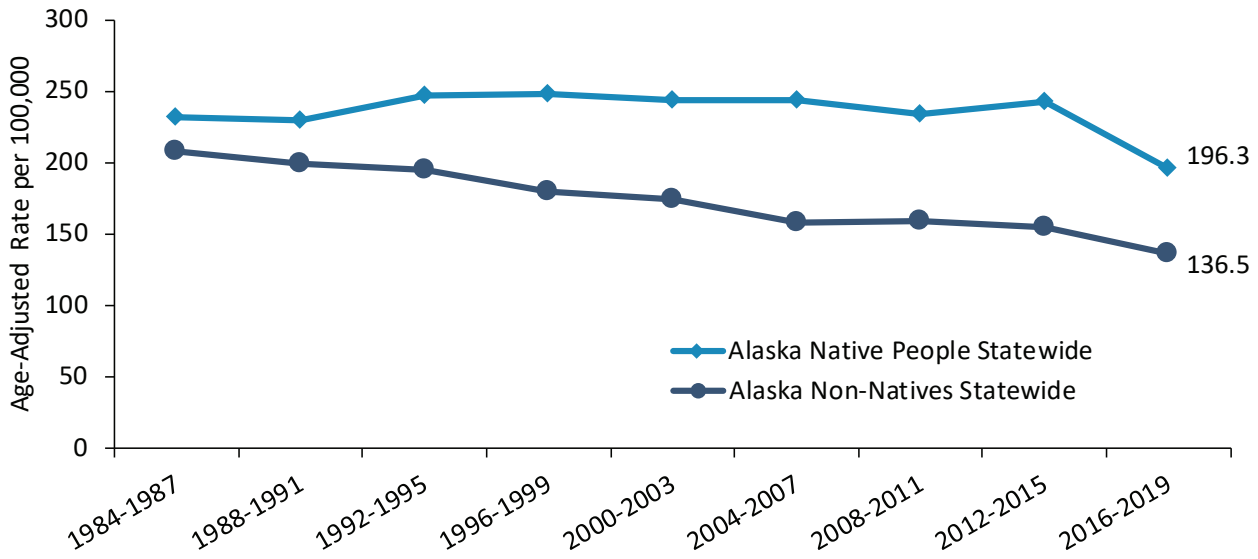
	Alaska Native People Statewide	Alaska Native Males	Alaska Native Females	Alaska Non-Natives Statewide
1	Unintentional Injuries 36.5	Unintentional Injuries 36.5	Unintentional Injury 36.6	Unintentional Injuries 31.0
2	Suicide 45.6	Suicide 46.2	Cancer 15.2	Cancer 12.7
3	Cancer 14.8	Heart Disease 17.2	Liver Disease & Cirrhosis 27.3	Heart Disease 13.5
4	Heart Disease 17.6	Cancer 14.4	Suicide 43.7	Suicide 33.5
5	Liver Disease & Cirrhosis 26.6	Homicide 39.9	Heart Disease 18.4	Homicide 38.8
6	Homicide 41.1	Alcohol Abuse 18.0	Homicide 43.2	Liver Disease & Cirrhosis 18.7
7	Alcohol Abuse 21.1	Congenital Malformations 59.7	Alcohol Abuse 27.8	Diabetes Mellitus 13.1
8	Congenital Malformations 60.7	Liver Disease & Cirrhosis 24.8	Congenital Malformations 62.3	Perinatal Conditions 74.7
9	Perinatal Conditions 75.0	Perinatal Conditions 75.0	COPD 11.0	COPD 52.7
10	COPD 10.1	COPD 9.4	Cerebrovascular Diseases 16.7	Congenital Malformations 10.1

Alcohol Abuse
Alzheimer's Disease
Cancer
Cerebrovascular Diseases
Congenital Malformation
COPD
Diabetes Mellitus
Essential Hypertension
Heart Disease
Homicide
Influenza & Pneumonia
Legal Intervention
Liver Disease & Cirrhosis
Nephritis
Perinatal Conditions
Septicemia
Suicide
Unintentional Injuries

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-24 and C-25

Cancer Mortality

Figure 12a. Age-Adjusted Cancer Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-26

Definition

Cancer mortality is the rate of death due to malignant neoplasms (cancer) per 100,000 population. Cancer deaths include ICD–10 codes C00–C97.

Related Objectives

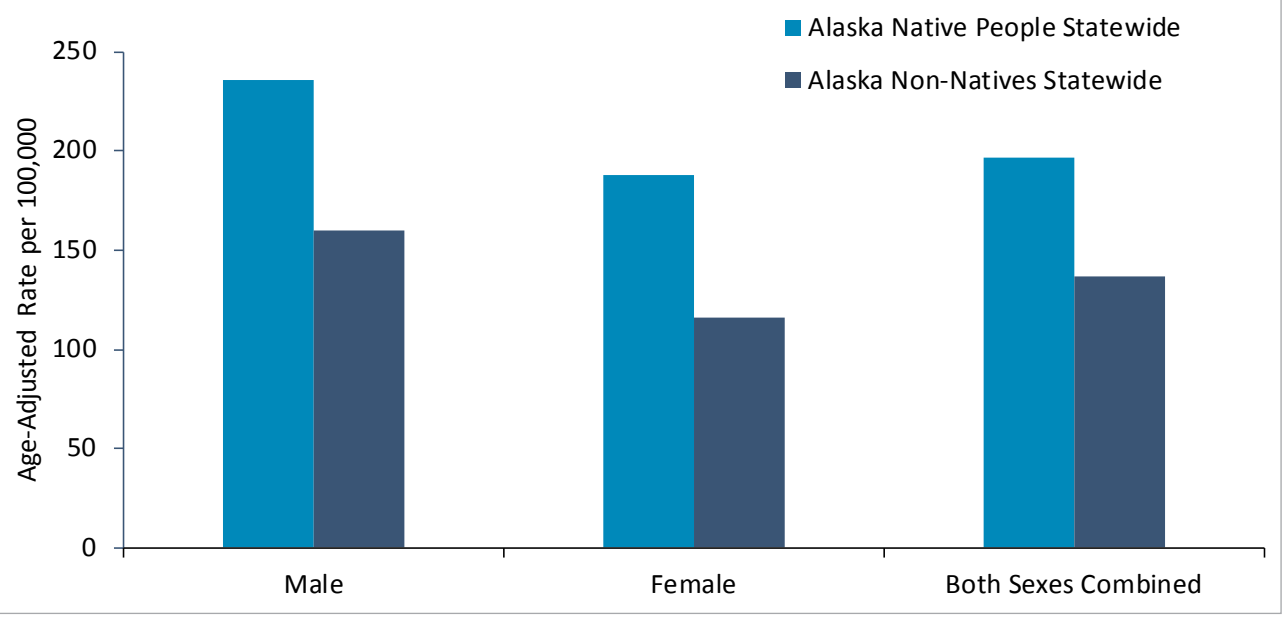
Reduce the cancer mortality rate to 127.4 per 100,000 population. - *HEALTHY ALASKANS 2030, OBJECTIVE #1.* Reduce the overall cancer death rate to 122.7 per 100,000 population. - *HEALTHY PEOPLE 2030, OBJECTIVE C-01*

Summary

- During 2016–2019, cancer was the leading cause of death among Alaska Native people with a mortality rate of 196.3 per 100,000. This was significantly higher than among Alaska non-Natives (136.5 per 100,000).
- The cancer mortality rate among Alaska Native people has appeared to decline between 1984–1987 and 2016–2019. Since 1992-1995, cancer mortality rates had been significantly higher among Alaska Native people compared to Alaska non-Natives for all time periods shown.
- Cancer mortality rates varied by Tribal health region, ranging from 179.9 to 271.0 deaths per 100,000.

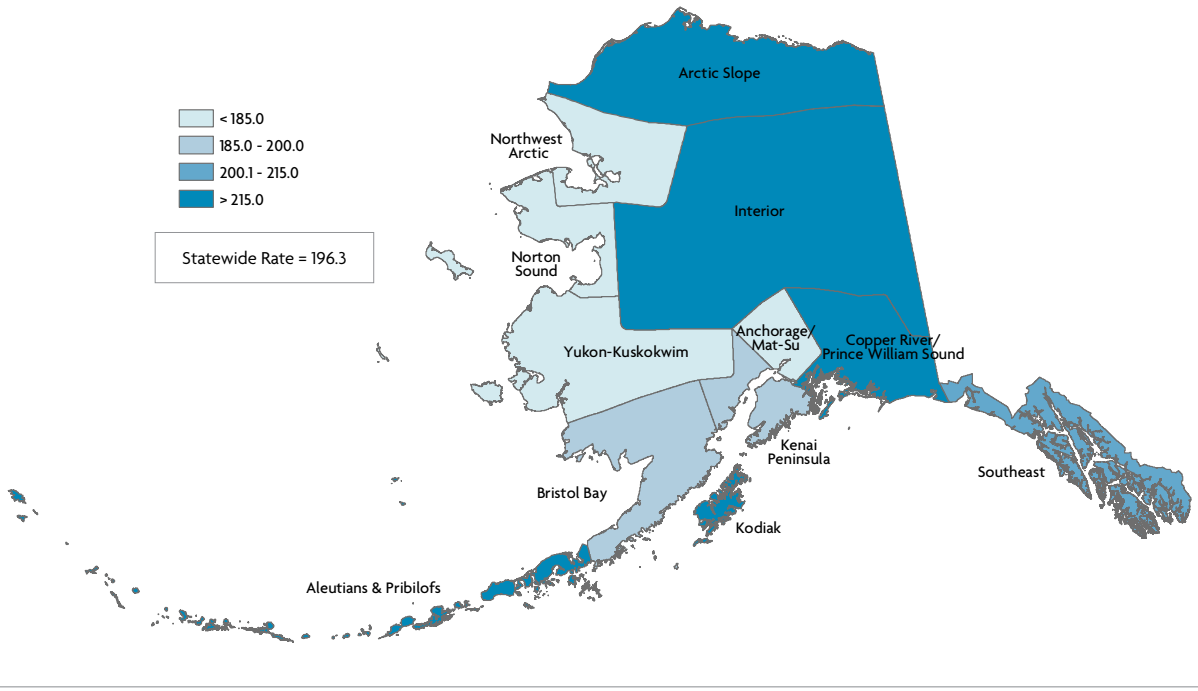
Cancer Mortality

Figure 12b. Age-Adjusted Cancer Mortality Rate by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-27

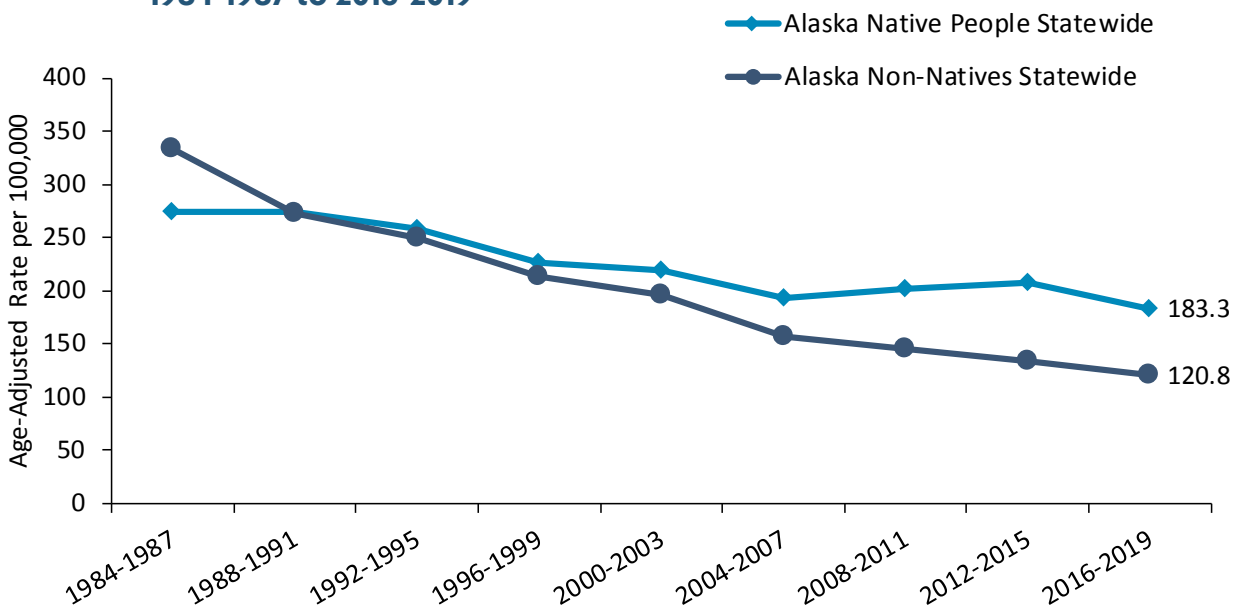
Figure 12c. Age-Adjusted Alaska Native Cancer Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-28

Heart Disease Mortality

Figure 13a. Age-Adjusted Heart Disease Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-29

Definition

Heart disease mortality is the rate of death due to diseases of the heart per 100,000 population. Heart disease deaths include ICD–10 codes I00–I09, I11, I13, and I20–I51.

Related Objectives

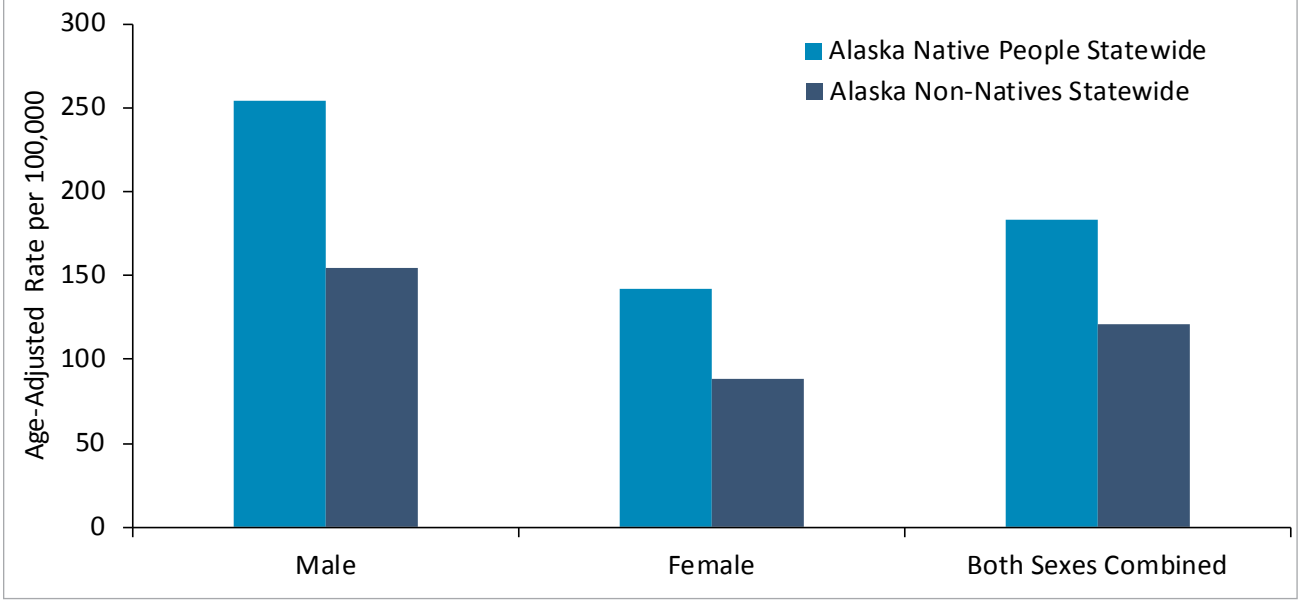
Reduce coronary heart disease deaths to 71.1 per 100,000 population. - *HEALTHY PEOPLE 2030, OBJECTIVE HDS-02*

Summary

» During 2016–2019, heart disease was the second leading cause of death among Alaska Native people, with a mortality rate of 183.3 per 100,000. This was significantly higher than among Alaska non-Natives (120.8 per 100,000).
» Between the 1984–1987 and 2016–2019 time periods, heart disease mortality rates among Alaska Native people decreased but are still significantly higher compared with Alaska non-Natives.
» The heart disease mortality rate among Alaska Native males is higher than the heart disease mortality rate among Alaska Native females.
» Heart disease mortality rates varied by Tribal health region, ranging from 120.4 to 239.9 deaths per 100,000.

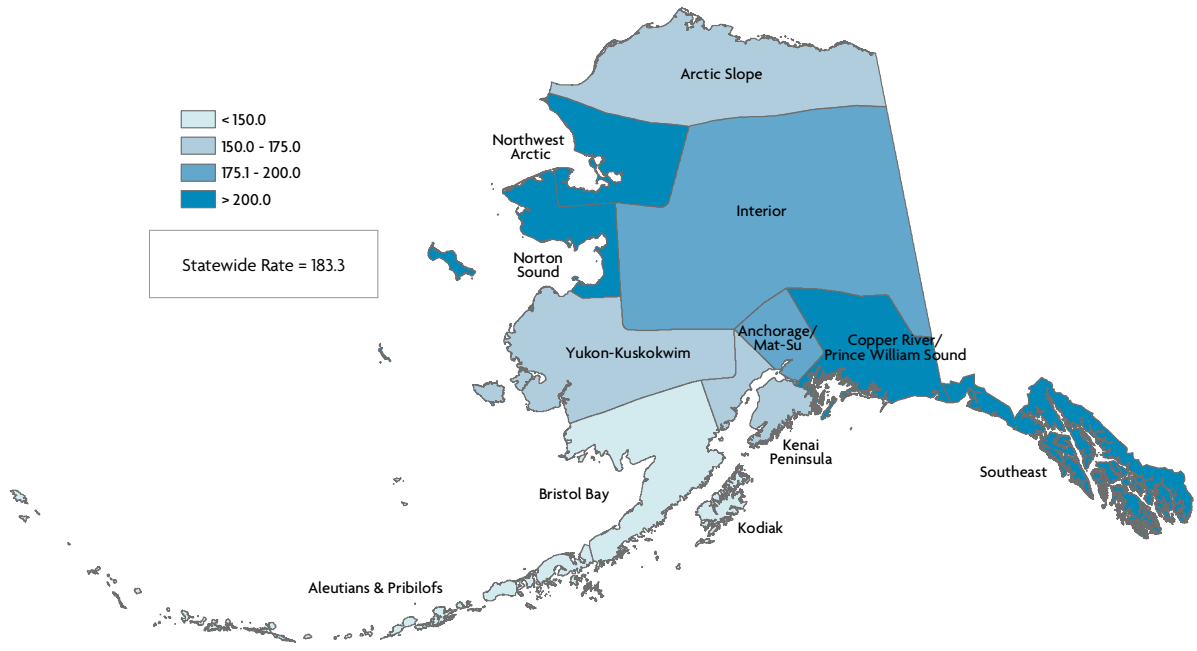
Heart Disease Mortality

Figure 13b. Age-Adjusted Heart Disease Mortality Rate by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-30

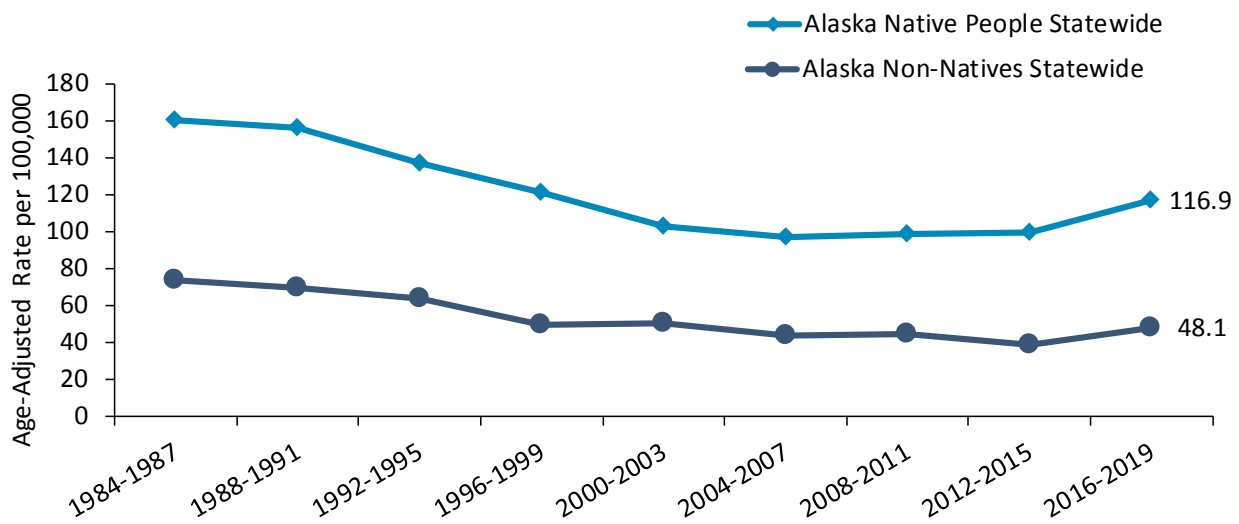
Figure 13c. Age-Adjusted Alaska Native Heart Disease Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-31

Unintentional Injury Mortality

Figure 14a. Age-Adjusted Unintentional Injury Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-32

Definition

Unintentional injury mortality is the total number of deaths due to unintentional injuries per 100,000 persons. Unintentional injury deaths include ICD–10 codes V01–X59 and Y85-Y86.

Related Objectives

Reduce the unintentional injury mortality rate to 56.5 per 100,000 population. - *HEALTHY ALASKANS 2030, OBJECTIVE #12*

Reduce unintentional injury deaths to 36.4 deaths per 100,000 population. - *HEALTHY PEOPLE 2030, OBJECTIVE IVP-03*

Summary

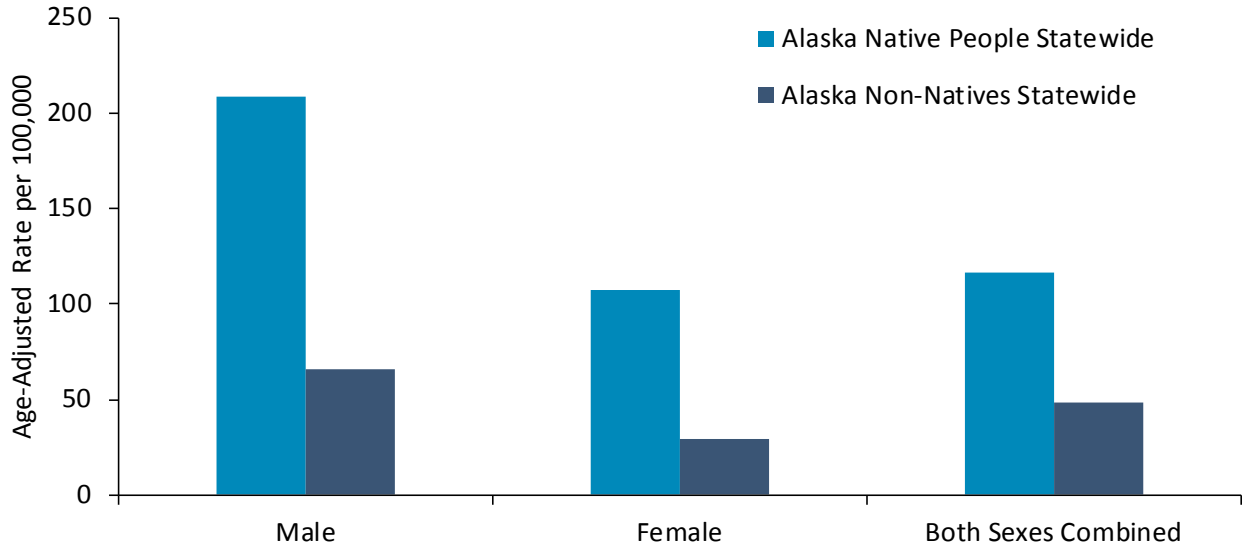
» During 2016–2019, unintentional injury was the third leading cause of death among Alaska Native people, with a mortality rate of 116.9 per 100,000. This was significantly higher than among Alaska non-Natives (48.1 per 100,000).

» During 2016–2019, the unintentional injury mortality rate for Alaska Native people was 2.4 times that of Alaska non-Natives.

» Unintentional injury mortality rates varied by Tribal health region, ranging from 72.0 to 214.6 deaths per 100,000.

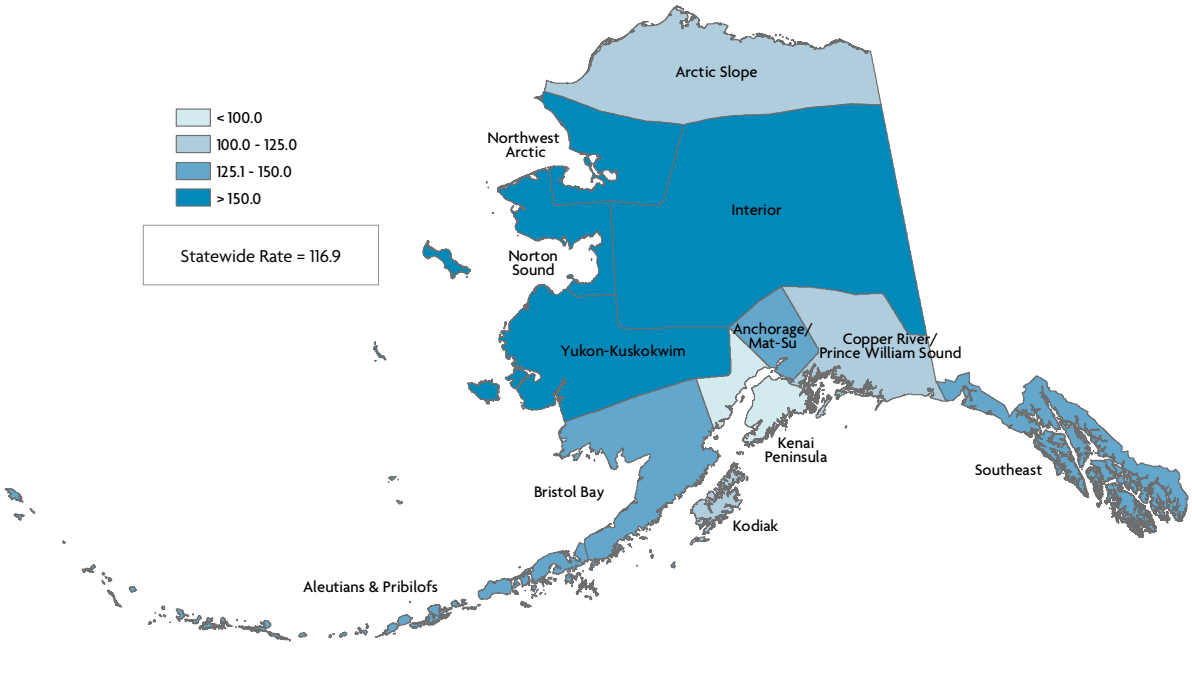
Unintentional Injury Mortality

Figure 14b. Unintentional Injury Mortality Rate by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-33

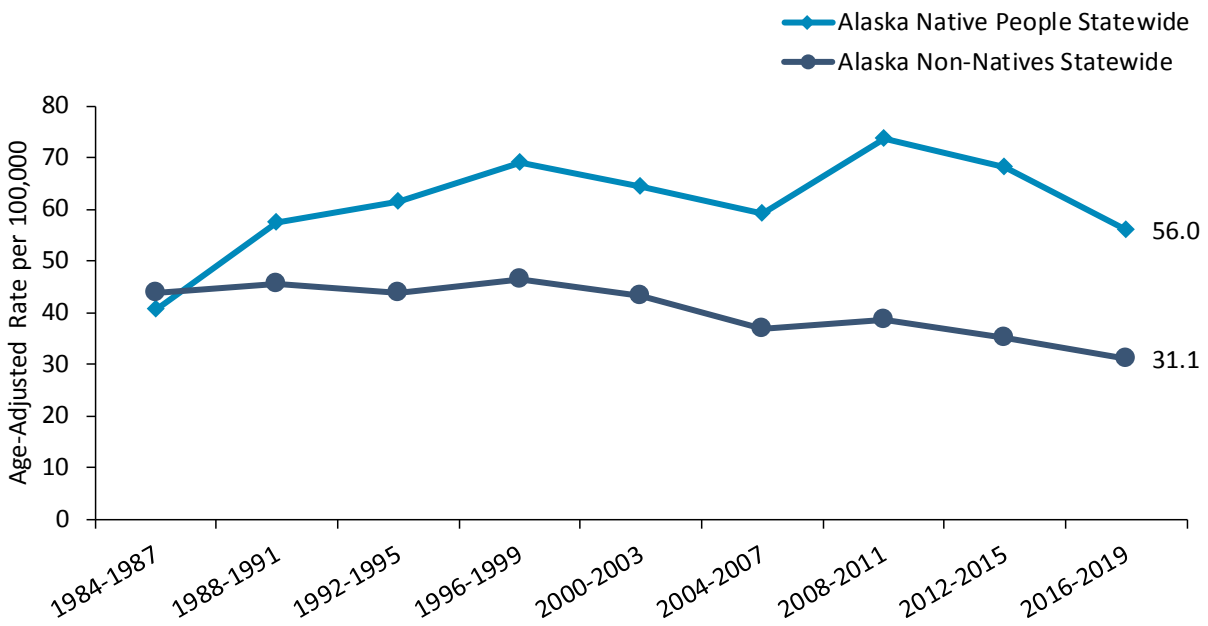
Figure 14c. Age-Adjusted Alaska Native Unintentional Injury Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-34

COPD Mortality

Figure 15a. Age-Adjusted COPD Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-35

Definition

Chronic obstructive pulmonary disease (COPD) mortality is the rate of death due to COPD per 100,000 population. COPD deaths include ICD–10 codes J40–J47.

Related Objectives

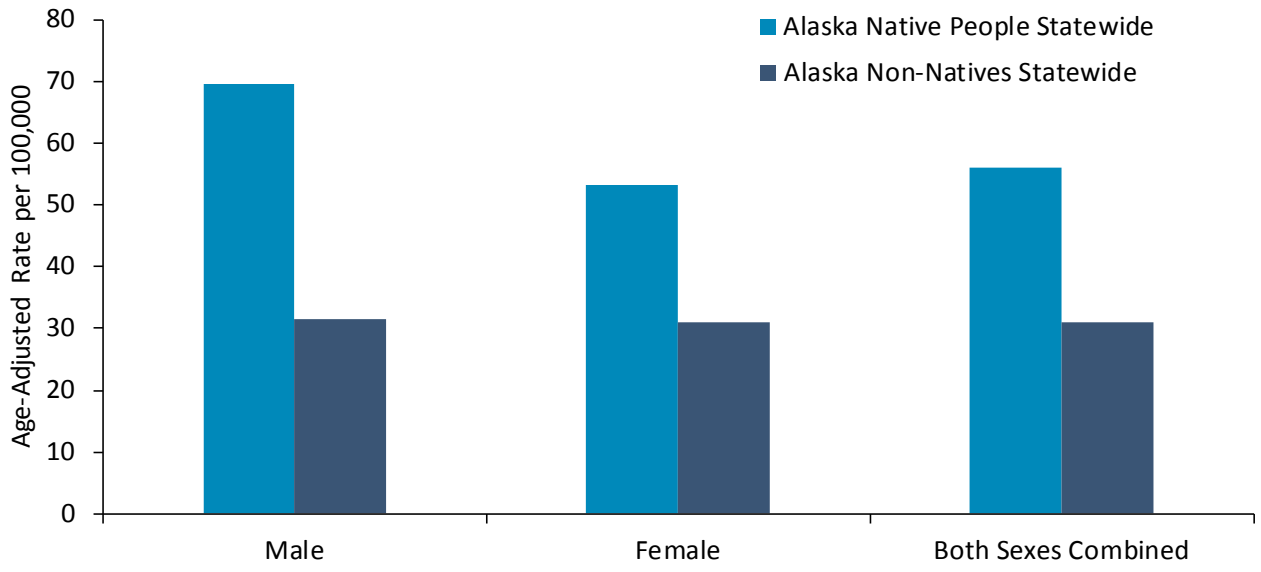
Reduce deaths from COPD in adults to 107.2 per 100,000 population. - *HEALTHY PEOPLE 2030, OBJECTIVE RD-05*

Summary

- During 2016–2019, COPD was the fifth leading cause of death among Alaska Native people, with a mortality rate of 56.0 per 100,000. This was significantly higher than among Alaska non-Natives (31.1 per 100,000).
- COPD mortality rates among Alaska Native people appear to have increased since 1984–1987.
- COPD mortality rates varied by Tribal health region, ranging from 56.0 to 116.8 deaths per 100,000.

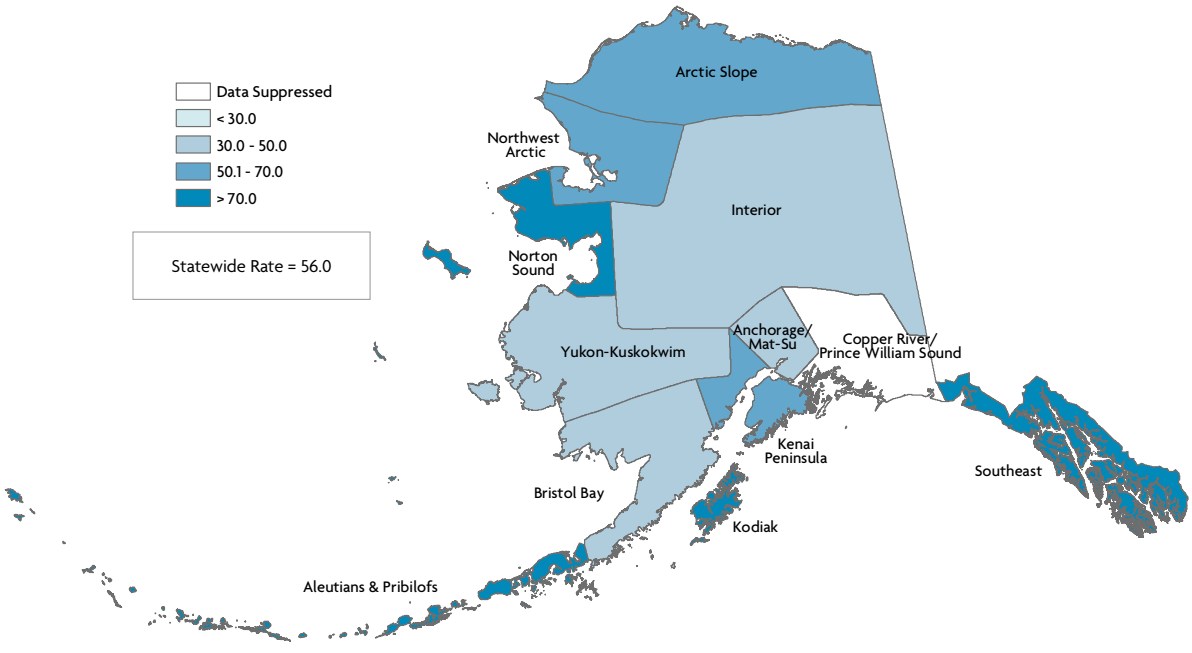
COPD Mortality

Figure 15b. Age-Adjusted COPD Mortality Rate by Sex, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-36

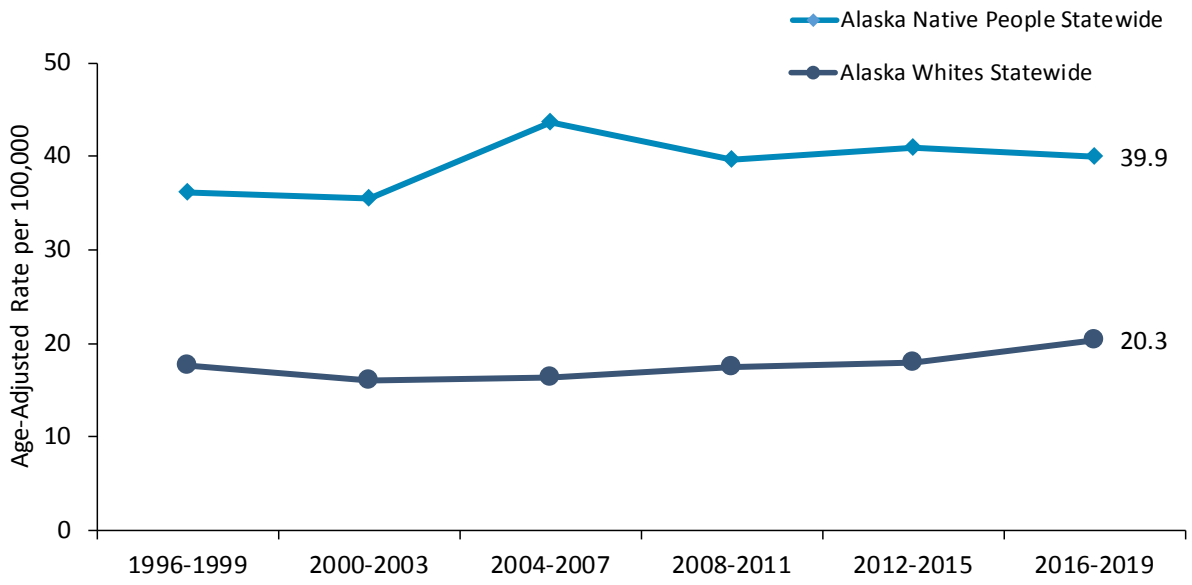
Figure 15c. Age-Adjusted Alaska Native COPD Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-37

Suicide Mortality

Figure 16a. Age-Adjusted Suicide Mortality Rate per 100,000 Population, 1996-1999 to 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-38

Definition

The suicide mortality rate is the total number of deaths due to suicide per 100,000 population. Suicide is defined as the action of intentionally taking one's own life. Suicide deaths include ICD–10 codes X60–X84, Y870, and U03.

Related Objectives

Reduce the suicide mortality rate to 25.0 per 100,000 population. - *HEALTHY ALASKANS 2030, OBJECTIVE #25*. Reduce the suicide rate to 12.8 suicides per 100,000 population. - *HEALTHY PEOPLE 2030, GOAL MHMD-01*

Summary

» During 2016–2019, suicide was the fourth leading cause of death among Alaska Native people with a rate of 39.9 per 100,000. This was significantly higher than among Alaska non-Natives (20.3 per 100,000).

» During 2016–2019, Alaska Native males experienced disproportionately higher suicide mortality rates (105.8 per 100,000) than Alaska Native females (34.1 per 100,000).

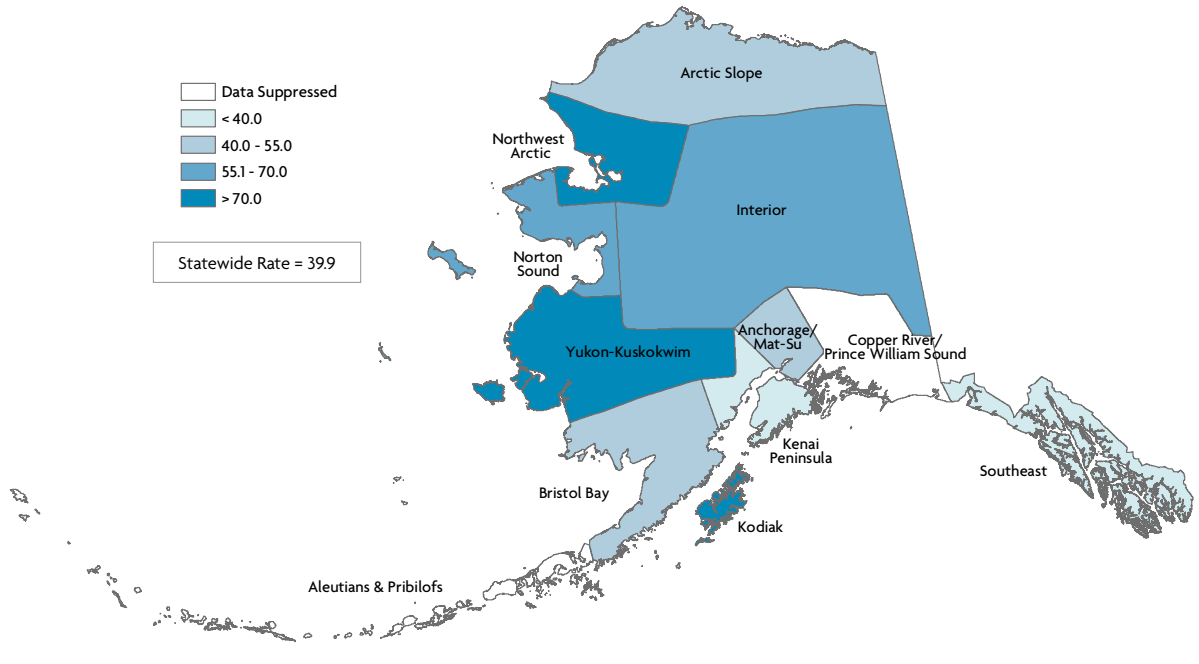
» The suicide mortality rate among Alaska Native people varied by Tribal health region, ranging from 29.6 to 118.3 deaths per 100,000.

Suicide Mortality

Figure 16b. Age-Adjusted Suicide Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-39

Figure 16c. Age-Adjusted Alaska Native Suicide Mortality Rate per 100,000 by Tribal Health Region, 2016-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-40

Morbidity

Morbidity Highlights

The prevalence of diagnosed diabetes among Alaska Native people is 6.3%.

The leading cause of hospitalizations in the Alaska Tribal Health System is for abnormal clinical and laboratory findings, followed by pregnancy and childbirth, digestive disease, and injury and poisoning.

Cancer incidence rates have increased significantly among Alaska Native people since 1969.

The leading types of cancer among Alaska Native people are colon/rectum, lung/bronchus, and breast cancer.

Morbidity Highlights

Over half (51.7%) of Alaska Native adults have experienced tooth loss due to tooth decay or gum disease.

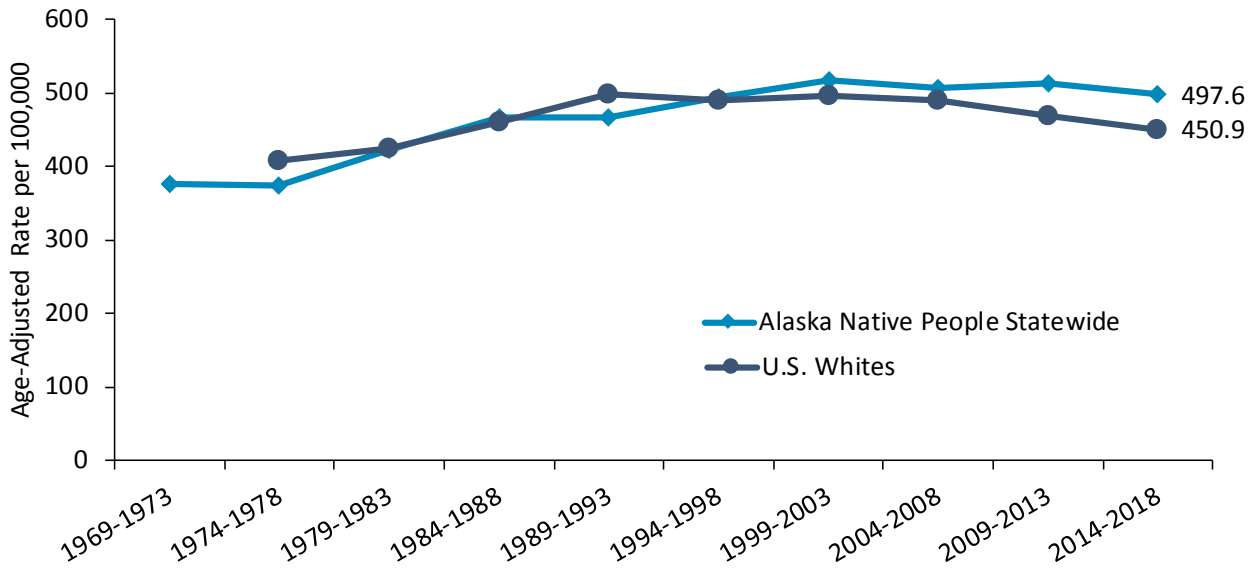
Chlamydia infection rates among Alaska Native people are more than 3 times greater than among Alaska non-Natives, with the greatest reported number of infections among females aged 15–34 years.

Gonorrhea infection rates among Alaska Native people are more than 3 times greater than among Alaska non-Natives, with the greatest reported number of infections among females aged 15–34 years.

Over half of all outpatient visits in the Alaska Tribal Health System are for reasons such as examinations and reproduction related matters. The leading cause of outpatient visits is for musculoskeletal diseases.

Cancer Incidence

Figure 17a. Cancer Incidence Rate per 100,000 Population, 1969-1973 to 2014-2018



Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry; National Cancer Institute, Surveillance Epidemiology and End Results Program (SEER)
Appendix Table C-41

Definition

Cancer incidence is the number of new cancers diagnosed in a specified population during a specified time period. Cancers incidence rates for a specific type of cancer are based on the primary site reported or on the site of origin.

Summary

» During 2014–2018, the cancer incidence rate among Alaska Native people statewide was 497.6 cases per 100,000 population. This was significantly higher than among U.S. Whites (450.9 per 100,000).

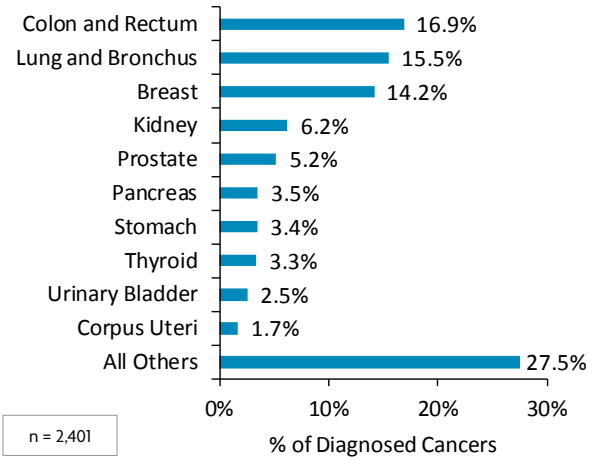
» Cancer incidence rates increased significantly among Alaska Native people between 1969–1973 (376.8 per 100,000) and 2014–2018 (497.6 per 100,000). However, since 1984–1988 these rates have remained relatively stable.

» The leading cancers diagnosed among Alaska Native people statewide during 2014–2018 were colon/rectum (16.9%), lung (15.5%), breast (14.2%), and kidney/renal pelvis (6.2%).

» During 2014-2018, Alaska Native cancer incidence rates varied by Tribal health region, ranging from 352.9 to 590.2 per 100,000.

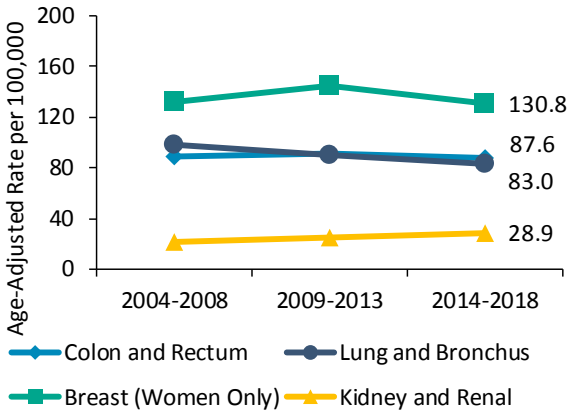
Cancer Incidence

Figure 17b. Cancer Incidence by Cancer Site, Alaska Native People, 2014-2018



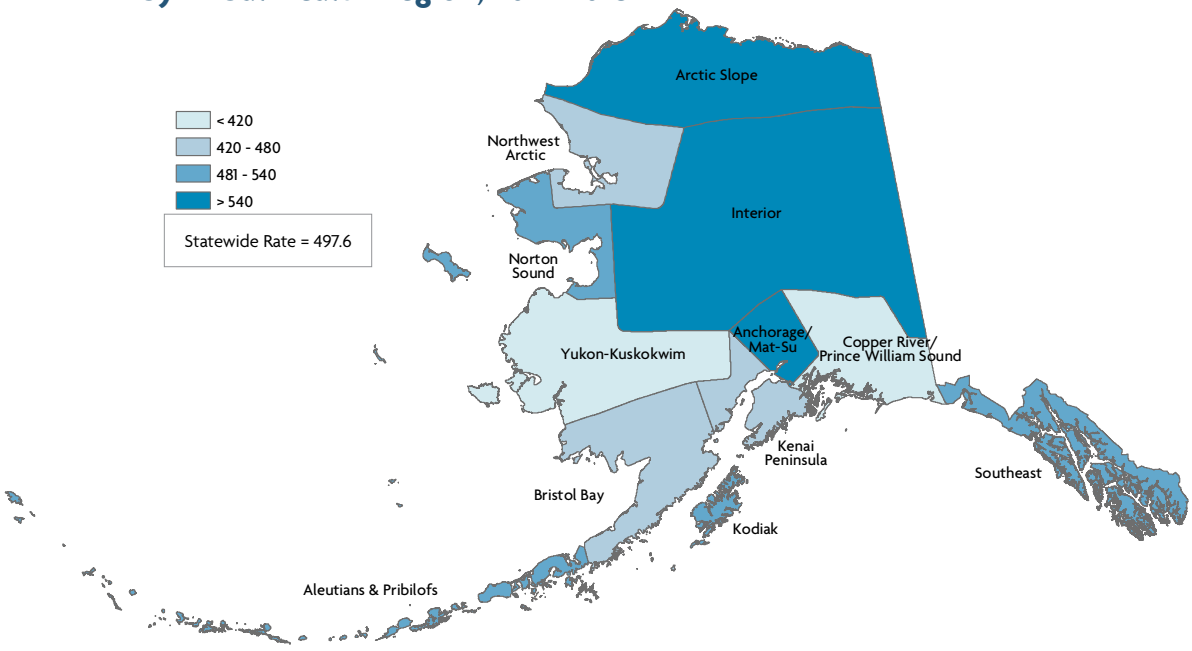
Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry
Appendix Table C-42

Figure 17c. Trends in Cancer Incidence Rate by Cancer Site, Alaska Native People, 2004-2008 to 2014-2018



Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry
Appendix Table C-43

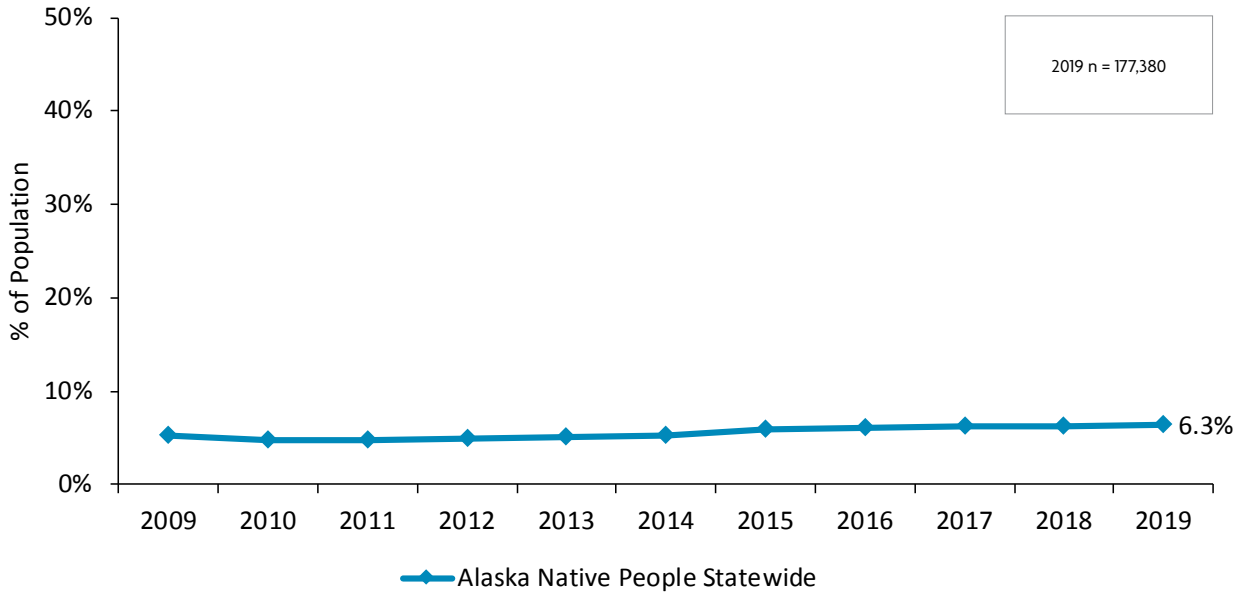
Figure 17d. Age-Adjusted Alaska Native Cancer Incidence Rate per 100,000 by Tribal Health Region, 2014-2018



Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry
Appendix Table C-44

Diabetes Prevalence

Figure 18a. Age-Adjusted Alaska Native Prevalence of Diagnosed Diabetes, 2009-2019



Data Source: Alaska Native Medical Center Diabetes Registry
Appendix Table C-45

Definition

Diabetes mellitus is a group of metabolic diseases characterized by high blood sugar levels during a prolonged period of time. When you have diabetes, either your body doesn't make enough insulin or can't use its own insulin as well as it should. This causes sugar to build up in the blood and can lead to serious health complications including heart disease, blindness, kidney failure, and lower-extremity amputations.[5]

Diabetes prevalence is the number of Alaska Native people living with diabetes during a specific time period expressed as a percentage of the Alaska Area Indian Health Service (IHS) estimated population. The estimated population is a statistical projection based on the U.S. decennial census (2010).

Related Objectives

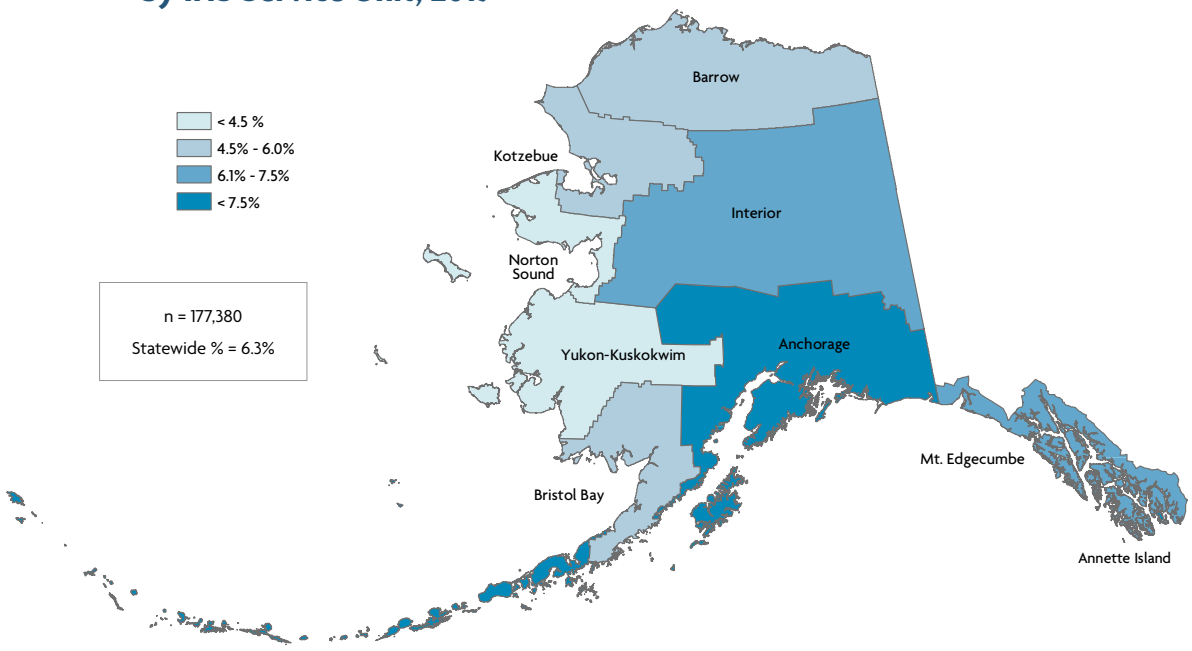
Reduce the number of diabetes cases diagnosed yearly to 5.6 per 1,000 population. - *HEALTHY PEOPLE 2030, OBJECTIVE D-01*

Summary

- The statewide age-adjusted prevalence of Alaska Native people diagnosed with diabetes was 6.3% in 2019.
- Between 2009 and 2019, statewide Alaska Native diabetes prevalence increased 21% from 5.2% to 6.3%.
- Diabetes prevalence varied by IHS Service Unit area, ranging from a low of 3.7% in the Norton Sound Service Unit to a high of 11.0% in the Annette Island Service Unit.

Diabetes Prevalence

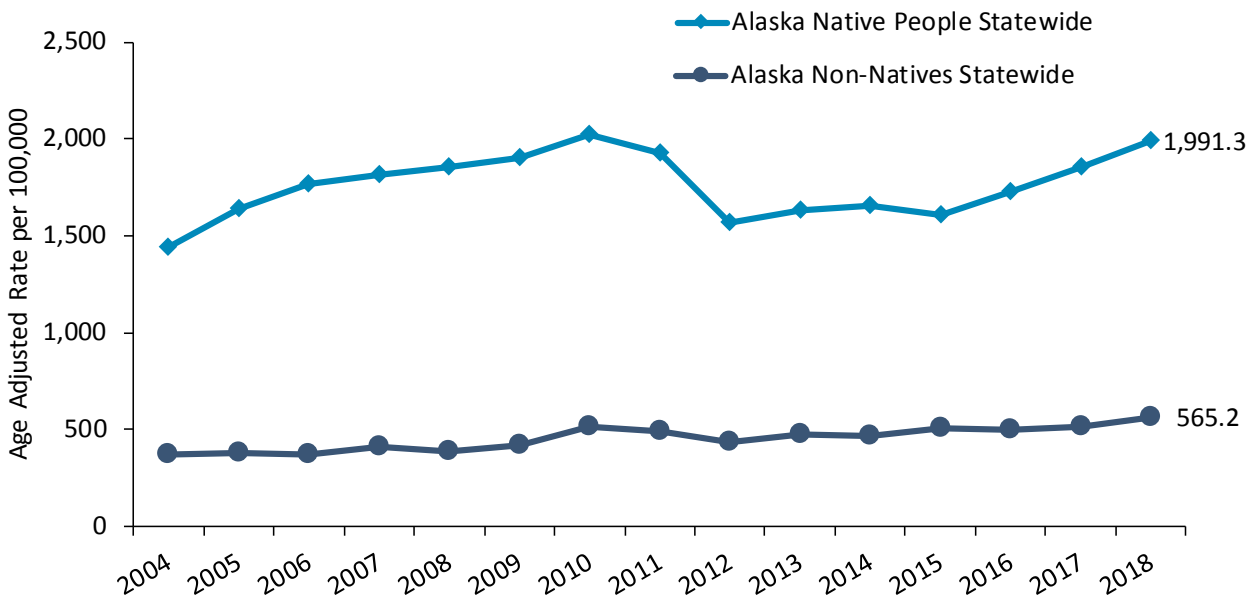
Figure 18b. Age-Adjusted Alaska Native Prevalence of Diagnosed Diabetes by IHS Service Unit, 2019



Data Source: Alaska Native Medical Center Diabetes Registry
Appendix Table C-46

Chlamydia

Figure 19a. Age-Adjusted Chlamydia Incidence Rate per 100,000 Population, 2004-2018



Data Source: Alaska Division of Public Health, HIV/STD Program
Appendix Table C-47

Definition

Chlamydia (CT) is a common sexually transmitted infection caused by the bacterium Chlamydia trachomatis. Both men and women can get CT. Most people who have CT have no symptoms. Untreated CT can lead to permanent damage to a woman's reproductive system, making it difficult to get pregnant.[6]

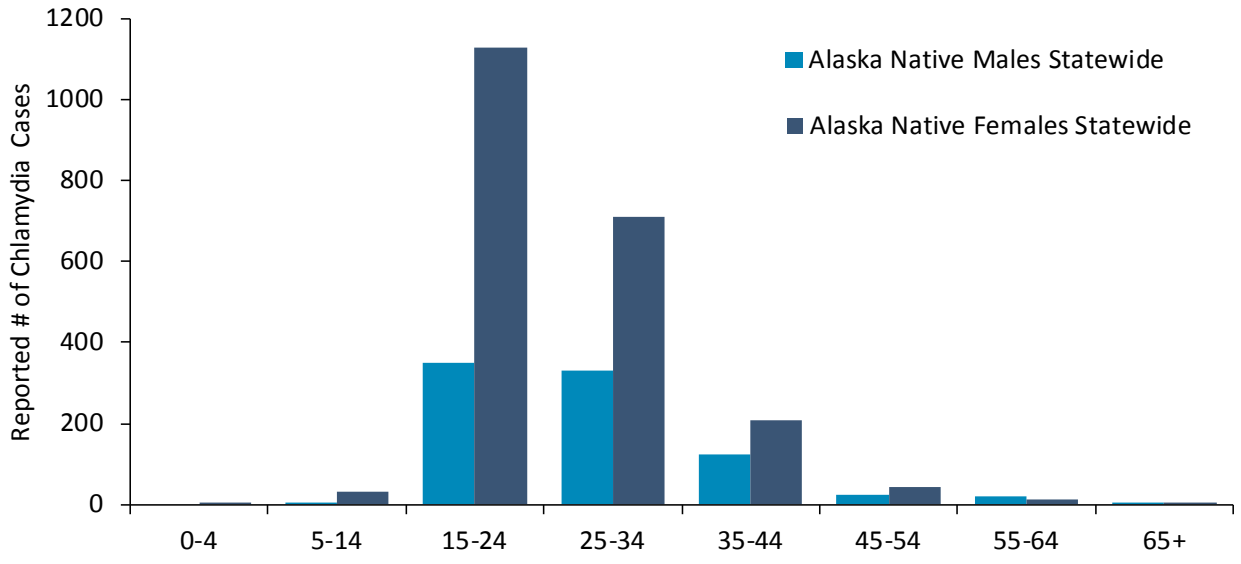
Summary

- In 2018 Alaska's CT rates were the highest among all U.S. states.
- Chlamydia infection rates among Alaska Native people increased between 2004 and 2018, with 2018 having the second highest rate (1991.3 per 100,000) among all years shown.
- The 2018 Alaska Native CT rate was 3.5 times greater than the Alaska non-Native rate.
- The greatest number of CT infections were reported among those aged 15-34 years; nearly 3 out of 4 reported cases occurred in a female.
- Unadjusted chlamydia rates varied by Tribal health region, ranging from 534.4 to 3,450.4 cases per 100,000.

Note: Number and rate do not include cases designated as multi-racial or with unknown race. Caution is advised when comparing data between years because changes to racial classification have occurred over time.

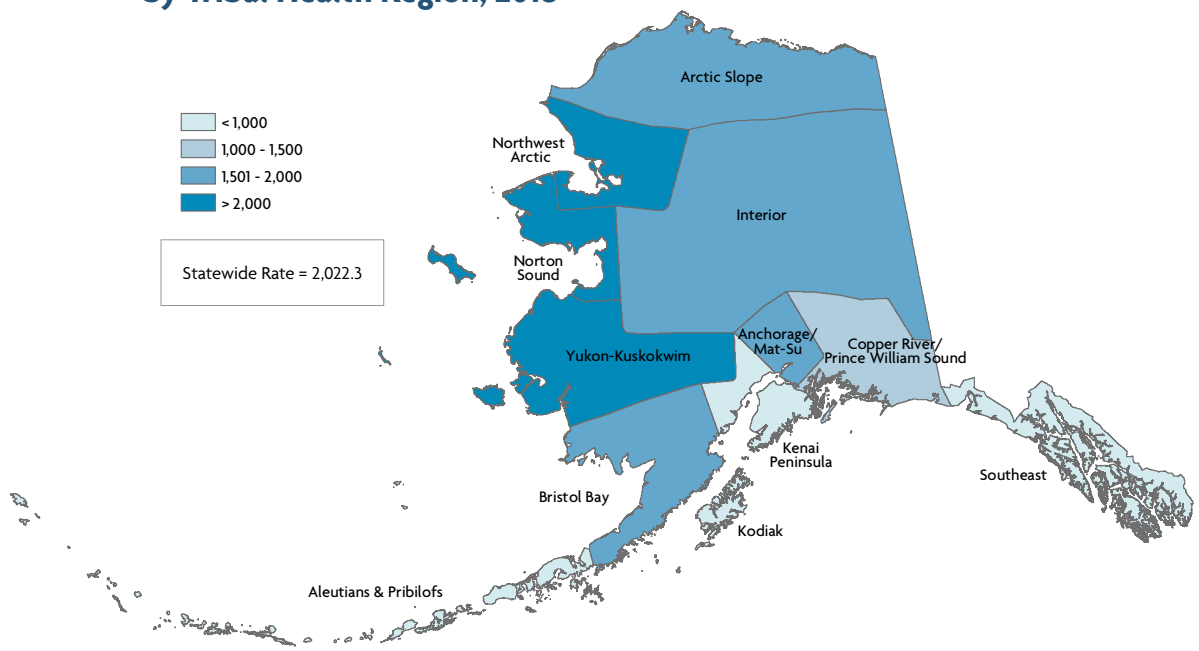
Chlamydia

Figure 19b. Reported Chlamydia Cases by Sex and Age, Alaska Native People, 2018



Data Source: Alaska Division of Public Health, HIV/STD Program

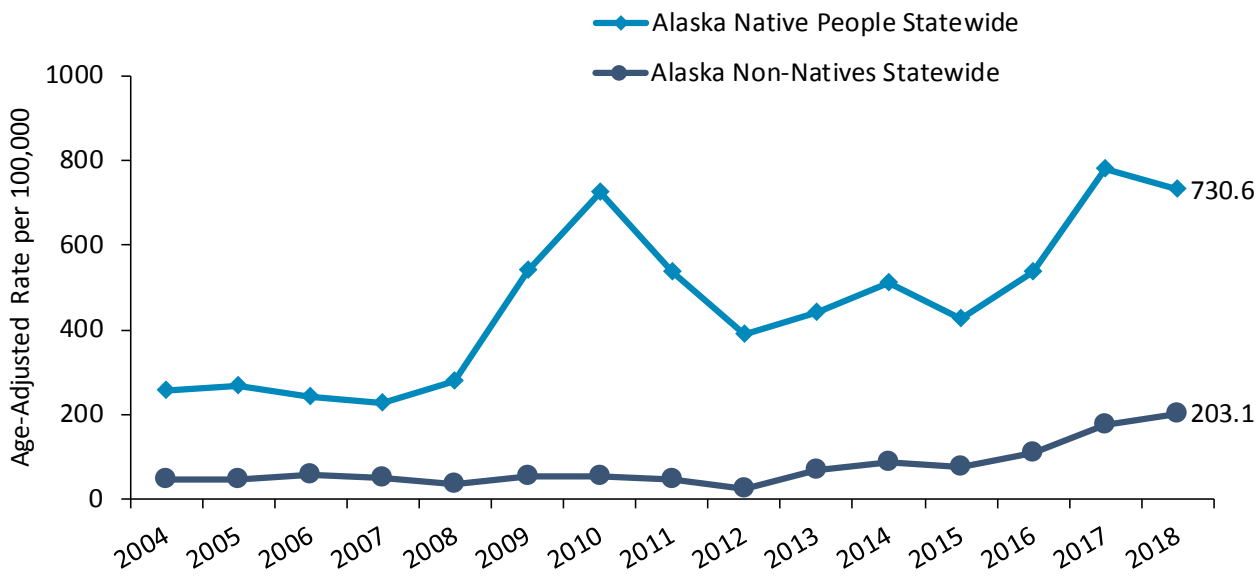
Figure 19c. Unadjusted Alaska Native Chlamydia Incidence Rate per 100,000 by Tribal Health Region, 2018



Data Source: Alaska Division of Public Health, HIV/STD Program
Appendix Table C-48

Gonorrhea

Figure 20a. Age-Adjusted Gonorrhea Incidence Rate per 100,000 Population, 2004-2018



Data Source: Alaska Division of Public Health, HIV/STD Program; Centers for Disease Control and Prevention
Appendix Table C-49

Definition

Gonorrhea (GC) is a sexually transmitted infection caused by the bacterium Neisseria gonorrhea. Gonorrhea can infect both men and women. It can cause infections in the genitals, rectum, and throat. GC can lead to permanent damage to a women's reproductive system.[7]

Related Objectives

Reduce the incidence rate of gonorrhea to 199.0 per 100,000 population. - *Healthy Alaskans 2030, Objective #11*

Reduce gonorrhea rates in male adolescents and young men to 471.2 per 100,000 population. - *Healthy People 2030, Objective STI-02*

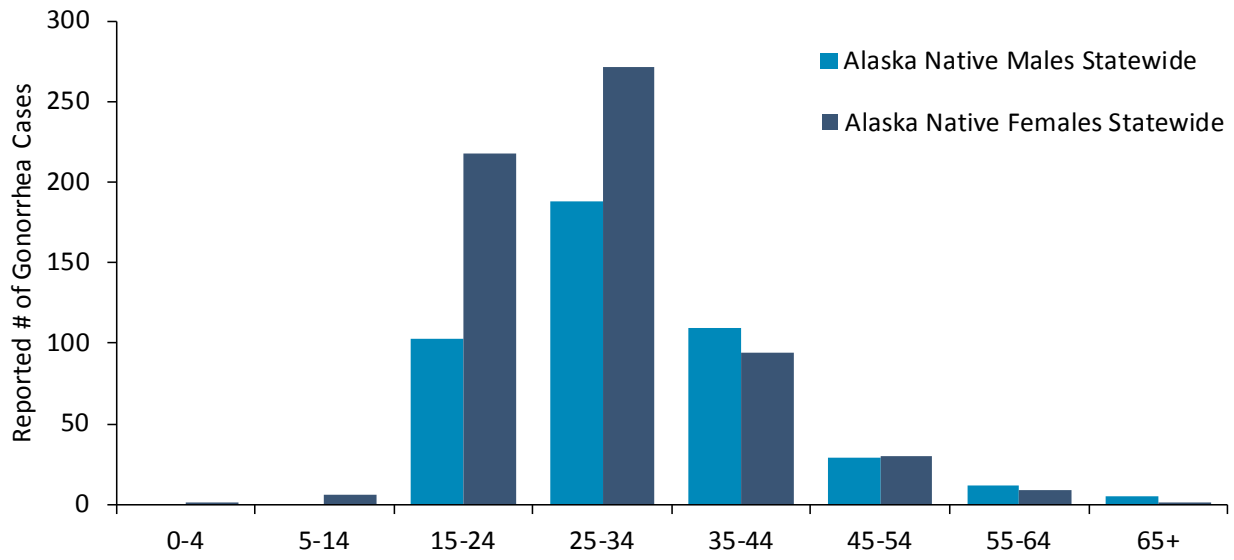
Summary

- In 2018 Alaska's GC rates were ranked 2nd among all U.S. states.
- Alaska Native gonorrhea incidence rates increased sharply starting in 2008, subsequently decreased, then sharply increased again starting in 2016, and as of 2018 was at its second highest rate (730.6) among all years shown.
- The 2018 Alaska Native gonorrhea incidence rate was slightly more than 3.5 times the rate among Alaska non-Natives.
- During 2018 the greatest number of reported gonorrhea cases were among those aged 15-44 years.
- In 2018, unadjusted gonorrhea incidence rates varied by Tribal health region, ranging from 69.7 to 1,378.6 per 100,000.

Note: Number and rate do not include cases designated as multi-racial or with unknown race. Caution is advised when comparing data between years because changes to racial classification have occurred over time.

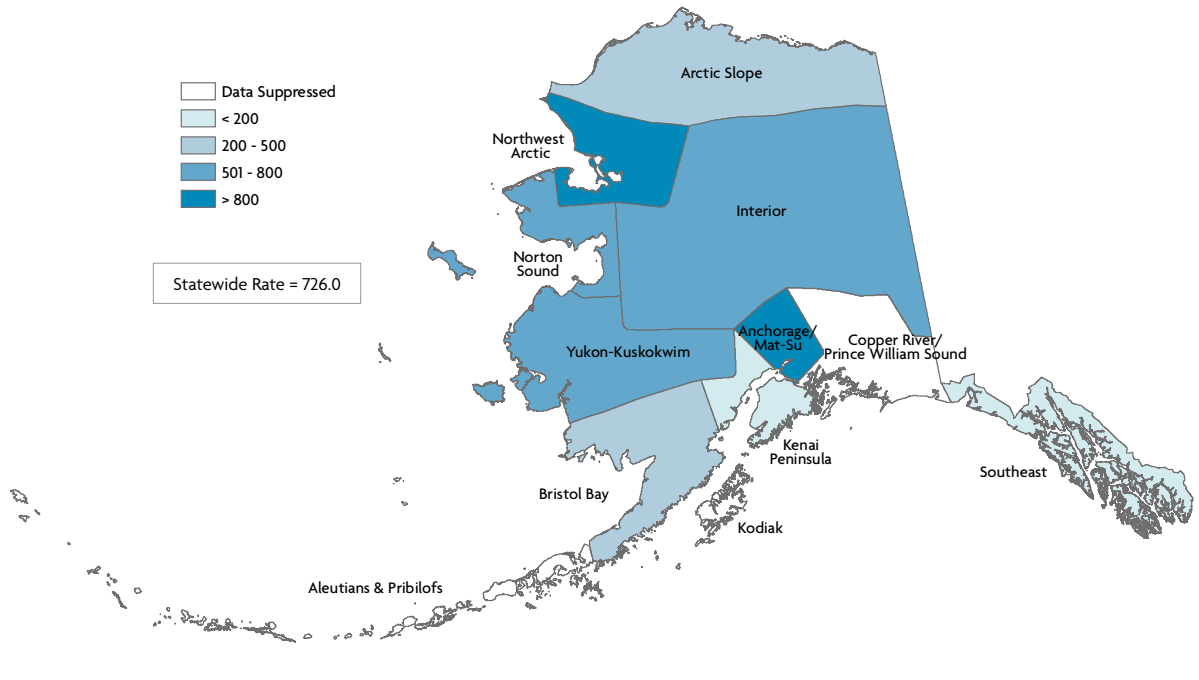
Gonorrhea

Figure 20b. Reported Gonorrhea Cases by Sex and Age, Alaska Native People, 2018



Data Source: Alaska Division of Public Health, HIV/STD Program

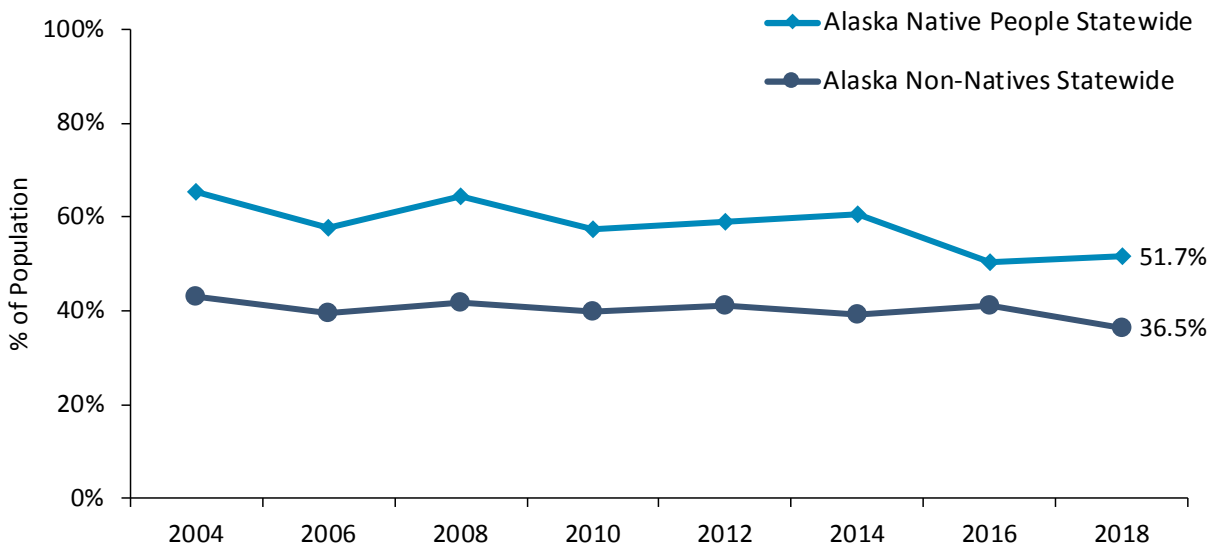
Figure 20c. Unadjusted Alaska Native Gonorrhea Incidence Rate per 100,000 by Tribal Health Region, 2018



Data Source: Alaska Division of Public Health, HIV/STD Program
Appendix Table C-50

Tooth Loss

Figure 21a. Adult Tooth Loss, 2004-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-51

Definition

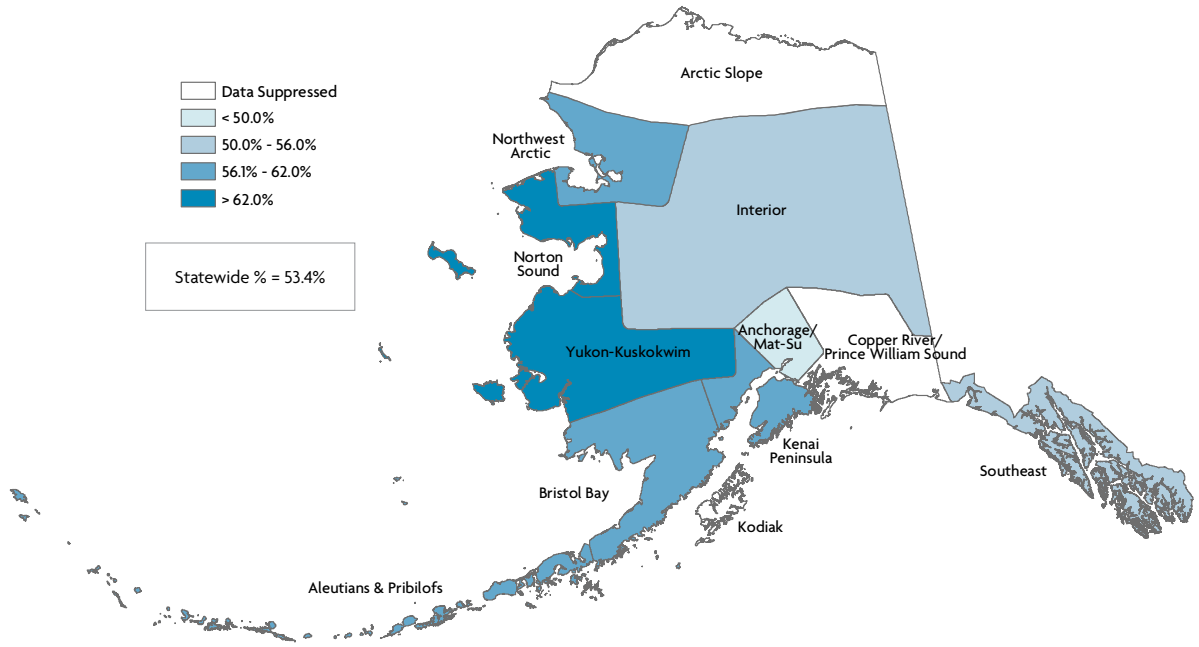
Tooth loss is measured as adults who report having one or more of their permanent teeth removed due to tooth decay or gum disease. Tooth loss is an important indicator of overall oral health and access to dental care. Tooth loss due to tooth decay or gum disease can be prevented by good oral hygiene and regular preventive services by a dentist. Good oral health is critical for an individual's overall health and well-being.[8]

Summary

- Slightly more than half (51.7%) of Alaska Native adults statewide reported tooth loss in 2018. This was significantly higher than among Alaska non-Native adults (36.5%).
- Tooth loss among Alaska Native adults has significantly decreased since 2004.
- During 2014-2018, the percent of Alaska Native adults who experienced tooth loss varied by Tribal health region, ranging from 40.4% to 67.4% of Alaska Native adults.

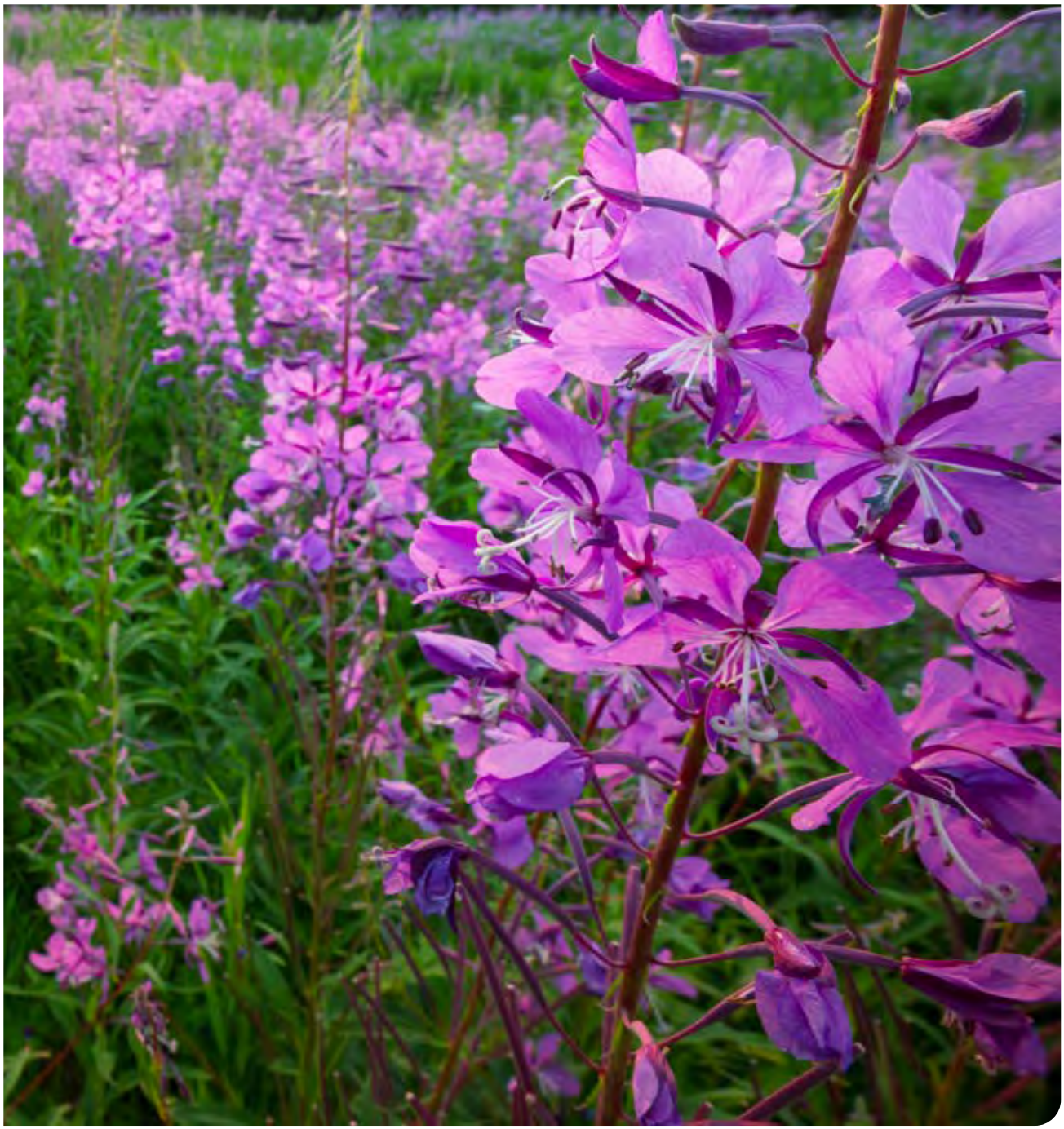
Tooth Loss

Figure 21b. Percent of Alaska Native Adults With Tooth Loss by Tribal Health Region, 3-year Aggregate, 2014, 2016, and 2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-52

Maternal, Infant, & Child Health



Maternal, Infant & Child Health Highlights

Among Alaska Native people, the unadjusted birth rate in 2019 was 18.4 births per 1,000 people. Among Alaska Native teens, it was 33.5 births per 1,000 teens.

The prevalence of birth defects among Alaska Native children has increased since 2007.

Pre-term birth among Alaska Native infants has stayed relatively stable since 1997, fluctuating between 10–13%.

More than two-thirds (68.1%) of Alaska Native mothers began prenatal care during the first trimester.

Maternal, Infant & Child Health Highlights

Almost a quarter (23.7%) of Alaska Native mothers reported tobacco use during pregnancy in 2019.

94.4% of Alaska Native mothers reported no alcohol during the last 3 months of their pregnancy in 2019.

More than 90% of Alaska Native mothers initiated breastfeeding; at 8 weeks, 73.9% were still breastfeeding their infant.

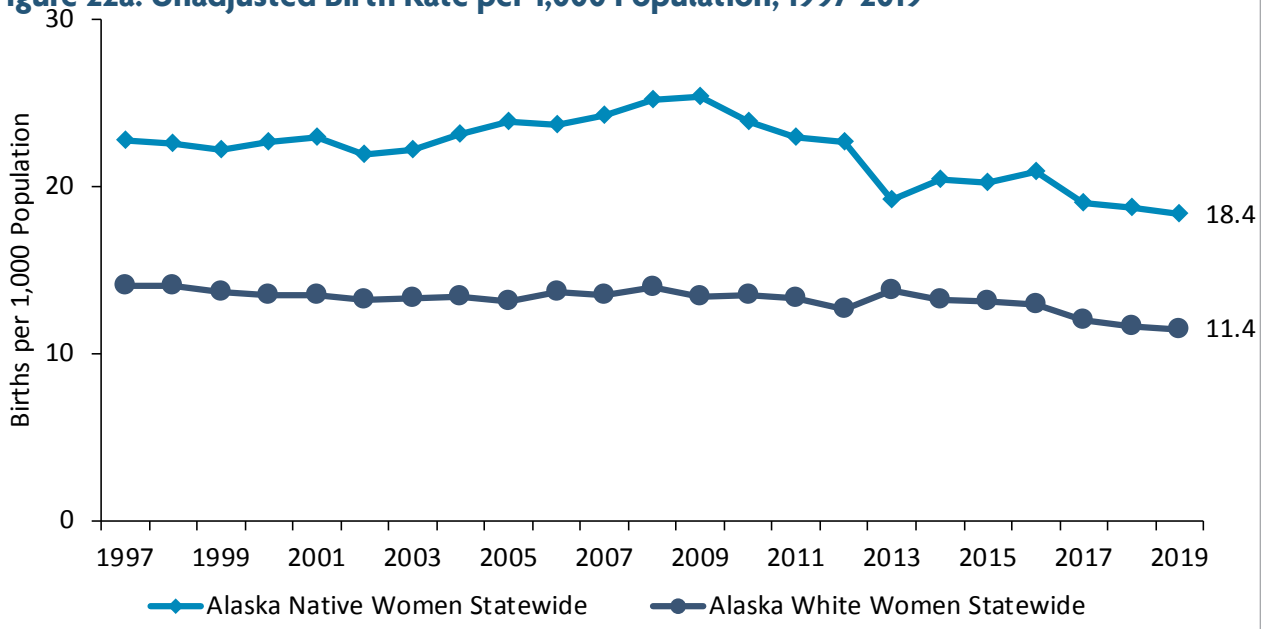
Total birth rates and teen birth rates for Alaska Native women have decreased since 1997.

More than a third (38.3%) of Alaska Native adults reported that they witnessed domestic violence as a child.

More than one in three (41.1%) Alaska Native mothers of 3-year olds reported that their child had experienced tooth decay.

Birth Rate

Figure 22a. Unadjusted Birth Rate per 1,000 Population, 1997-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-53

Definition

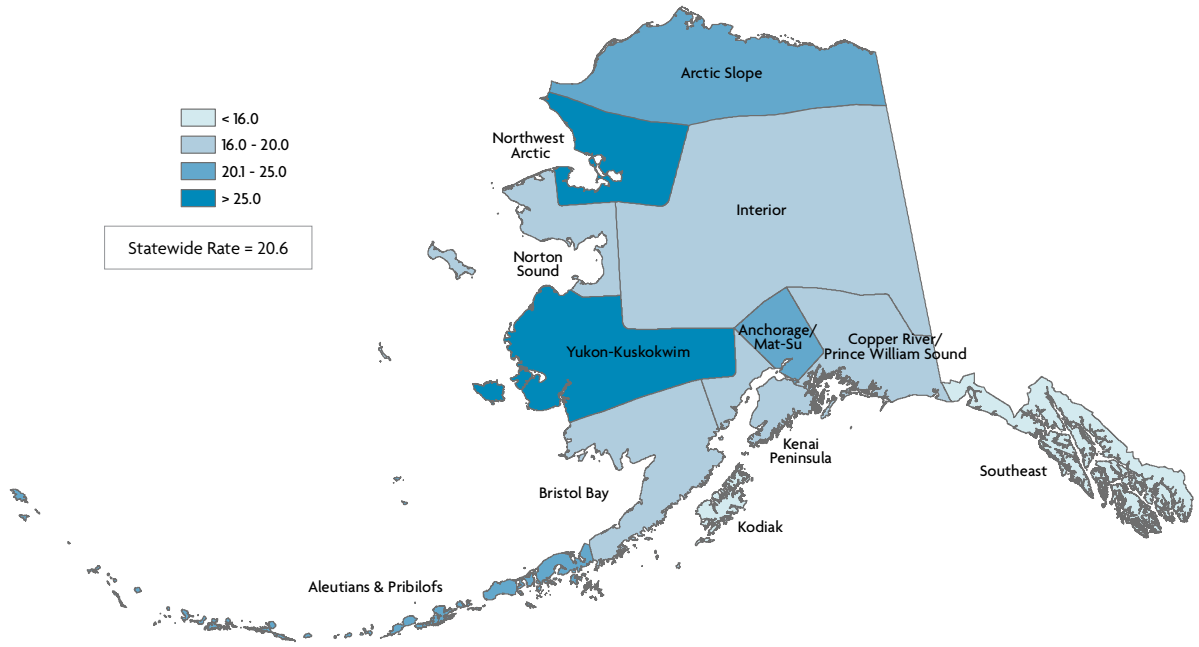
The birth rate is the total number of live births per 1,000 persons in a population per year. It is calculated by dividing the number of births in a population by the number of persons in the population. For Alaska Native people, the birth rate was calculated for births to Alaska Native mothers who are Alaska residents. The unadjusted birth rate allows tracking of population change over time.

Summary

- In 2019, the unadjusted birth rate for Alaska Native people statewide was 18.4 births per 1,000 persons.
- The unadjusted Alaska Native birth rate was 1.6 times that of Alaska Whites in 2019.
- Between 1997 and 2019, the unadjusted birth rate for Alaska Native people decreased 19.3%, from 22.8 to 18.4.
- During 2015–2019, unadjusted average annual birth rates varied by Tribal health region, ranging from 13.4 to 28.9 births per 1,000 population.

Birth Rate

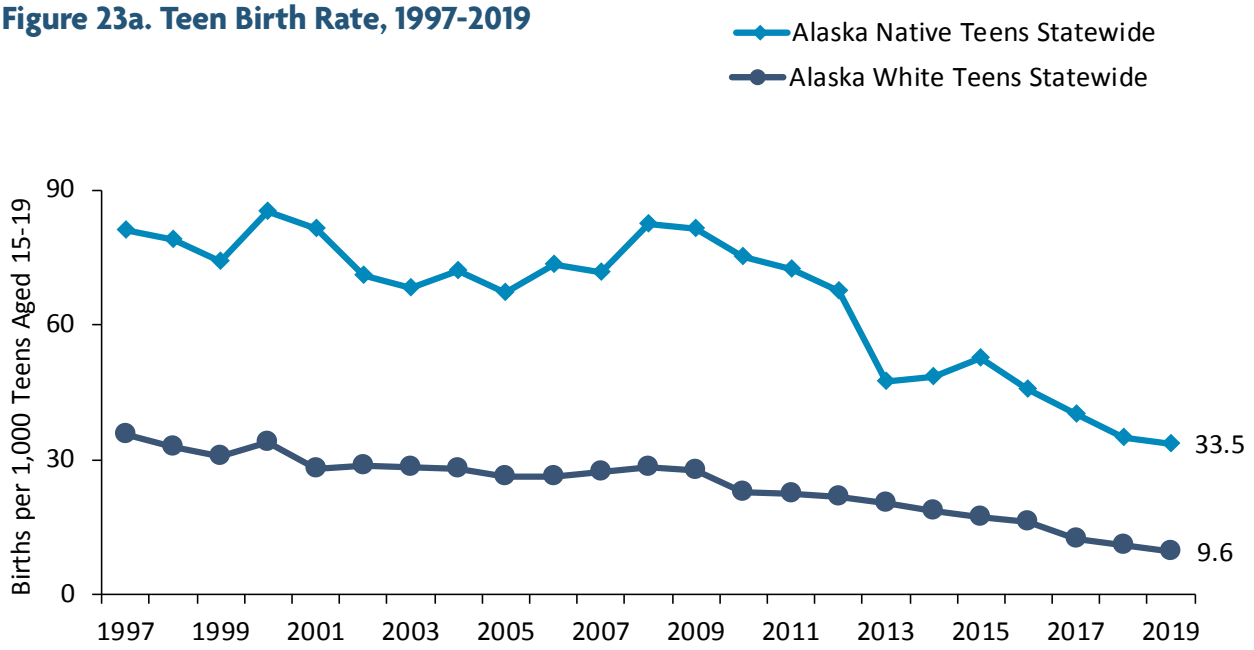
Figure 22b. Unadjusted Alaska Native Birth Rate per 1,000 by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-54

Teen Birth Rate

Figure 23a. Teen Birth Rate, 1997-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-55

Definition

The teen birth rate is the number of live births to females, aged 15 to 19 years, per 1,000 females in the population in this age group per year. The teen birth rate is used as an indicator of the health status of populations because teens are often less prepared than older women for pregnancy and parenthood, have limited resources, and are more likely to have preterm births and low birth weight infants.[9]

Related Objectives

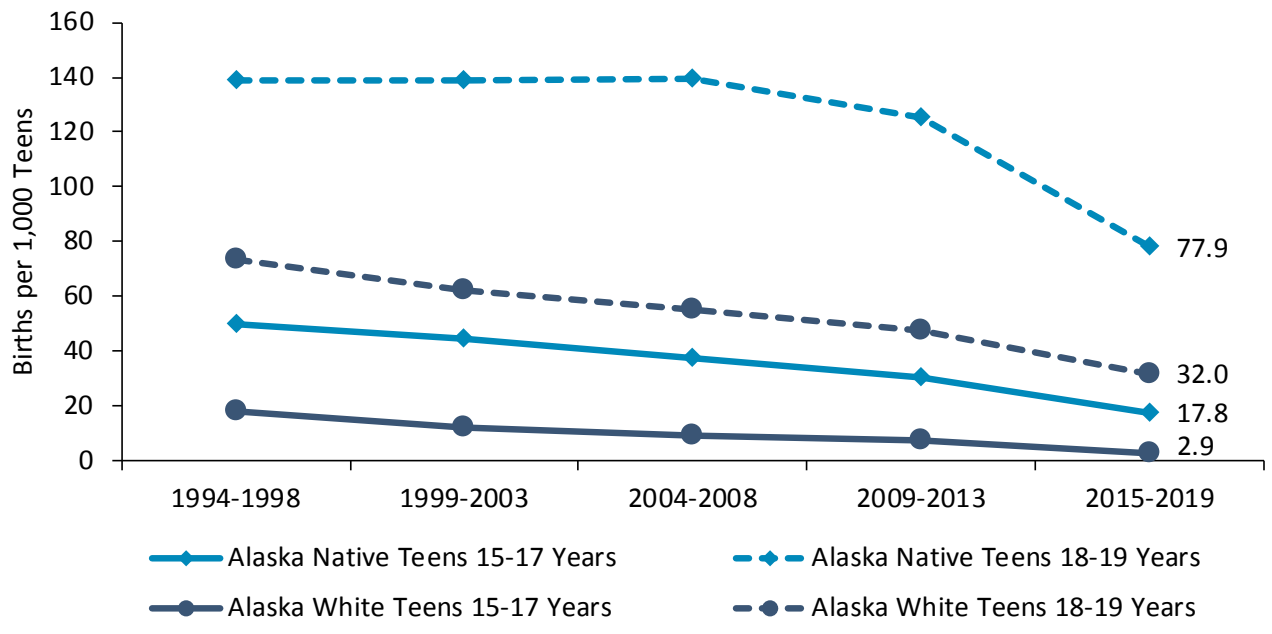
Reduce pregnancies in adolescents to 31.4 per 1,000 population. - *Healthy People 2030, Objective FP-03*

Summary

- In 2019, the Alaska Native teen birth rate was 33.5 per 1,000, more than triple that of the Alaska White teen birth rate (9.6).
- Between 1997 and 2019, Alaska Native teen birth rates decreased for teens aged 15–17 and 18–19 years.
- In 2015–2019, the Alaska Native birth rate for teens aged 15–17 years was 17.8 per 1,000 and 77.9 per 1,000 for teens aged 18–19 years.
- Almost three-quarters (73.8%) of Alaska Native teen births were among teens aged 18–19 years in 2015–2019.
- During 2015–2019, teen birth rates varied widely by Tribal health region, ranging from 21.6 to 87.1 per 1,000.

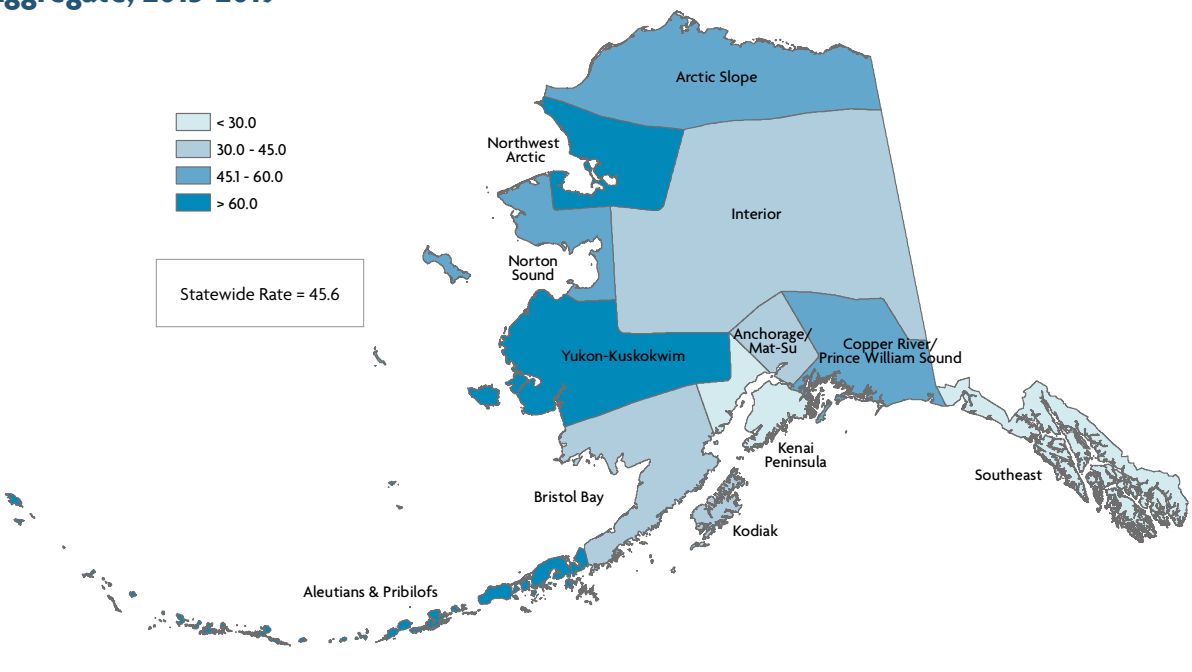
Teen Birth Rate

Figure 23b. Teen Births by Age Group and Race, 1994-1998 to 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-56

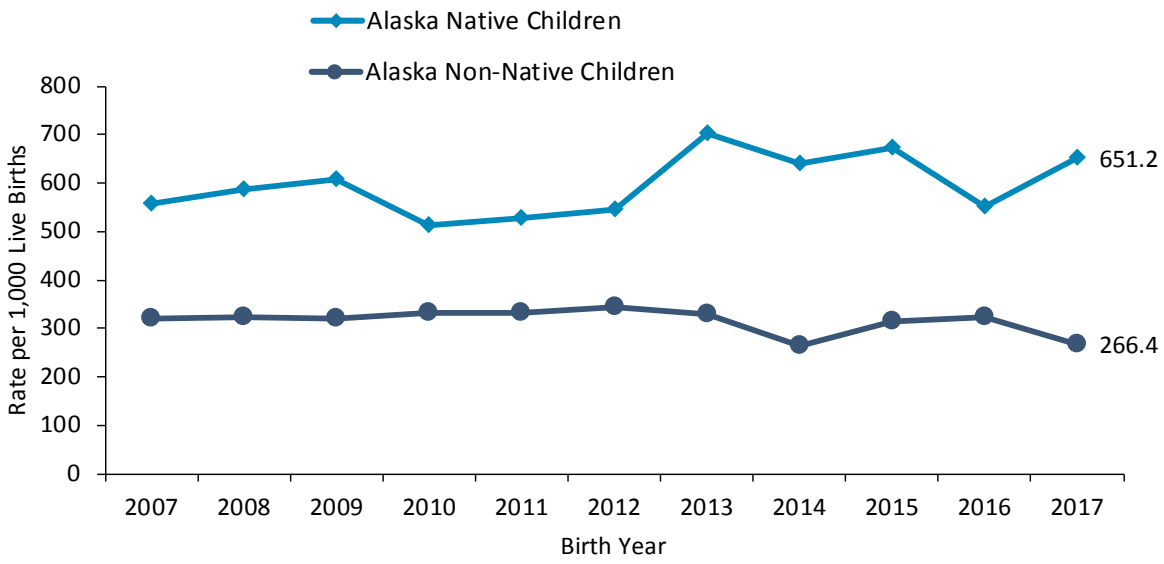
Figure 23c. Alaska Native Teen Birth Rate per 1,000 by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-57

Birth Defects

Figure 24a. Prevalence of Birth Defects, Alaska Statewide, 2007-2017



Data Source: Alaska Division of Public Health, Alaska Birth Defects Registry
Appendix Table C-58

Definition

Birth defects are structural changes present at birth that can affect almost any part or parts of the body (e.g., heart, brain, foot). They may affect how the body looks, works, or both. Birth defects can vary from mild to severe. The well-being of each child affected with a birth defect depends mostly on which organ or body part is involved and how much it is affected. Depending on the severity of the defect and what body part is affected, the expected lifespan of a person with a birth defect may or may not be affected. Women can increase their chances of having a healthy baby by managing health conditions and practicing healthy behaviors before and during pregnancy. These can include getting folic acid every day, getting early and regular prenatal care, avoiding harmful substances, preventing infections, and living a healthy lifestyle.[10]

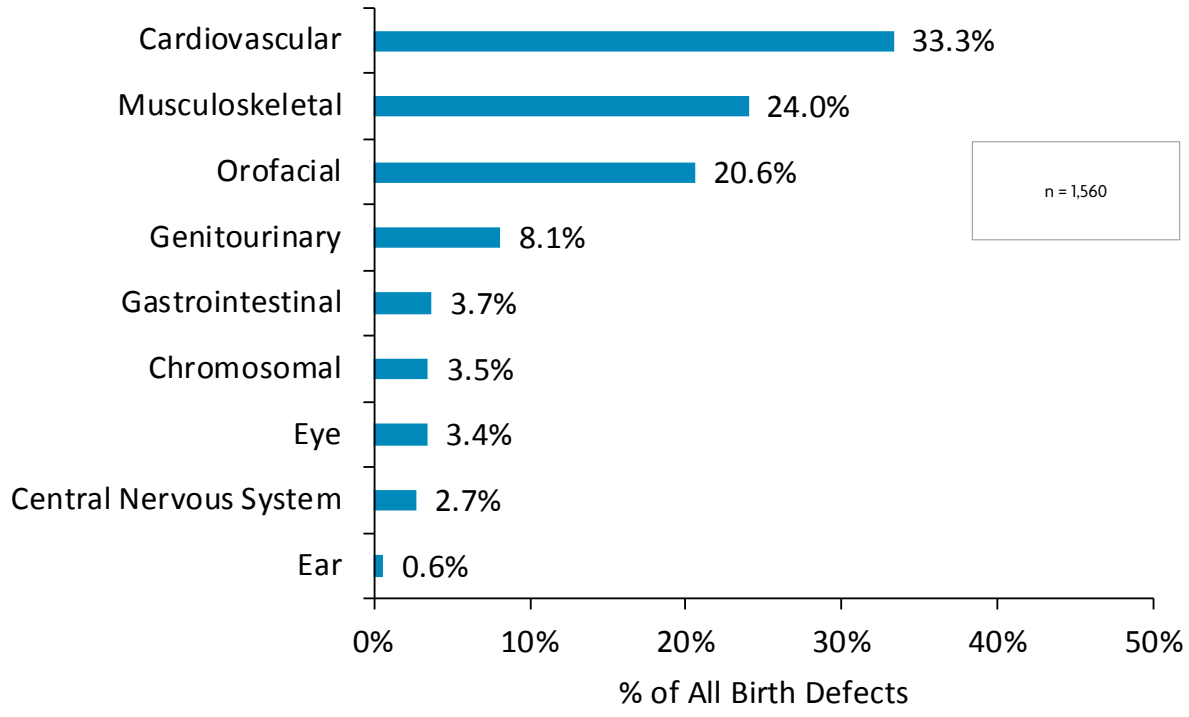
The data presented here only include children who have at least one of 45 birth defects that are considered major congenital anomalies and are collected by the National Birth Defects Prevention Network (NBDPN). Alcohol-related birth defects, including fetal alcohol syndrome, are not included. Data are based on birth defects detected to the Alaska Birth Defects Report Registry, and contains unconfirmed birth defects. The registry accepts reports for individuals up to 3 years after their birth. Thus, only data up to the birth year 2017 were available for this report.

Summary

- The prevalence rate of birth defects among Alaska Native children was 651.2 per 10,000 live births in 2017, a rate nearly two and half times higher than among Alaska White children (266.4).
- The current rate of birth defects (651.2) among Alaska Native children increased since 2007 (556.8). The rate among Alaska non-Natives decreased from 320.3 to 266.4 since 2007.
- During 2014–2017, the leading types of major birth defects were cardiovascular (33.3%), musculoskeletal (24.0%), orofacial (20.6%), and genitourinary (8.1%).

Birth Defects

Figure 24b. Leading Types of Birth Defects, Alaska Native Children Statewide, 2014-2017

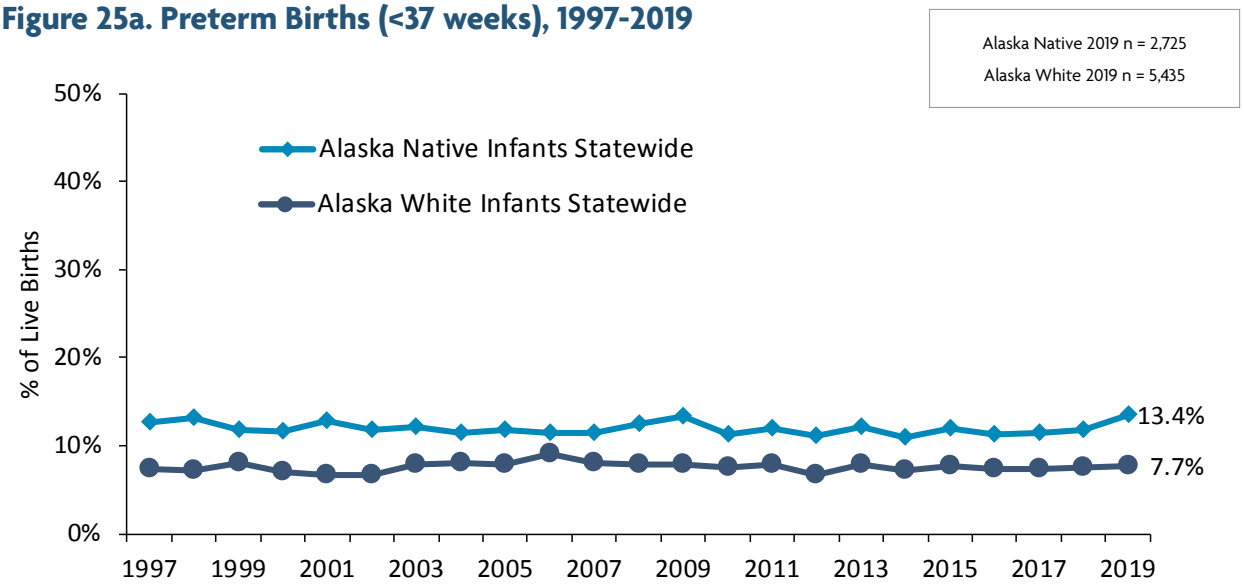


Data Source: Alaska Division of Public Health, Alaska Birth Defects Registry
Appendix Table C-59

Note: These data contain unconfirmed birth defects detected to the Alaska Birth Defects Report Registry. Caution is advised when comparing data between years because changes to inclusion criteria, collection methods, analyzation methods and race classification have occurred over time.

Preterm Birth

Figure 25a. Preterm Births (<37 weeks), 1997-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Sections
Appendix Table C-60

Definition

The average length of human gestation is 40 weeks, starting from the first day of the woman's last menstrual period. Preterm birth is defined as childbirth occurring at less than 37 completed weeks of gestation. Preterm infants are at greater risk for mortality and a variety of health and developmental problems. Infants born at the earliest gestational ages have the greatest risk of mortality and morbidity.[11]

Related Objectives

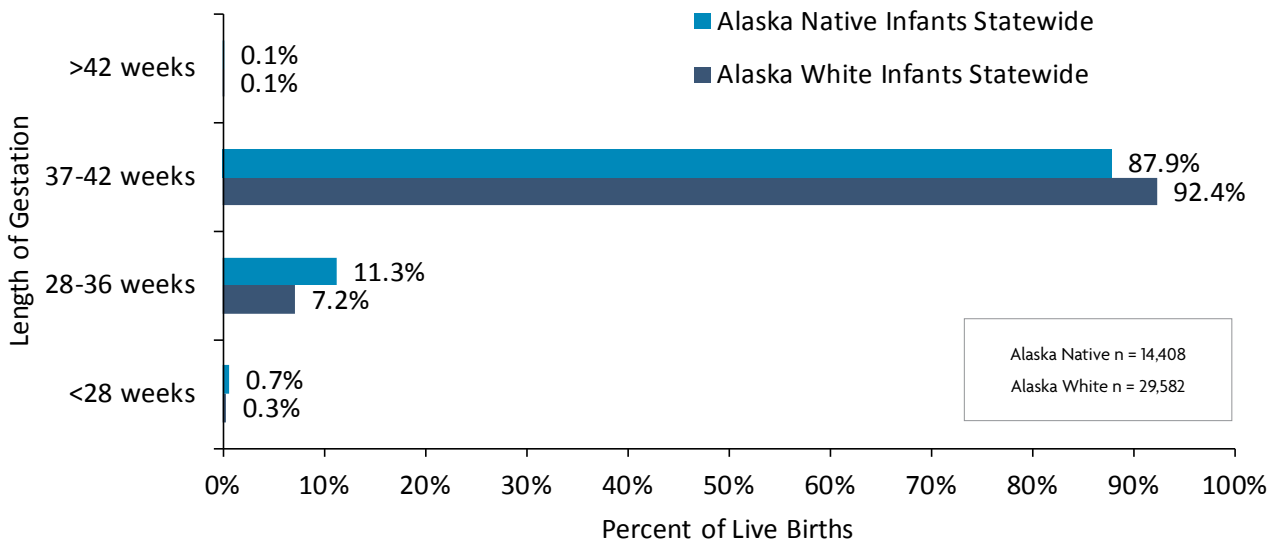
Reduce preterm births to 9.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE MICH-07*

Summary

- In 2019, 13.4% of Alaska Native infant births were preterm, compared with 7.7% of Alaska White infants.
- Between 1997 and 2019, the percent of births among Alaska Native people there were preterm appeared to remain relatively stable.
- During 2015–2019, the percent of births that were preterm among Alaska Native infants varied by Tribal health region, ranging from 9.2% to 14.1%.

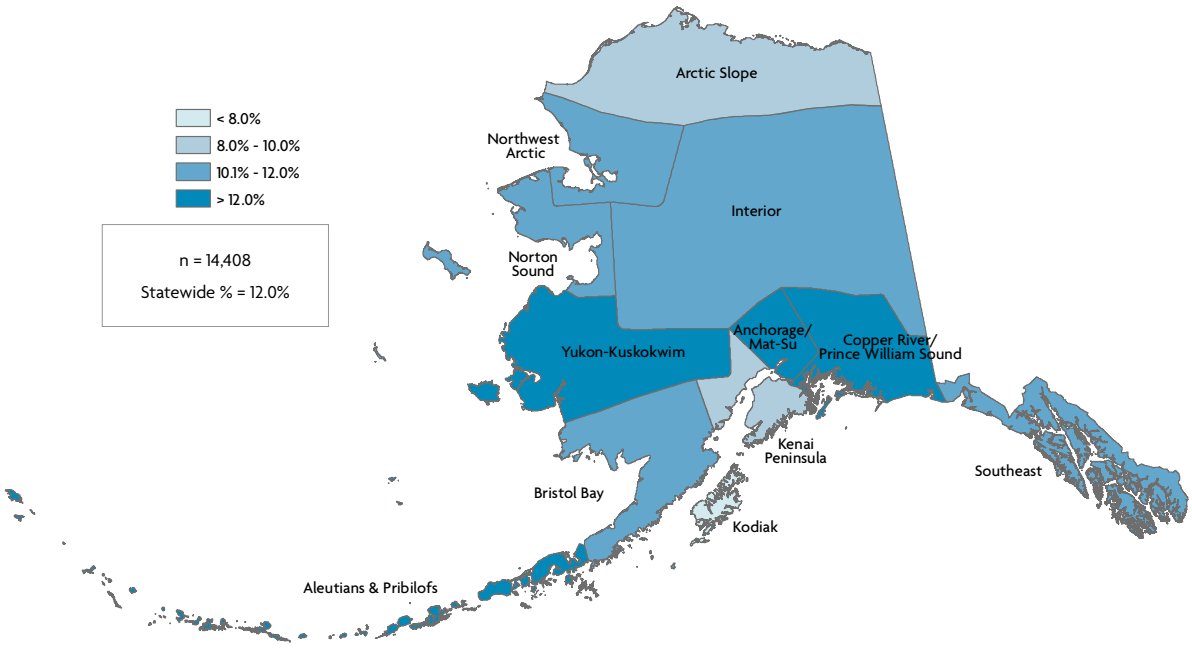
Preterm Birth

Figure 25b. Length of Gestation, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-61

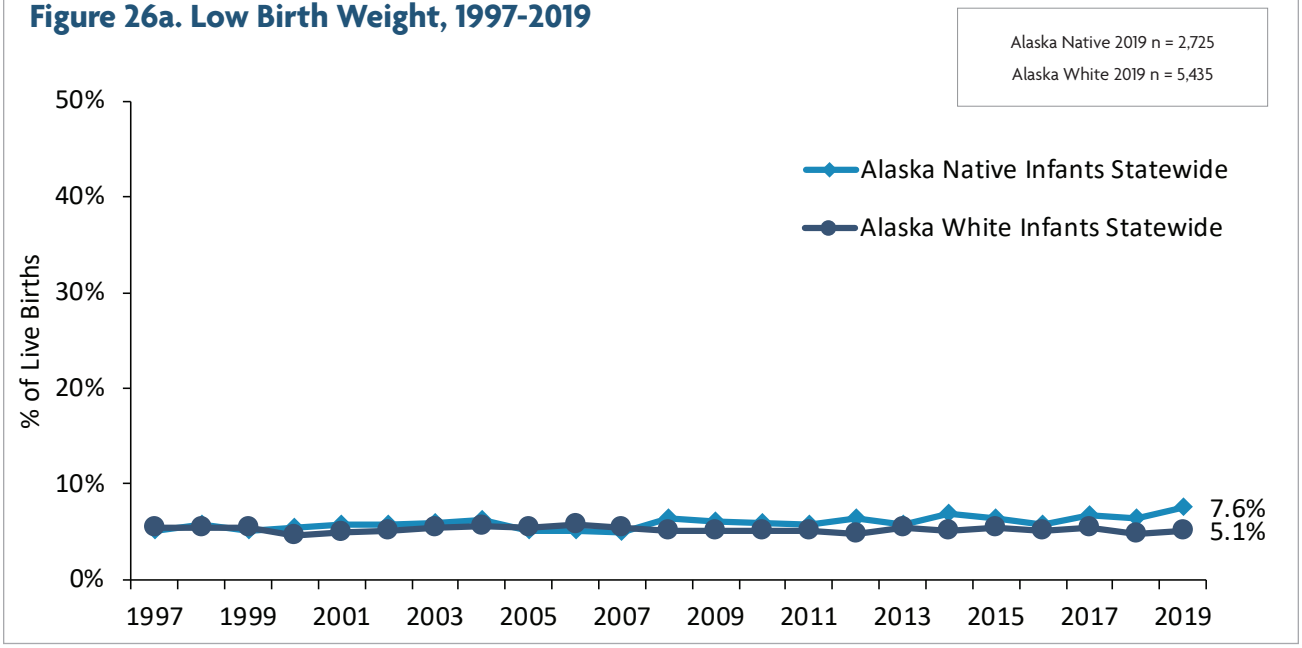
Figure 25c. Percent of Alaska Native Births That Were Preterm (<37 Weeks) by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-62

Low Birth Weight

Figure 26a. Low Birth Weight, 1997-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-63

Definition

Low birth weight (LBW) is defined as a birth weight of less than 2,500 grams (5 pounds, 8 oz.). Normal birth weight is 2,500 grams or more. Low birth weight is a result of either preterm birth or small for gestational age, or both. Low birth weight infants are more likely to have physical and developmental health problems and are at increased risk of death during the first year of life compared with infants of normal weight.[12]

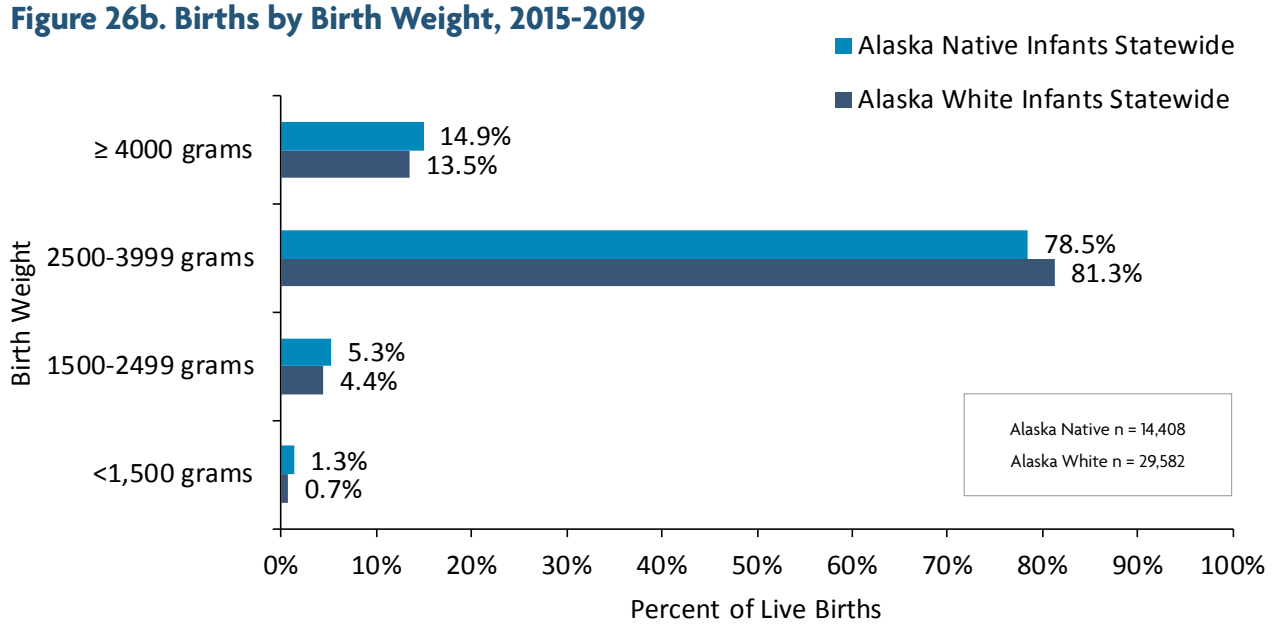
Summary

- During 2019, 7.6% of Alaska Native infants statewide were born with low birth weight.
- Between 1997 and 2019, the percent of births among Alaska Native people there were low weight appeared to remain relatively stable.
- During 2015–2019, the percent of births that were low weight among Alaska Native infants varied by Tribal health region, ranging from 2.2% to 9.2%.

Note: The birth data are based upon data reported on birth certificates to the State of Alaska. Infant race is based on the race of the mother. Alaska Native infants are infants born to an Alaska Native mother. White infants are infants born to a white mother.

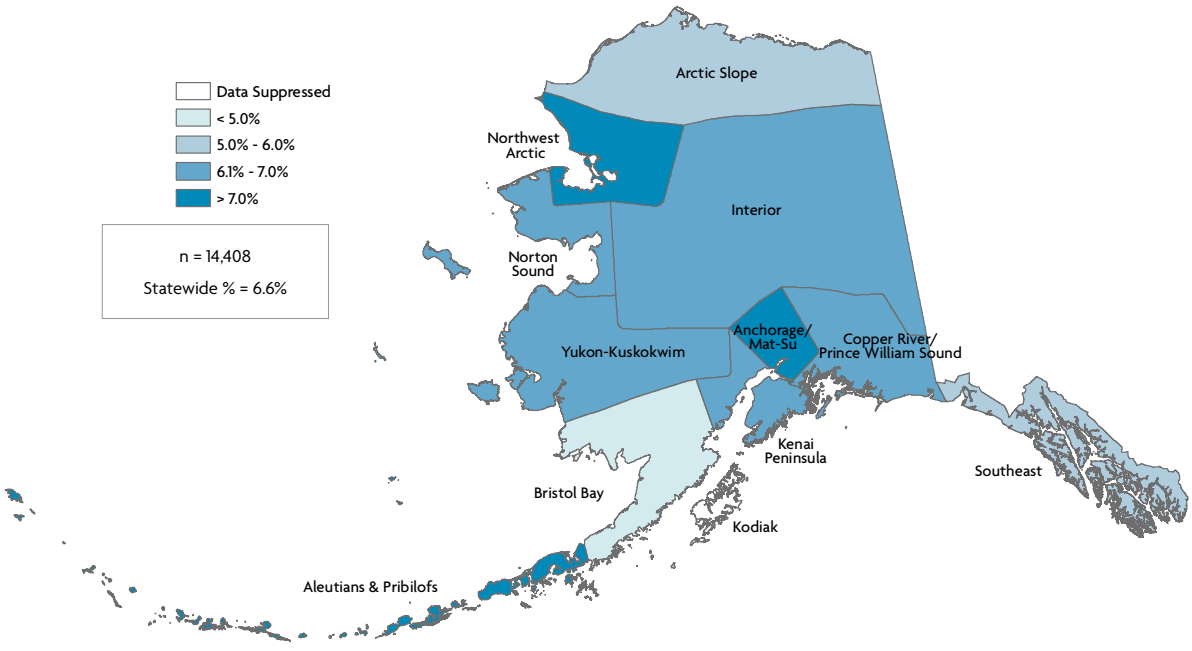
Low Birth Weight

Figure 26b. Births by Birth Weight, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-64

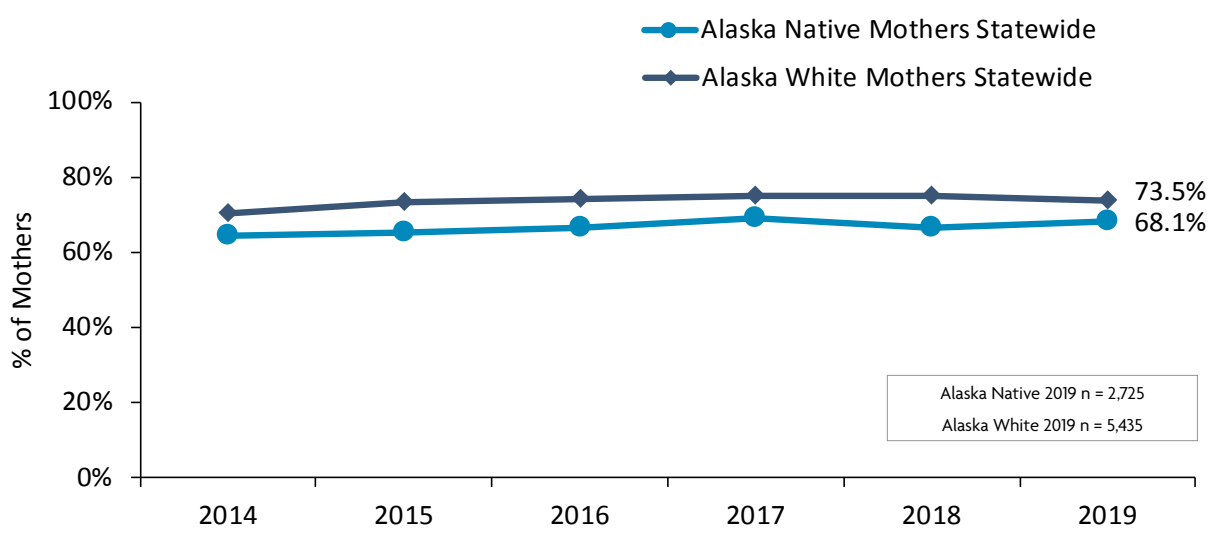
Figure 26c. Percent of Alaska Native Births That Were Low Weight (<2,500 Grams) by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-65

Prenatal Care Initiation

Figure 27a. First Trimester Prenatal Care Initiation, 2014-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-66

Definition

Prenatal care initiation is based on the mother's self-report of the first month of pregnancy in which prenatal care began, as documented on the infant's birth certificate. Initiation of prenatal care in the first trimester is an important preventive strategy to protect the health of both mother and child.[13] Care ideally begins before conception and includes preventive care, counseling, and screening for risks to maternal and fetal health.

Related Objectives

Increase the proportion of pregnant women who receive prenatal care beginning in the first trimester to 81.8%. - *HEALTHY ALASKANS 2030, OBJECTIVE #4*

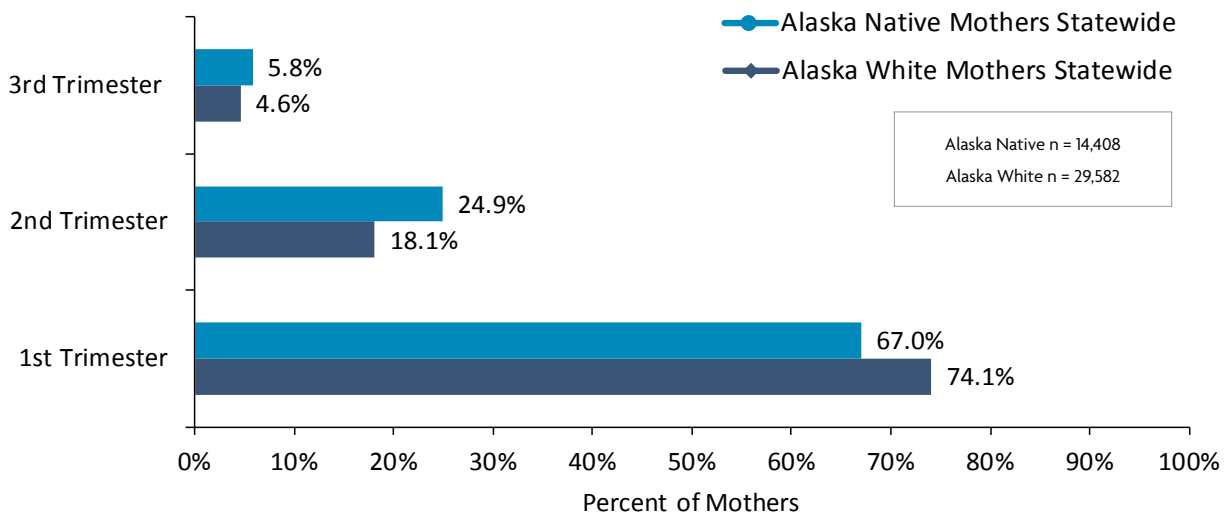
Summary

- In 2019, the percent of Alaska Native mothers who were documented to have begun prenatal care in the first trimester was 68.1%.
- Between 2014 and 2019, the percent of Alaska Native mothers documented to have begun prenatal care in the first trimester appeared to remain relatively stable.
- During 2015-2019, the percent of Alaska Native mothers in each Tribal health region who were documented to have begun prenatal care in the first trimester varied, ranging from 57.1% to 77.2%

Note: This measure of prenatal care is based on the documented month that prenatal care began and is dependent on clinical and birth certificate documentation, and may under-represent actual prenatal care received.

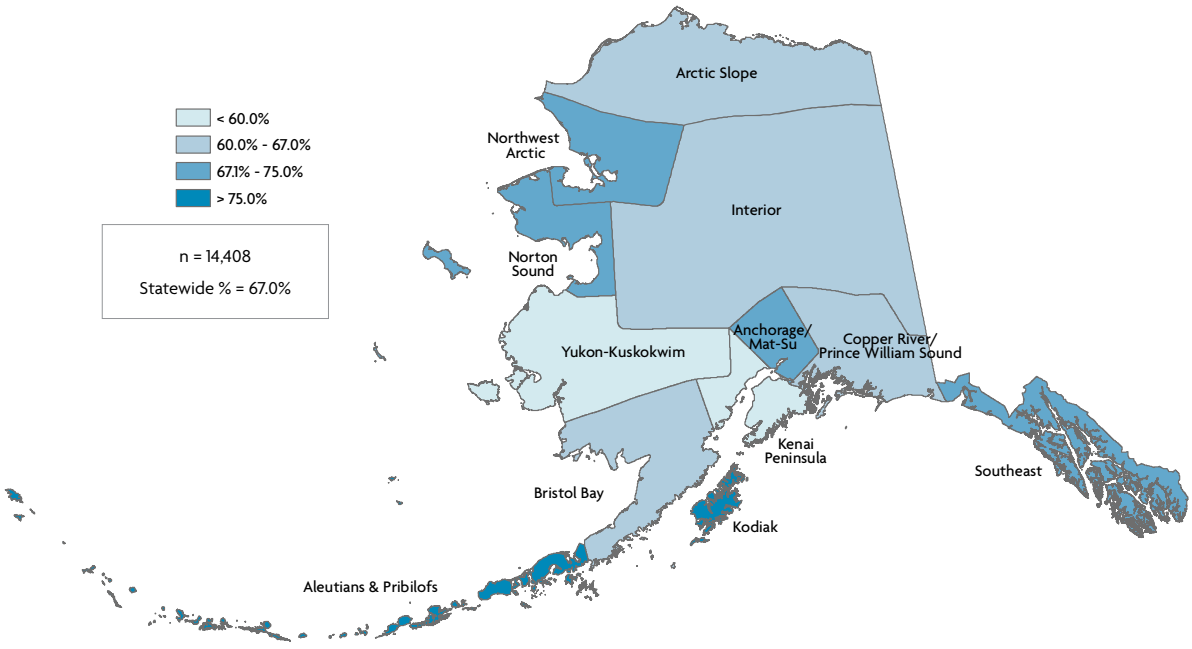
Prenatal Care Initiation

Figure 27b. Prenatal Care Initiation by Trimester, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-67

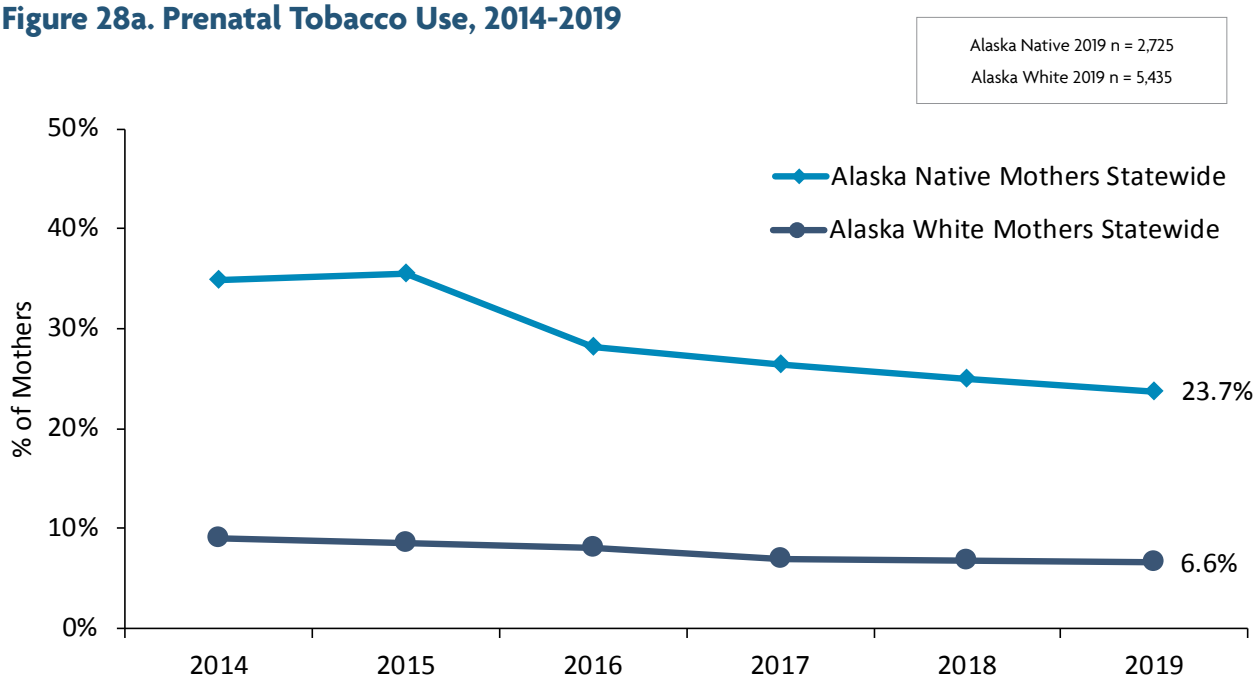
Figure 27c. Percent of Alaska Native Mothers That Initiated First Trimester Prenatal Care by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-68

Prenatal Tobacco Use

Figure 28a. Prenatal Tobacco Use, 2014-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-69

Definition

Prenatal tobacco use includes women who self-reported tobacco use during pregnancy as documented on the birth certificate. Maternal tobacco use during pregnancy is the single most preventable cause of illness and death for both infants and mothers. Harmful effects of exposure to tobacco may include reduced fertility, adverse effects on fetal and child development, and adverse pregnancy outcomes such as premature birth, low birth weight, stillbirth, and infant mortality.[14]

Related Objectives

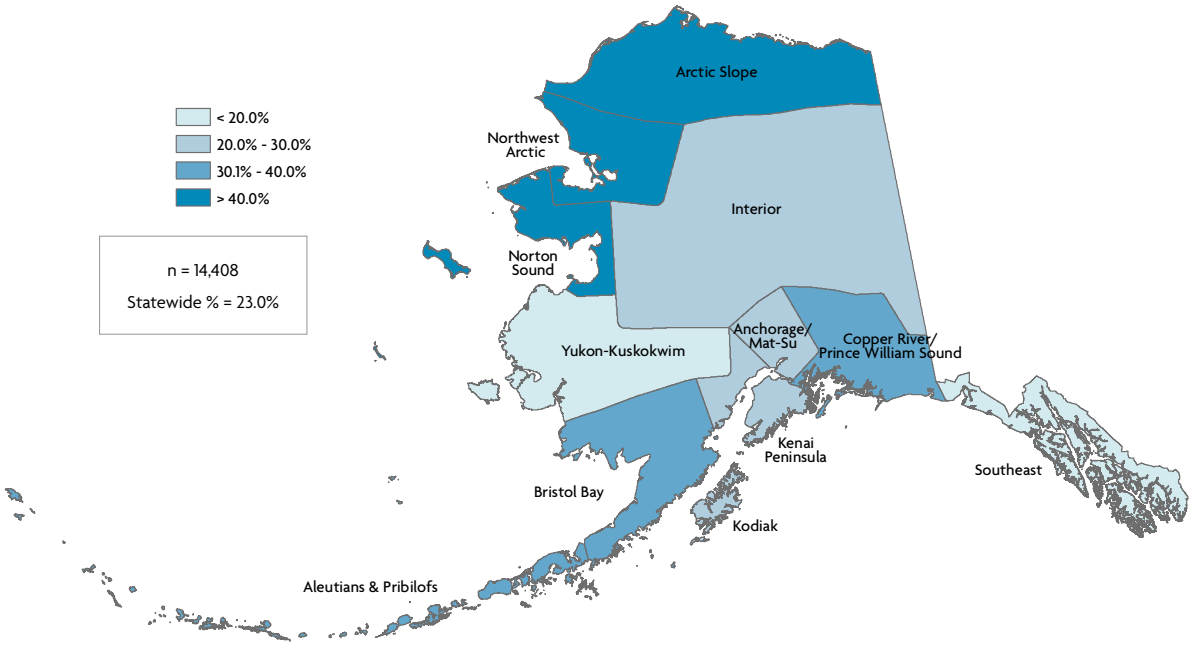
Increase abstinence from cigarette smoking among pregnant women to 95.7%. - *Healthy People 2030, Objective MICH-10*

Summary

- In 2019, almost a quarter (23.7%) of Alaska Native mothers reported using tobacco during pregnancy.
- Between 2014 and 2019, the percent of Alaska Native mothers who used tobacco during pregnancy was consistently at least two times greater than mothers of Alaska White infants.
- During 2015–2019, the percent of Alaska Native mothers who used tobacco during pregnancy varied widely by Tribal health region, ranging from 6.2% to 47.7%.

Prenatal Tobacco Use

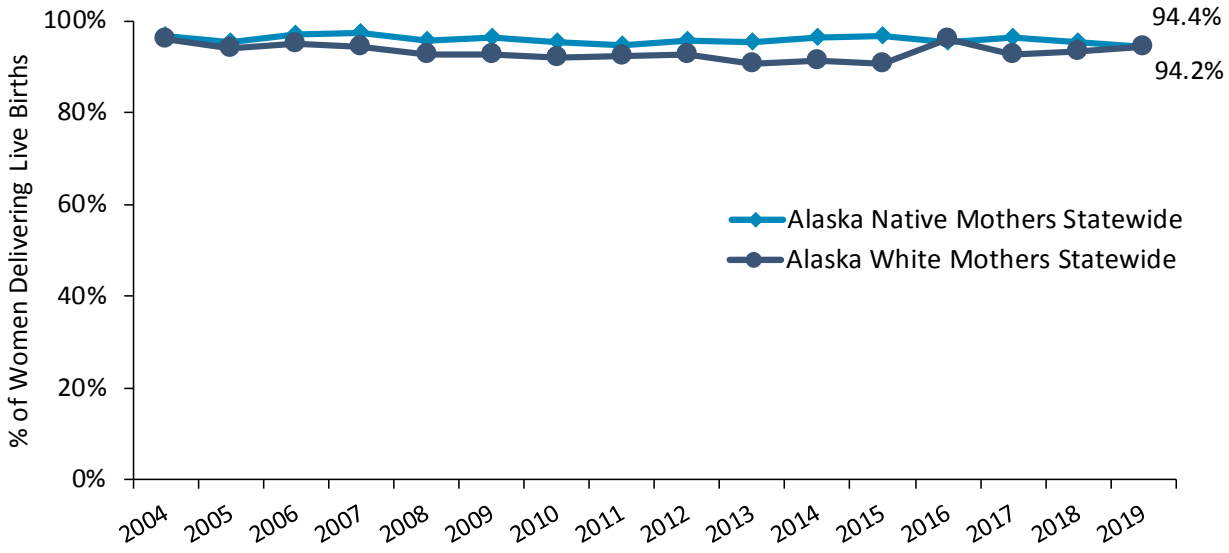
Figure 28b. Percent of Alaska Native Mothers Who Used Tobacco During Pregnancy by Tribal Health Region, 5-Year Aggregate, 2015-2019



Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
Appendix Table C-70

Prenatal Alcohol Use

Figure 29. No Alcohol Use in Last Three Months of Pregnancy, 2004-2019



Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-71

Definition

Prenatal alcohol use includes women who self-reported consumption of alcohol during the last 3 months of their pregnancy. Use of alcohol during pregnancy can result in miscarriage, stillbirth, and adverse physical and neurological problems known as fetal alcohol spectrum disorders (FASD).[15] Prenatal alcohol use is a leading preventable cause of birth defects and mental retardation.[16]

Related Objectives

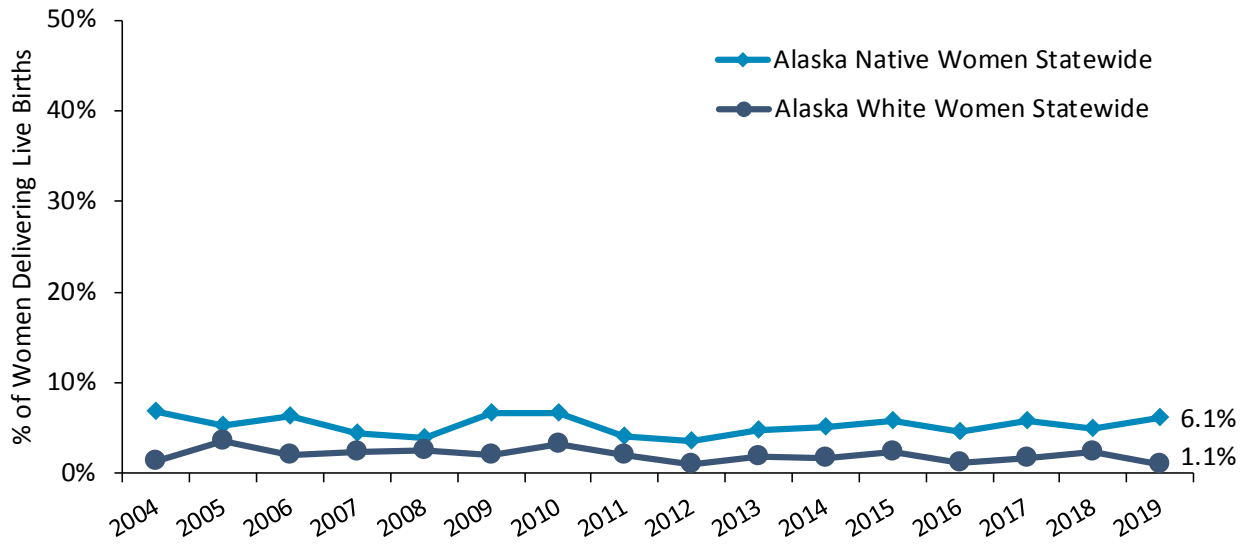
Increase abstinence from alcohol among pregnant women to 92.2%. - *Healthy People 2030, Objective MICH-09*

Summary

- In 2019, 94.4% of Alaska Native mothers reported no alcohol use during the last 3 months of their pregnancy.
- Between 2004 and 2019, the percent of Alaska Native mothers consuming no alcohol in the last three months of pregnancy appeared to remain relatively stable.

Prenatal Intimate Partner Violence

Figure 30a. Prenatal Physical Abuse by Husband, Partner, or Ex-partner 2004-2019



Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-72

Definition

Prenatal intimate partner violence can include both physical or emotional abuse by a husband or partner (physical abuse includes ex-partner) during pregnancy. Prenatal physical abuse includes women who reported that their husband or partner pushed, hit, slapped, kicked, choked, or physically hurt them in any other way during their most recent pregnancy. Prenatal emotional abuse includes women who reported that their husband or partner threatened them, limited their activity against their will, or made them feel unsafe in any other way during their most recent pregnancy. Violence during pregnancy increases the likelihood of pregnancy complications and adverse birth outcomes such as low birth weight, preterm birth, increased risk of Cesarean delivery, uterine rupture, hemorrhage, miscarriage, and hospitalizations during pregnancy.[17]

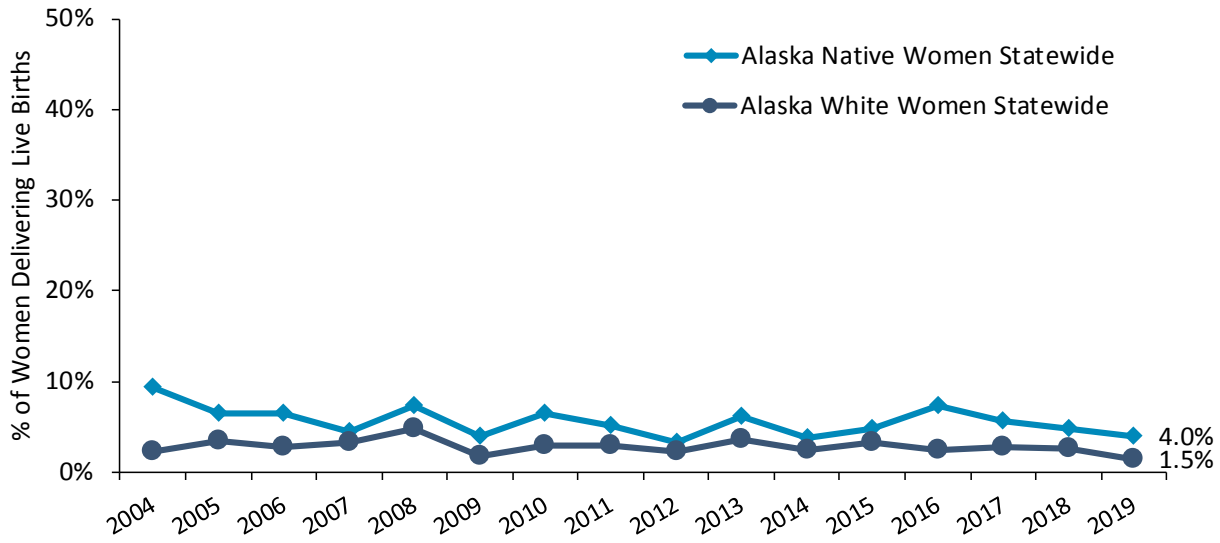
Summary

- In 2019, 6.1% of Alaska Native mothers reported experiencing prenatal physical abuse by a husband, partner, or ex-partner.
- In 2019, 4.0% of Alaska Native mothers reported experiencing prenatal emotional abuse by a husband or partner.

Note: Starting in 2016, physical abuse includes abuse from an ex-partner.

Prenatal Intimate Partner Violence

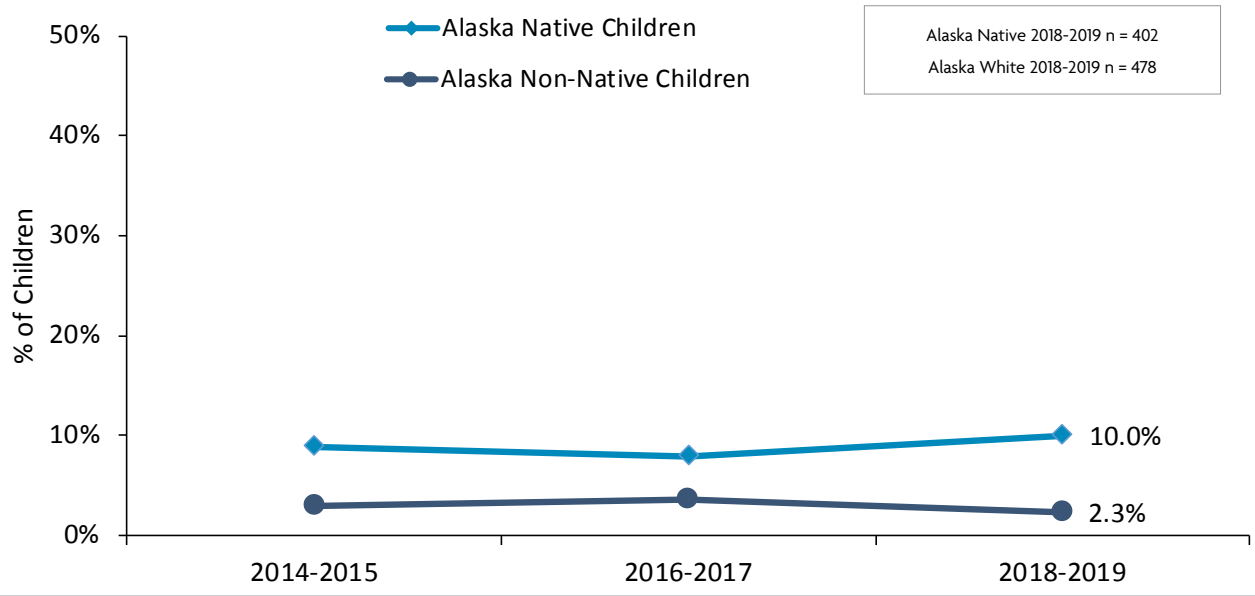
Figure 30b. Prenatal Emotional Abuse by Husband or Partner, 2004-2019



Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-73

Childhood Witness to Violence

Figure 33. Childhood Witness to Violence, 3–Year–Old Children, 2014-2015 to 2018-2019



Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-80

Definition

Childhood witness to violence includes people who have witnessed domestic violence or abuse between household members as a child. Witnessing violence can lead to the development of negative outcomes including inappropriate attitudes towards violence, behavioral problems, and emotional problems.[21] Child witnesses to violence are more likely to be victims of physical and sexual abuse themselves.[22]

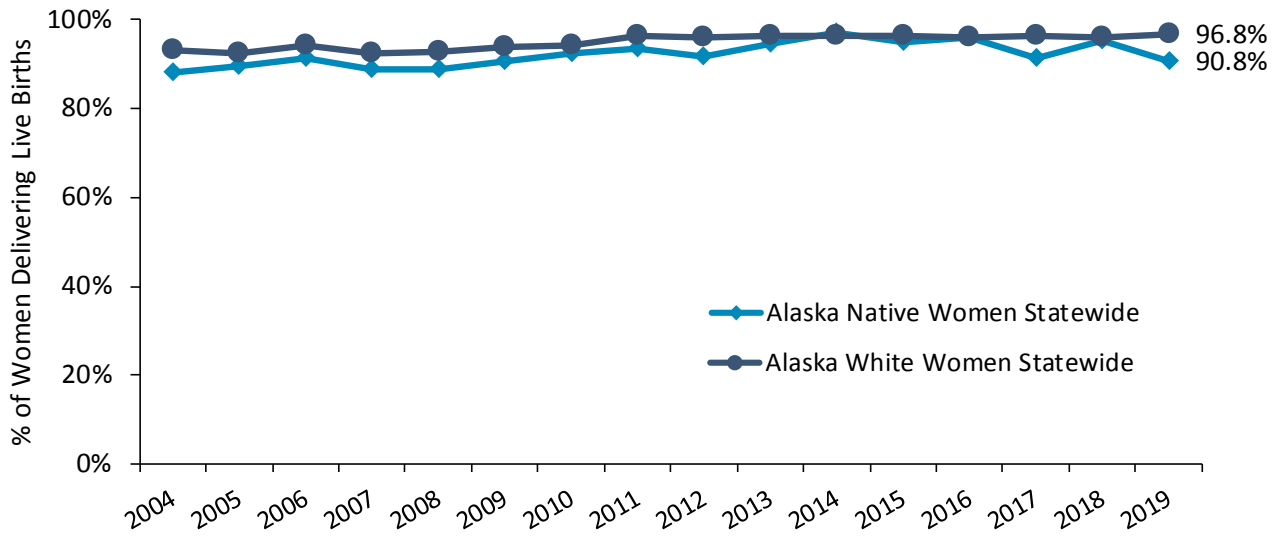
Childhood witness to violence as reported by mothers of 3-year–olds includes those who report that their child has ever witnessed violence or physical abuse between household members.

Summary

- During 2018-2019, 10.0% of Alaska Native mothers of 3-year–olds reported that their child witnessed violence or abuse between household members. This was significantly higher than among Alaska White mothers of 3–year–olds (2.3%).
- Between 2014–2015 and 2018–2019, the percentage of Alaska Native mothers reporting their child had witnessed violence or abuse has remained relatively stable.

Breastfeeding

Figure 31a. Breastfeeding Initiation, 2004-2019



Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-74

Definition

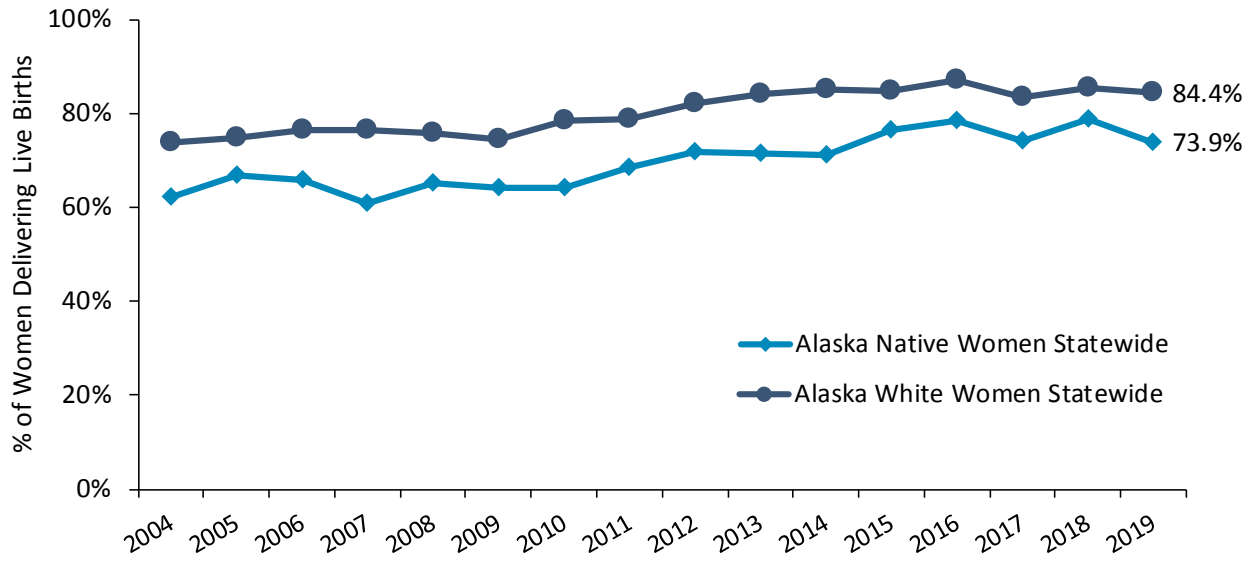
Breastfeeding is beneficial to both infants and mothers. Benefits to the infant include protection against infectious diseases and sudden infant death syndrome, and reduced risk of diabetes, certain cancers, overweight/obesity, and asthma.[18] Benefits to the mother include earlier return to pre-pregnancy weight, decreased risk of breast and ovarian cancer, and infant bonding.[18] The American Academy of Pediatrics recommends exclusive breastfeeding for the first 6 months of life, and continued breastfeeding for the first year of life and beyond as mutually desired by mother and child.[19] Breastfeeding initiation includes women who report having ever breastfed or pumped breast milk to feed to their newborn. Breastfeeding at 8 weeks includes mothers who report that they were still breastfeeding or feeding pumped milk to their newborn at 8 weeks postpartum.

Summary

» In 2019, 90.8% of Alaska Native women reported initiating breastfeeding. At 8 weeks postpartum, 73.9% were still breastfeeding.
» Between 2004 and 2019, the percent of Alaska Native mothers initiating breastfeeding appeared to remain relatively stable.

Breastfeeding

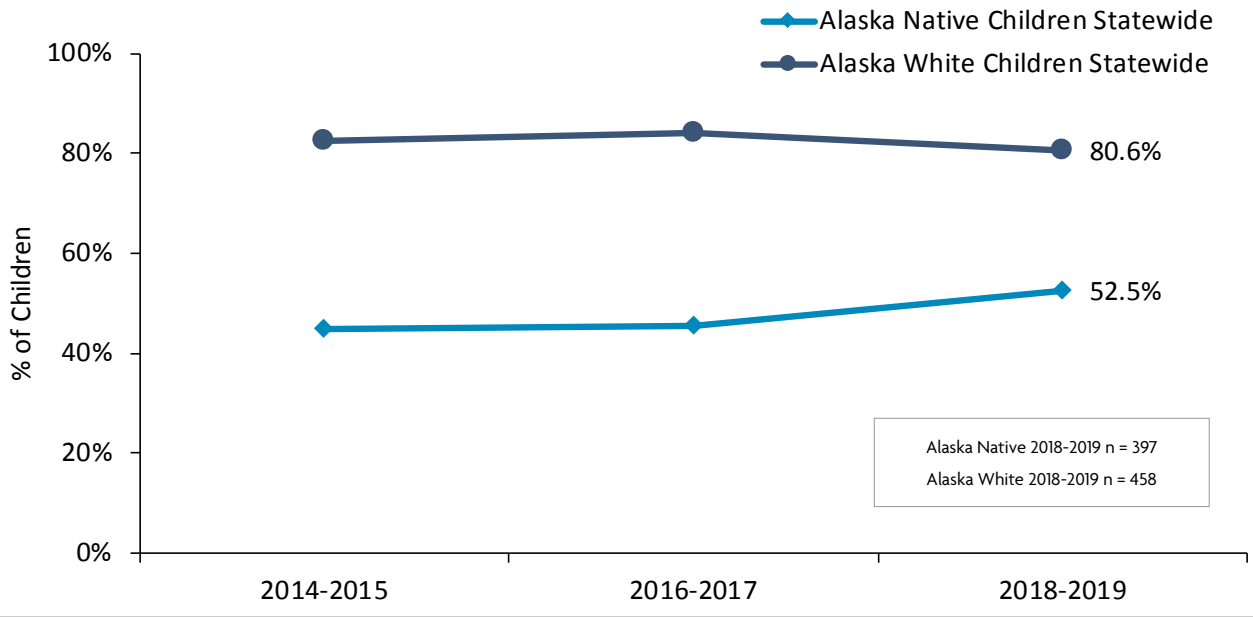
Figure 31b. Breastfeeding at 8 Weeks, 2004-2019



Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-75

Diet - Sugar Sweetened Beverages

Figure 32a. Abstained from Sweetened Drinks on Previous Day, 3–Year–Old Children, 2014-2015 to 2018-2019



Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-76

Definition

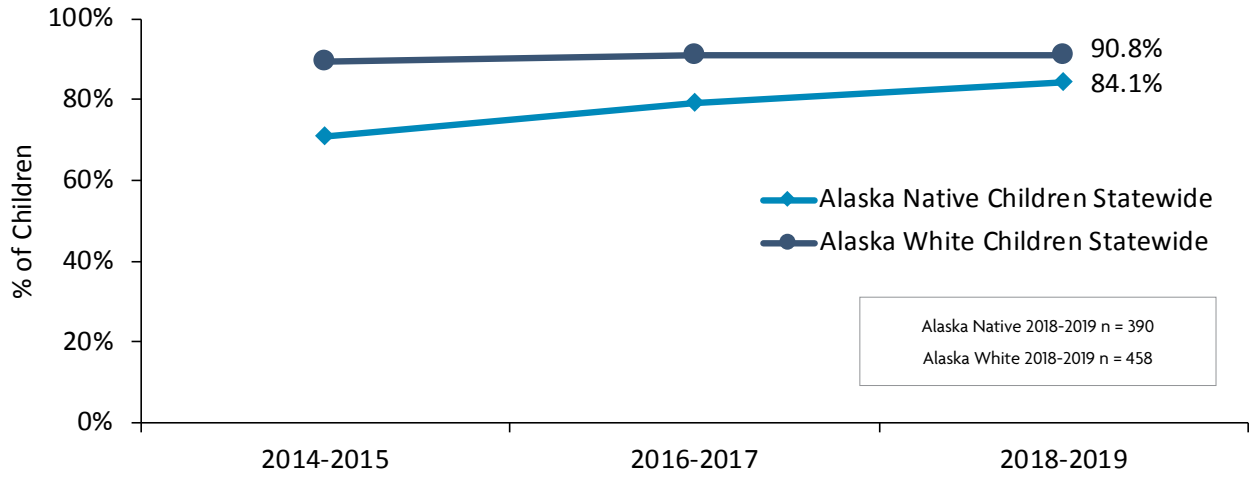
Sugar sweetened beverages include drink products with added sugar as an ingredient. These include regular soda (pop), fruit drinks, sport drinks, energy drinks, flavored water drinks, and iced teas. Diet drinks that contain artificial sweeteners with 0 grams of added sugar and juices made from 100% juice are excluded. Sugar sweetened beverages can contain up to 30 grams of added sugar per serving, and are associated with increased daily calorie consumption. Children's consumption of sugar sweetened beverages is associated with an increased risk of obesity, poor nutrition, and tooth decay.[20]

Summary

- During 2018–2019, 52.5% of Alaska Native mothers of 3–year–old children reported that their child did not drink any sweetened drinks (excluding soda) on the previous day. This was significantly lower than among Alaska White mothers (80.6%) and among Alaska overall (73.0%).
- During 2018–2019, 84.1% of Alaska Native mothers reported that their child did not drink any soda in the previous day.
- Abstinence from soda has significantly increased among Alaska Native children between 2014-2015 and 2018-2019. Abstinence from sweetened drinks (excluding soda) has remained relatively stable among Alaska Native children between 2014-2015 and 2018-2019.

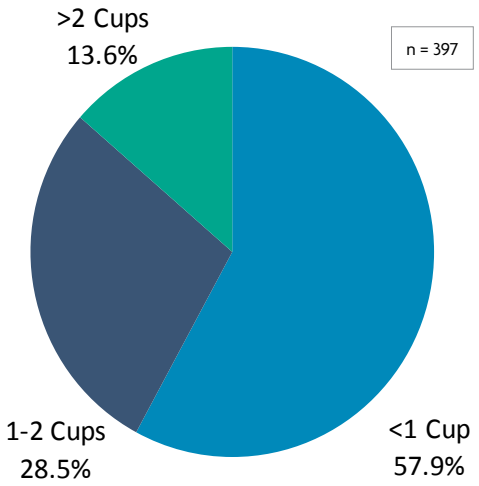
Diet - Sugar Sweetened Beverages

Figure 32b. Abstained from Soda on Previous Day, 3–Year–Old Children, 2014-2015 to 2018-2019



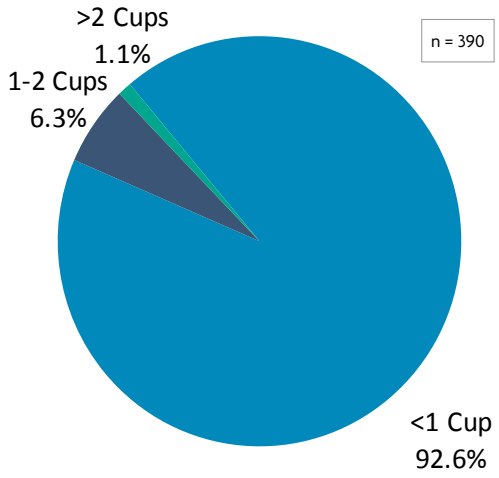
Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-77

Figure 32c. Sweetened Drink Consumption on Previous Day, 3–Year-Old Alaska Native Children Statewide, 2018-2019



Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-78

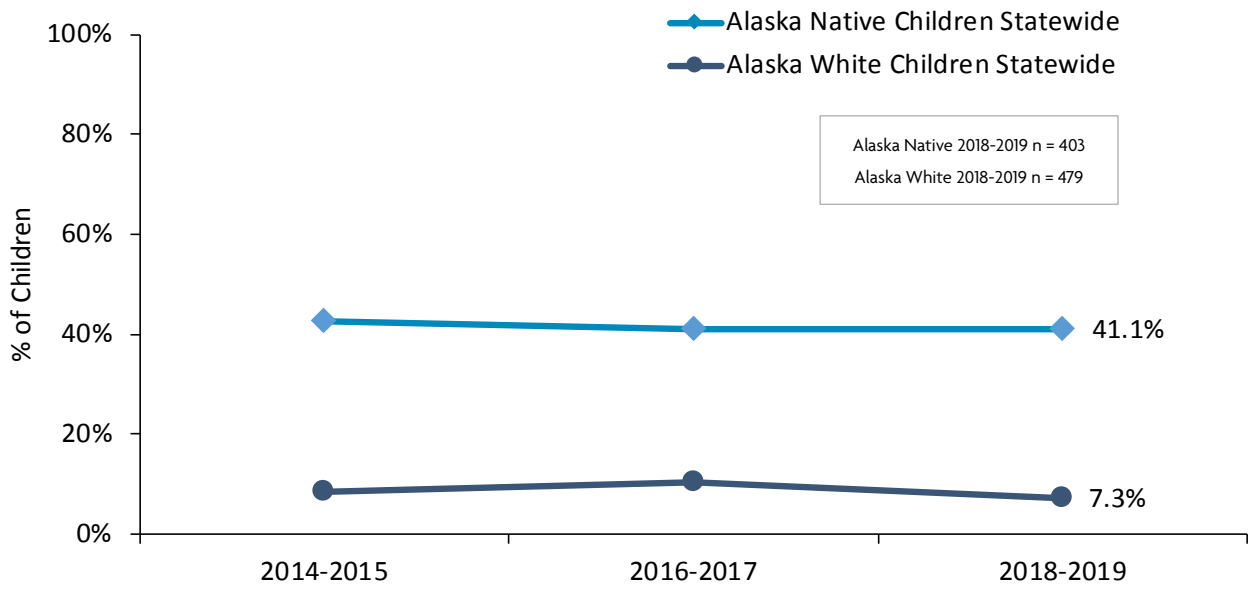
Figure 32d. Soda Consumption on Previous Day, 3–Year–Old Alaska Native Children Statewide, 2018-2019



Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-79

Childhood Dental Caries

Figure 34a. Dental Caries Among 3–Year–Old Children, 2014-2015 to 2018-2019



Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit
Appendix Table C-81

Definition

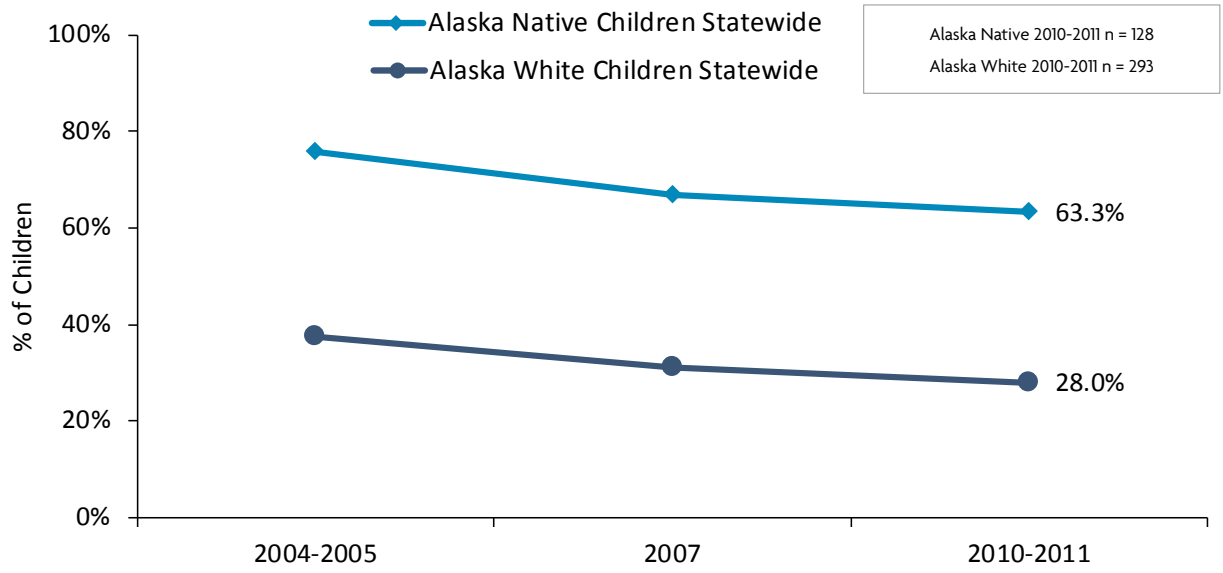
Childhood dental caries includes Alaska Native mothers who self-reported their infants or children have ever experienced dental caries. Data from the Alaska Oral Assessment are based on visual inspections performed by dentists at the child's school. Caries, also referred to as cavities or tooth decay, are caused by a bacterial infection that destroys the hard outer protective lining of the teeth.

Summary

- During 2018–2019, 41.1% of Alaska Native mothers of 3-year–olds reported that a health care provider had ever said their child had tooth decay. This was significantly higher than among Alaska White mothers of 3-year–olds (7.3%).
- The percentage of 3-year-olds with dental caries has remained relatively stable between 2014-2015 and 2018-2019.
- During 2010–2011, 63.3% of Alaska Native kindergarten children had experience with dental caries. This was significantly higher than among Alaska White kindergarten children (28.0%).
- During 2010–2011, more than 4 out of 5 (83.4%) Alaska Native 3rd grade children had experience with dental caries. This was significantly higher than among Alaska White 3rd grade children (48.4%).

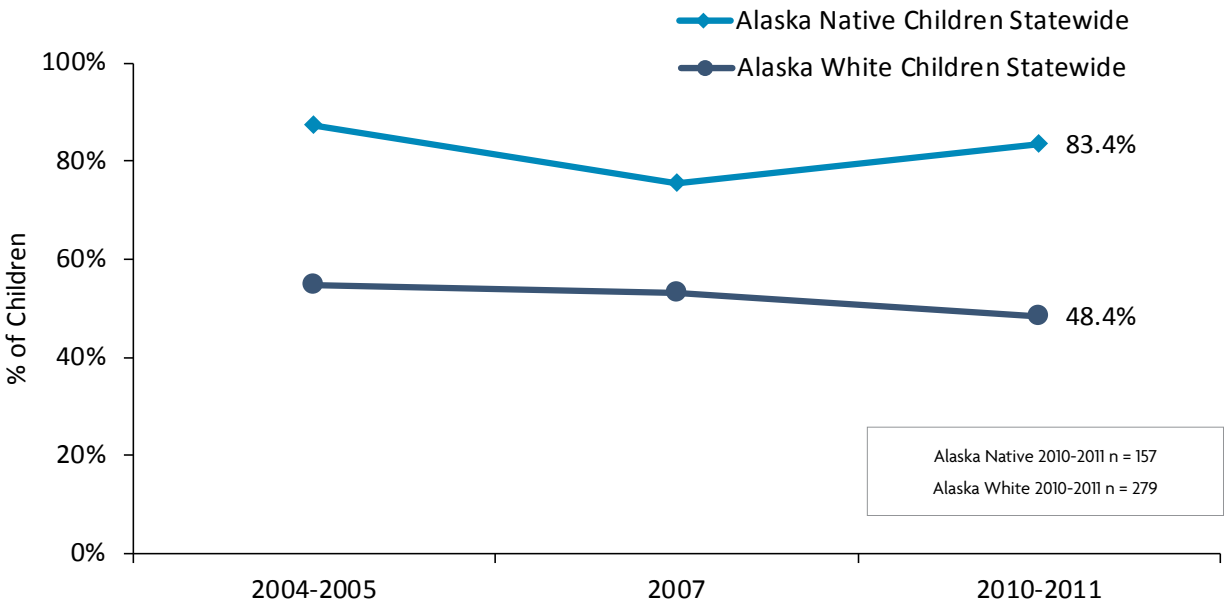
Childhood Dental Caries

Figure 34b. Dental Caries Among Alaska Kindergarten Children, 2004-2005 to 2010-2011



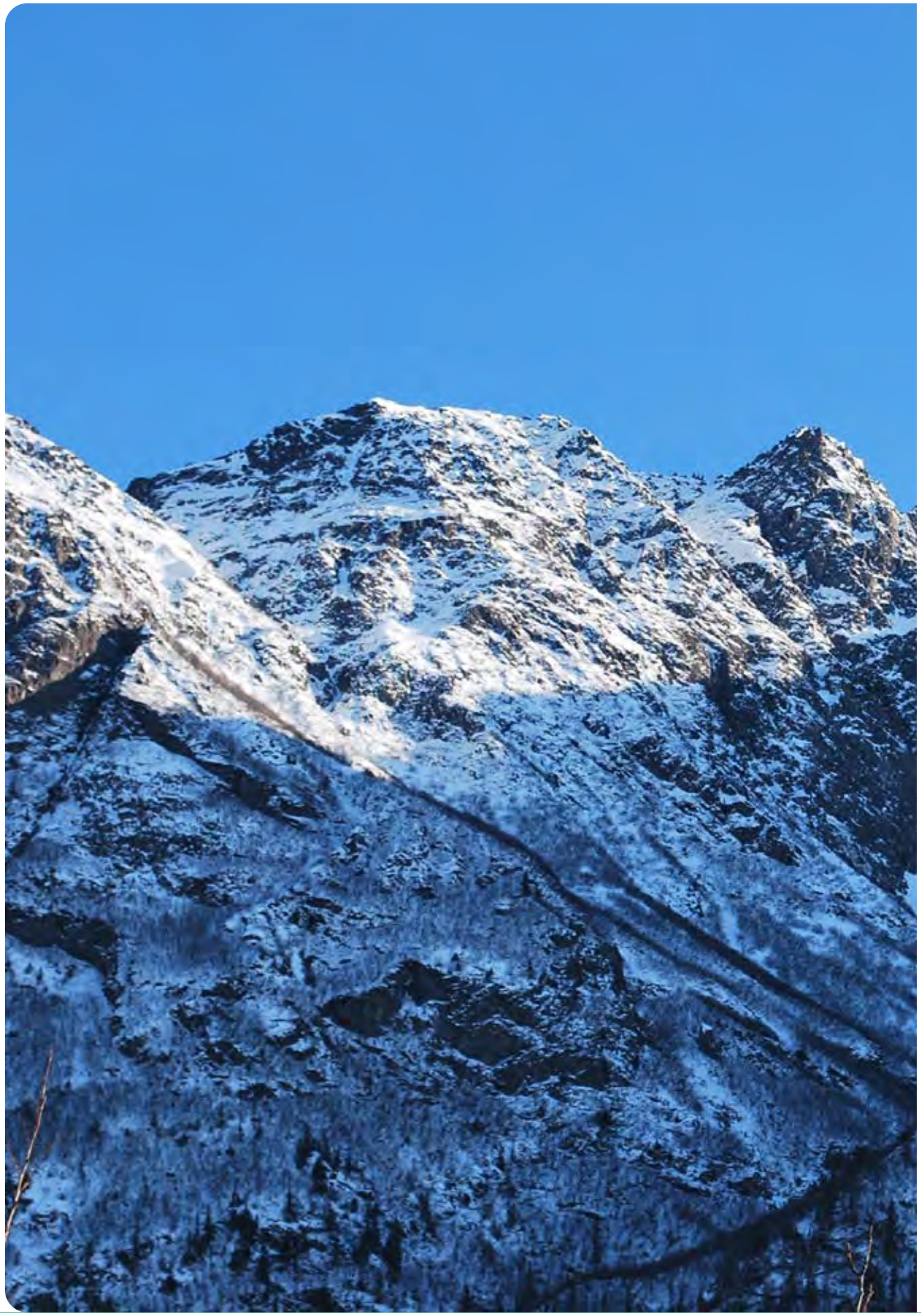
Data Source: Alaska Division of Public Health, Alaska Oral Health Assessment
Appendix Table C-82

Figure 34c. Dental Caries Among Alaska Third Grade Children, 2004-2005 to 2010-2011

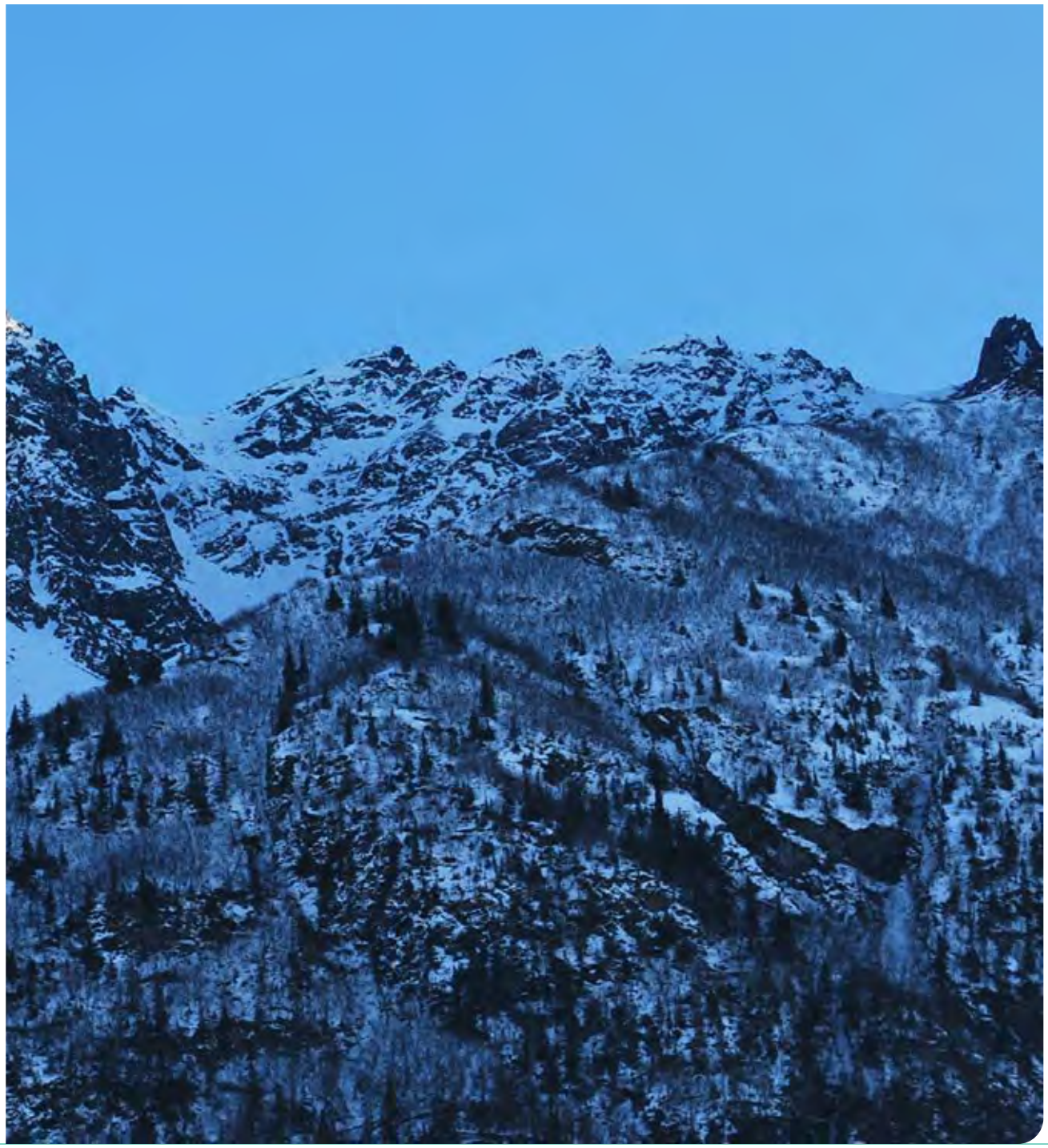


Data Source: Alaska Division of Public Health, Alaska Oral Health Assessment
Appendix Table C-83

Note: The Alaska Oral Health Assessment survey methodology uses non-probability quota sampling from randomly selected Alaska schools. The results may not be representative of all Alaskan kindergarten children. This report shows the most recent available data (2010-2011). Caution is advised when attempting to compare data between years due to unequal reporting intervals.



Adolescent Health



Adolescent Health Highlights

Close to half (46.4%) of Alaska Native adolescents had three or more adults in their lives that they could seek support from, a protective factor for negative health outcomes.

Over a third (43.1%) of Alaska Native adolescents experienced a major depressive episode in 2019.

Almost a quarter (24.3%) of Alaska Native adolescents reported that they attempted suicide in 2019.

17.5% of Alaska Native adolescents met the recommended level of physical activity.

Adolescent Health Highlights

More than a quarter (27.8%) of Alaska Native adolescents reported current marijuana use.

Since 2007, cigarette smoking had decreased significantly among Alaska Native adolescents. 12.6% reported currently smoking cigarettes, and about one-fifth (20.2%) used smokeless tobacco.

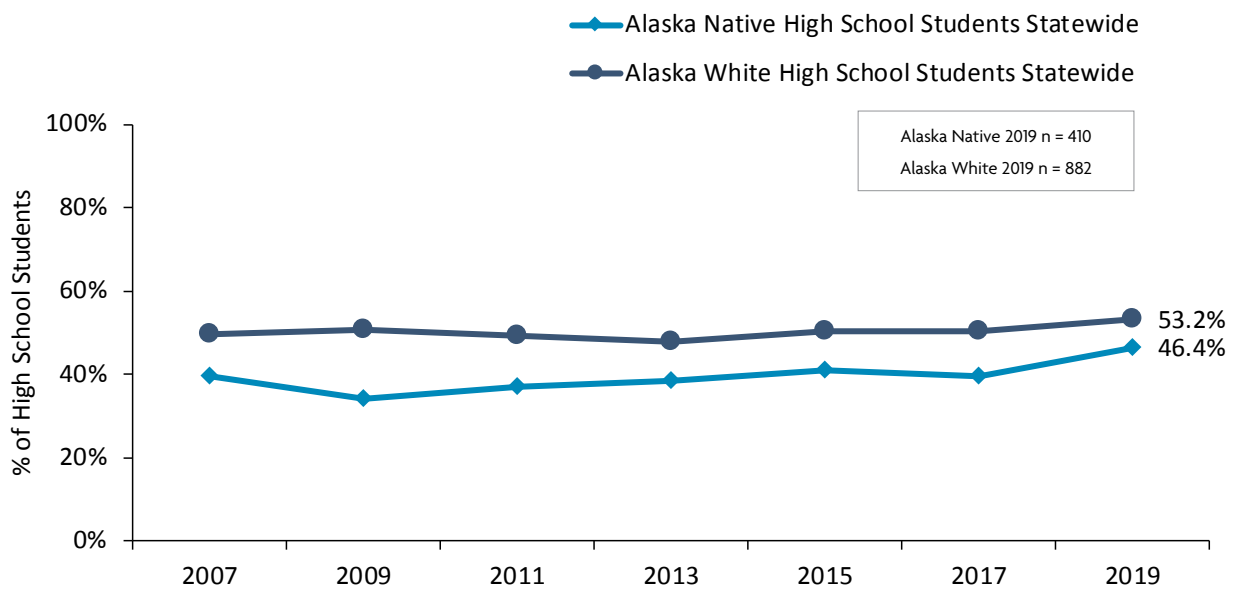
Approximately 17.5% of Alaska Native adolescents were obese, while 66.3% were at a healthy weight.

Over one in ten (14.0%) Alaska Native adolescents had experienced intimate partner violence.

Alcohol consumption among Alaska Native adolescents had also decreased significantly. Approximately 10.8% reported binge drinking, and 16.7% reported any amount of drinking in the past month.

Social Support

Figure 35. High School Student Social Support, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-84

Definition

Adolescent social support is defined as the estimated percentage of high school students (grades 9-12) who would feel comfortable seeking help from three or more adults besides their parents if they had an important question affecting their life.

Related Objectives

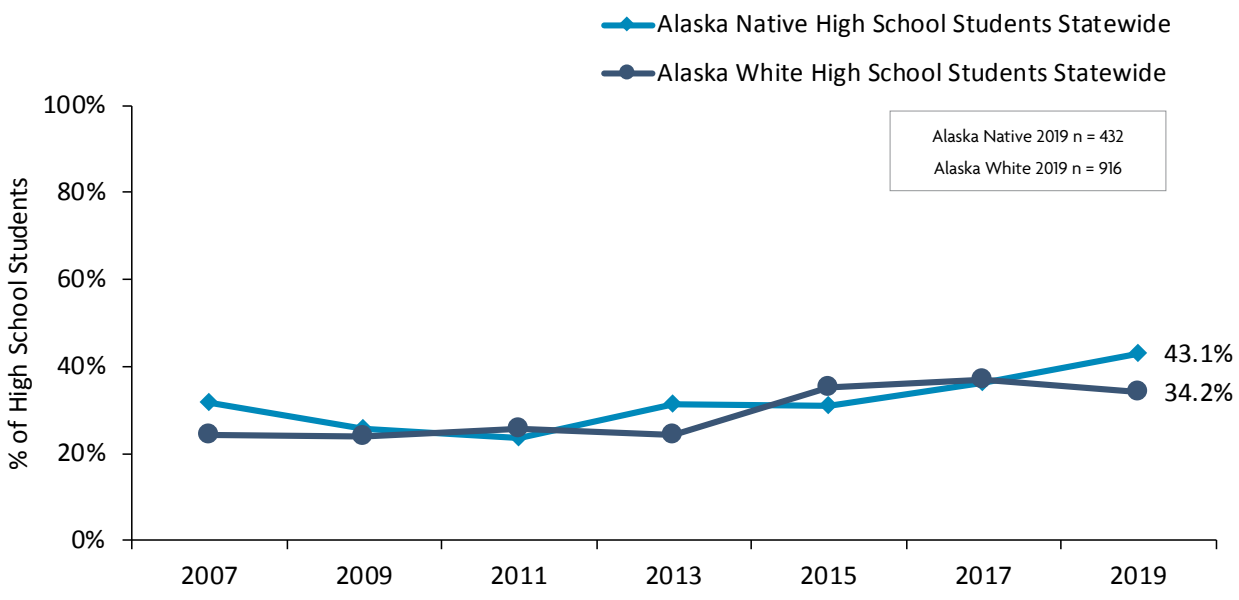
Increase the percentage of adolescents (high school students in grades 9-12) with three or more adults (besides their parents) from whom they feel comfortable seeking help to 50.0%.
- HEALTHY ALASKANS 2030, OBJECTIVE #17

Summary

- Over four in ten (46.4%) Alaska Native high school students reported having three or more adults they would be comfortable seeking help from in 2019.
- In 2019, there was no statistically significant difference in social support between Alaska Native and Alaska White high school students.
- Social support among Alaska Native high school students appears to have remained relatively stable between 2007 and 2019.

Depression

Figure 36. High School Student Depression, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-85

Definition

Adolescent depression is defined as the estimated percentage of high school students (grades 9-12) who have ever felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months. There is evidence that experiencing depressive disorders during adolescence is associated with numerous negative health outcomes including other mental health disorders, suicidal behavior, substance abuse, and obesity.[23]

Related Objectives

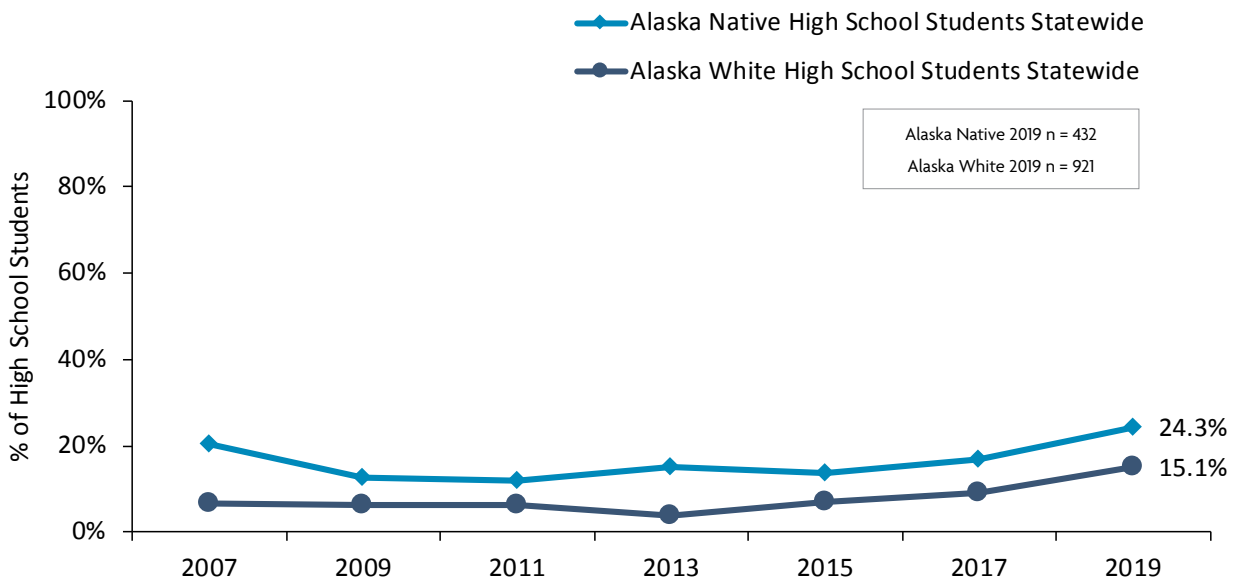
Reduce the percentage of adolescents (high school students in grades 9-12) who felt so sad or hopeless every day for 2 weeks or more in a row that they stopped doing some usual activities during the past 12 months to 31.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #13*

Summary

- Over four in ten (43.1%) Alaska Native high school students reported having sad or hopeless feelings that affected their usual activities in 2019.
- In 2019, there was no statistically significant difference in depression prevalence between Alaska Native and Alaska White high school students.
- Depression among Alaska Native high school students has significantly increased between 2009 and 2019.

Suicide Attempts

Figure 37. High School Student Suicide Attempts, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-86

Definition

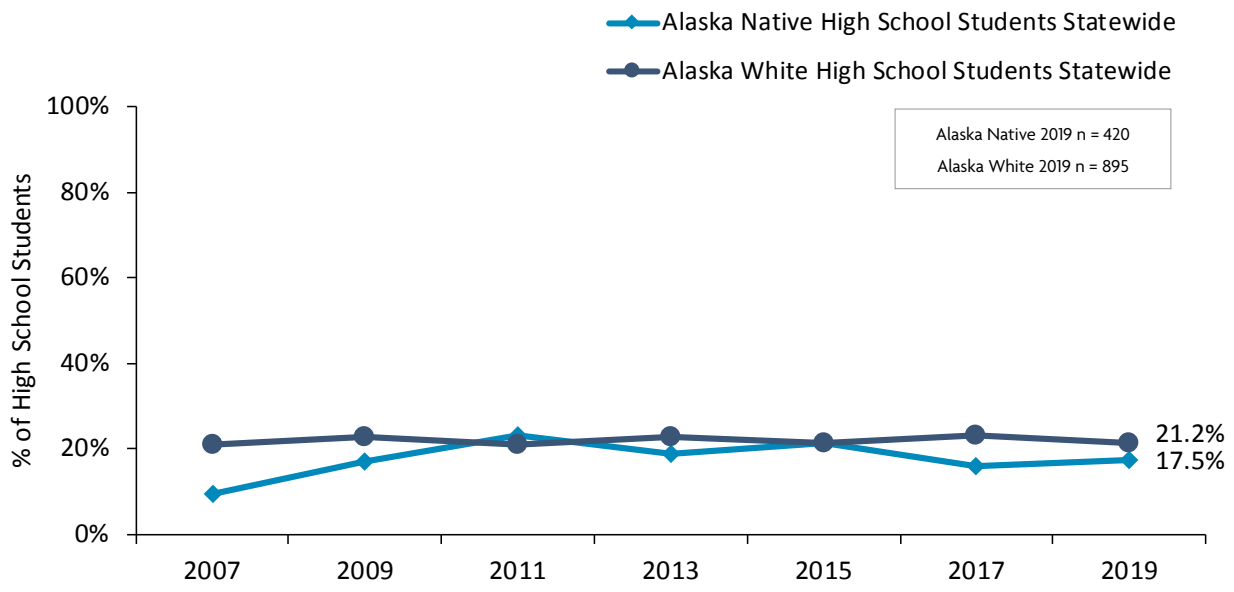
Adolescent suicide attempts is defined as the estimated percent of high school students (grades 9-12) who tried to intentionally take their own life one or more times during the past 12 months.

Summary

- In 2019, nearly 1 in 4 (24.3%) Alaska Native high school students reported one or more suicide attempts during the past 12 months.
- In 2019, there was no statistically significant difference in the percent of students who attempted suicide between Alaska Native and Alaska White high school students.
- The percent of Alaska Native high school students who attempted suicide has appeared to remain relatively stable between 2007 and 2019.

Physical Activity

Figure 38. High School Student Physical Activity, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-87

Definition

Physical activity is defined as high school students (grades 9-12) who were physically active for a total of at least 60 minutes per day, including doing any kind of physical activity that increased their heart rate and made them breathe hard some of the time. The current recommendation is 60 minutes of physical activity per day, every day of the week.[24]

Related Objectives

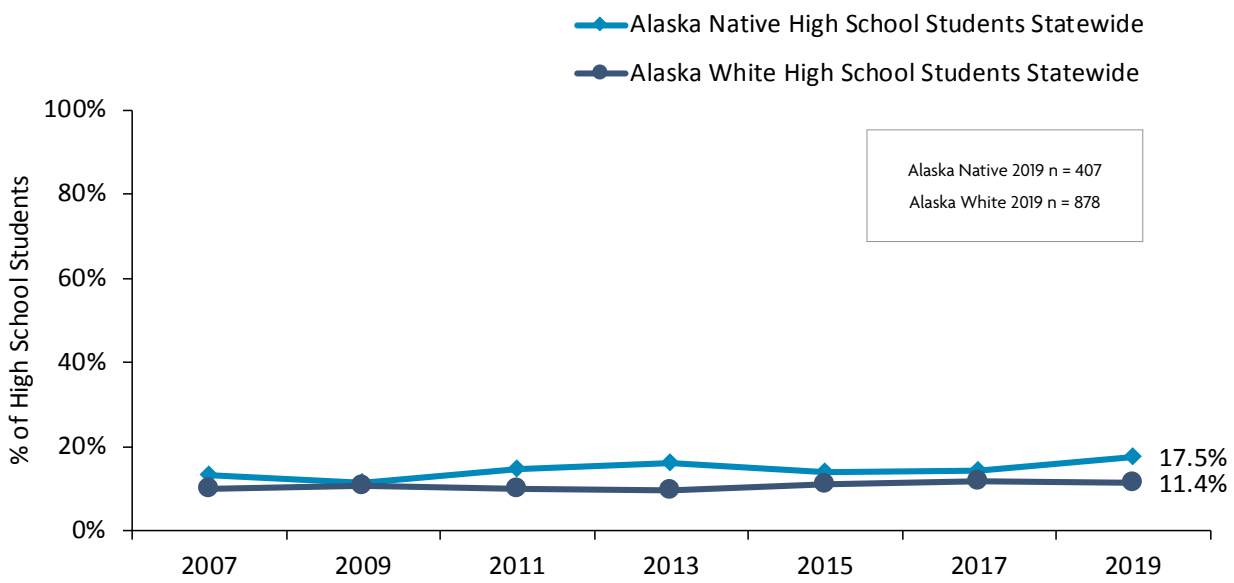
Increase the percentage of adolescents (high school students in grades 9-12) who do at least 60 minutes of physical activity a day, every day of the week, to 22.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #16.* Increase the proportion of adolescents who do enough aerobic physical activity to 30.6%. - *HEALTHY PEOPLE 2030, OBJECTIVE PA-06*

Summary

- Nearly one in five (17.5%) Alaska Native high school students reported engaging in the recommended level of physical activity in 2019.
- In 2019, there was no statistically significant difference in the percent of high school students who met physical activity recommendations between Alaska Native and Alaska White high school students.
- The percent of Alaska Native high school students who met physical activity recommendations has appeared to remain relatively stable between 2007 and 2019.

Obesity

Figure 39. High School Student Obesity, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-88

Definition

Adolescent obesity is the percentage of students (grades 9-12) with a body mass index (BMI) equal to or greater than the age- and sex-specific 95th percentile.

Related Objectives

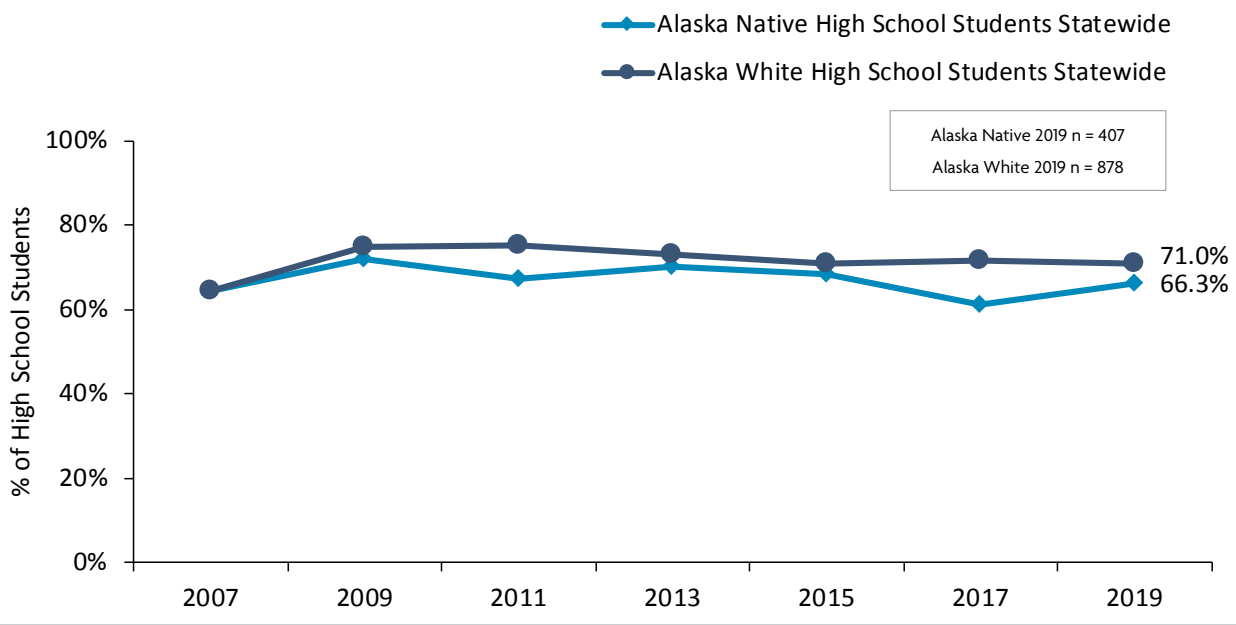
Reduce the proportion of children and adolescents with obesity to 15.5%. - *HEALTHY PEOPLE 2030, OBJECTIVE NWS-04*

Summary

- Nearly one in five (17.5%) Alaska Native high school students reported being obese in 2019.
- In 2019, there was no statistically significant difference in obesity prevalence between Alaska Native and Alaska White high school students.
- The percent of obese Alaska Native high school students appears to have remained relatively stable between 2007 and 2019.

Healthy Weight

Figure 40. High School Student Healthy Weight, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-89

Definition

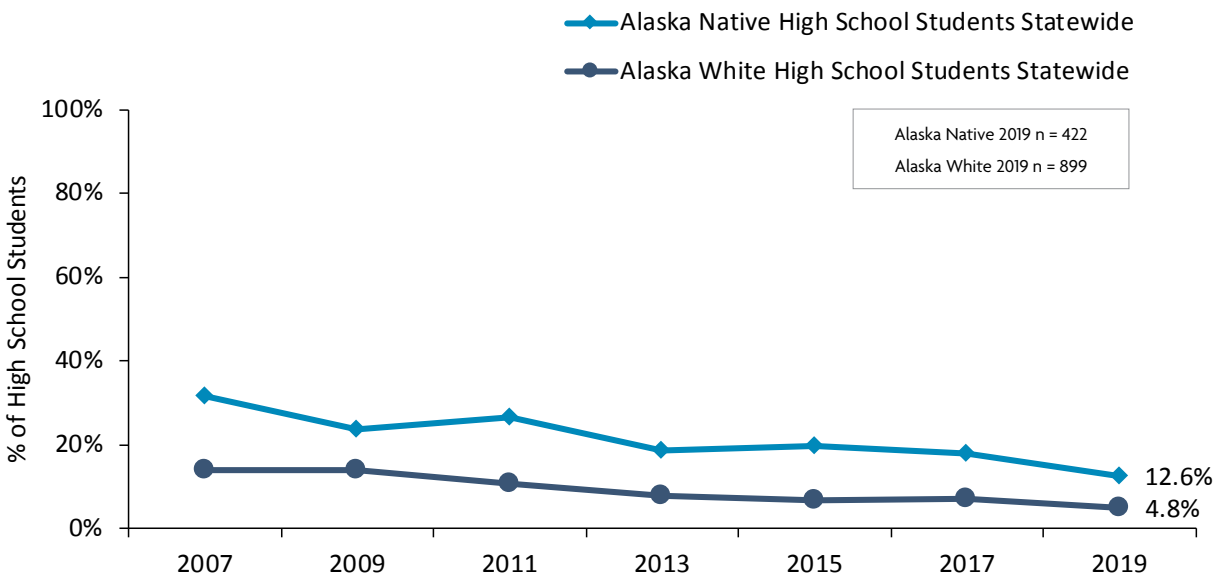
Adolescent healthy weight is the percentage of students (grades 9-12) with a body mass index (BMI) at the age- and sex-specific 5th percentile to less than the 85th percentile.

Summary

- Two-thirds (66.3%) of Alaska Native high school students reported meeting the criteria for healthy weight in 2019.
- In 2019, there was no statistically significant difference in the percentage of high school students with a healthy weight between Alaska Native and Alaska White high school students.
- The percentage of Alaska Native high school students who reported having a healthy weight appears to have remained relatively stable between 2007 and 2019.

Current Smoking

Figure 41. High School Student Current Smoking, 2007-2019



Data Sources: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-90

Definition

Adolescent current smoking is defined as the percent of high school students (grades 9-12) who have smoked cigarettes on one or more of the past 30 days.

Related Objectives

Reduce current cigarette smoking in adolescents to 3.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE TU-06*

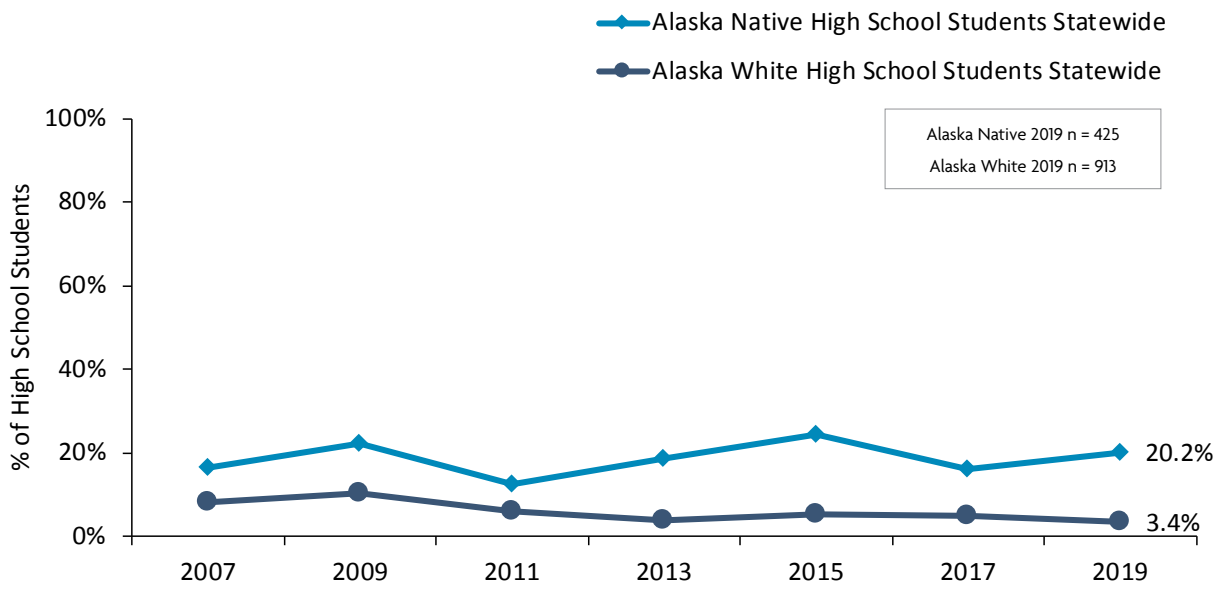
Summary

» In 2019, about one in eight (12.6%) Alaska Native high school students reported being current smokers. This was significantly higher than among Alaska White high school students (4.8%).

» Current smoking decreased significantly among Alaska Native high school students between 2007 and 2019.

Current Smokeless Tobacco Use

Figure 42. High School Student Current Smokeless Tobacco Use, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-91

Definition

Adolescent current smokeless tobacco use is defined as the percent of high school students (grades 9-12) who used chewing tobacco, snuff, or dip on one or more of the past 30 days.

Related Objectives

Reduce current use of smokeless tobacco products among adolescents to 2.3%. - *HEALTHY PEOPLE 2030, OBJECTIVE TU-08*

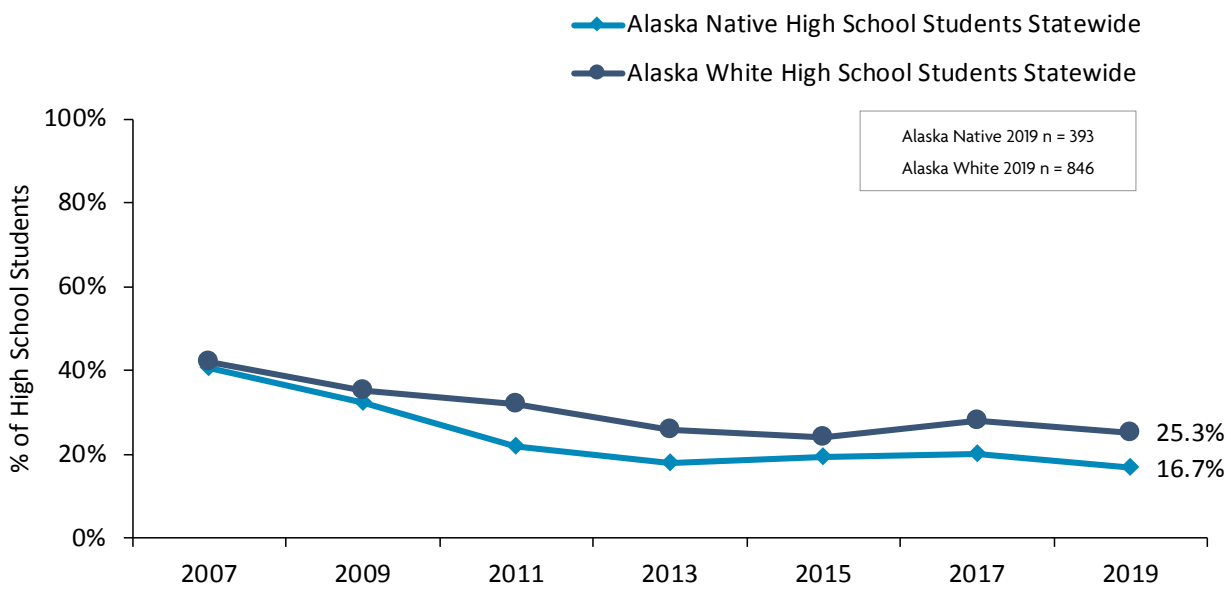
Summary

- In 2019, about one in five (20.2%) Alaska Native high school students reported being current smokeless tobacco users. This was significantly higher than among Alaska White high school students (3.4%).
- Between 2007 and 2019, the prevalence of smokeless tobacco use among Alaska Native high school students has remained relatively stable.
- Smokeless tobacco use among Alaska Native high school students was significantly higher than among Alaska White students for all years shown except during 2007 and 2009.

Note: Data for Alaska Native high school students in 2007, 2017, 2019 and for Alaska White high school students in 2019 are considered unstable and should be used with caution.

Current Drinking

Figure 43. High School Student Current Drinking, 2007-2019



Data Sources: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-92

Definition

Adolescent current drinking is the estimated percentage of high school students (grades 9-12) who consumed at least one drink of alcohol on one or more of the past 30 days.

Related Objectives

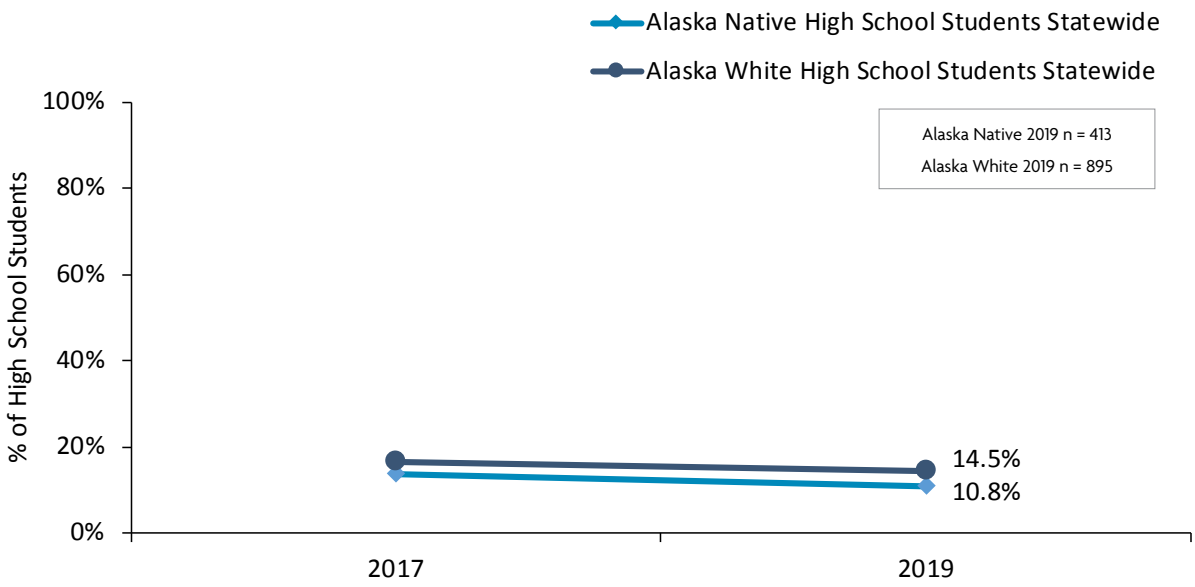
Reduce the proportion of adolescents who drank alcohol in the past month to 6.3%. - *HEALTHY PEOPLE 2030, OBJECTIVE SU-04*

Summary

- One in six (16.7%) Alaska Native high school students reported current drinking in 2019.
- In 2019, there was no statistically significant difference in current drinking between Alaska Native and Alaska White high school students.
- Current drinking among Alaska Native high school students has significantly decreased between 2007 and 2019.

Current Binge Drinking

Figure 44. High School Student Current Binge Drinking, 2017-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-93

Definition

Adolescent binge drinking is the estimated percentage of high school students (grades 9-12) who consumed five or more drinks of alcohol for males or four or more drinks for females, within a couple of hours, on one or more of the past 30 days.

Related Objectives

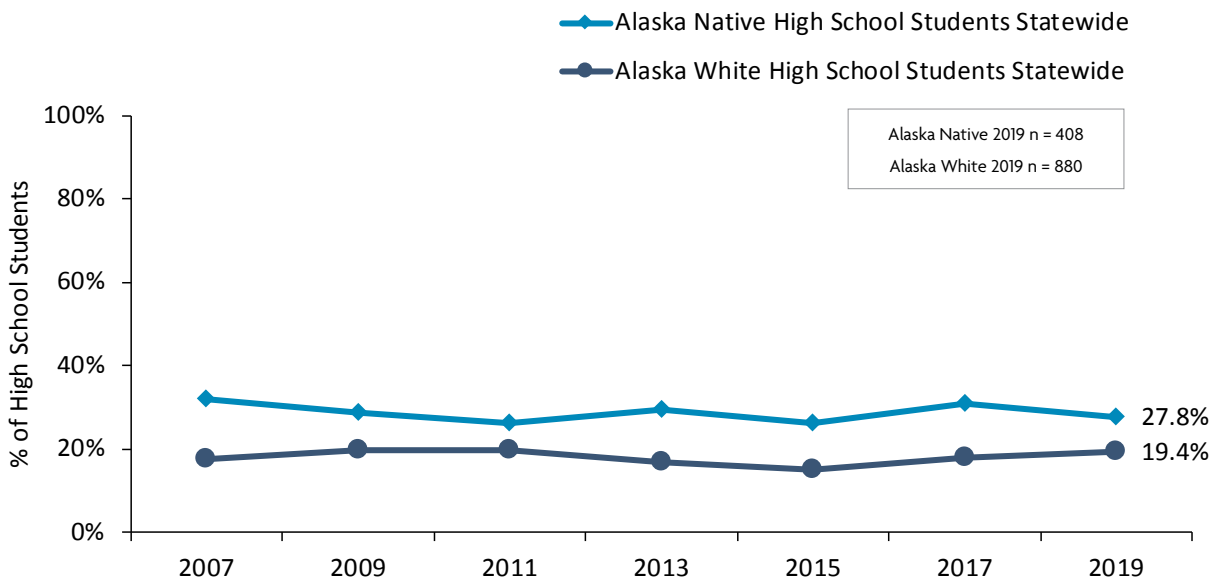
Reduce the proportion of people under 21 years who engaged in binge drinking in the past month to 8.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE SU-09*

Summary

- About one out of nine (10.8%) Alaska Native high school students reported current binge drinking in 2019.
- In 2019, there was no statistically significant difference in binge drinking between Alaska Native and Alaska White high school students.

Current Marijuana Use

Figure 45. High School Student Current Marijuana Use, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-94

Definition

Adolescent marijuana use is defined as the estimated percentage of high school students (grades 9-12) who used marijuana on one or more of the past 30 days.

Related Objectives

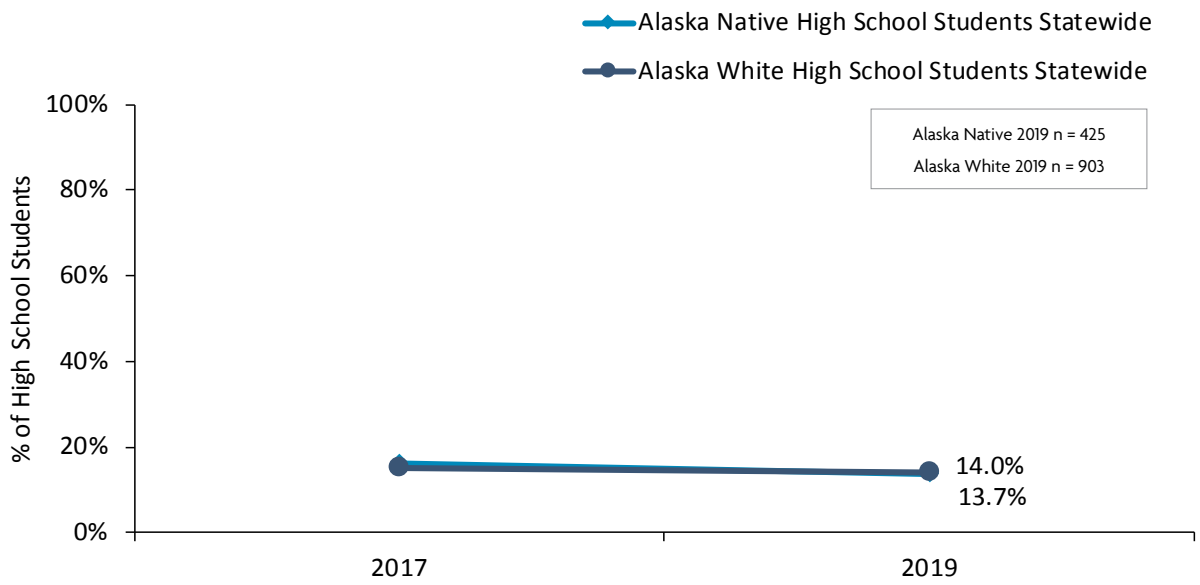
Reduce the proportion of adolescents who used marijuana in the past 30 days to 5.8%. - *HEALTHY PEOPLE 2030, OBJECTIVE SU-06*

Summary

- In 2019, about one out of four (27.8%) Alaska Native high school students reported current marijuana use.
- In 2019, there was no statistically significant difference in marijuana use between Alaska Native and Alaska White high school students.
- The percentage of Alaska Native high school students currently using marijuana has remained relatively stable between 2007 and 2019.

Prescription Pain Medicine Misuse

Figure 46. High School Student Prescription Pain Medicine Misuse, 2017-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-95

Definition

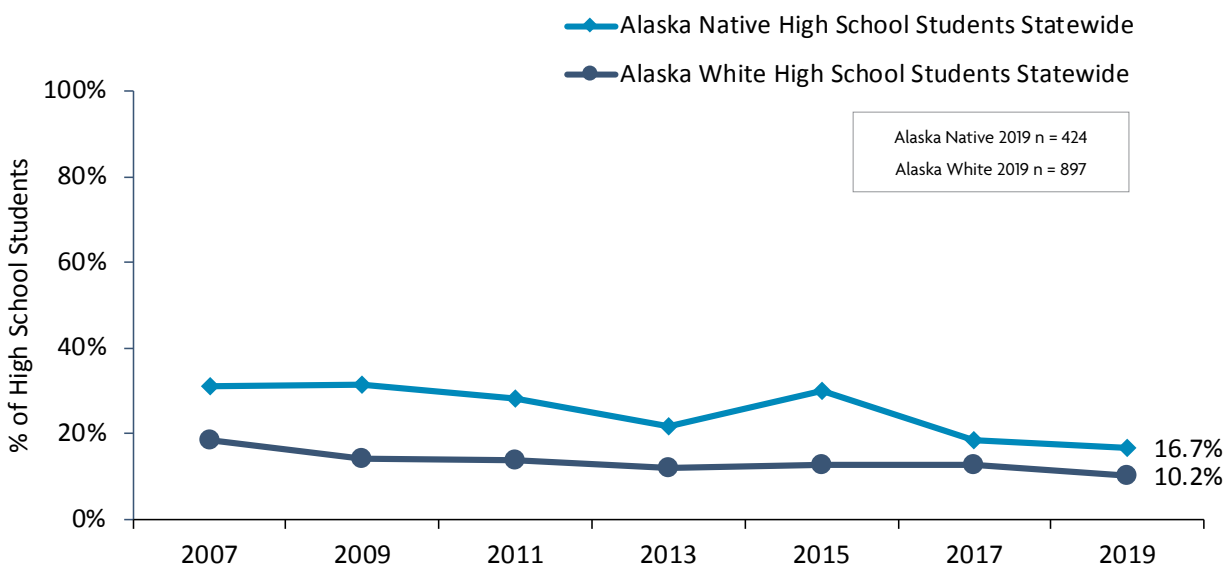
Among high school students (grades 9-12) prescription pain medicine misuse is defined as having used a prescription pain medication (such as OxyContin, Percocet, Vicodin, codeine, or Hydrocodone) without a doctor's prescription or differently than prescribed one or more times during their life.

Summary

- In 2019, 13.7% of Alaska Native high school students reported having used prescription pain medications without a doctor's prescription or differently than prescribed in their lifetime.
- In 2019, there was no statistically significant difference between Alaska Native and Alaska White high school students in prescription pain medicine misuse.

Soda Consumption

Figure 47. High School Student Soda Consumption, 2007-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-96

Definition

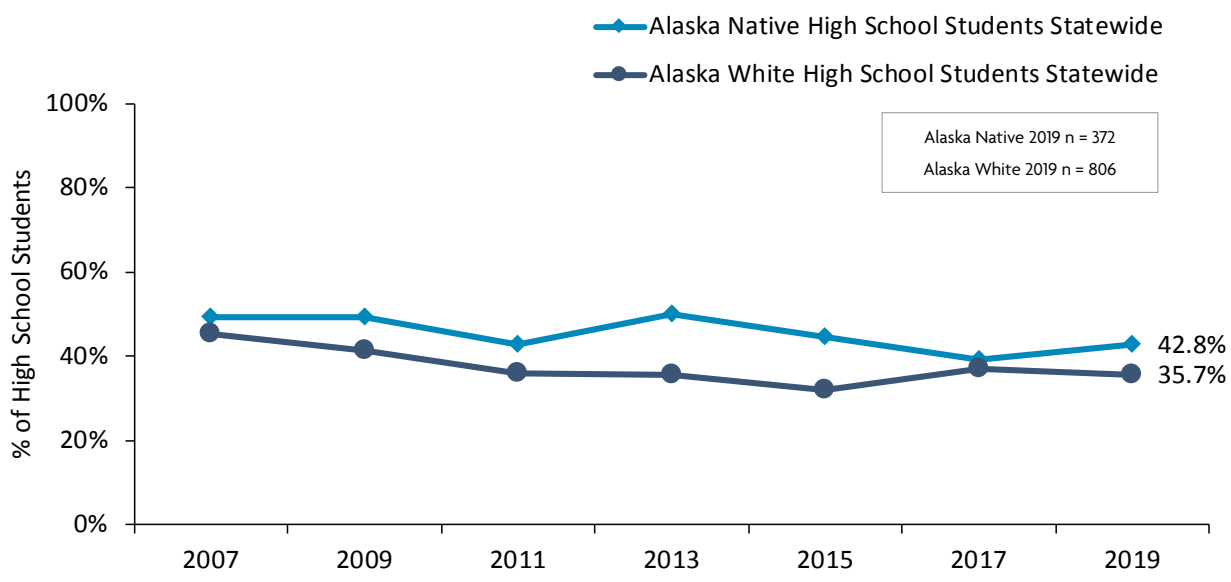
Among high school students (grades 9-12), soda consumption is defined as drinking soda or pop one or more times per day during the past seven days. Soda or pop includes drinks such as Coke or Pepsi and excludes diet sodas.

Summary

- One out of six (16.7%) Alaska Native high school students reported drinking soda daily in the past week in 2019.
- In 2019, there was no statistically significant difference in soda consumption between Alaska Native and Alaska White high school students.
- The percent of Alaska Native high school students drinking soda daily has significantly decreased between 2007 and 2019.

Sexual Activity

Figure 48. High School Student Sexual Activity, 2007-2019



Data Sources: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-97

Definition

Adolescent sexual activity is defined as the estimated percentage of high school students (grades 9-12) who have ever engaged in sexual intercourse.

Related Objectives

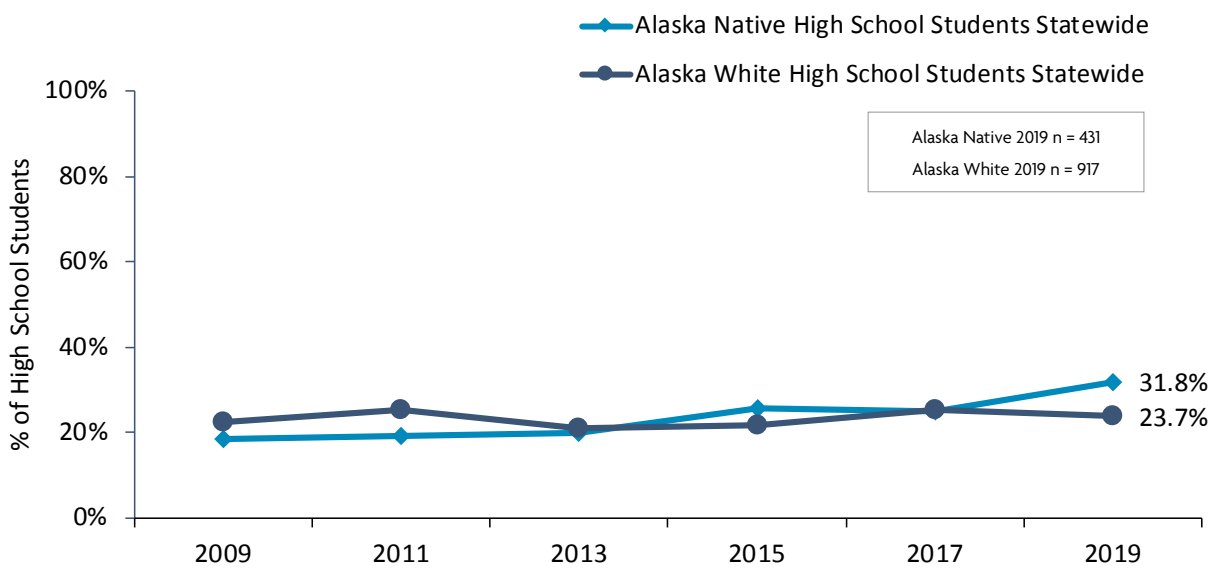
Increase the proportion of adolescents who have never had sex to 80.8%. - *HEALTHY PEOPLE 2030, OBJECTIVE FP-04*

Summary

- In 2019, less than half (42.8%) of Alaska Native high school students reported having ever engaged in sexual intercourse.
- In 2019, there was no statistically significant difference in sexual activity between Alaska Native and Alaska White high school students.
- Sexual activity among Alaska Native high school students has remained relatively stable between 2007 and 2019.

Bullying

Figure 49. High School Student Bullying, 2009–2019



Data Sources: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-98

Definition

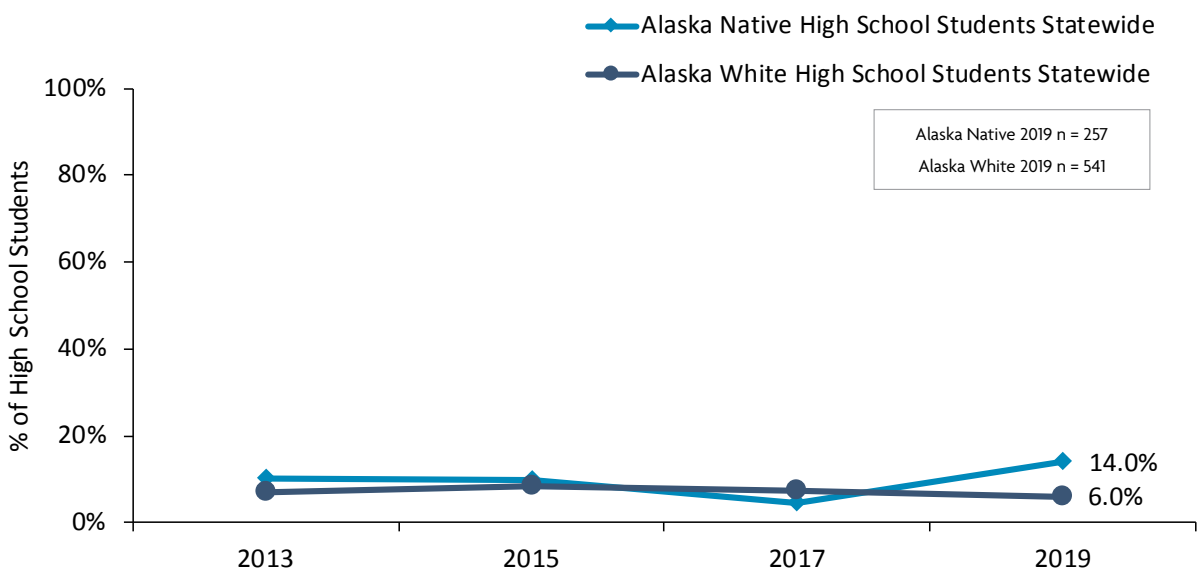
Adolescent bullying is defined as the estimated percentage of high school students (grades 9-12) who were bullied on school property during the past 12 months. Bullying is when one or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again.

Summary

- In 2019, about one in three (31.8%) Alaska Native high school students reported having been bullied in the past year.
- In 2019, there was no statistically significant difference in bullying between Alaska Native and Alaska White high school students.
- The percent of Alaska Native high school students who were bullied has significantly increased between 2009 and 2019.

Intimate Partner Violence

Figure 50. High School Student Intimate Partner Violence, 2013-2019



Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System
Appendix Table C-99

Definition

Adolescent intimate partner violence is defined as the estimated percentage of high school students (grades 9-12) who have ever been physically hurt on purpose by someone they were dating or going out with during the past 12 months. Physically hurt includes being hit, slammed into something, or injured with an object or weapon.

Related Objectives

Reduce the percentage of adolescents (high school students in grades 9-12) who were ever hit, slammed into something, injured with an object or weapon, or physically hurt on purpose by someone they were dating or going out with during the past 12 months to 6.6%. - *HEALTHY ALASKANS 2030, OBJECTIVE #30*

Reduce sexual or physical adolescent dating violence to 11.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE IVP-18*

Summary

- In 2019, approximately one in seven (14.0%) Alaska Native high school students reported having experienced intimate partner violence.
- In 2019, there was no statistically significant difference in intimate partner violence between Alaska Native and Alaska White high school students.
- The percent of Alaska Native high school students who reported experiencing intimate partner violence appears to have remained relatively stable between 2013 and 2019.

Note: Data for Alaska Native high school students in 2017 and 2019 are considered unstable and should be used with caution.

Adult Health

Adult Health Highlights

One in five (19.1%) Alaska Native adults reported binge drinking in the past month.

Around a third (31.3%) of Alaska Native adults were overweight, and slightly over a third (36.3%) were obese based on body mass index.

More than a third (40.4%) of Alaska Native adults reported being in very good or excellent health.

12.2 % of Alaska Native adults reported experiencing frequent mental distress.

Less than a fifth (18.0%) of Alaska Native adults met the current recommendations for physical activity.

Adult Health Highlights

Almost one in three (29.7%) Alaska Native adults has experienced intimate partner violence in their lifetime.

Smokeless tobacco use has been relatively stable, with 12.7% of Alaska Native adults reporting current use of smokeless tobacco.

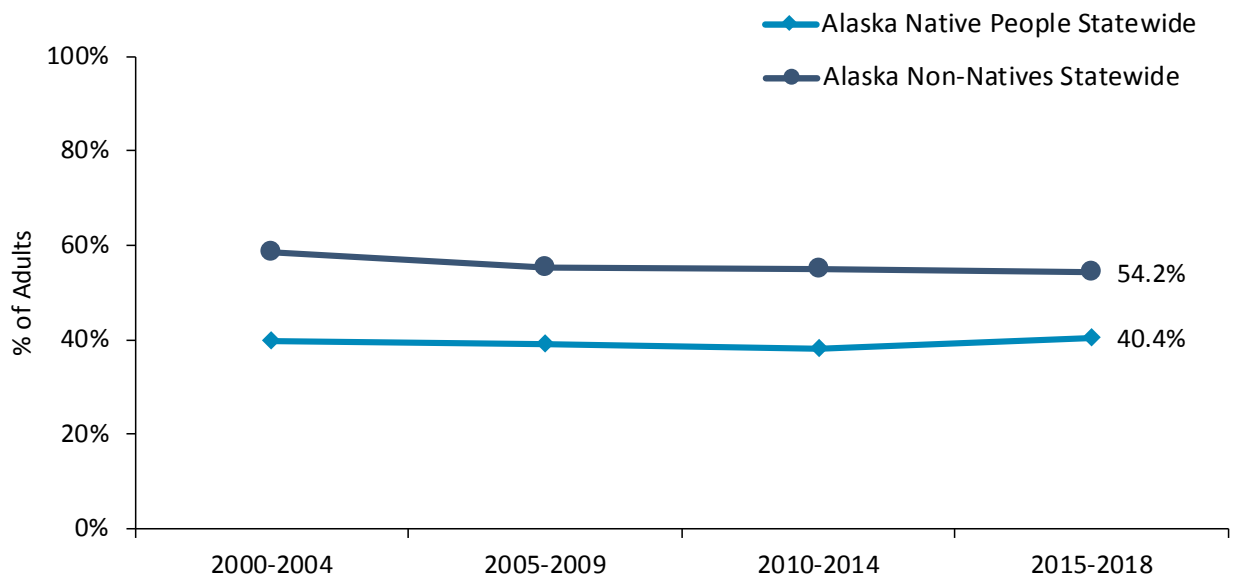
More than one in four (30.2%) Alaska Native adults have experienced 4 or more adverse childhood experiences (ACEs).

Smoking prevalence has not decreased significantly since 2000. More than a third (36.4%) of Alaska Native adults were current smokers.

An estimated 9.0% of the Alaska Native adult population meet dietary recommendations for daily fruit and vegetable consumption.

General Health Status

Figure 51a. Adult General Health Status (Very Good/Excellent), 2000-2004 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-100

Definition

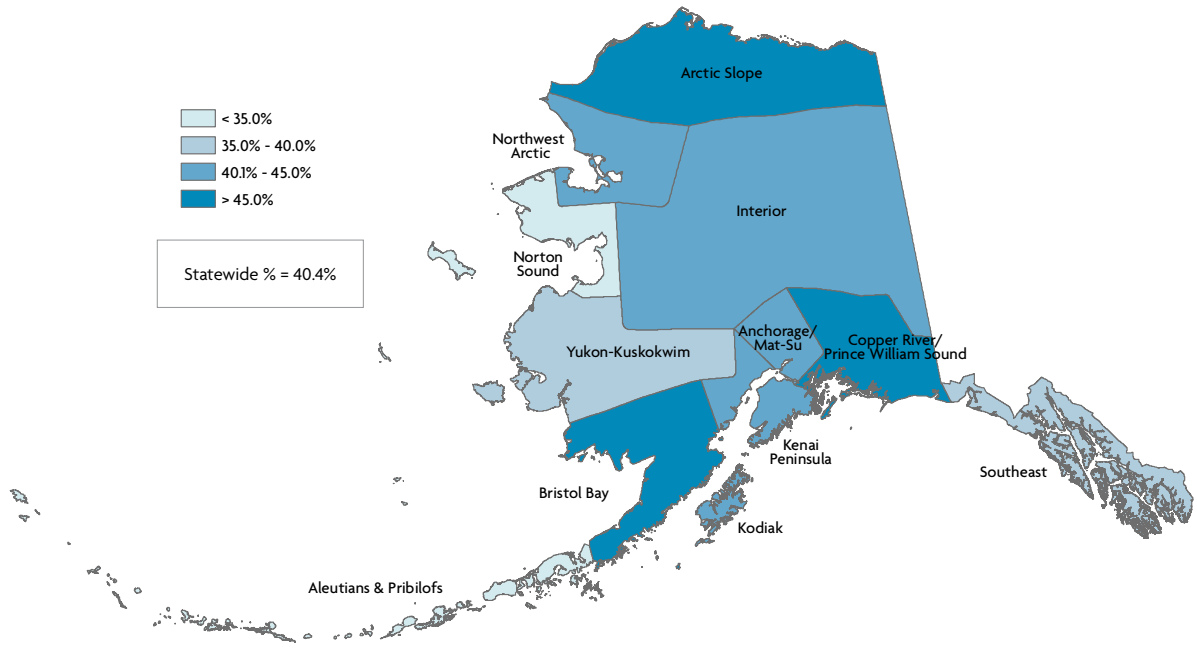
General health status is a self-assessed measure of how an individual perceives his or her health. Self-assessed health status has been validated as a useful indicator of health for a variety of populations and allows for comparisons across different conditions and populations.[25]

Summary

- During 2015–2018, about four in ten (40.4%) Alaska Native adults reported being in "very good" or "excellent" health. This was significantly lower than Alaska non-Native adults (54.2%).
- The general health status among Alaska Native adults has remained relatively stable between 2000-2004 and 2015-2018.
- During 2015–2018, the percent of Alaska Native adults with "very good" or "excellent" health varied by Tribal health region from 29.0% to 47.8%.

General Health Status

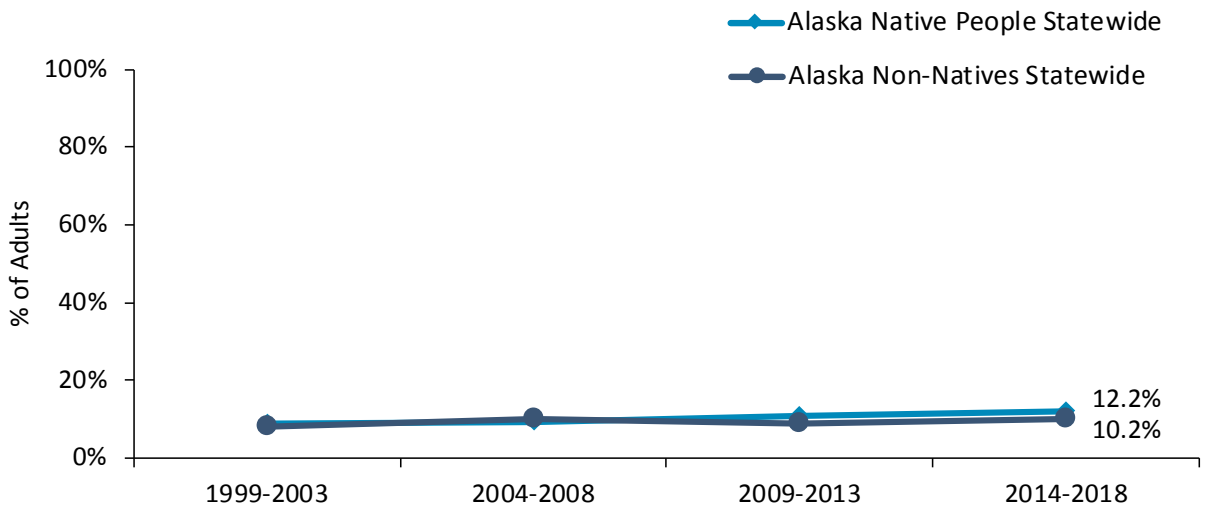
Figure 51b. Percent of Alaska Native Adults With General Health Status of Very Good/ Excellent by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-101

Frequent Mental Distress

Figure 52a. Adult Frequent Mental Distress, 1999-2003 to 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-102

Definition

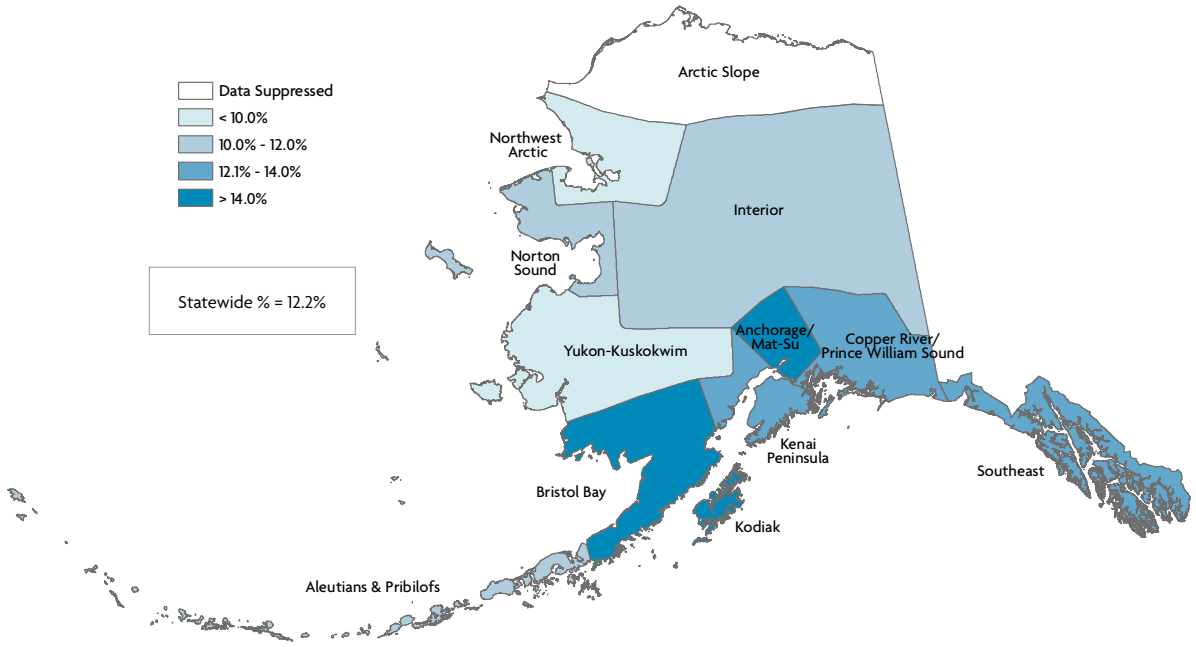
The World Health Organization states that mental health is "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community".[26] Frequent mental distress is the percentage of adults who reported "not good" mental health for 14 or more days in the past 30 days. Evidence has shown that mental health disorders, especially depressive disorders, are related to the occurrence, treatment, risk factors for and course of chronic diseases. There is evidence that positive mental health is associated with improved health outcomes.[27]

Summary

- During 2014–2018, about one in eight (12.2%) Alaska Native adults reported experiencing frequent mental distress.
- During 2014-2018, there was no statistically significant difference in frequent mental distress between Alaska Native and non-Native adults.
- The percent of Alaska Native adults experiencing frequent mental distress remained relatively stable between 1999–2003 and 2014–2018.
- During 2014–2018, the percent of Alaska Native adults with frequent mental distress varied by Tribal health region, ranging from 7.6% to 15.5%.

Frequent Mental Distress

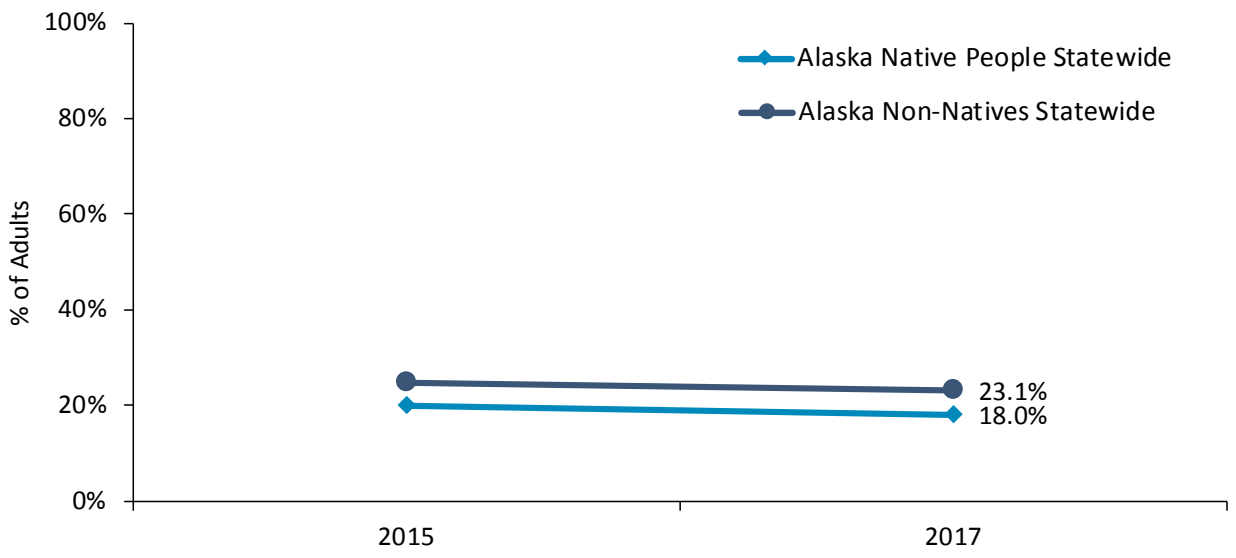
Figure 52b. Percent of Alaska Native Adults That Experienced Frequent Mental Distress by Tribal Health Region, 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-103

Physical Activity

Figure 53a. Adult Physical Activity, 2015-2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-104

Definition

Adult physical activity is measured for persons aged 18 years and older who meet national recommendations for physical activity. The CDC's Physical Activity Guidelines for Americans recommends that adults get a mix of moderate- or vigorous-intensity aerobic activity and muscle-strengthening activity each week.[28] The minimum amount of aerobic activity recommended each week is 150 minutes of moderate-intensity activity or 75 minutes of vigorous-intensity activity, or an equivalent combination. The minimum frequency of recommended muscle-strengthening activity is at least 2 days a week where all major muscle groups are worked.

Related Objectives

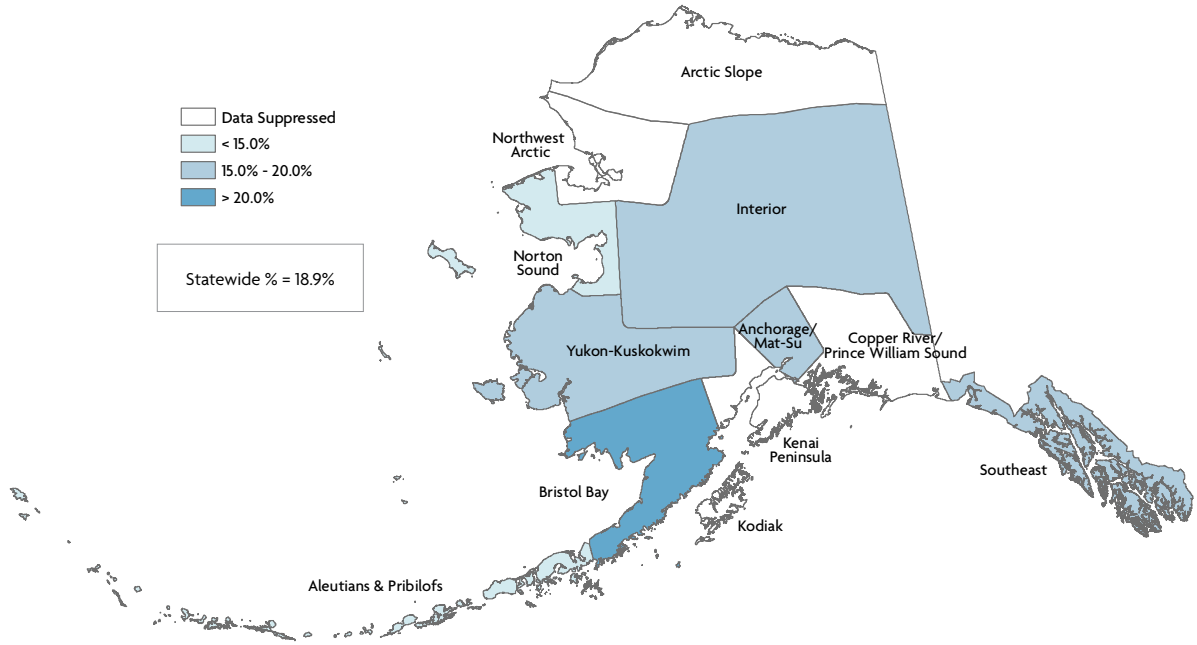
Increase the proportion of adults who do enough aerobic physical activity for substantial health benefits to 59.2%. - *HEALTHY PEOPLE 2030, OBJECTIVE PA-02*

Summary

- During 2017, about one in five (18.0%) Alaska Native adults reported meeting the recommendations for physical activity.
- During 2017, there was no statistically significant difference between the percent of Alaska Native and non-Native adults who met physical activity recommendations.
- During 2015-2017, the percent of Alaska Native adults meeting physical activity recommendations varied by Tribal health region, ranging from 10.4% to 25.1%.

Physical Activity

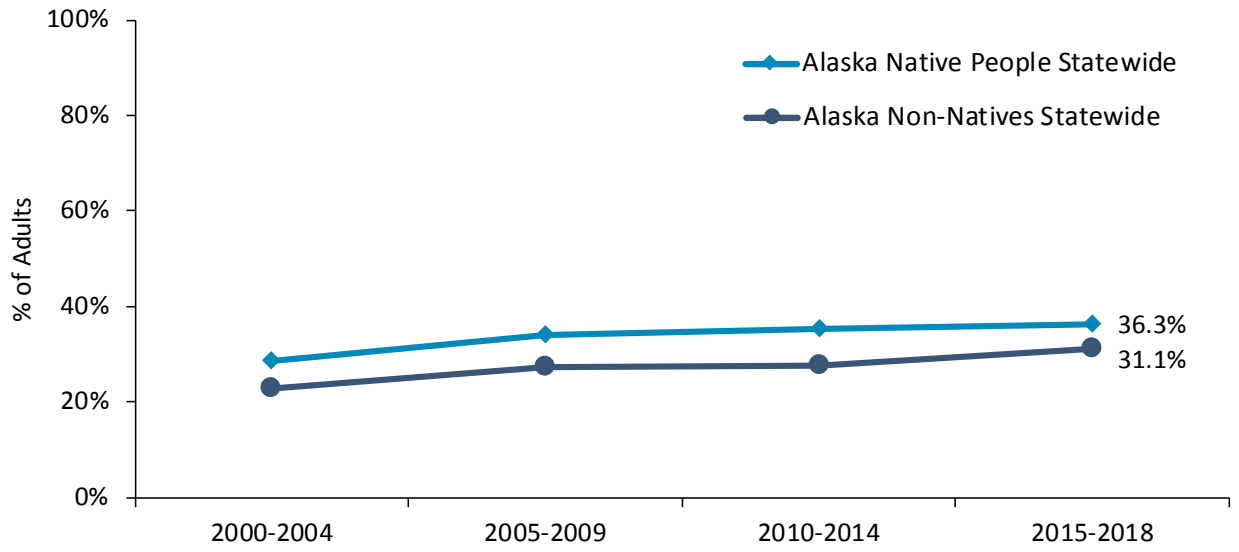
Figure 53b. Percent of Alaska Native Adults That Met Physical Activity Recommendations by Tribal Health Region, 2-Year Aggregate, 2015 and 2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-105

Obesity

Figure 54a. Adult Obesity, 2000-2004 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-106

Definition

Adult obesity is measured for persons aged 18 years and older having a body mass index of 30 kg/m2 or more. Obesity is an important risk factor for chronic diseases and other health problems such as heart disease, cancers, high blood pressure, type 2 diabetes, stroke, and respiratory problems.[29]

Related Objectives

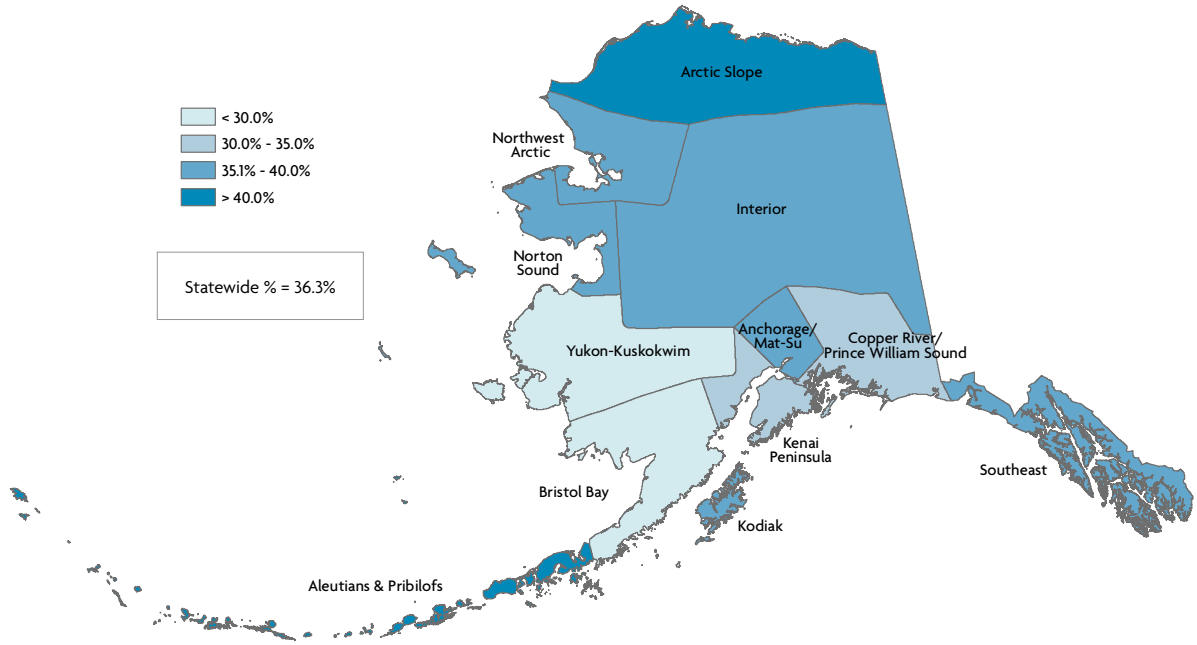
Reduce the proportion of adults with obesity to 36.0%. - *HEALTHY PEOPLE 2030, OBJECTIVE NWS-03*

Summary

- During 2015–2018, over one in three (36.3%) Alaska Native adults reported being obese according to their BMI. This was significantly higher than Alaska non-Native adults (31.1%).
- The proportion of obese adults has significantly increased among both Alaska Native and Alaska non-Native adults since 2000-2004.
- During 2015–2018, the percent of Alaska Native adults who were obese varied by Tribal health region, ranging from 28.5% to 55.3%.

Obesity

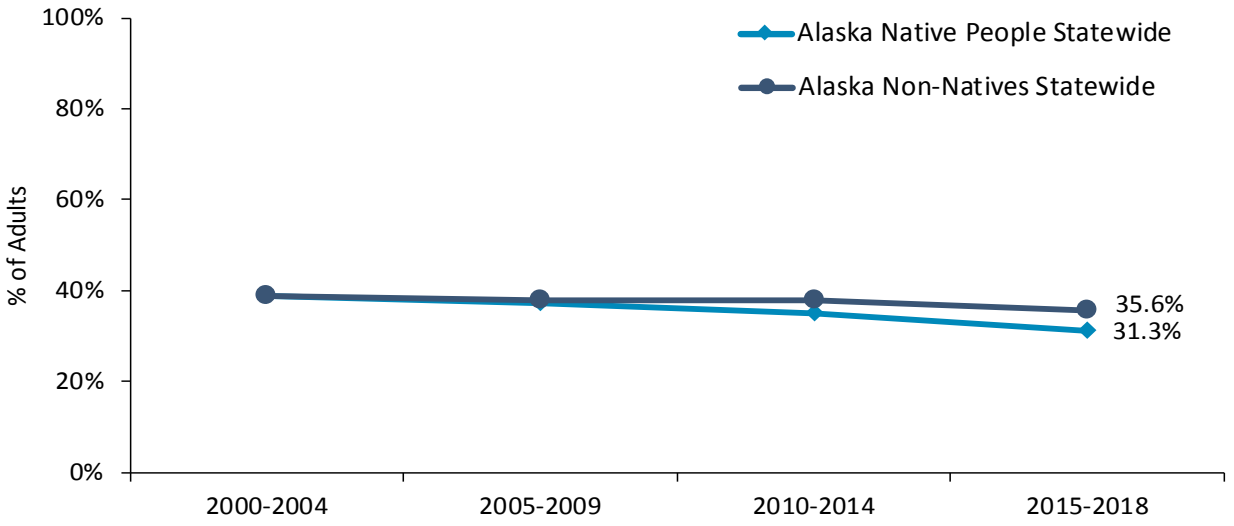
Figure 54b. Percent of Alaska Native Adults That Were Obese by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-107

Overweight

Figure 55a. Adult Overweight, 2000-2004 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-108

Definition

Adult overweight is measured for persons aged 18 years and older having a body mass index of 25.0 to 29.9 kg/m2. Overweight status is an important risk factor for chronic diseases and other health problems such as heart disease, cancers, high blood pressure, type 2 diabetes, stroke, and respiratory problems.[29]

Summary

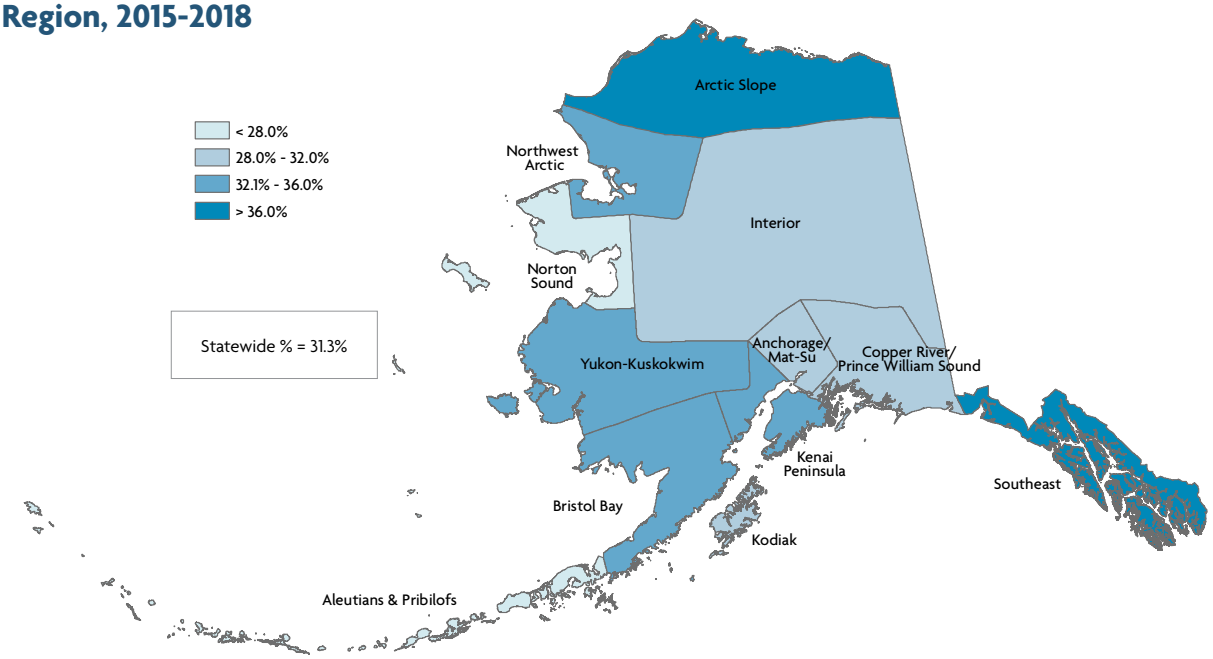
» During 2015–2018, nearly one in three (31.3%) Alaska Native adults reported being overweight according to their BMI. This was significantly lower than Alaska non-Native adults (35.6%).

» The percent of overweight Alaska Native and Alaska non-Native adults has significantly decreased between 2000-2004 and 2015-2018.

» During 2015–2018, the percent of Alaska Native adults that were overweight varied by Tribal health region, ranging from 16.4% to 37.2%.

Overweight

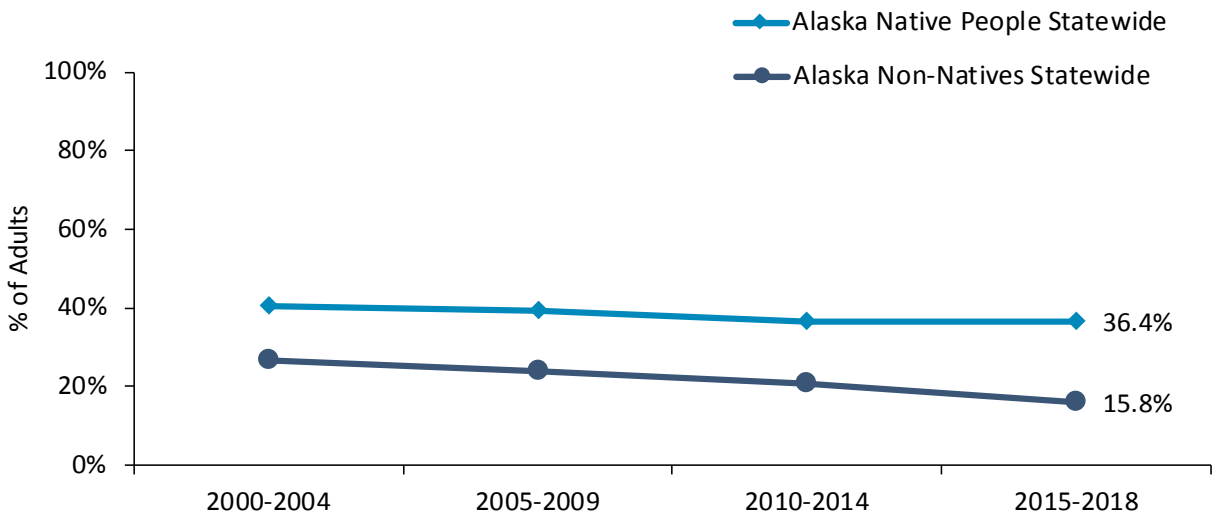
Figure 55b. Percent of Alaska Native Adults That Were Overweight by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-109

Current Smoking

Figure 56a. Adult Current Smoking, 2000-2004 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-110

Definition

Adult current smoking is measured for persons aged 18 years and older who have smoked at least 100 cigarettes during their lifetime and currently smoke some days or every day. Cigarette smoking is the leading cause of preventable disease and death in Alaska and in the United States as a whole. Smoking is associated with cancer, chronic obstructive pulmonary disease, coronary heart disease, stroke, premature birth, low birth weight, still birth, infant death, and other negative health effects.[30, 31]

Related Objectives

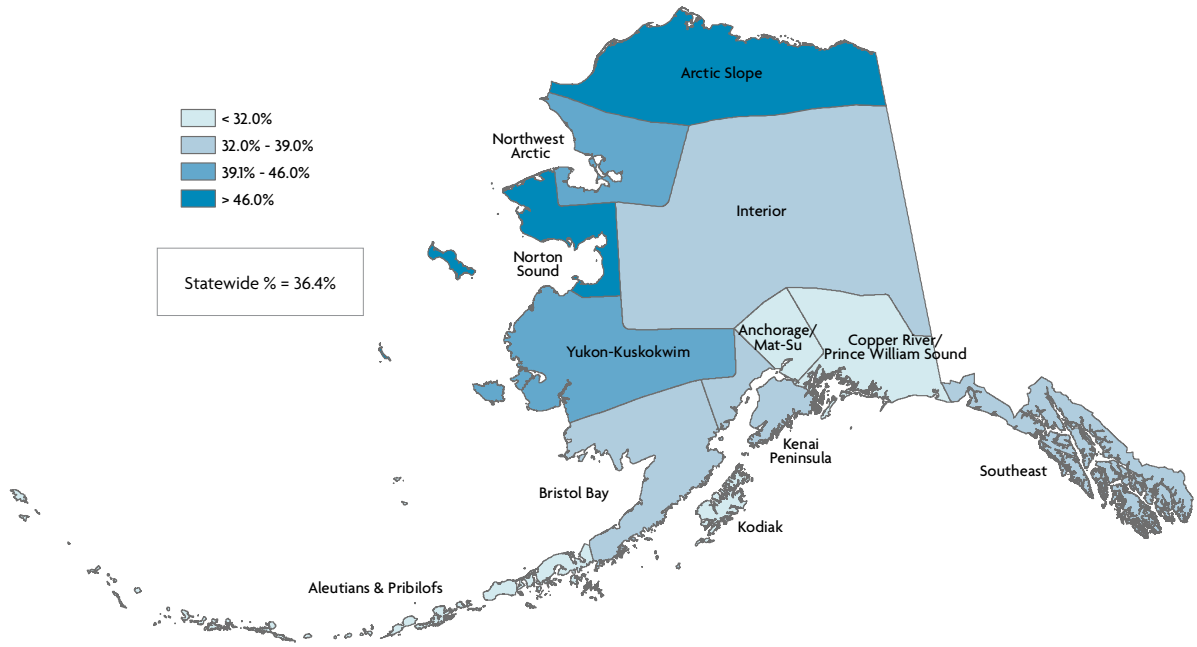
Reduce the percentage of adults (aged 18 and older) who currently smoke cigarettes or use electronic vapor products, smokeless tobacco, or other tobacco products to 25.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #27.* Reduce current cigarette smoking in adults to 5.0%. - *HEALTHY PEOPLE 2030, OBJECTIVE TU-02*

Summary

- During 2015–2018, more than one in three (36.4%) Alaska Native adults reported current smoking. This was significantly higher than Alaska non-Native adults (15.8%).
- Alaska Native adult current smoking rates have remained relatively stable between 2000–2004 and 2015–2018, whereas Alaska non-Native adult current smoking rates decreased significantly.
- During 2015–2018, the percent of Alaska Native adults that were current smokers varied by Tribal health region, ranging from 30.0% to 53.5%.

Current Smoking

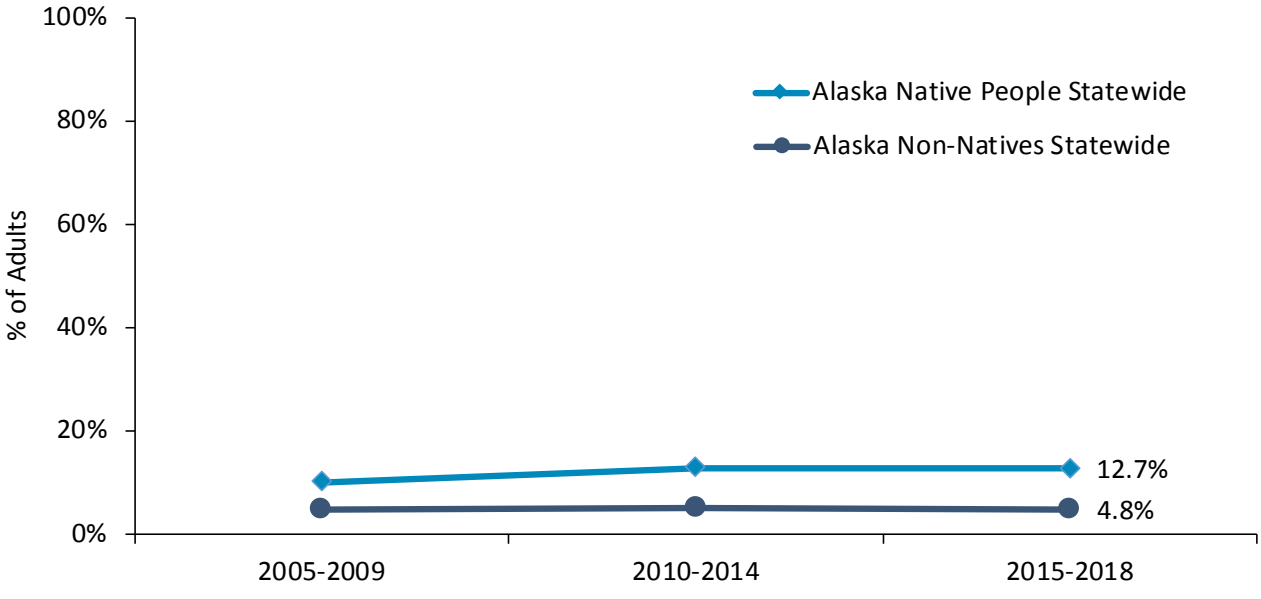
Figure 56b. Percent of Alaska Native Adults That Were Current Smokers by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-111

Current Smokeless Tobacco Use

Figure 57a. Adult Current Smokeless Tobacco Use, 2005-2009 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-112

Definition

Adult smokeless tobacco use is measured for persons aged 18 years and older who currently use smokeless tobacco products including chewing tobacco, snuff, Iq'mik, or Blackbull. Smokeless tobacco causes oral cancer, esophageal cancer, and pancreatic cancer, and is also associated with heart disease, gum disease, and oral lesions.[32]

Related Objectives

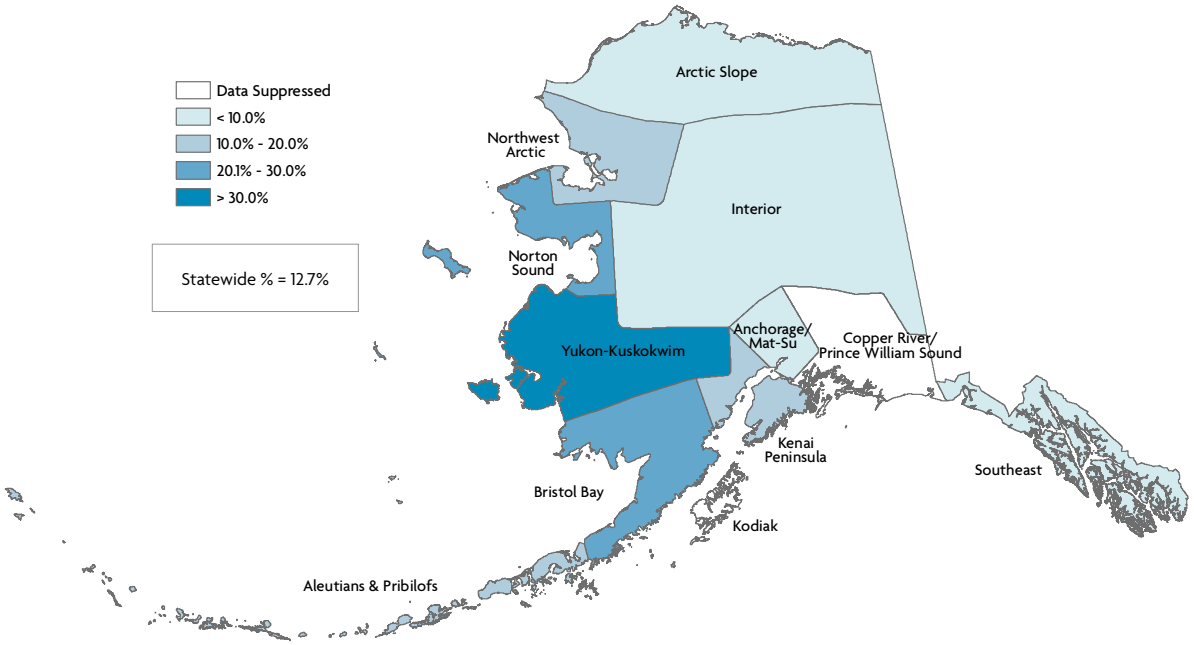
Reduce the percentage of adults (aged 18 and older) who currently smoke cigarettes or use electronic vapor products, smokeless tobacco, or other tobacco products to 25.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #27*

Summary

- During 2015–2018, about one in eight (12.7%) Alaska Native adults reported current use of smokeless tobacco. This was significantly higher than Alaska non-Native adults (4.8%).
- Current smokeless tobacco use among Alaska Native adults has remained relatively stable between 2005-2009 and 2015-2018.
- During 2015–2018, adult current smokeless tobacco use varied widely by Tribal health region, ranging from 1.5% to 40.0%.

Current Smokeless Tobacco Use

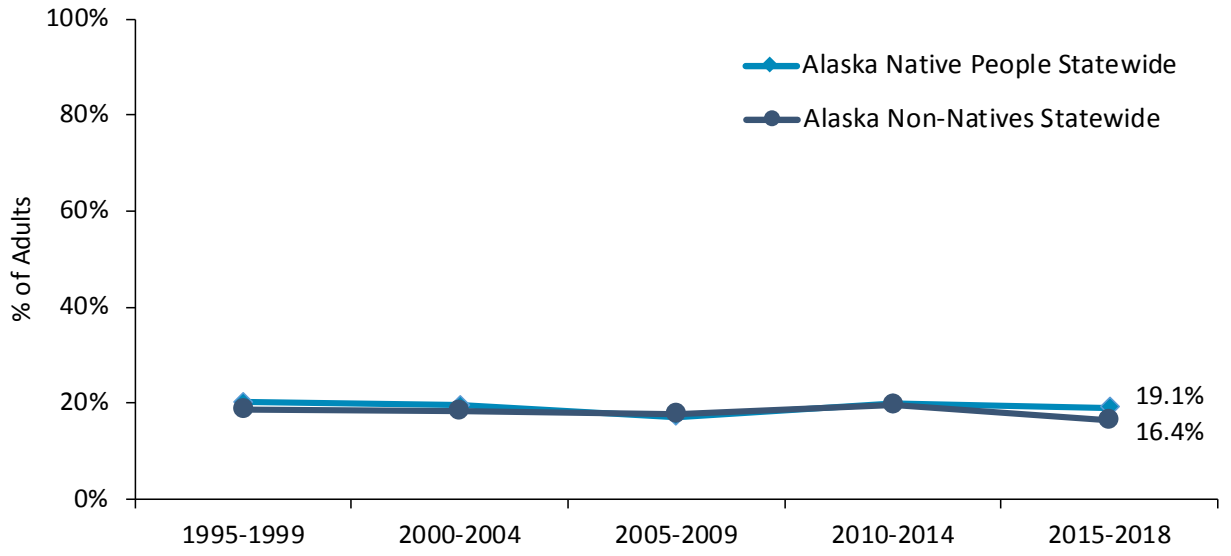
Figure 57b. Percent of Alaska Native Adults That Were Current Smokeless Tobacco Users by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-113

Current Binge Drinking

Figure 58a. Adult Current Binge Drinking, 1995-1999 to 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-114

Definition

Adult binge drinking is measured as adults aged 18 years and older who have had 5 or more drinks (for men) or 4 or more drinks (for women) on one or more occasion in the past 30 days. Negative consequences associated with binge drinking include unintentional and intentional injuries, alcohol poisoning, sexually transmitted diseases, unintended pregnancy, liver disease, neurologic damage, and high blood pressure and other cardiovascular diseases.[33]

Related Objectives

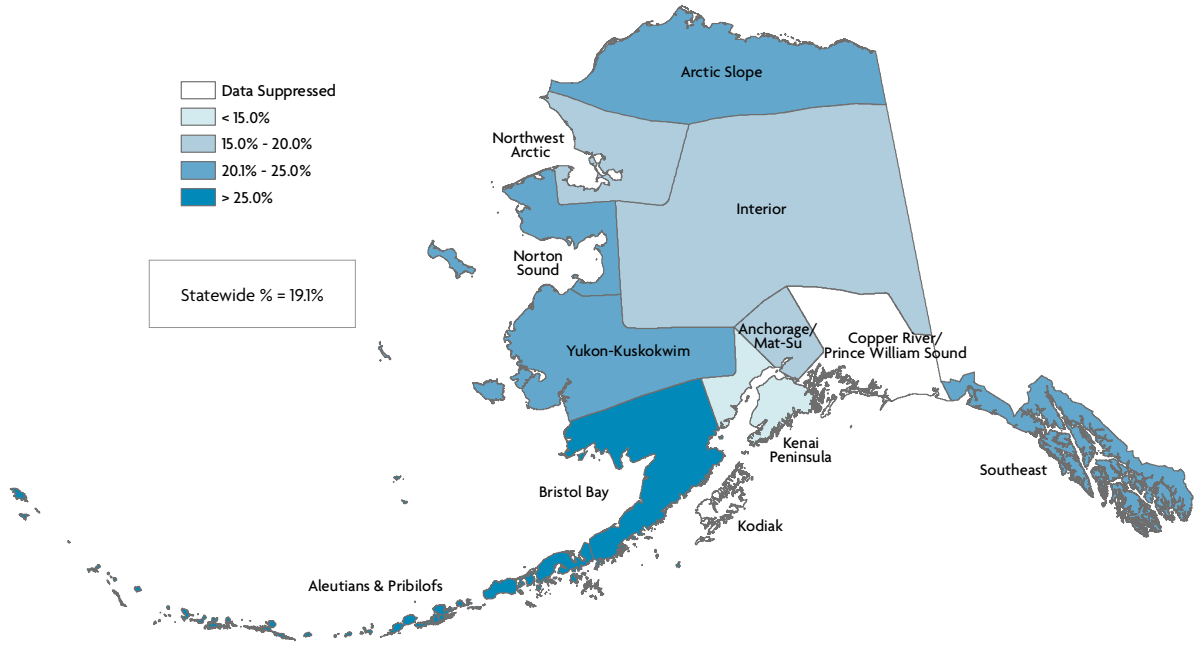
Reduce the proportion of people aged 21 years and over who engaged in binge drinking in the past month to 25.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE SU-10*

Summary

- During 2015–2018, approximately one in five (19.1%) Alaska Native adults reported binge drinking.
- During 2015-2018, there was no statistically significant difference in binge drinking between Alaska Native and non-Native adults.
- Binge drinking among Alaska Native adults appears to have remained relatively stable between 1995-1999 and 2015-2018.
- During 2015–2018, the percent of Alaska Native adults binge drinking varied by Tribal health region, ranging from 12.8% to 32.1%

Current Binge Drinking

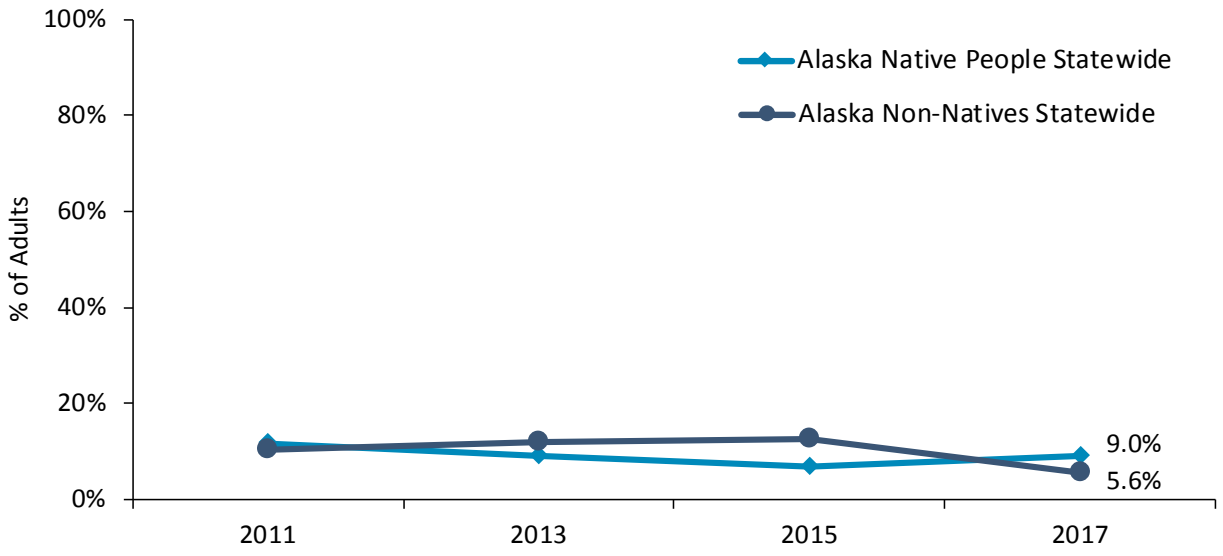
Figure 58b. Percent of Alaska Native Adults That Currently Binge Drank by Tribal Health Region, 2015-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-115

Diet - Fruit & Vegetable Consumption

Figure 59a. Adults Meeting Fruit and Vegetable Consumption Recommendations, 2011-2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-116

Definition

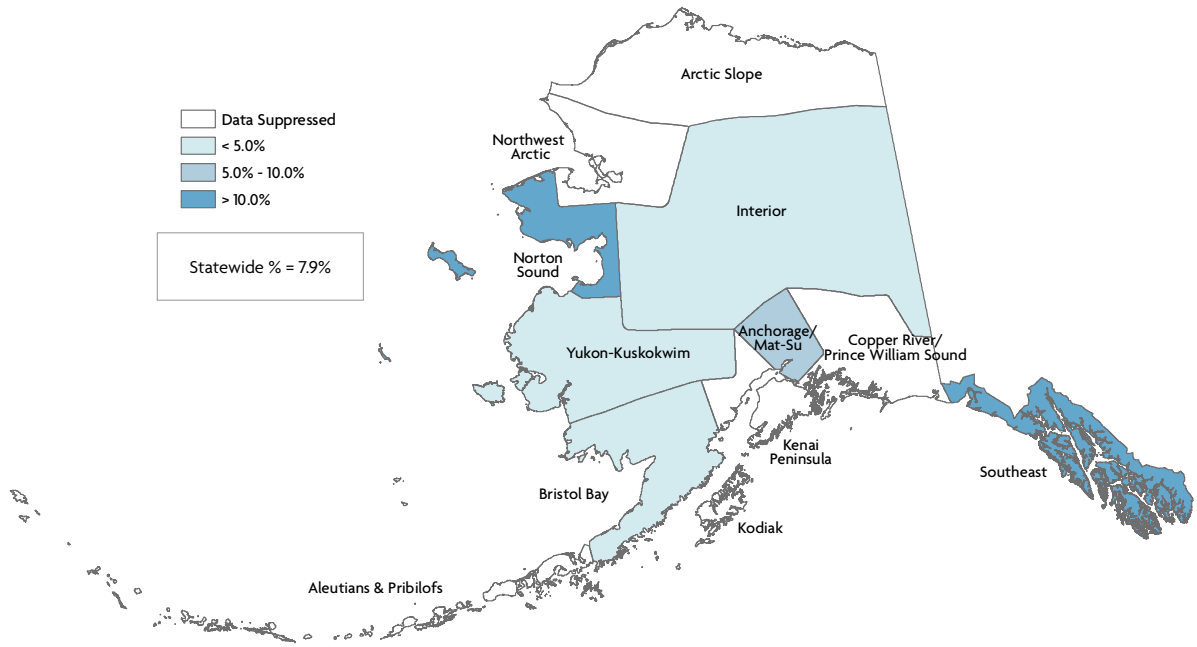
One method of assessing the adult diet is to measure consumption of fruits and vegetables. The amount of fruits and vegetables recommended daily varies based on age, sex, and level of physical activity. One of the key recommendations from the Dietary Guidelines for Americans, 2020–2025 is to consume a diet that includes a variety of vegetables and fruits.[34] The data show the percentage of adults who report having eaten at least 3 servings of vegetables and at least 2 servings of fruit per day during the past month. Vegetables include green salad, potatoes (excluding french fries, fried potatoes, or potato chips), carrots, or other vegetables. Fruits include 100% fruit juice and fruit.

Summary

- During 2017, about one in eleven (9.0%) Alaska Native adults reported eating at least 3 servings of vegetables and 2 servings of fruit per day.
- During 2017, there was no statistically significant difference in fruit and vegetable consumption between Alaska Native and Alaska non-Native adults.
- Fruit and vegetable consumption has remained relatively stable among Alaska Native adults between 2011 and 2017.
- During 2015-2017, the percent of Alaska Native adults meeting fruit and vegetable recommendations varied by Tribal health region, ranging from 2.6% to 12.4%.

Diet - Fruit & Vegetable Consumption

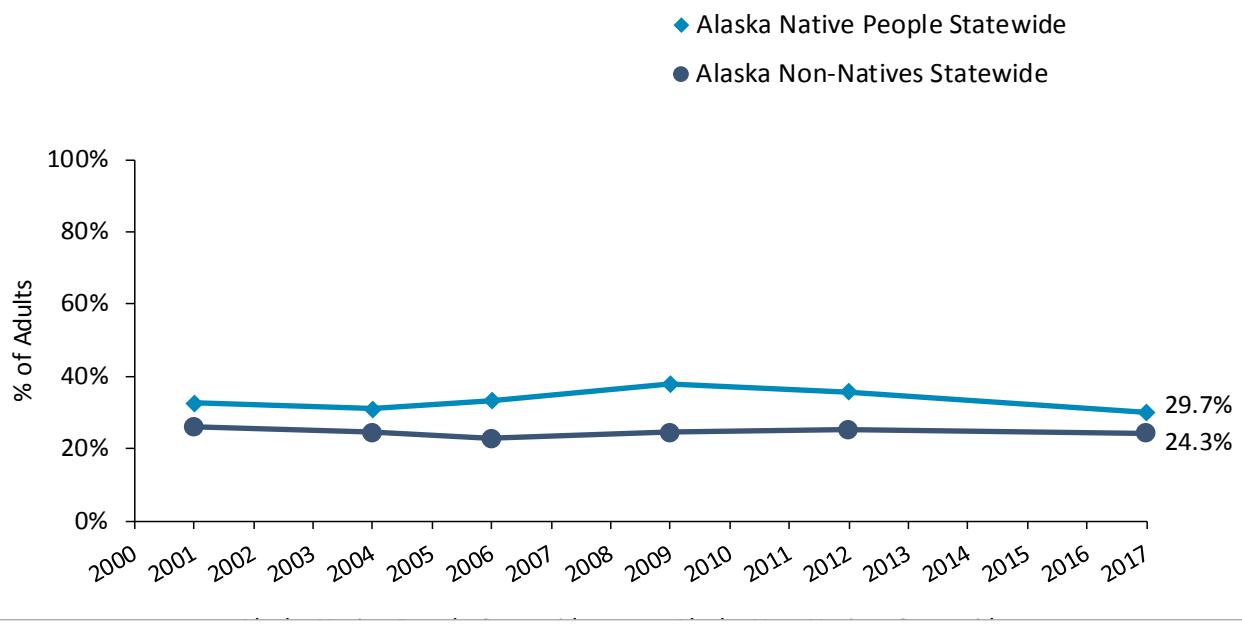
Figure 59b. Percent of Alaska Native Adults That Met Fruit and Vegetable Consumption Recommendations by Tribal Health Region, 2-Year Aggregate, 2015 and 2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-117

Intimate Partner Violence

Figure 60a. Lifetime Intimate Partner Violence for Select Years, 2001-2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-118

Definition

Intimate partner violence can include physical, sexual, or psychological/emotional harm by a current or former partner or spouse. Physical injuries can range from cuts, bruises and welts, to broken bones, internal bleeding and head trauma. Emotional harm can include trauma symptoms, and can lead to poor mental health or harmful coping behaviors such as use of alcohol or drugs.[35]

Lifetime intimate partner violence is measured for persons aged 18 years and older who report that they have had a spouse or partner ever hit, slap, punch, shove, kick, choke, hurt, or threaten them.

Note that data are only available for select years and in unequal intervals for this metric: 2001, 2004, 2006, 2009, 2012, and 2017.

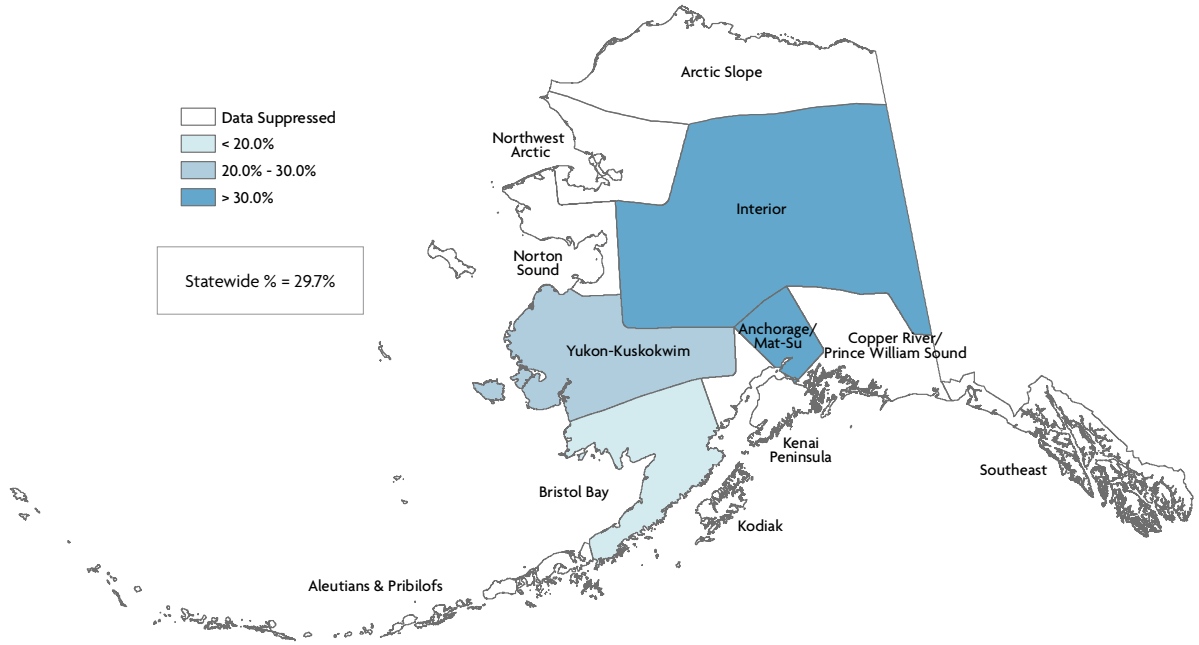
Summary

- During 2017, approximately one in three (29.7%) Alaska Native adults reported having ever experienced intimate partner violence in their lifetime.
- During 2017, there was no statistically significant difference in intimate partner violence between Alaska Native and Alaska non-Native adults.
- During 2017, the percent of Alaska Native adults who experienced intimate partner violence in their lifetime varied by Tribal health region, ranging from 16.0% to 37.9%.

Note: Data only available for certain years. Caution is advised when attempting to compare data between years.

Intimate Partner Violence

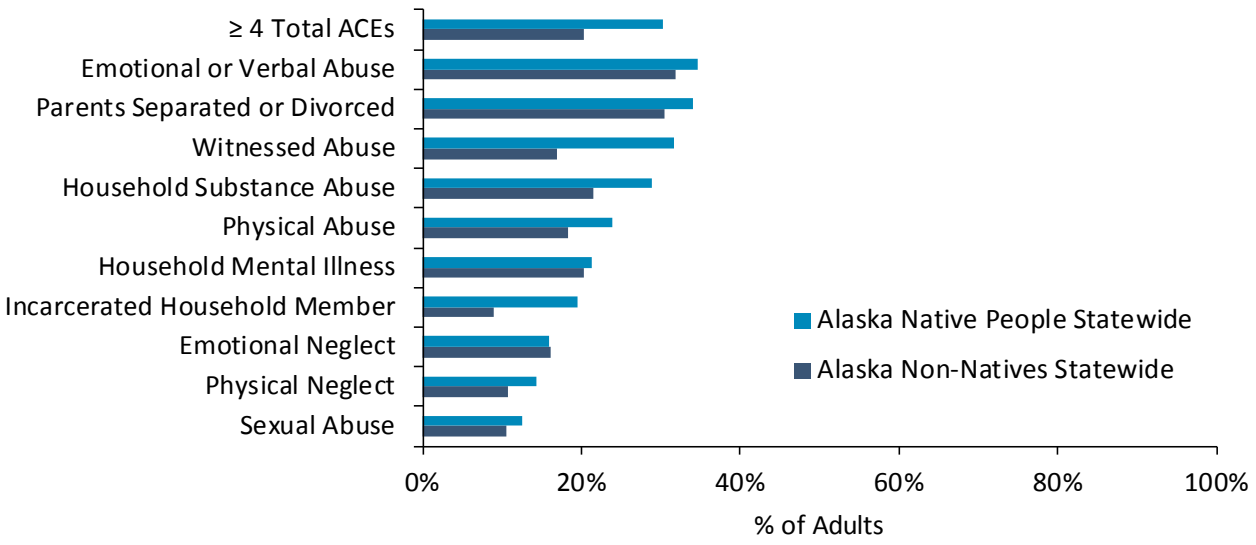
Figure 60b. Percent of Alaska Native Adults Who Experienced Intimate Partner Violence in Their Lifetime by Tribal Health Region, 2017



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-119

Adverse Childhood Experiences

Figure 61. Adverse Childhood Experiences, 2013-2015



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-120

Definition

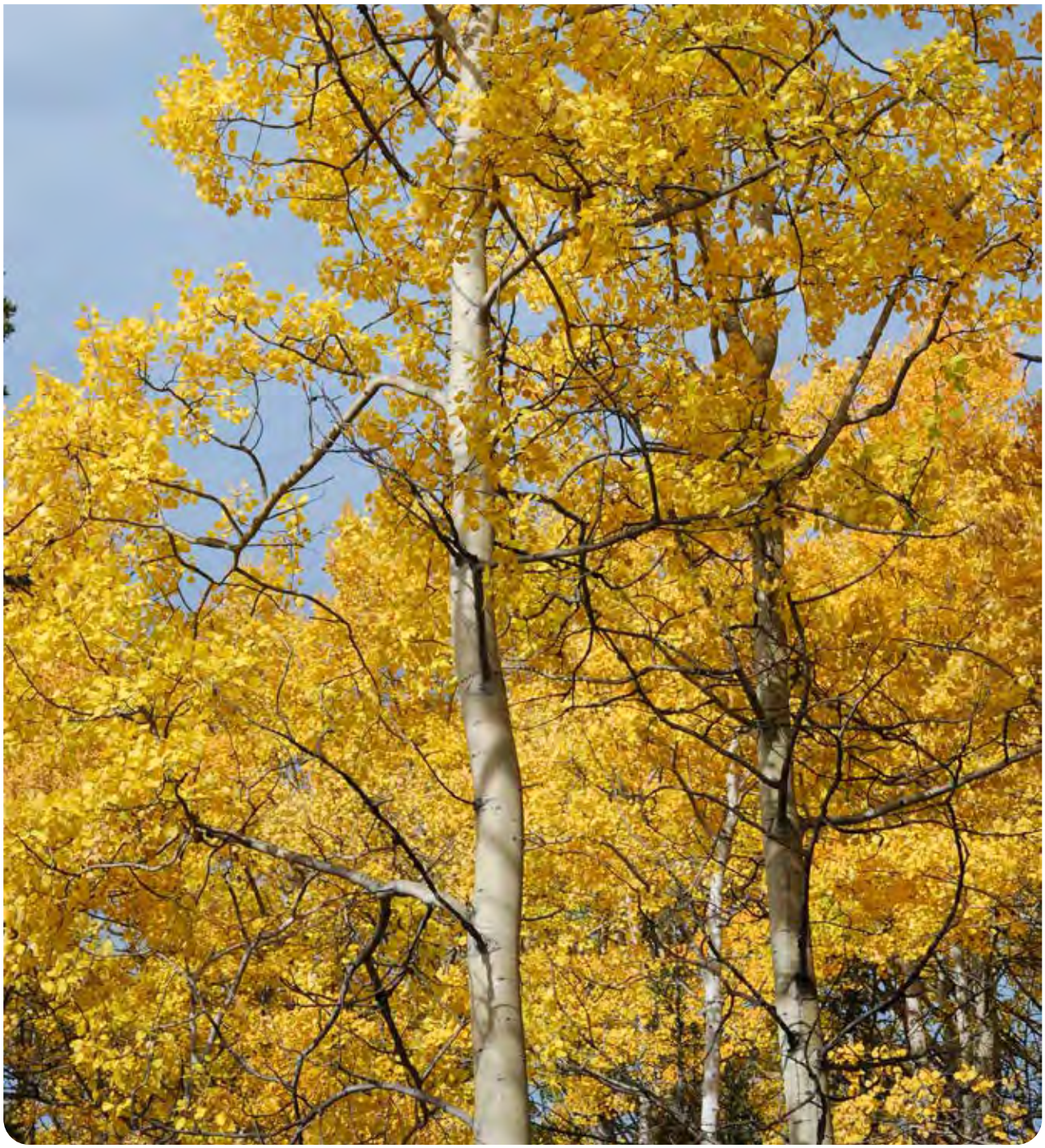
An adverse childhood experience (ACE) is a stressful or traumatic experience, including abuse, neglect and a range of household dysfunctions such as witnessing domestic violence, or growing up with substance abuse, mental illness, parental discord, or crime in the home. ACEs have been linked to risky health behaviors, chronic health conditions, and early death.[36]

Summary

- During 2013–2015, 30.2% of Alaska Native adults reported experiencing 4 or more ACEs. This was significantly higher than Alaska non-Native adults (20.3%).
- During 2013–2015, 31.7% of Alaska Native adults reported witnessing abuse in the household as a child. This was significantly higher than among Alaska non-Native adults (16.9%).
- During 2013–2015, sexual abuse was the least commonly reported ACE among Alaska Native adults (12.5%) and did not differ significantly from Alaska non-Native adults (10.6%).

Note: This report shows the most recent available ACEs data (2013-2015).

Preventative Care



Preventative Care Highlights

Over three-quarters (83.4%) of Alaska Native women aged 50–74 years were screened for breast cancer in 2018.

Over half (59.8%) of Alaska Native adults received dental care in 2014–2018.

84.3% of Alaska Native women aged 21–65 years were screened for cervical cancer in 2018.

Approximately two-thirds (69.6%) of Alaska Native adults aged 50 years and older have ever been screened for colorectal cancer.

Close to three-quarters (72.6%) of Alaska Native children aged 19–35 months have completed the recommended childhood vaccination series, and roughly half (46.8%) have received at least 2 doses of the influenza vaccine.

Preventative Care Highlights

Almost half of Alaska Native adults (47.3%), aged 60 years and older, have received the shingles vaccine.

About seven out of ten Alaska Native adults (68.3%) have been vaccinated against pneumococcal disease.

Approximately 16.2% of Alaska Native youth aged 5–17 years are immunized annually against seasonal influenza.

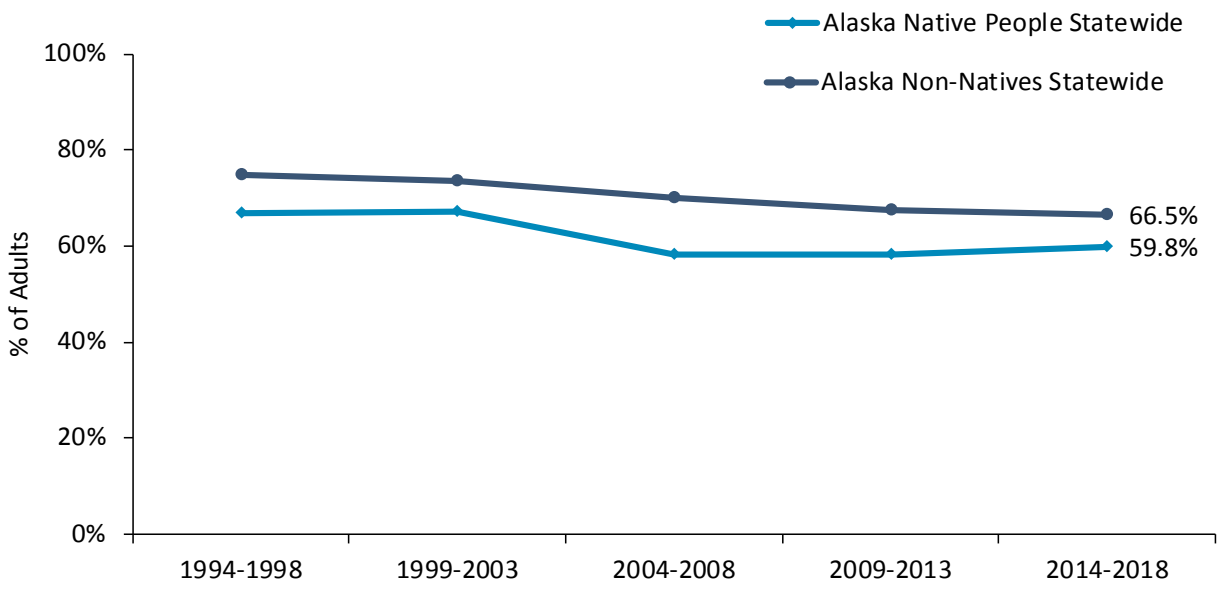
Almost nine out of ten (88.2%) Alaska Native adolescents have received the Tdap.

More than half of Alaska Native female (65.9%) and male (62.4%) adolescents have been fully immunized against human papillomavirus (HPV).

One quarter (25.1%) of Alaska Native adults received a seasonal influenza vaccine during the 2017-2018 season.

Dental Care

Figure 62a. Adult Dental Care, 1994-1998 to 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-121

Definition

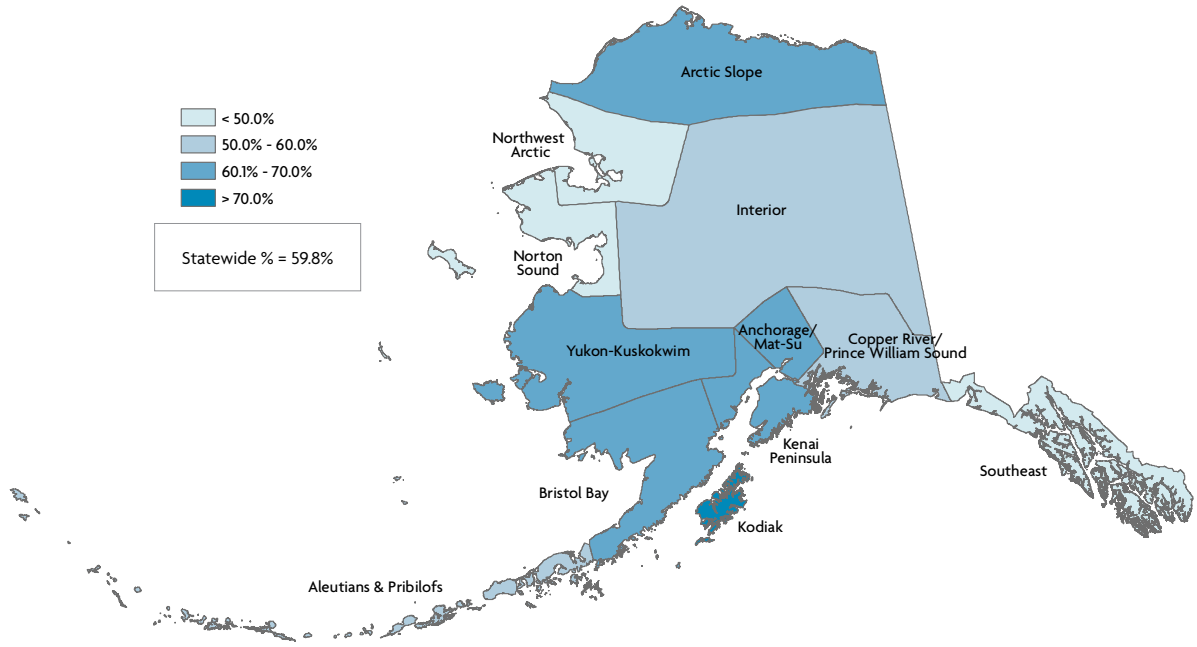
Dental care is critical for an individual's overall health and well-being. Preventive services and dental treatments can reduce the prevalence of oral diseases. Dental care is measured for persons aged 18 years and older who visited a dentist or dental clinic for any reason in the past year.

Summary

- During 2014–2018, about six out of ten (59.8%) Alaska Native adults reported visiting a dentist or dental clinic in the past year. This was significantly lower than Alaska non-Native adults (66.5%).
- The percent of Alaska Native adults who visited a dentist or dental clinic has remained relatively stable between 1994-1999 and 2014-2018.
- During 2014–2018, the percent of Alaska Native adults who visited a dentist or dental clinic varied widely by Tribal health region, ranging from 40.3% to 90.4%.

Dental Care

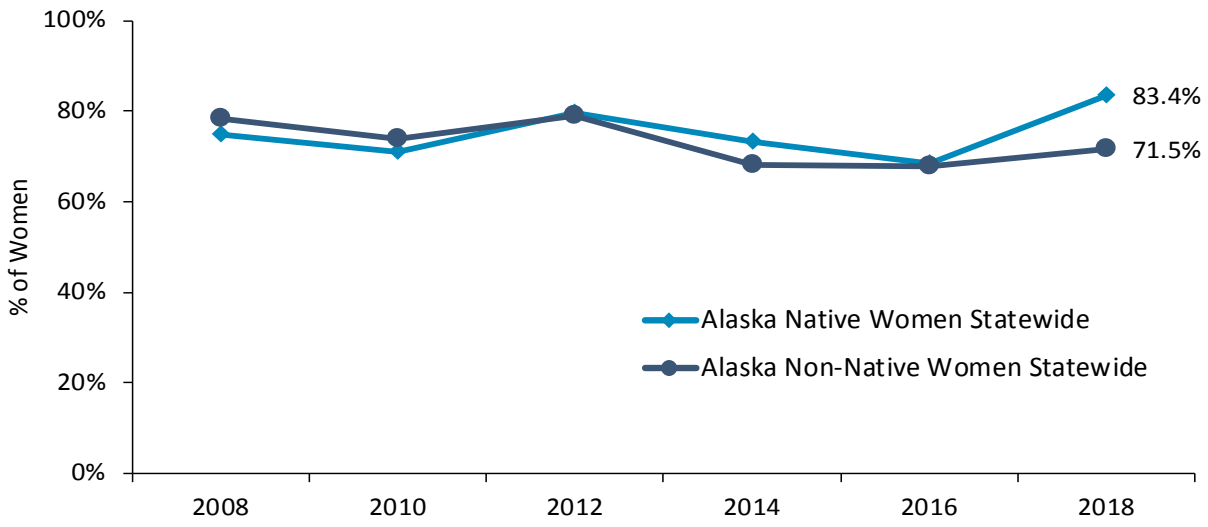
Figure 62b. Percent of Alaska Native Adults Who Visited a Dentist or Dental Clinic by Tribal Health Region, 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-122

Breast Cancer Screening

Figure 63a. Breast Cancer Screening Among Women Aged 50-74 Years, 2008-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-123

Definition

Breast cancer screening is a measure of females aged 50–74 years who reported a mammogram within the last two years. The U.S. Preventive Services Task Force currently recommends mammograms to test for early signs of breast cancer every two years for females aged 50–74 years.[37] Note that as of 2021 they are reviewing their current breast cancer screening recommendations and may release new guidelines in the future.

A mammogram is an x-ray of the breast. Among women at average risk, mammograms are the recommended way to find breast cancer early when it is easier to treat.[37]

Related Objectives

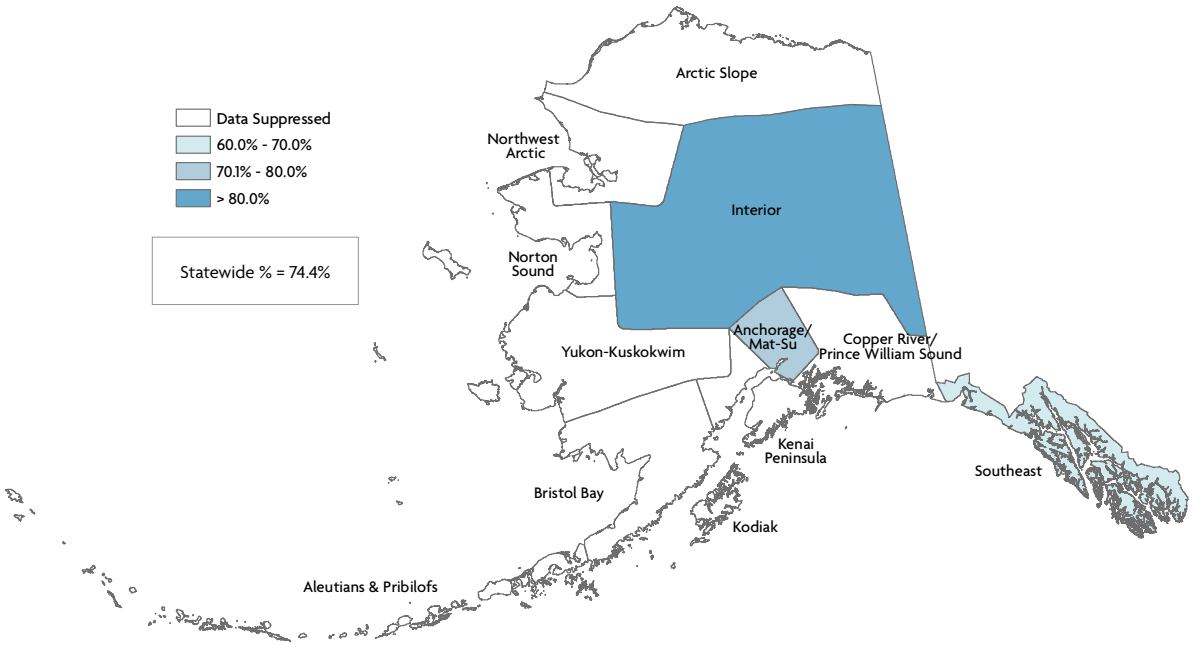
Increase the proportion of females who get screened for breast cancer to 77.1%. - *HEALTHY PEOPLE 2030, OBJECTIVE C-05*

Summary

- During 2018, about eight in ten (83.4%) Alaska Native women aged 50–74 years reported having had a mammogram within the last two years.
- During 2018, there was no statistically significant difference in breast cancer screening rates between Alaska Native and Alaska non-Native women.
- Estimated breast cancer screening rates among Alaska Native women aged 50-74 years have remained relatively stable between 2008 and 2018.
- During 2014–2018, the percent of Alaska Native women aged 50–74 years who received breast cancer screening varied by Tribal health region, ranging from 63.8% to 83.9%.

Breast Cancer Screening

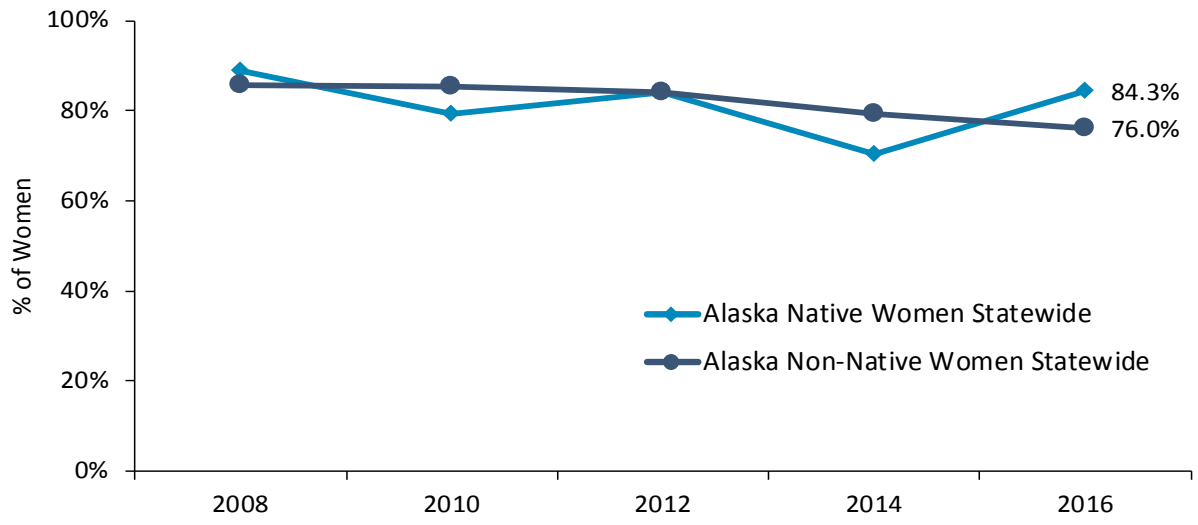
Figure 63b. Percent of Alaska Native Women Aged 50-74 Years Who Underwent Breast Cancer Screening by Tribal Health Region, 3-Year Aggregate, 2014, 2016, and 2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-124

Cervical Cancer Screening

Figure 64a. Cervical Cancer Screening Among Women Aged 21-65 Years, 2008-2016



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-125

Definition

Cervical cancer screening includes females aged 21-65 years who reported at least one Pap smear within the last three years. The U.S. Preventive Services Task Force currently recommends females aged 21–29 years have a Pap smear every three years.[38] Among women aged 30–65 years, the recommendations are for a Pap smear every three years and high-risk human papillomavirus (hrHPV)testing every five years, or a Pap smear in combination with hrHPV testing every five years.[38] Note that as of 2021 they are reviewing their current cervical cancer screening recommendations and may release new guidelines in the future. Screening can detect early abnormal changes in the tissues of the cervix so that they can be treated before they become cancerous.

Related Objectives

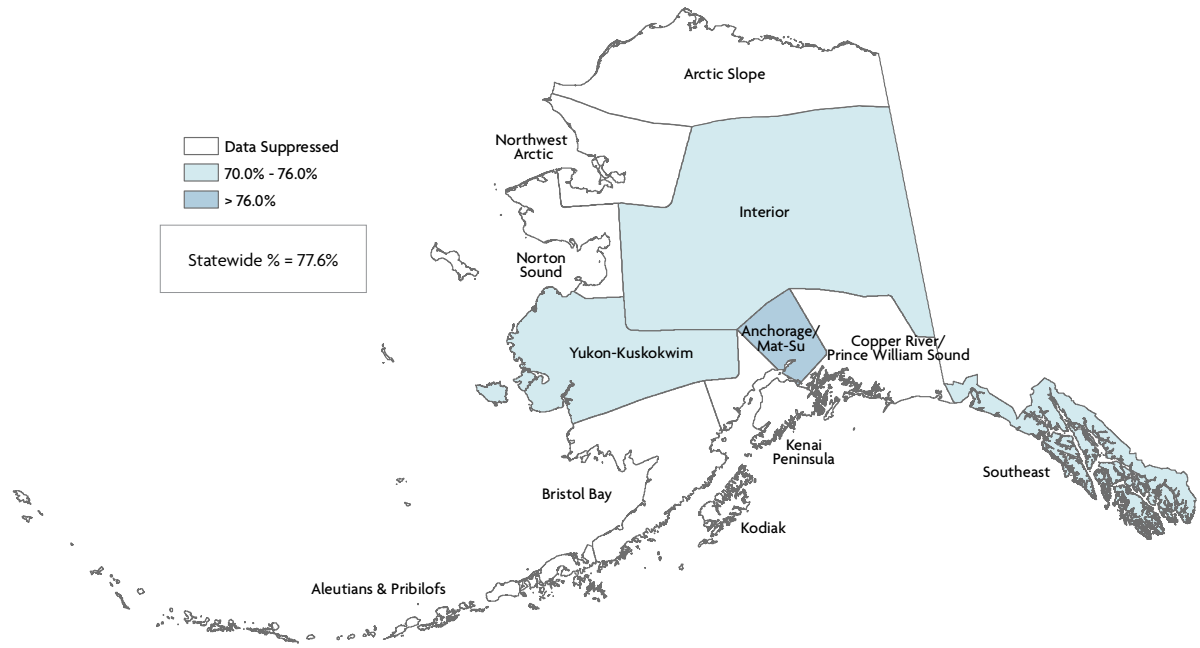
Increase the proportion of females who get screened for cervical cancer to 84.3%. - *HEALTHY PEOPLE 2030, OBJECTIVE C-09*

Summary

- During 2016, about eight in ten (84.3%) Alaska Native women aged 21–65 years reported having had a Pap smear in the past 3 years.
- During 2016, there was no statistically significant difference in cervical cancer screening rates between Alaska Native and non-Native women.
- Cervical cancer screening rates among Alaska Native women significantly decreased between 2008 and 2014; however, 2016 rates are no longer significantly different from 2008 rates.
- During 2012–2016, the percent of Alaska Native women who received cervical cancer screening varied by Tribal health region, ranging from 71.1% to 84.5%.

Cervical Cancer Screening

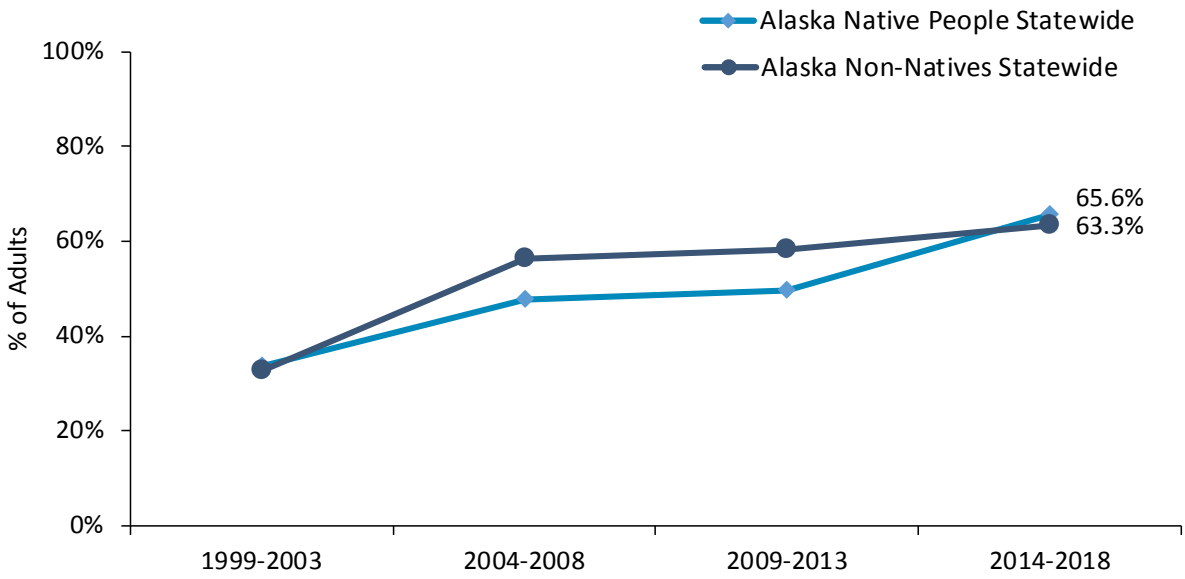
Figure 64b. Percent of Alaska Native Women Aged 21–65 Years Who Underwent Cervical Cancer Screening by Tribal Health Region, 3-Year Aggregate, 2012, 2014 and 2016



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-126

Colorectal Cancer Screening

Figure 65a. Colorectal Cancer Screening Among Adults Aged 50-75 Years, 1999-2003 to 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-127

Definition

Colorectal cancer screening is measured as adults aged 50–75 years who report having a fecal occult blood test within one year, or a sigmoidoscopy within the past five years, or a colonscopy within the past ten years. The U.S. Preventive Services Task Force currently recommends all adults aged 45–75 years undergo regular colorectal cancer screening.[39] The recommended testing schedule depends on which test is performed.

Related Objectives

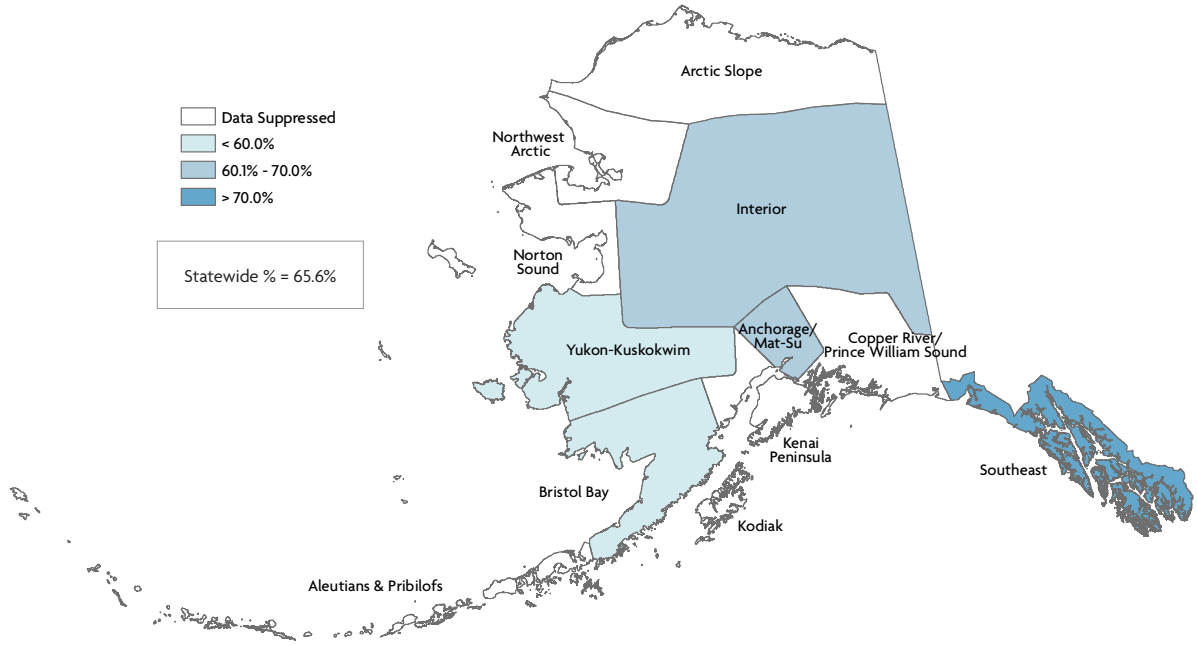
Increase the proportion of adults who get screened for colorectal cancer to 74.4%. - *HEALTHY PEOPLE 2030, OBJECTIVE C-07*

Summary

- During 2014–2018, about two out of three (65.6%) Alaska Native adults aged 50-75 years reported having been screened for colorectal cancer.
- During 2014–2018, there was no statistically significant difference in colorectal cancer screening rates between Alaska Native and non-Native adults.
- Between 1999–2003 and 2014–2018, colorectal cancer screening significantly increased among Alaska Native and non-Native adults. Among Alaska Native adults, the screening rate almost doubled between those time periods.
- During 2014–2018, the percent of Alaska Native adults who received colorectal cancer screening varied by Tribal health region, ranging from 52.2% to 72.3%.

Colorectal Cancer Screening

Figure 65b. Percent of Alaska Native Adults Aged 50-75 Years Who Underwent Colorectal Cancer Screening by Tribal Health Region, 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-128

Childhood Immunizations

Definition

The Advisory Committee on Immunization Practices (ACIP) provides routine vaccine recommendations for children. The recommended childhood immunizations for children by two years of age include four doses of diphtheria, tetanus, and pertussis (DTaP) vaccine; three doses of inactivated poliovirus (IPV) vaccine; one dose of measles, mumps, and rubella (MMR) vaccine; three doses of Haemophilus influenza type b (Hib) vaccine; three doses of the Hepatitis B (HepB) vaccine; one dose of the varicella vaccine; and four doses of the pneumococcal conjugate vaccine (PCV).[40] This series is referred to in shorthand as 4:3:1:3:3:1:4.

In addition to the 4:3:1:3:3:1:4 series, two or three doses (depending on which vaccine is used) of rotavirus (RV) vaccine and two doses of hepatitis A (HepA) vaccine are also recommended by two years of age.[40] One or two doses (depending on child's influenza vaccination history) of annual influenza vaccine is recommended for persons aged 6–months and older.[40]

Related Objectives

Increase the vaccination coverage level of 4 doses of diphtheria-tetanus-acellular pertussis (DTaP) vaccine among children by age 2 years to 90.0%. - *Healthy Alaskans 2030, Objective #10*

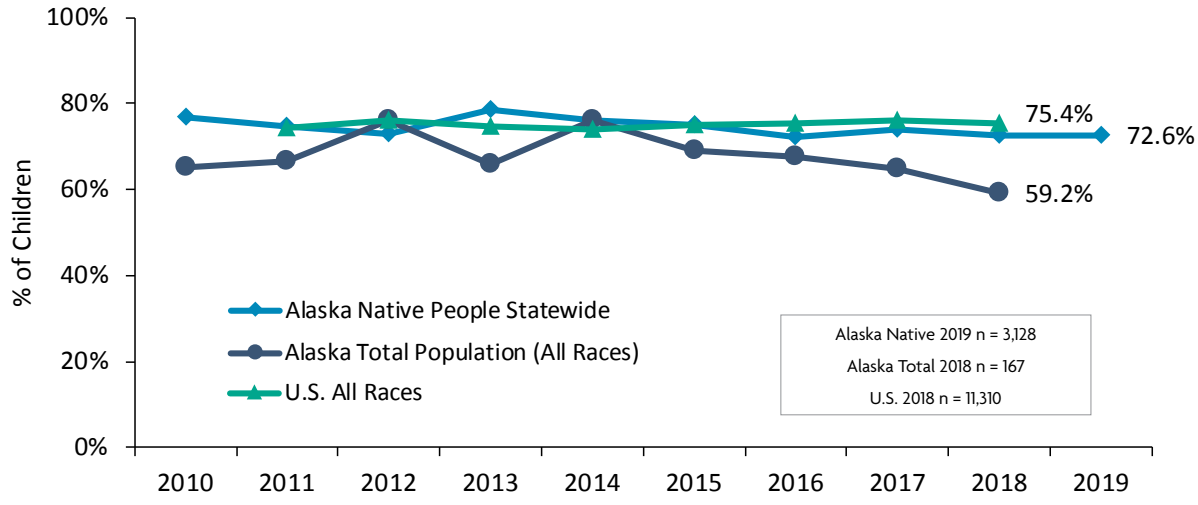
Reduce the proportion of children who get no recommended vaccines by age 2 years to 1.3%. - *HEALTHY PEOPLE 2030, OBJECTIVE IID-02*

Summary

- During 2019, about three out of four (72.6%) Alaska Native children aged 19–35 months had received the recommended childhood vaccination series.
- During 2019, among Alaska Native children aged 19–35 months, individual vaccine coverage for the 4:3:1:3:3:1:4 series ranged from 76.7% for DTaP to 95.5% for HepB.
- Over three out of four (78.1%) Alaska Native children aged 19–35 months completed the rotavirus vaccine series and over one in two (53.8%) completed the HepA series in 2019.
- Close to half (46.8%) of Alaska Native children aged 19–35 months had received two doses of influenza vaccine in 2019.

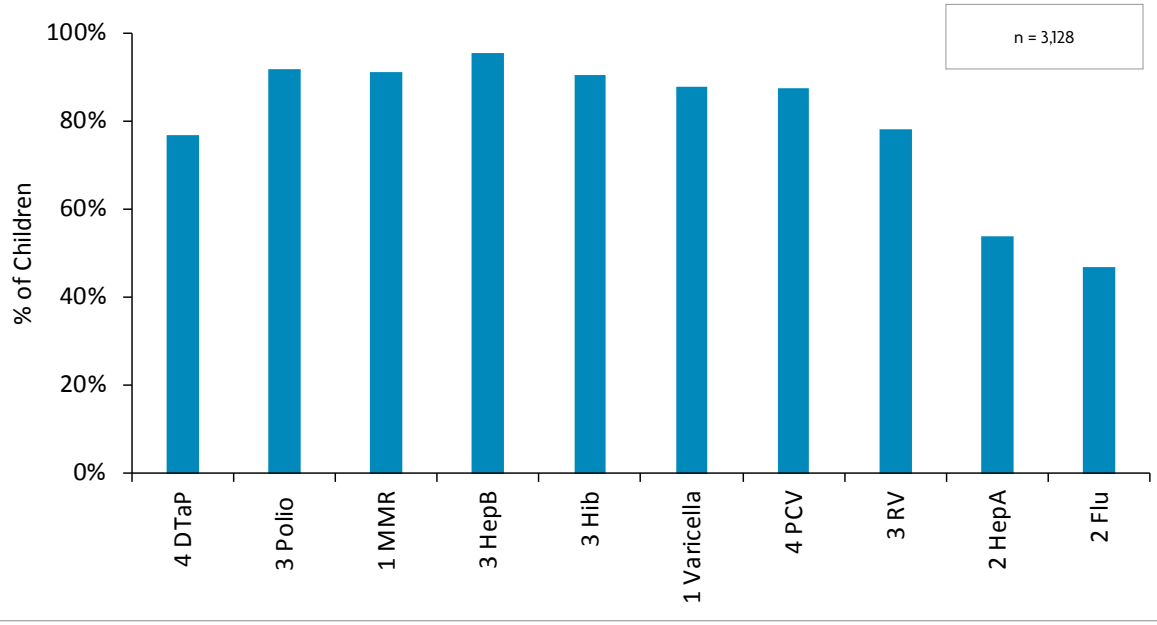
Childhood Immunizations

Figure 66a. 4:3:1:3:3:1:4 Series Completion Among Children Aged 19-35 Months, 2010-2019*



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control & Prevention, National Immunization Survey
Appendix Table C-129

Figure 66b. Immunization Completion by Vaccine Type Among Alaska Native Children Aged 19-35 Months, Alaska, 2019

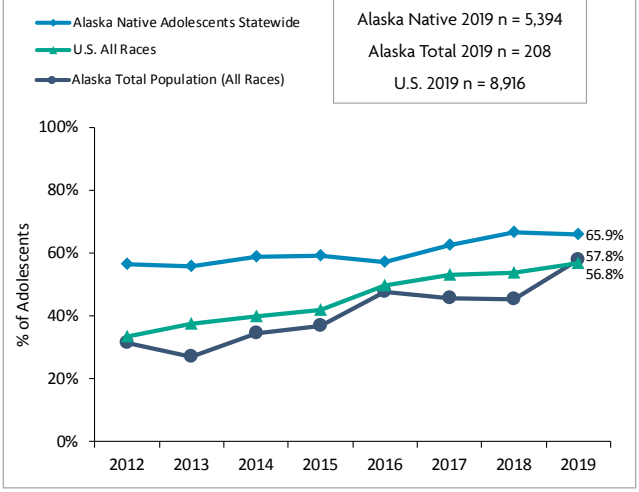


Data Source: Indian Health Service, National Immunization Reporting System

Note: Indian Health Service Immunization Program data is reported for the end of each fiscal year quarter 1 (ending December 31). National Immunization Survey (NIS) data is reported by calendar year (January-December).
* Vaccination coverage estimates for Alaska total population and U.S. total population are presented by birth year (birth cohort) rather than survey year. Because of the survey age eligibility range of 19-35 months, children born in three different calendar years appear in the data for each survey year. To estimate vaccination coverage among children born in a particular year, multiple survey years of data were combined and then stratified by birth year (birth cohort).

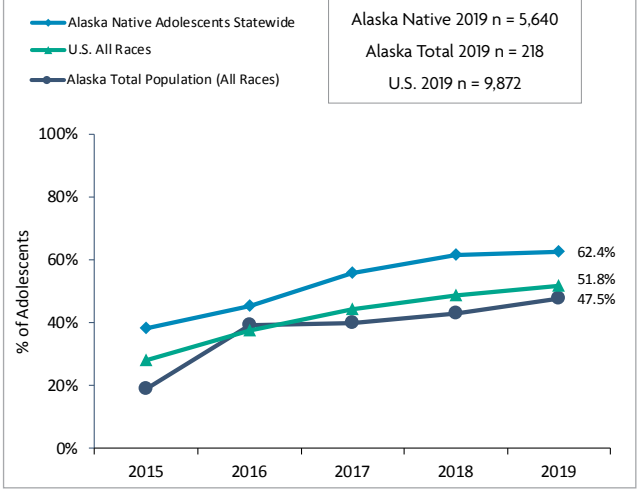
Adolescent Immunizations

Figure 67a.
HPV Vaccination (3 Doses) Among Females Aged 13-17 Years, 2012-2019*



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)
Appendix Table C-130

Figure 67b.
HPV Vaccination (3 Doses) Among Males Aged 13-17 Years, 2015-2019*



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)
Appendix Table C-131

Note: Indian Health Service Immunization Program data is reported for the end of each fiscal year quarter 1 (ending December 31). National Immunization Survey (NIS) data is reported by calendar year (January-December).

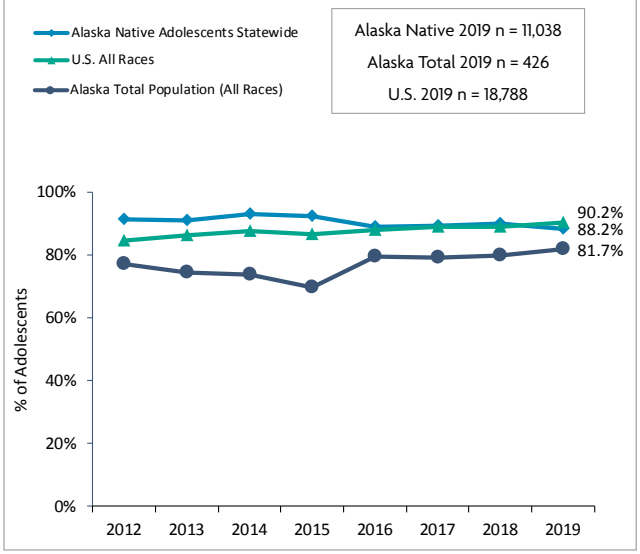
* In December 2016, the Advisory Committee on Immunization Practices updated HPV vaccination recommendations to include a 2-dose schedule for immunocompetent adolescents initiating the vaccine series before their 15th birthday; 3 doses are recommended for persons who initiate the series at age 15–26 years and for immunocompromised persons. A new HPV up-to-date measure was added to the 2016 National Immunization Survey–Teen to account for the revised HPV vaccination schedule. The data for Alaska total population and U.S. all races for 2016 and beyond reports this new measure.

Definition

The Advisory Committee on Immunization Practices (ACIP) provides routine vaccine recommendations for preteens and teens. The recommended adolescent immunizations vary depending on age group, lifestyle, medical and other indications, and immunization history. In general, recommendations include an annual influenza vaccine for all preteens and teens aged 7 years and older; one dose of tetanus, diphtheria, pertussis (Tdap) vaccine for those aged 11–12 years; and one dose of meningococcal conjugate vaccine (MCV4, also known as MenACWY) for those aged 11–12 years with a booster at age 16.[40] Depending on age, two or three doses of human papillomavirus (HPV) vaccine is recommended, routinely starting for those aged 11–12 years.[40] If the series is started before age 15 years, two doses are needed, and if starting at age 15 or older, three doses are needed.[40] Additional vaccines may be recommended for adolescents with medical, lifestyle or other risk factors, or who are catching-up on missed vaccines.

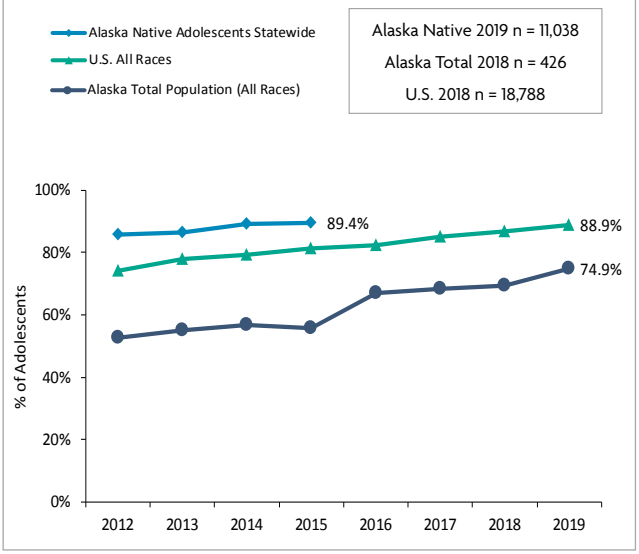
Adolescent Immunizations

Figure 67c.
Tdap (1 Dose) Vaccination Among Persons Aged 13-17 Years, 2012-2019



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)
Appendix Table C-132

Figure 67d.
MCV4 Vaccination Coverage (≥1 Dose) Among Persons Aged 13-17 Years, 2012-2019



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)
Appendix Table C-133

Related Objectives

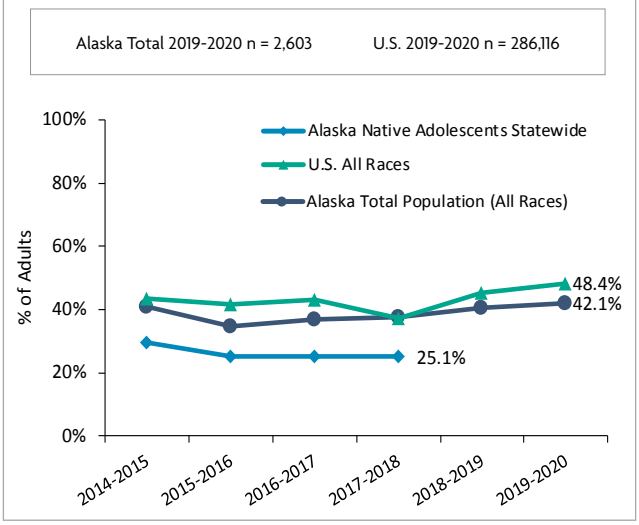
Increase the proportion of adolescents who get recommended doses of the HPV vaccine to 80.0%. - *HEALTHY PEOPLE 2030, OBJECTIVE IID-08*

Summary

- HPV vaccination among Alaska Native female adolescents has increased steadily since its introduction, reaching 65.9% in 2019.
- HPV vaccination among Alaska Native male adolescents has also increased steadily and reached 62.4% in 2019.
- During 2015, the most recent year for which MCV4 vaccination data among Alaska Native adolescents was available at the time of this report, coverage was 89.4%.

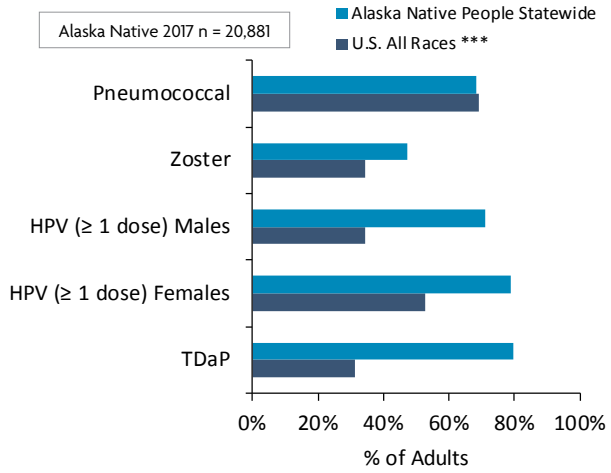
Adult Immunizations

Figure 68a. Seasonal Influenza Vaccination Among Adults Aged 18 Years and Older, 2014-2015 to 2019-2020



Data Source: Indian Health Service, National Immunization Reporting System; CDC National Immunization Survey-Flu (NIS-Flu); CDC Behavioral Risk Factor Surveillance System
Appendix Table C-134

Figure 68b. Immunization Coverage by Vaccine Type Among Alaska Native Adults of Recommended Age*, Alaska, 2017**



Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control & Prevention, National Health Interview Survey
Appendix Table C-135

* TDaP coverage is for adults age 19 years and older. HPV is for females age 19-26 years and males 19-21 years, zoster is for adults age 60 and older, and pneumococcal is for adults age 65 and older.
** These data show adults who received the shingles/zoster vaccine known as Zostavax, but as of November 2020 Zostavax is no longer available or recommended. Current recommendations are for adults aged 50 years and older to receive two doses of the vaccine Shingrix, even if a Zostavax vaccine was received in the past.
*** U.S. All Races data is for 2018. Sample size for U.S. All Races depends on vaccine, see table C-140 for details.

Definition

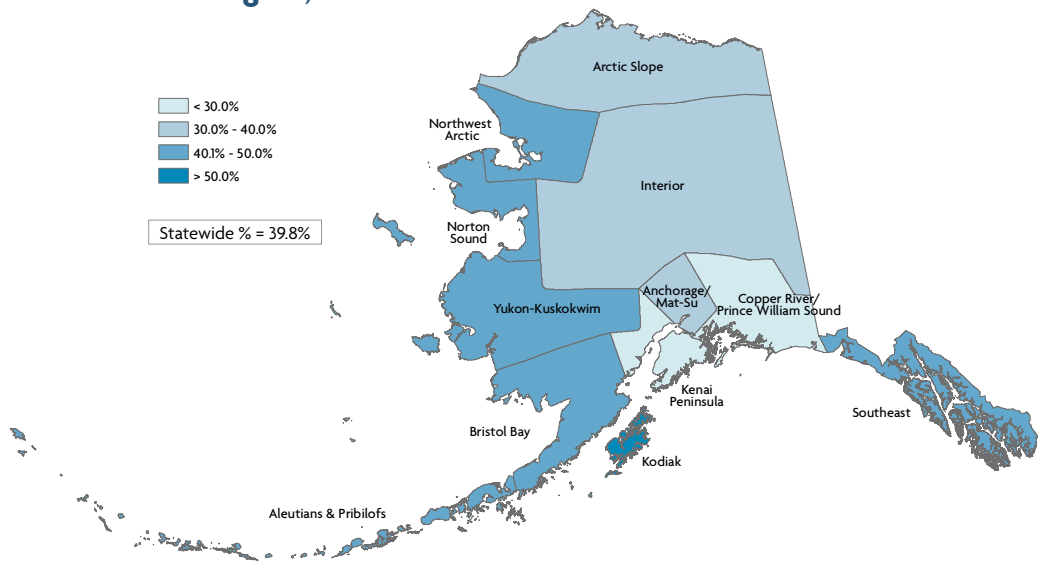
The Advisory Committee on Immunization Practices (ACIP) provides a list of recommended vaccines for adults. The recommended adult immunizations vary by age, lifestyle, medical and other indications, travel, and immunization history. In general, recommendations include an annual influenza vaccine for all adults; one dose of tetanus, diphtheria, pertussis (Tdap) vaccine with a Td booster every ten years; two or three doses (depending on age of receiving first dose or indications) of human papillomavirus (HPV) vaccine for adults aged 19–26 years; one dose of pneumococcal 13-valent conjugate vaccine (PCV13) and one or two doses (depending on medical indications) of pneumococcal polysaccharide vaccine (PPSV23) for adults aged 65 years and older; and, two doses of shingles/zoster vaccine (Shingrix) for adults aged 50 years and older.[41] Additional vaccines may be recommended for persons with medical, occupational, lifestyle or other risk factors.

Related Objectives

Increase the proportion of people who get the flu vaccine every year to 70.0%. - *HEALTHY PEOPLE 2030, OBJECTIVE IID-09*

Adult Immunizations

Figure 68c. Percent of Alaska Native Adults who Received a Seasonal Influenza Vaccine by Tribal Health Region, 2014-2018



Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-136

Summary

- During 2017–2018, the most recent year for which influenza vaccination data among Alaska Native adults was available at the time of this report, one in four (25.1%) Alaska Native adults were vaccinated for influenza.
- Nearly seven out of ten (68.3%) Alaska Native adults age 65 years and older had been vaccinated against pneumococcal disease in 2017.
- During 2017, almost two-thirds of Alaska Native females (64.1%) and a little under half of Alaska Native males (43.1%) have received the recommended 3 doses of the HPV vaccine.
- Almost half of Alaska Native adults aged 60 years and older (47.3%) had received the recommended dose of shingles (zoster) vaccine in 2017.
- During 2014–2018, the percent of Alaska Native adults who were vaccinated for seasonal influenza varied by Tribal health region, ranging from 23.6% to 51.2%

Environmental Health

Environmental Health Highlights

Approximately half of community water system users in Alaska receive water that is fluoridated for dental caries prevention.

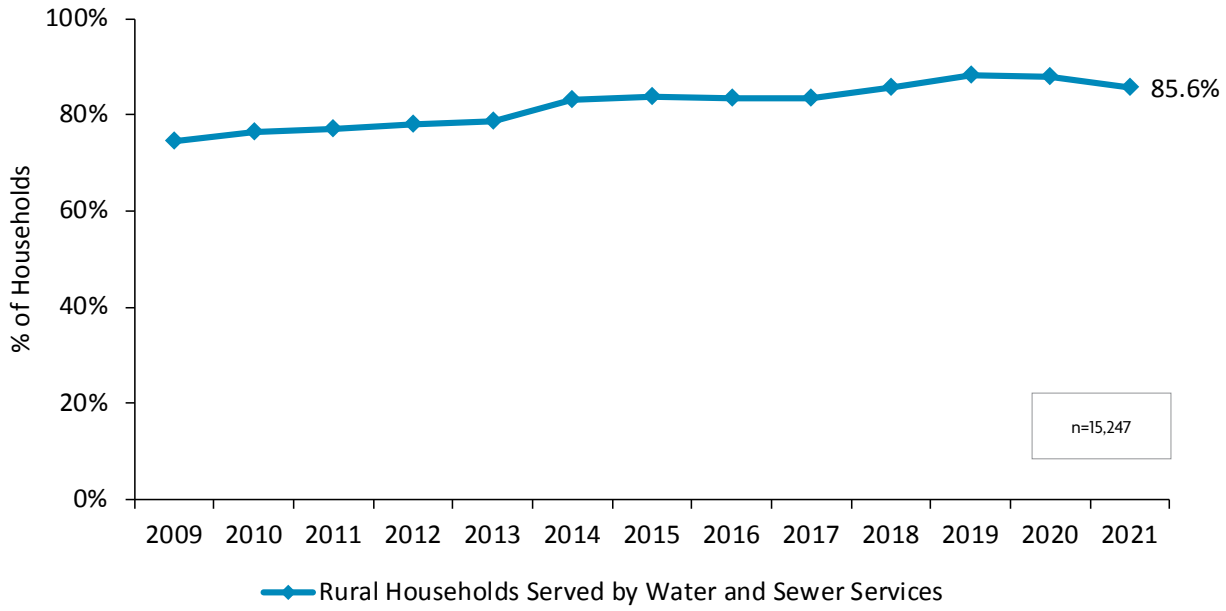
Environmental Health Highlights

85.6% of households in rural Alaska have access to water and sewer services.

The proportion of households in rural Alaska Native communities that are served by water and sewer services has increased since 2009.

Rural Water & Wastewater Service

Figure 69a. Rural Households with Water and Sewer Service, 2009-2021



Data Source: Indian Health Service, Sanitation Tracking and Reporting System
Appendix Table C-137

Definition

Access to in-home water and wastewater service, either through piped connections or closed haul systems, has a positive impact on public health and can help stop the spread of diseases and illnesses.[42] The data show the number of households in rural Alaskan communities with access to public water and sewer service. The term rural refers to communities with predominantly Alaska Native populations eligible for Indian Health Service capital improvement projects.

Related Objectives

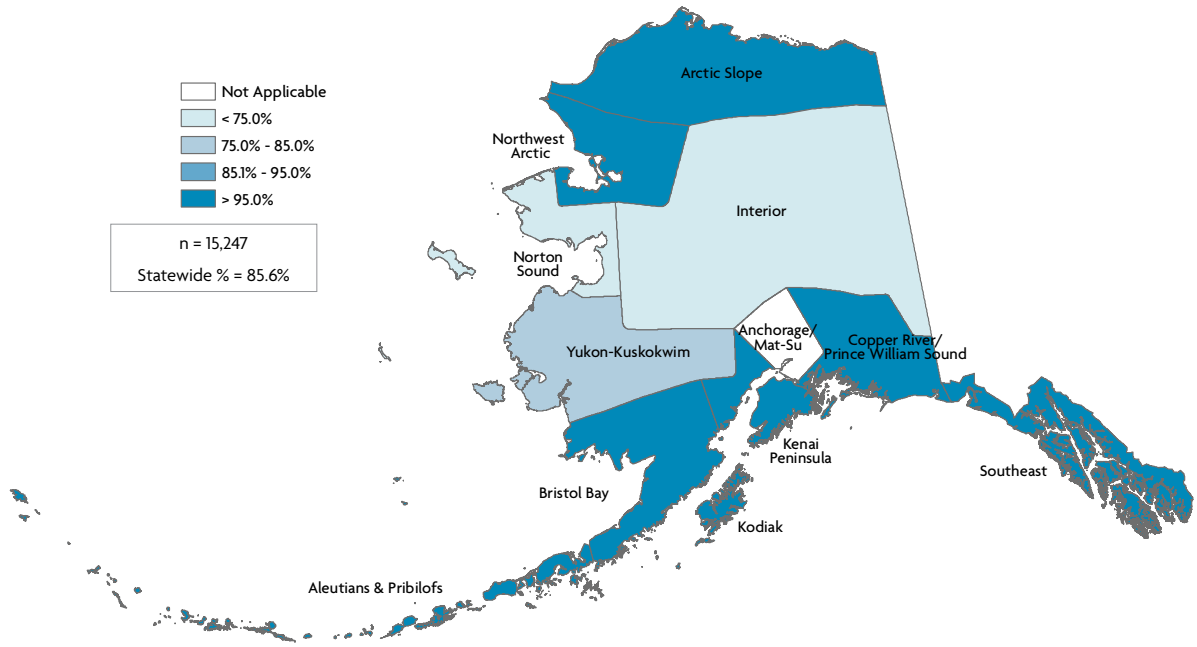
Increase the percentage of rural community housing units with water and sewer services to 90.0%. - *HEALTHY ALASKANS 2030, OBJECTIVE #2*

Summary

- During 2021, about eight out of ten (85.6%) households in rural Alaska Native communities were served by water and wastewater services.
- Between 2009 and 2021, the percentage of households in rural Alaska Native communities served by water and sewer services has increased from 74.4% to 85.6%.
- The percentage of households in rural Alaska Native communities served by water and sewer services varied by Tribal health region, ranging from 68.9% to 100%.

Rural Water & Wastewater Service

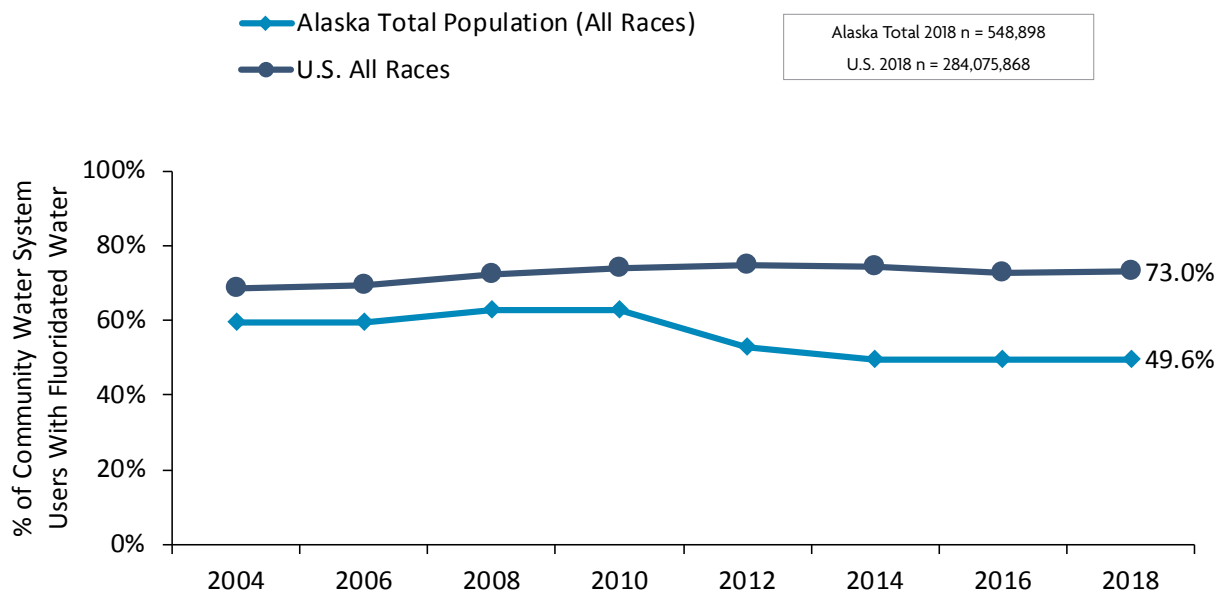
Figure 69b. Percent of Rural Households With Water and Sewer Services by Tribal Health Region, 2021



Data Source: Indian Health Service, Sanitation Tracking and Reporting System
Appendix Table C-138

Community Water Fluoridation

Figure 70. Population Served by Community Water System with Fluoridated Water, 2004-2018



Data Source: Centers for Disease Control and Prevention, Water Fluoridation Reporting System
Appendix Table C-139

Definition

Community water fluoridation is the controlled addition of a fluoride compound to a community water supply to achieve a concentration optimal for dental caries prevention. Drinking fluoridated water keeps teeth strong and reduces cavities (also called tooth decay) by about 25% in children and adults.[43]

The data in this report show the number of people served by community water systems that receive fluoridated water. The percentage is based on the total number of people using community water systems, not the total population of the state.

Objectives

Increase the proportion of the Alaska population served by community water systems with optimally fluoridated water to 60%. - *HEALTHY ALASKANS 2030, OBJECTIVE #3*

Summary

- During 2018, approximately half (49.6%) of community water system users in Alaska were receiving fluoridated water. This percentage ranks Alaska 44 out of the 50 states. This percentage is significantly lower than for the U.S. population as a whole.
- Since 2010, the percentage of community water system users in Alaska receiving fluoridated water has decreased significantly. Several large community water systems, including those in Fairbanks and Juneau, stopped adding fluoride to their water systems in the last decade.

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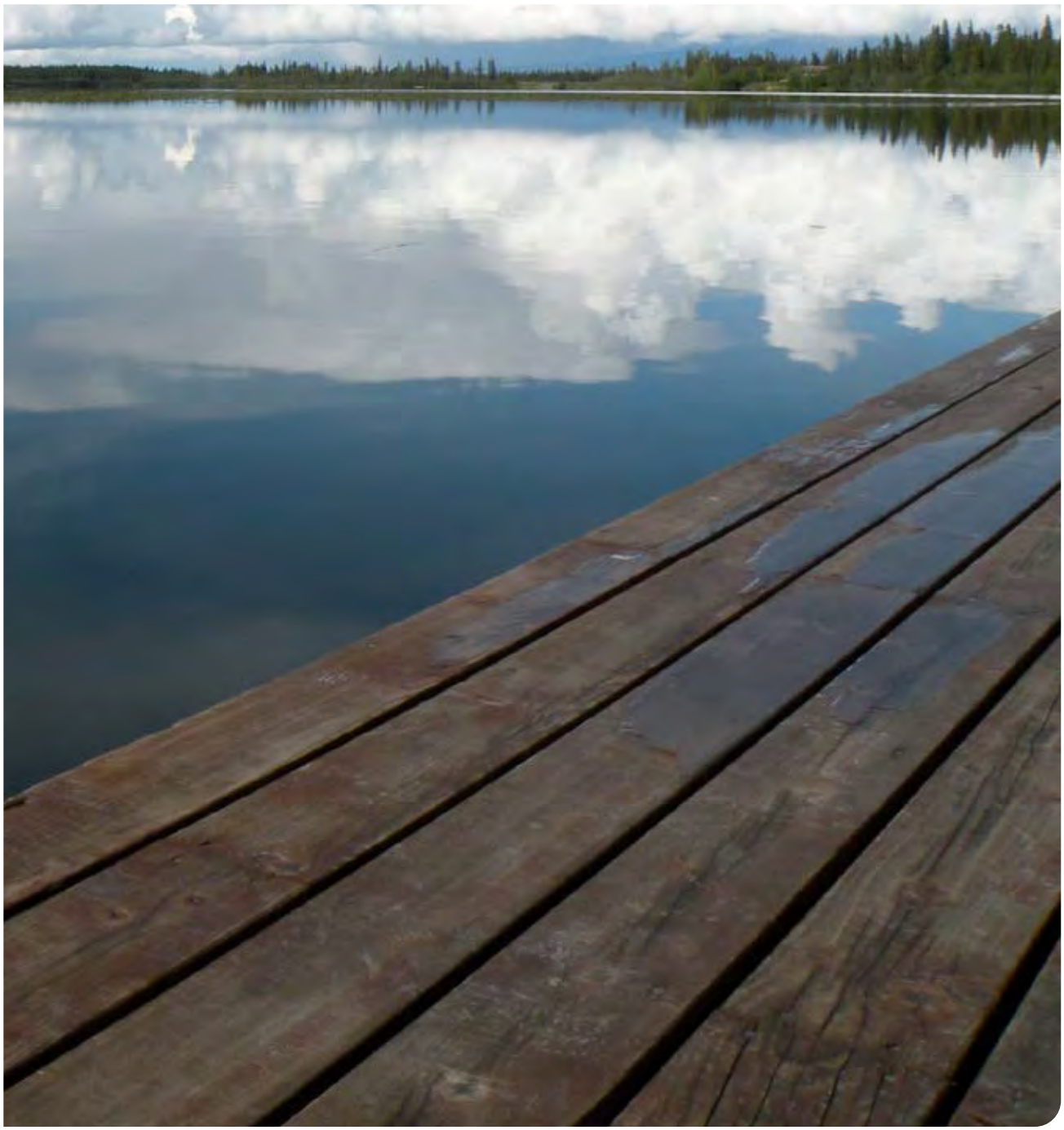
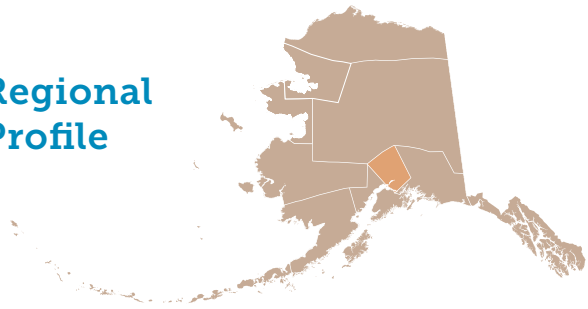
Pelican

Regional Profiles



Regional Profile



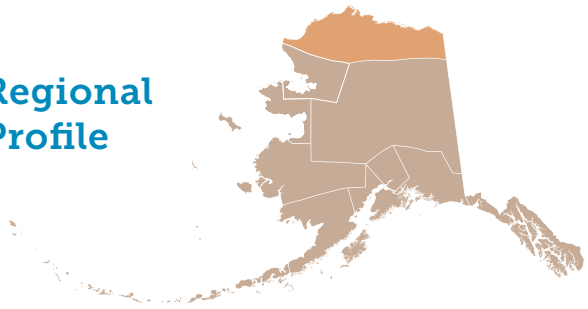
Anchorage/Mat-Su

	Anchorage / Mat-Su Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	86.7%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	19.0%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	71.6	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	259.2	196.3	190.4	127.4
2. Heart Disease	226.1	183.3	155.9	71.1
3. Unintentional Injury	101.7	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	5.6	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	573.7	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	20.6	18.4	11.4	N/A
Low Birth Weight	7.1%	7.6%	5.1%	N/A
First Trimester Prenatal Care	73.6%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	22.5%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	14.9%	12.2%	10.2%	N/A
Physical Activity	19.2%	18.0%	23.1%	59.2%
Obesity	37.6%	36.3%	31.1%	36.0%
Overweight	30.8%	31.3%	35.6%	N/A
Current Smoking	31.5%	36.4%	15.8%	25.0%
Current Binge Drinking	15.1%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	67.0%	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	N/A	85.6%	N/A	90.0%

N/A – Not applicable or not available

* Data is for U.S. Whites only

Regional Profile



Arctic Slope

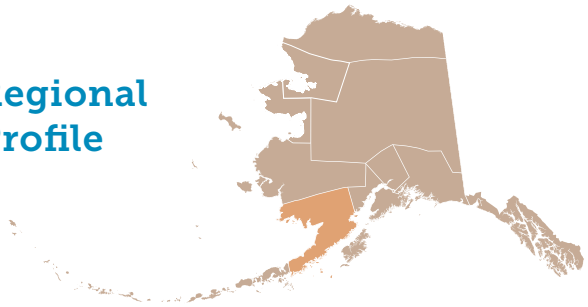
	Arctic Slope Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	79.1%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	16.2%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	69.8	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	404.5	196.3	190.4	127.4
2. Heart Disease	166.7	183.3	155.9	71.1
3. Unintentional Injury	96.4	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	4.5	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	590.2	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	20.9	18.4	11.4	N/A
Low Birth Weight	5.6%	7.6%	5.1%	N/A
First Trimester Prenatal Care	63.2%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	47.7%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	DSU	12.2%	10.2%	N/A
Physical Activity	DSU	18.0%	23.1%	59.2%
Obesity	48.2%	36.3%	31.1%	36.0%
Overweight	36.7%	31.3%	35.6%	N/A
Current Smoking	52.3%	36.4%	15.8%	25.0%
Current Binge Drinking	24.3%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	97.3%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

* Data is for U.S. Whites only

Regional Profile



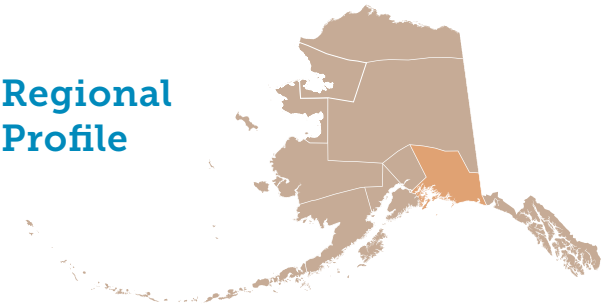
Bristol Bay

	Bristol Bay Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	81.9%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	19.8%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	71.4	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	232.4	196.3	190.4	127.4
2. Heart Disease	262.6	183.3	155.9	71.1
3. Unintentional Injury	151.8	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	5.9	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	436.4	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	17.6	18.4	11.4	N/A
Low Birth Weight	4.7%	7.6%	5.1%	N/A
First Trimester Prenatal Care	63.2%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	39.5%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	15.2%	12.2%	10.2%	N/A
Physical Activity	25.1%	18.0%	23.1%	59.2%
Obesity	28.5%	36.3%	31.1%	36.0%
Overweight	35.6%	31.3%	35.6%	N/A
Current Smoking	38.5%	36.4%	15.8%	25.0%
Current Binge Drinking	32	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	56.3%	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	98.8%	85.6%	N/A	90.0%

N/A – Not applicable or not available

* Data is for U.S. Whites only

Regional Profile



Copper River/ Prince William Sound

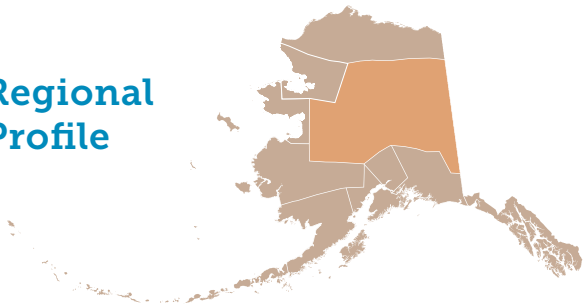
	Copper River/ Prince William Sound Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	91.2%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	21.7%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	71.9	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	234.3	196.3	190.4	127.4
2. Heart Disease	264.4	183.3	155.9	71.1
3. Unintentional Injury	106.1	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	N/A	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	401.8	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	16.9	18.4	11.4	N/A
Low Birth Weight	6.1%	7.6%	5.1%	N/A
First Trimester Prenatal Care	60.1%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	33.8%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	12.1%	12.2%	10.2%	N/A
Physical Activity	DSU	18.0%	23.1%	59.2%
Obesity	31.6%	36.3%	31.1%	36.0%
Overweight	31.6%	31.3%	35.6%	N/A
Current Smoking	30.0%	36.4%	15.8%	25.0%
Current Binge Drinking	DSU	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	99.0%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

* Data is for U.S. Whites only

Regional Profile



Interior

	Interior Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	82.1%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	19.8%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	70.5	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	225.7	196.3	190.4	127.4
2. Heart Disease	166.0	183.3	155.9	71.1
3. Unintentional Injury	131.1	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	6.4	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	568.8	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	19.9	18.4	11.4	N/A
Low Birth Weight	6.3%	7.6%	5.1%	N/A
First Trimester Prenatal Care	64.2%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	21.7%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	11.9%	12.2%	10.2%	N/A
Physical Activity	19.4%	18.0%	23.1%	59.2%
Obesity	35.2%	36.3%	31.1%	36.0%
Overweight	31.4%	31.3%	35.6%	N/A
Current Smoking	34.4%	36.4%	15.8%	25.0%
Current Binge Drinking	17.5%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	69.5%	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	73.3%	85.6%	N/A	90.0%

N/A – Not applicable or not available

* Data is for U.S. Whites only

Regional Profile

Kenai Peninsula

	Kenai Peninsula Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	83.3%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	20.9%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in years	71.6	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	203.1	196.3	190.4	127.4
2. Heart Disease	264.3	183.3	155.9	71.1
3. Unintentional Injury	65.0	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	N/A	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	425.1	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth rate (Live Births per 1,000 Persons)	16.3	18.4	11.4	N/A
Low Birth Weight	6.2%	7.6%	5.1%	N/A
First Trimester Prenatal Care	59.5%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	27.2%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	13.6%	12.2%	10.2%	N/A
Physical Activity	DSU	18.0%	23.1%	59.2%
Obesity	33.0%	36.3%	31.1%	36.0%
Overweight	32.9%	31.3%	35.6%	N/A
Current Smoking	39.0%	36.4%	15.8%	25.0%
Current Binge Drinking	12.8%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	99.1%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

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Regional Profile

Kodiak Area

	Kodiak Area Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	86.0%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	32.7%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in years	72.1	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	227.5	196.3	190.4	127.4
2. Heart Disease	185.9	183.3	155.9	71.1
3. Unintentional Injury	173.2	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	N/A	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	536.4	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth rate (Live Births per 1,000 Persons)	15.7	18.4	11.4	N/A
Low Birth Weight	2.2%	7.6%	5.1%	N/A
First Trimester Prenatal Care	77.2%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	23.3%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	15.5%	12.2%	10.2%	N/A
Physical Activity	DSU	18.0%	23.1%	59.2%
Obesity	36.2%	36.3%	31.1%	36.0%
Overweight	29.1%	31.3%	35.6%	N/A
Current Smoking	31.6%	36.4%	15.8%	25.0%
Current Binge Drinking	DSU	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	100.0%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

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Regional Profile

Northwest Arctic

	Northwest Arctic Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goal
Sociodemographics				
High School or Higher Educational Attainment	78.1%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	30.6%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	70.4	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	223.7	196.3	190.4	127.4
2. Heart Disease	186.6	183.3	155.9	71.1
3. Unintentional Injury	73.0	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	6.7	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	434.8	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth rate (Live Births per 1,000 Persons)	26.3	18.4	11.4	N/A
Low Birth Weight	7.2%	7.6%	5.1%	N/A
First Trimester Prenatal Care	71.2%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	43.1%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	7.6%	12.2%	10.2%	N/A
Physical Activity	DSU	18.0%	23.1%	59.2%
Obesity	36.6%	36.3%	31.1%	36.0%
Overweight	34.2%	31.3%	35.6%	N/A
Current Smoking	43.5%	36.4%	15.8%	25.0%
Current Binge Drinking	18.1%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	98.0%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

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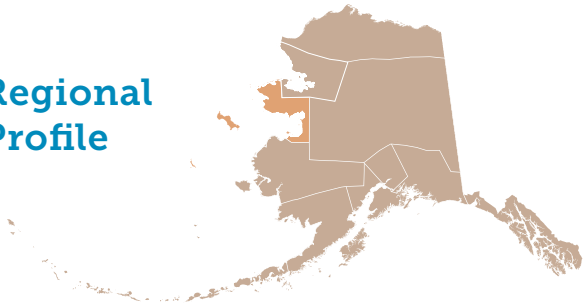
Regional Profile



Norton Sound

	Norton Sound Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	80.5%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	26.8%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in years	69.3	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	278.7	196.3	190.4	127.4
2. Heart Disease	255.0	183.3	155.9	71.1
3. Unintentional Injury	68.1	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	10.9	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	531.9	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth rate (Live Births per 1,000 Persons)	18.4	18.4	11.4	N/A
Low Birth Weight	6.0%	7.6%	5.1%	N/A
First Trimester Prenatal Care	70.0%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	45.1%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	10.0%	12.2%	10.2%	N/A
Physical Activity	14.9%	18.0%	23.1%	59.2%
Obesity	39.2%	36.3%	31.1%	36.0%
Overweight	16.4%	31.3%	35.6%	N/A
Current Smoking	53.5%	36.4%	15.8%	25.0%
Current Binge Drinking	22.8%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	68.9%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

* Data is for U.S. Whites only

Regional Profile

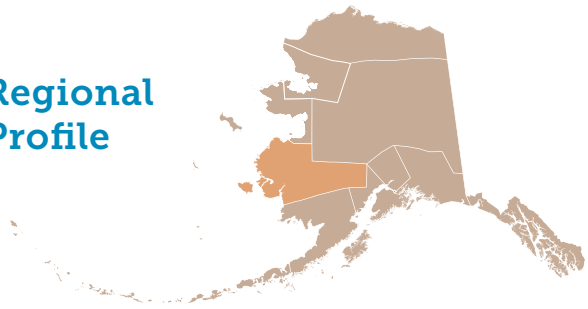
Southeast

	Southeast Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	87.9%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	19.4%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	73.8	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	226.7	196.3	190.4	127.4
2. Heart Disease	200.3	183.3	155.9	71.1
3. Unintentional Injury	60.9	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	2.6	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	502.8	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	13.4	18.4	11.4	N/A
Low Birth Weight	5.9%	7.6%	5.1%	N/A
First Trimester Prenatal Care	72.5%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	17.1%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	13.7%	12.2%	10.2%	N/A
Physical Activity	16.8%	18.0%	23.1%	59.2%
Obesity	36.5%	36.3%	31.1%	36.0%
Overweight	37.2%	31.3%	35.6%	N/A
Current Smoking	33.0%	36.4%	15.8%	25.0%
Current Binge Drinking	20.1%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	72.3%	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	100.0%	85.6%	N/A	90.0%

N/A – Not applicable or not available

* Data is for U.S. Whites only

Regional Profile



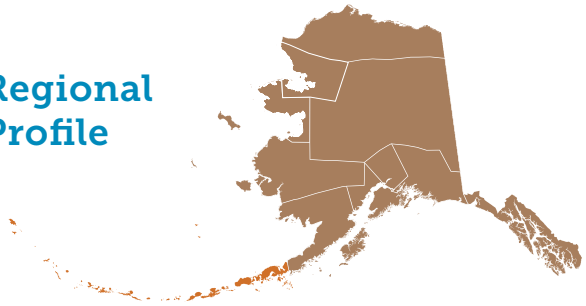
Yukon-Kuskokwim

	Yukon-Kuskokwim Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	76.9%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	34.9%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	70.9	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	212.7	196.3	190.4	127.4
2. Heart Disease	201.8	183.3	155.9	71.1
3. Unintentional Injury	114.6	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	10.9	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	352.9	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	28.9	18.4	11.4	N/A
Low Birth Weight	6.8%	7.6%	5.1%	N/A
First Trimester Prenatal Care	57.1%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	6.2%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	8.8%	12.2%	10.2%	N/A
Physical Activity	19.9%	18.0%	23.1%	59.2%
Obesity	28.9%	36.3%	31.1%	36.0%
Overweight	32.1%	31.3%	35.6%	N/A
Current Smoking	41.3%	36.4%	15.8%	25.0%
Current Binge Drinking	23.1%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	52.2%	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	79.0%	85.6%	N/A	90.0%

N/A – Not applicable or not available

* Data is for U.S. Whites only

Regional Profile



Aleutains & Pribilofs

	Aleutians & Pribilofs Alaska Native People	Alaska Native People Statewide	Alaska Whites/ Non-Natives Statewide	Related Healthy Alaskans 2030/ - Healthy People 2030 Goals
Sociodemographics				
High School or Higher Educational Attainment	84.2%	83.0%	95.6%	90.0%
Percent of Population Living in Poverty	15.6%	24.0%	7.2%	10.0%
Mortality				
Life Expectancy in Years	72.5	70.4	79.3	N/A
Age-Adjusted Mortality Rates per 100,000 for Leading Causes of Death				
1. Cancer	353.8	196.3	190.4	127.4
2. Heart Disease	139.9	183.3	155.9	71.1
3. Unintentional Injury	75.2	116.9	67.3	56.5
Infant Mortality Rate per 1,000 Live Births	DSU	10.3	2.9	5.0
Morbidity				
Age-Adjusted Cancer Incidence Rate per 100,000	493.4	497.6	450.9*	N/A
Age-Adjusted Chlamydia Incidence Rate per 100,000	N/A	1,991.3	565.2	N/A
Maternal, Infant, and Child Health				
Birth Rate (Live Births per 1,000 Persons)	21.0	18.4	11.4	N/A
Low Birth Weight	9.2%	7.6%	5.1%	N/A
First Trimester Prenatal Care	76.5%	68.1%	73.5%	81.8%
Prenatal Tobacco Use	36.6%	23.7%	6.6%	4.3%
Adult Health				
Frequent Mental Distress	11.8%	12.2%	10.2%	N/A
Physical Activity	10.4%	18.0%	23.1%	59.2%
Obesity	55.3%	36.3%	31.1%	36.0%
Overweight	25.0%	31.3%	35.6%	N/A
Current Smoking	31.5%	36.4%	15.8%	25.0%
Current Binge Drinking	28.5%	19.1%	16.4%	25.4%
Preventive Care				
Colorectal Cancer Screening Among Adults Aged 50-75 Years	DSU	69.6%	63.8%	74.4%
Environmental Health				
Rural Households with Water and Sewer Service	98.4%	85.6%	N/A	90.0%

N/A – Not applicable or not available

DSU – Data are suppressed because they do not meet criteria for reliability or confidentiality

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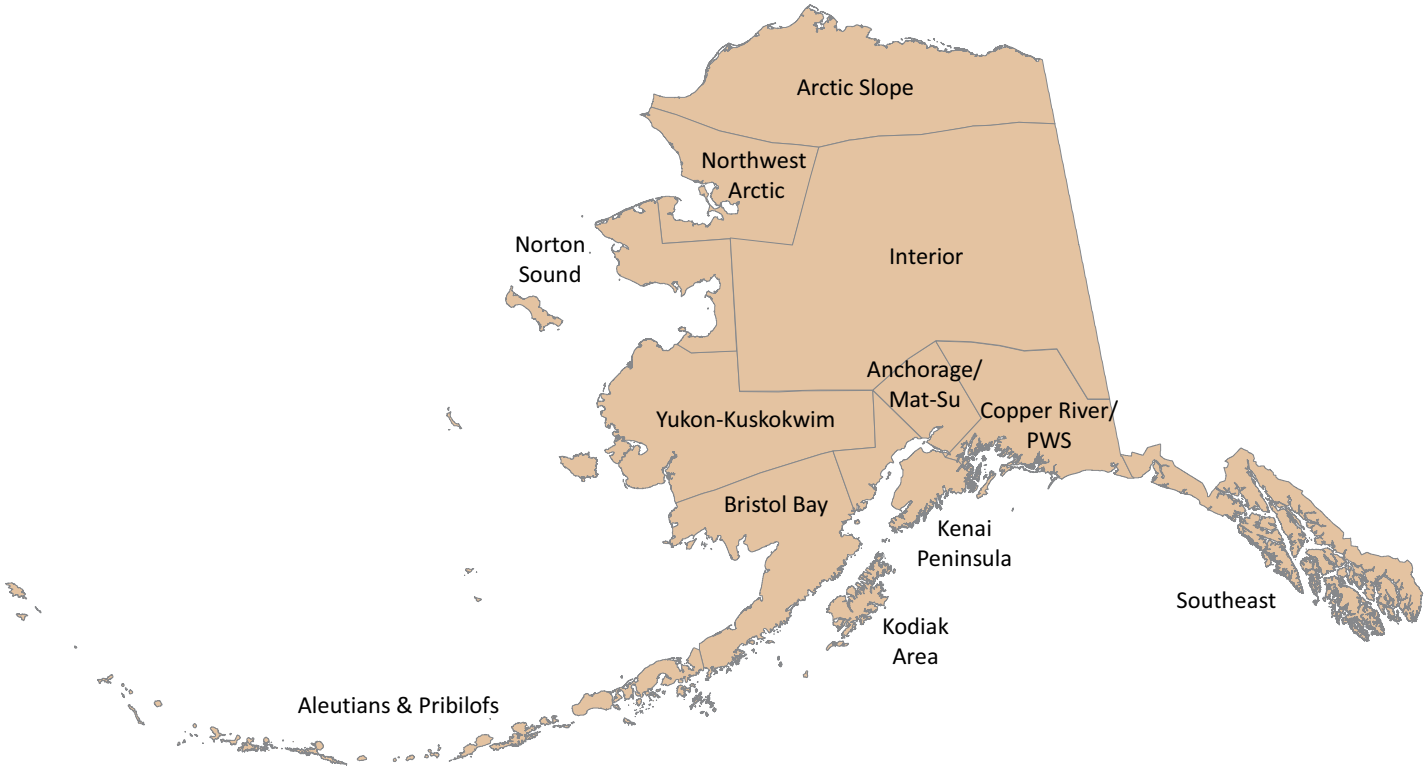
Appendices

Appendix A

Tribal Health Regions



Tribal Health Regions

Tribal Health Region	Title I and V Tribal Health Organizations in Region	Census Area/Borough included in Region	Exceptions to Census Areas/Boroughs	
			Villages Added	Villages Removed
Aleutians and Pribilofs	Aleutian Pribilof Islands Association (APIA), Eastern Aleutian Tribes Inc., St. George Traditional Council	Aleutians East Borough, Aleutians West Census Area		
Anchorage/ Mat-Su	Southcentral Foundation (SCF), Chickaloon Village, Native Village of Eklutna, Knik Tribal Council	Anchorage Municipality, Matanuska-Susitna Borough		
Arctic Slope	Arctic Slope Native Association (ASNA), Ukpeagvik Inupiat Corporation	North Slope Borough		Point Hope (Northwest Arctic), Anaktuvak Pass (Interior)
Bristol Bay	Bristol Bay Area Health Corporation (BBAHC)	Dillingham Census Area, Lake and Peninsula Borough, Bristol Bay Borough	Goodnews Bay, Platinum	
Copper River/ Prince William Sound	Chugachmiut Inc.(part)*, Chitina Traditional Council, Copper River Native Association (CRNA), Mt. Sanford Tribal Consortium, Valdez Native Tribe	Chugach Census Area, Copper River Census Area	Cantwell	
Interior	Tanana Chiefs Conference (TCC), Council of Athabascan Tribal Governments, Fairbanks Native Assoc., Tanana IRA Native Council	Denali Borough, Fairbanks North Star Borough, Southeast Fairbanks Census Area, Yukon-Koyukuk Census Area	Anaktuvak Pass	Cantwell (Copper River/Prince William Sound); Grayling, Anvik Shageluk, Holy Cross (Yukon-Kuskokwim)
Kenai Peninsula	Chugachmiut (part)*, Kenaitze Indian Tribe IRA, Ninilchik Traditional Council, Seldovia Village Tribe	Kenai Peninsula Borough		
Kodiak Area	Kodiak Area Native Association (KANA), Native Village of Karluk	Kodiak Island Borough		
Northwest Arctic	Maniilaq Association	Northwest Arctic Borough	Point Hope	
Norton Sound	Norton Sound Health Corporation (NSHC), Native Village of Diomede	Nome Census Area		
Southeast	Southeast Alaska Regional Health Corporation (SEARHC), Hoonah Indian Association, Ketchikan Indian Corporation, Metlakatla Indian Community, Yakutat Tlingit Tribe	Yakutat City & Borough, Skagway Municipality, Hoonah-Angoon Census Area, Haines Borough, Juneau City & Borough, Sitka City & Borough, Wrangell City & Borough, Petersburg Borough, Prince of Wales-Hyder Census Area, Ketchikan Gateway Borough		
Yukon-Kuskokwim	Akiachak Native Community, Native Village of Quinhagak, Yukon-Kuskokwim Health Corporation (YKHC)	Bethel Census Area, Kusilvak Census Area	Grayling, Anvik, Shageluk, Holy Cross	Goodnews Bay, Platinum (Bristol Bay)

* Chugachmiut is separated into 2 regions: Chenega Bay, Tatitlek, Valdez, and Cordova are included in Copper River/Prince William Sound; Port Graham, Nanwalek, and Seward are included in Kenai Peninsula.

Methods - General Notes

Confidentiality
In order to protect individuals from potentially being identified, data from populations with small sample size are either: 1) aggregated over a region or a larger area; 2) aggregated over time periods; or 3) both. For some indicators, data is not shown if the number of cases or the sample size is not large enough. Maps, tables, and regional profiles display an indicator if data is being suppressed.

Statistical Significance
Throughout the document, differences are considered statistically significant at the 95% confidence level ($p<0.05$). Differences between rates or between percentages are considered significantly different if the 95% confidence intervals do not overlap. Rate ratios are considered statistically significant if the 95% confidence interval of the rate ratio did not contain 1. Differences that are statistically significant are noted as such in the summary text for each health topic. If it is not indicated that a difference is significant then it does not meet the threshold to be considered statistically significant. It is difficult to find statistically significant differences when analyzing small sample sizes and populations, and caution is advised when attempting to draw conclusions from data with wide confidence intervals and/or high relative standard error. Sample sizes (n) and confidence intervals are included with these data where possible.

Historic Data
In addition to reporting the most recently available data, this document shows data that were previously accessed, analyzed and detailed in prior years. This report did not reanalyze data from prior time periods or editions of this report; thus data for preceding years may not reflect more recent analyses that have occurred between then and now.

Small Numbers
The effect of small numbers should be kept in mind when looking at rates based on a small number of occurrences of a disease or health related event. Rates calculated based on small numbers due to events being rare, or because the population is small, are often unstable. When comparing rates over time, the rates may fluctuate up and down more compared to larger populations.

Rounding
Calculations for percentages are rounded to one decimal place, where the data source allowed. As a result, total percentages may not add up to 100.0%.

Race/Ethnicity
Throughout the document "Alaska Native" generally refers to Alaska Native or American Indian people residing in Alaska. Depending on the data source, this may include those who identify as Alaska Native/American Indian alone, or in combination with one or more other race groups. Details on race definitions are provided under the specific data sources below, where applicable.

Data Sources

Alaska Department of Labor and Workforce Development
The Alaska Department of Labor and Workforce Development (ADOLWD), Research and Analysis Section produces statistics about a range of economic data including population and Census, housing, occupations, industries, and workforce. The ADOLWD produced the population estimates used in this report. These population estimates use the 2010 decennial census data as a baseline and adjusts the numbers yearly based upon administrative records including Permanent Fund applications, military and group quarters data, and U.S. Census Bureau data. Alaska Native people are classified as those reporting Alaska Native alone or in combination with one or more race.

Alaska Division of Public Health, Alaska Birth Defects Registry
The Alaska Birth Defects Registry (ABDR) collects information on the occurrence and distribution of congenital birth defects that are listed as reportable conditions to public health in Alaska. The ABDR conducts a modified passive surveillance system and relies on reporting by major hospitals, specialty clinics, and medical records aggregators. Data was provided and analyzed by the ABDR. Reports that could not be matched to an Alaskan birth certificate were excluded from analysis. The analysis includes children who have at least one of the 45 congenital anomalies that are collected by the National Birth Defects Prevention Network as well as unconfirmed birth defects detected through the passive report system. Alcohol-related birth defects are not included. Year is determined by the year of birth. ABDR's inclusion criteria, classifications of race, and methods of data collection and analysis have changed over time, so caution is advised when comparing data over periods of time.

Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
The Alaska Childhood Understanding Behaviors Survey (CUBS) is designed to find out about the health, behaviors, and early childhood experiences of young children in Alaska before they enter school. CUBS is a three-year follow-up survey to the Alaska Pregnancy Risk Assessment Monitoring System (PRAMS). CUBS data are representative of mothers of 3-year-old children born in Alaska. The Alaska CUBS Program conducted data analysis and provided aggregated data to the Alaska Native Epidemiology Center. CUBS estimates are statistically weighted to represent the total population of 3-year-old children who were born in Alaska. "Alaska Native" refers to Alaska Native and American Indian people who reside in Alaska. Race classifications are based on the maternal race listed on the child's birth certificate and includes any mention of Alaska Native, including individuals who list multiple races. "White" refers to children with a maternal race listed as White only on the birth certificate.

Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section
The Alaska Health Analytics and Vital Records Section (formerly the Alaska Bureau of Vital Statistics) provided data from birth and death events that occurred in Alaska. The Alaska Native Epidemiology Center analyzed the data.
The mortality data for Alaska range from 1984 to 2019, depending on the health indicator. Number of deaths and rates are provided for Alaska Native/American Indian people and non-Native Alaskan residents. Alaska Native people are classified as those identified on the death certificate as being Alaska Native and/or American Indian (alone or in combination with another race). Data were aggregated into 4 year periods due to small numbers. Bridged race population estimates from the National Center for Health Statistics were used as the denominator to calculate the mortality rates. Bridged estimates are necessary to adjust for the introduction of multiple race selection in the Census starting in 2000. Rates were age-adjusted to the 2000 U.S. standard population. The birth data are based upon data reported on birth certificates to the State of Alaska. Infant race is based on the race of the mother. Alaska

Data Sources

Native infants are infants born to an Alaska Native mother. White infants are infants born to a white mother.

Rates were calculated for tribal health regions and causes that had at least five events (births or deaths) during the designated time period. Data are suppressed if there were less than 5 cases. Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Events were assigned to the region in which the person was resident, regardless of place of occurrence. All analyses were restricted to births and deaths of Alaska residents.

Alaska Division of Public Health, Alaska Oral Health Assessment

The Alaska Oral Health Assessment is undertaken with kindergarten, Head Start, and third grade children from a sample of Alaska sites for oral health disease surveillance. The assessment evaluates dental decay, untreated decay, caries experience, and dental sealants. The assessment consists of two parts: a questionnaire/consent for parents/guardians; and a school-based clinical assessment conducted by dentists. Included in this report are assessment data from the 2004-2005, 2007, and 2010-2011 school years. The 2010-2011 data is the most recently available at the time of this report.

Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

The Behavioral Risk Factor Surveillance System (BRFSS) is a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age and older) living in households. Alaska began participating in the BRFSS in 1991.

The BRFSS is a standardized telephone interview designed to collect uniform state-specific data on health status and perceptions, preventive health practices, and risky behaviors that are linked to chronic diseases, injuries, and preventable infectious diseases. The core questions are asked every year and rotating core questions are asked in alternating years by all states. Additionally, there are optional CDC modules that states may or may not choose to include, and states may add questions of their own. In addition to the Standard Alaska BRFSS, a Supplemental Alaska BRFSS survey was conducted from 2007-2020. This Supplemental BRFSS survey is conducted using identical methodology as the Standard BRFSS but with a greater emphasis on tobacco-related questions. Some questions are on both surveys which allows for a much larger sample size. Data from both the Standard and Supplemental Alaska BRFSS surveys are used for select measures in this report.

The health characteristics estimated from the BRFSS pertain to the adult population, aged 18 years or older, who live in households. Individuals living in military barracks, dormitories, nursing homes, and other group-living situations are excluded. Apart from that exclusion, each state's sample is designed to be representative of the state's population. In order to achieve a representative sample, the State of Alaska oversamples rural regions. Oversampling of rural regions helps to get a more representative sample of Alaska Native people, since there are more Alaska Native people living in rural Alaska.

Since 2011, BRFSS conducts both landline telephone and cellular telephone based surveys. In conducting the BRFSS landline telephone survey, data are collected from a randomly selected adult in a household. In conducting the cellular telephone version of the BRFSS survey, data are collected from an adult who participates by using a cellular telephone.

The analyses of Behavioral Risk Factor Surveillance System accounts for the fact that not every adult resident of the state has an equal chance of being contacted for an interview. A probability is assigned to each respondent which reflects their likelihood of being contacted. In addition, each person interviewed is treated as a representative for other, similar persons. The probability factor and assumption of representation are used to calculate a statistical weighting factor to be used in analyses to draw inferences about the overall population.

Alaska Native people are classified as those having any mention of Alaska Native and/or American Indian in their survey. Readers should use these estimates with caution since the number of respondents who are Alaska Native from each region is relatively small. In order for data to be presented, a minimum of 5 people must report the particular behavior of interest and there must be at least 50 people included in

Data Sources

the sample size for a given question. Within the regional and statewide data, multiple years are combined to achieve a meaningful sample size where possible. Caution is advised when attempting to draw conclusions from data with wide confidence intervals. All BRFSS data was obtained via AK-IBIS, an online tool for accessing data from the Alaska Division of Public Health. AK-IBIS has been unavailable since May 2021 due to a cyber-attack.

Alaska Division of Public Health, HIV/STD Program

The HIV/STD Program addresses public health issues and activities with the goal of preventing sexually transmitted diseases including HIV infection and their impact on health in Alaska. The data presented in this report on chlamydia and gonorrhea were provided by the HIV/STD Program and analyzed by the HIV/STD Program and the Alaska Native Epidemiology Center. Alaska Native people are classified as those having any mention of Alaska Native and/or American Indian in their records. Cases of chlamydia and gonorrhea with unknown or multi-race were excluded from analysis.

Alaska Division of Public Health, Pregnancy Risk Assessment Monitoring System

The Alaska Pregnancy Risk Assessment Monitoring System (PRAMS) is a survey of mothers of newborn infants developed by the Centers for Disease Control and Prevention Division of Reproductive Health to collect information on the health risk behaviors and circumstances of pregnant and postpartum women. PRAMS is a population-based complex sample survey. Percentages noted are weighted to reflect the population of women who delivered a live born infant in Alaska during the year specified. It was initiated in the state of Alaska in 1990 by the State of Alaska Division of Public Health's Section of Maternal, Child, and Family Health. The survey is administered by mail with a telephone follow-up. PRAMS has a core set of questions that each participating state asks, and a limited number of state-specific questions. Topics covered include family planning, prenatal care, use of tobacco, alcohol, and drugs, participation in the Women, Infants, and Children's (WIC) nutrition program and Medicaid, payment for care, family income, breast-feeding, physical abuse, and life stressors such as illness, job loss, debt, divorce, plus other topics.

Sampled participants must be Alaska residents who have delivered a live birth in state. The surveys are administered two to six months after the date of birth. Mothers of infants that die are included and grief letters are mailed out to the mothers in these situations. If births are multiple, only one infant is randomly selected. Pending adoptions are also included as long as the biological mother is included on the birth record.

Since PRAMS data are self-reported, reporting bias is possible. Data are not routinely collected on abortions or still births thus data do not represent all women who become pregnant during a given time period, only those who delivered a live, viable infant. Recall bias may be possible since women are asked to remember events or behaviors up to 12 months before they got pregnant. Alaska's survey response rates are favorable.

Alaska PRAMS data was provided and analyzed by the Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit.

Alaska Division of Public Health, Youth Risk Behavior Surveillance System

The Youth Risk Behavior Surveillance System (YRBSS) was developed in 1990 by the Centers for Disease Control and Prevention, and first implemented in Alaska in 1995. The YRBSS monitors the prevalence of behaviors that put youth at risk for the most significant health and social problems in order to assist in prevention and intervention planning and evaluation. This is a school-based survey of high school students in grades 9-12, administered in cooperation with the Department of Education and Early Development and the Department of Health and Social Services. Alaska Native youth are classified as those having any mention of Alaska Native and/or American Indian in their survey.

Due to methodological limitations, YRBS data is not shown for Tribal health regions in this report. In order for data to be presented, to protect participants' privacy, and to ensure high data quality, a minimum of 5 people must report the particular behavior of interest and there must be at least 100 people included in the sample size for a given question. The statewide estimates are based on a statewide sample

Data Sources

of completed surveys and can only be generalized to traditional high school students in grades 9 through 12. Students who were enrolled in English as a Second Language classes, special education classes, alternative schools, correspondence schools, group home schools, and correctional schools are not represented. Also, youth who dropped out of school are not included. YRBS is based on self-report of behaviors, so self-report or recall bias may exist. All YRBS data was obtained in aggregate via AK-IBIS and Alaska YRBS data-dashboards, which are online tools for accessing data from the Alaska Division of Public Health. AK-IBIS has been unavailable since May 2021 due to a cyber–attack.
Finally, the YRBS survey answers the what, where, and when about self-reported behaviors, but cannot answer the why and how of the behaviors.

Alaska Native Medical Center Diabetes Registry
The Alaska Native Medical Center's Diabetes Registry provided the diabetes data aggregated by Indian Health Service Units. The Alaska Area Diabetes Registry is a clinical and epidemiologic resource for tribal health care facilities throughout Alaska. The registry tracks patients diagnosed with diabetes and works to ensure that their care meets national standards. Patients include Alaska Native and/or American Indian people who use Indian Health Services or tribal health facilities.

Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry
The Alaska Native Tumor Registry (ANTR) is a collection of complete cancer incidence data since 1969 for all cancers diagnosed among Alaska Native/American Indian people living in Alaska at the time of death. The ANTR is a participant in the National Cancer Institute's, Surveillance Epidemiology and End Results (SEER) Program. The registry includes Alaska Native/American Indian people living in Alaska at the time of diagnosis who met eligibility requirements for Indian Health Service benefits.

Centers for Disease Control and Prevention, National Immunization Surveys
The National Immunization Surveys (NIS) are a group of telephone surveys conducted by the CDC's National Center for Immunization and Respiratory Diseases. The data used in this report comes from three surveys: the National Immunization Survey among children age 19-35 months, the National Immunization Survey-Teen (NIS-Teen) for adolescents age 13-17 years, and the National Immunization Survey-Child Influenza Module for children 6-18 months and 3-12 years who were not included in the NIS or NIS-Teen. The National Immunization Survey-Flu combines the flu vaccination data from the three surveys to assess annual flu vaccination coverage among children 6 months-17 years. Estimates are based on parent or guardian reported data and data from vaccination providers. Parents or guardians reported the race and ethnicity of the children.

Centers for Disease Control and Prevention, Water Fluoridation Reporting System
The Water Fluoridation Reporting System (WFRS) compiles data for monitoring access to and evaluating the quality of water fluoridation programs at the state and water system levels. WFRS data have been summarized every two years since 2000. Each state drinking water program has its own methodology for estimating water system service populations. A community water system is designated by the state drinking water administrator in accordance with the regulatory requirements of the U.S. Environmental Protection Agency. The data presented in the report show the population served by community water systems with any level of fluoridated water, but not necessarily at the optimal level.

Indian Health Service, National Immunization Reporting System
The National Immunization Reporting System is a web-based reporting tool to collect quarterly immunization data from each tribal health facility. Reports are collected each quarter for 3-27 month old children, 2 year olds, adolescents and adults. In addition, data is reported for influenza and healthcare personnel. Data are for Alaska Native/American Indian beneficiaries only. Immunization data used in the report are for the end of each fiscal year's quarter 1 ending December 31. The exception to this is for seasonal influenza, where the end of each fiscal year's quarter 2, ending March 31, is used.

Data Sources

Indian Health Service, Sanitation Tracking and Reporting System (STARS)
The Indian Health Service's (IHS) Sanitation Tracking and Reporting System (STARS) is a comprehensive online tracking and reporting system for the IHS Division of Sanitation Facilities Construction (DSFC). DSFC administers the program responsible for the delivery of environmental engineering services and sanitation facilities to American Indian and Alaska Native people. STARS includes basic information about existing and needed sanitation facilities related to homes in American Indian and Alaska Native communities, as well as water, wastewater, and solid waste systems and the organizations that operate systems, among other information.

National Cancer Institute, Surveillance Epidemiology and End Results Program
The Surveillance Epidemiology and End Results Program (SEER) is part of the National Cancer Institute. The SEER Program collects information on the incidence, survival, and prevalence of cancer, as well as the survival of persons with cancer. In addition, the SEER Program collects standard population data, U.S. mortality data, and U.S. population data.

U.S. Census Bureau
The U.S. Census Bureau is responsible for providing data about the nation's people and economy. The U.S. Decennial Census counts every resident in the United States and takes place every ten years. The American Community Survey (ACS) provides information about the population including jobs, occupations, education, housing, and other topics. The ACS is conducted on a sample of U.S. residents each month. The data in this report use the ACS 5-Year estimates due to small sample size. The Current Population Survey is used to collect data on employment, labor force, earnings, and education. The data used in this report were obtained from data.census.gov, an online tool for accessing data from the U.S. Census Bureau.

Appendix C

Data Tables

Table C-1: Population Estimates by Age Group and Gender, Alaska Native People, 2020

Data Sources: Alaska Department of Labor and Workforce Development, Research and Analysis Section

	Male		Female		Total	
Year	**n**	**%**	**n**	**%**	**n**	**%**
0-4	7,097	4.8%	6,551	4.4%	13,648	9.2%
5-9	7,761	5.2%	7,393	5.0%	15,154	10.2%
10-14	7,448	5.0%	6,921	4.7%	14,369	9.7%
15-19	6,546	4.4%	6,054	4.1%	12,600	8.5%
20-24	5,622	3.8%	5,333	3.6%	10,955	7.4%
25-29	5,711	3.9%	5,612	3.8%	11,323	7.6%
30-34	5,621	3.8%	5,727	3.9%	11,348	7.7%
35-39	4,866	3.3%	4,903	3.3%	9,769	6.6%
40-44	3,909	2.6%	3,910	2.6%	7,819	5.3%
45-49	3,422	2.3%	3,435	2.3%	6,857	4.6%
50-54	3,369	2.3%	3,506	2.4%	6,875	4.6%
55-59	3,775	2.5%	3,955	2.7%	7,730	5.2%
60-64	3,219	2.2%	3,636	2.5%	6,855	4.6%
65-69	2,495	1.7%	2,739	1.8%	5,234	3.5%
70-74	1,612	1.1%	1,818	1.2%	3,430	2.3%
75-79	896	0.6%	1,147	0.8%	2,043	1.4%
80-84	537	0.4%	686	0.5%	1,223	0.8%
85+	268	0.2%	585	0.4%	853	0.6%
Total	**74,174**	**50.1%**	**73,911**	**49.9%**	**148,085**	**100.0%**

Table C-2: Male Population Change by Age, 2015 to 2020

Data Source: U.S. Census Bureau, 2010 Census; Alaska Department of Labor and Workforce Development, Research and Analysis Section

	2015		2020		% Change in Alaska Native Male Population	% Change in Alaska Total Male Population
	Alaska Native Males	**Alaska Male Population**	**Alaska Native Males**	**Alaska Male Population**		
0-4	8,055	31,892	7,097	29,351	-11.9%	-8.0%
5-9	7,826	32,727	7,761	31,146	-0.8%	-4.8%
10-14	6,894	29,927	7,448	31,744	8.0%	6.1%
15-19	6,770	28,459	6,546	27,867	-3.3%	-2.1%
20-24	6,019	31,381	5,622	27,712	-6.6%	-11.7%
25-29	6,051	32,729	5,711	29,992	-5.6%	-8.4%
30-34	5,197	31,367	5,621	31,059	8.2%	-1.0%
35-39	4,195	26,148	4,866	29,906	16.0%	14.4%
40-44	3,714	23,851	3,909	24,411	5.3%	2.3%
45-49	3,737	24,266	3,422	21,919	-8.4%	-9.7%
50-54	4,251	28,333	3,369	22,699	-20.7%	-19.9%
55-59	3,662	28,215	3,775	25,618	3.1%	-9.2%
60-64	2,991	24,421	3,219	24,626	7.6%	0.8%
65-69	2,065	17,064	2,495	20,223	20.8%	18.5%
70-74	1,242	9,955	1,612	13,713	29.8%	37.7%
75-79	787	5,613	896	7,825	13.9%	39.4%
80-84	450	3,210	537	4,043	19.3%	26.0%
85+	278	2,316	268	2,744	-3.6%	18.5%
Total	**74,184**	**411,874**	**74,174**	**406,598**	**-0.01%**	**-1.3%**

Table C-3: Female Population Change by Age, 2015 to 2020

Data Sources: U.S. Census Bureau, 2010 Census; Alaska Department of Labor and Workforce Development, Research and Analysis Section

	2015		2020		% Change in Alaska Native Female Population	% Change in Alaska Total Female Population
	Alaska Native Females	Alaska Female Population	Alaska Native Females	Alaska Female Population		
0-4	7,644	30,528	6,551	27,663	-14.3%	-9.4%
5-9	7,236	30,494	7,393	29,877	2.2%	-2.0%
10-14	6,548	28,445	6,921	29,680	5.7%	4.3%
15-19	6,155	25,926	6,054	25,553	-1.6%	-1.4%
20-24	5,850	26,583	5,333	23,144	-8.8%	-12.9%
25-29	5,925	29,927	5,612	27,618	-5.3%	-7.7%
30-34	5,122	29,391	5,727	30,164	11.8%	2.6%
35-39	4,170	24,618	4,903	28,317	17.6%	15.0%
40-44	3,623	22,459	3,910	23,205	7.9%	3.3%
45-49	3,710	22,964	3,435	21,183	-7.4%	-7.8%
50-54	4,257	26,180	3,506	21,687	-17.6%	-17.2%
55-59	3,969	26,640	3,955	24,199	-0.4%	-9.2%
60-64	3,149	22,443	3,636	23,806	15.5%	6.1%
65-69	2,192	15,288	2,739	19,328	25.0%	26.4%
70-74	1,421	9,573	1,818	13,060	27.9%	36.4%
75-79	901	5,793	1,147	7,968	27.3%	37.5%
80-84	697	3,973	686	4,540	-1.6%	14.3%
85+	496	3,912	585	4,373	17.9%	11.8%
Total	**73,065**	**385,137**	**73,911**	**385,365**	**1.2%**	**0.1%**

Table C-4: Adults Aged 25 Years and Older Who Completed at Least High School, 2009-2013 to 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People Statewide		Alaska Whites Statewide	
Years	%	MOE (+/-)	%	MOE (+/-)
2009-2013	80.6%	1.5	94.9%	1.0
2010-2014	80.8%	1.3	95.1%	0.9
2011-2015	81.5%	1.3	95.3%	0.9
2012-2016	81.9%	1.7	95.4%	0.9
2013-2017	82.1%	1.6	95.5%	0.9
2014-2018	83.1%	1.7	95.5%	0.9
2015-2019	83.0%	1.7	95.6%	1.0

Table C-5: Highest Educational Attainment, Adults 25 Years and Older, 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People Statewide		Alaska Whites Statewide	
	%	MOE (+/-)	%	MOE (+/-)
Less than high school	17.0%	0.8	4.4%	0.2
High school diploma, GED or alternative	45.8%	1.1	24.2%	0.5
Some college or associate's degree	29.7%	1.1	35.9%	0.6
Bachelor's degree or higher	7.5%	0.7	35.5%	0.6

MOE: Margin of Error is based on a 90% confidence interval.

Appendix C - Data Tables

Table C-6: Percent of Alaska Native Adults Aged 25 Years and Older Who Completed at Least High School by Tribal Health Region, 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People
	%
Yukon-Kuskokwim	76.9%
Northwest Arctic	78.1%
Arctic Slope	79.1%
Norton Sound	80.5%
Bristol Bay	81.9%
Interior	82.1%
Kenai Peninsula	83.3%
Aleutians & Pribilofs	84.2%
Kodiak Area	86.0%
Anchorage/Mat-Su	86.7%
Southeast	87.9%
Copper River/Prince William Sound	91.2%
Statewide	**83.0%**

Table C-7: Unemployment, All Races, 1995-2020

Data Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section; U.S. Census Bureau, Current Population Survey

	Alaska Unemployment (All Races)		U.S. Unemployment (All Races)	
Year	n	%	n	%
1995	22,271	7.3%	7,404,000	5.6%
1996	23,519	7.6%	7,236,000	5.4%
1997	22,372	7.1%	6,739,000	4.9%
1998	20,046	6.3%	6,210,000	4.5%
1999	20,588	6.5%	5,880,000	4.2%
2000	20,365	6.4%	5,692,000	4.0%
2001	20,662	6.4%	6,801,000	4.7%
2002	23,820	7.3%	8,378,000	5.8%
2003	25,946	7.8%	8,774,000	6.0%
2004	25,100	7.5%	8,149,000	5.5%
2005	23,748	6.9%	7,591,000	5.1%
2006	23,149	6.6%	7,001,000	4.6%
2007	22,206	6.3%	7,078,000	4.6%
2008	23,824	6.7%	8,924,000	5.8%
2009	27,854	7.7%	14,265,000	9.3%
2010	28,497	7.9%	14,825,000	9.6%
2011	27,735	7.6%	13,747,000	8.9%
2012	26,066	7.1%	12,506,000	8.1%
2013	25,259	6.9%	11,460,000	7.4%
2014	25,086	6.9%	9,617,000	6.2%
2015	23,595	6.5%	8,296,000	5.3%
2016	23,824	6.6%	7,751,000	4.9%
2017	23,497	6.5%	6,982,000	4.4%
2018	21,166	5.9%	6,314,000	3.9%
2019	19,134	5.4%	6,001,000	3.7%
2020	27,195	7.8%	12,947,000	8.1%

Note: The data presented here are for all races and are not seasonally adjusted.

Appendix C - Data Tables

Table C-8: Percent of Population That Is Unemployed by Tribal Health Region, All Races, 2020

Data Source: Alaska Department of Labor and Workforce Development

	Alaska All Races	
	#	%
Aleutians & Pribilofs	269	4.3%
Arctic Slope	189	5.9%
Kodiak Area	380	6.2%
Interior	3445	6.8%
Anchorage/Mat-Su	14,961	7.6%
Southeast	2,912	8.3%
Bristol Bay	239	8.4%
Copper River/Prince William Sound	395	8.7%
Kenai Peninsula	2,393	9.1%
Norton Sound	411	10.5%
Northwest Arctic	352	12.0%
Yukon-Kuskokwim	1,250	13.5%
Statewide	**27,195**	**7.8%**

Note: The data presented here are for all races and are not seasonally adjusted.

Table C-9: Estimated Percent of People Living Below the Federal Poverty Level, All Ages, 2009-2013 to 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People Statewide		Alaska Whites Statewide	
Years	**%**	**MOE (+/-)**	**%**	**MOE (+/-)**
2009-2013	21.8%	1.0	6.8%	0.4
2010-2014	22.6%	1.0	6.7%	0.3
2011-2015	23.2%	0.9	6.7%	0.3
2012-2016	23.3%	0.9	6.5%	0.3
2013-2017	23.8%	0.8	6.7%	0.4
2014-2018	23.8%	1.0	7.1%	0.4
2015-2019	24.0%	1.5	7.2%	0.5

MOE: Margin of Error based on 90% confidence interval.

Table C-10: Estimated Percent of Alaska Native People Living Below the Federal Poverty Level by Age Group, 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People Statewide	
Age Group	**%**	**MOE (+/-)**
All ages	24.0%	1.5
Under 18 years	29.8%	0.5
18-64 years	23.1%	0.9
65 years and over	9.0%	0.1

MOE: Margin of Error based on 90% confidence interval.

Appendix C - Data Tables

Table C-11: Estimated Percent of Alaska Native People Living Below the Poverty Threshold by Tribal Health Region, 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People
Aleutians & Pribilofs	15.6%
Arctic Slope	16.2%
Anchorage/Mat-Su	19.0%
Southeast	19.4%
Bristol Bay	19.8%
Interior	19.9%
Kenai Peninsula	20.9%
Copper River/Prince William Sound	21.7%
Norton Sound	26.8%
Northwest Arctic	30.6%
Kodiak Area	32.7%
Yukon-Kuskokwim	34.9%
Statewide	**24.0%**

Table C-12: Estimated Median Household Income, 2006-2010 to 2015-2019

Data Source: U.S. Census Bureau, American Community Survey

	Alaska Native People Statewide		Alaska Whites Statewide	
	Median Income	MOE (+/-)	Median Income	MOE (+/-)
2006-2010	$42,582	$1,321	$72,955	$858
2007-2011	$44,315	$1,444	$75,201	$952
2008-2012	$45,172	$1,336	$76,515	$863
2009-2013	$44,964	$1,666	$77,087	$745
2010-2014	$45,624	$1,476	$78,752	$987
2011-2015	$45,997	$1,447	$79,475	$1,037
2012-2016	$46,222	$1,983	$81,971	$1,045
2013-2017	$47,397	$1,845	$83,478	$1,083
2014-2018	$49,834	$1,682	$84,799	$1,039
2015-2019	$49,959	$2,115	$85,298	$1,113

MOE: Margin of Error based on 90% confidence interval.

Table C-13: Leading Causes of Death, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	Rate	Deaths	Rate
Cancer	803	196.3	3,092	136.5
Heart Disease	750	183.3	2,531	120.8
Unintentional Injuries	601	116.9	1,092	48.1
Suicide	286	39.9	491	20.3
COPD	229	56.0	635	31.1
Chronic Liver Disease & Cirrhosis	188	46.0	285	10.5
Cerebrovascular Diseases	176	43.0	627	34.5
Alcohol Abuse	116	28.4	88	3.0
Homicide	107	26.2	159	6.9
Influenza & Pneumonia	94	23.0	145	7.9
All Causes	**4,566**	**1,077.7**	**13,337**	**635.9**

Appendix C - Data Tables

Table C-14: Leading Causes of Death by Sex, Alaska Native People, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Males		Alaska Native Females	
	Deaths	**Rate**	**Deaths**	**Rate**
Heart Disease	451	254.3	299	141.7
Cancer	406	235.5	397	188.2
Unintentional Injuries	375	208.7	226	107.1
Suicide	214	105.8	72	34.1
COPD	117	69.6	112	53.1
Alcohol Abuse	79	42.3	37	15.3
Cerebrovascular Diseases	77	36.7	99	46.9
Homicide	68	36.2	39	18.5
Chronic Liver Disease & Cirrhosis	51	29.6	137	64.9
Influenza & Pneumonia	43	27.3	51	24.2
All Causes	**2,479**	**1,165.4**	**2,084**	**938.4**

Table C-15: Life Expectancy at Birth, 1984-1988 to 2014-2018

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide	Alaska Whites Statewide
1984-1988	67.0	73.9
1989-1993	68.3	74.8
1994-1998	69.8	75.9
1999-2003	70.2	76.5
2004-2008	70.5	77.1
2009-2013	70.7	77.7
2014-2018	70.4	79.3

Table C-16: Alaska Native Life Expectancy in Years by Tribal Health Region, 2014-2018

Data Source: Alaska Health Analytics and Vital Records Section

	Alaska Native People
Kenai Peninsula	74.4
Southeast	72.8
Kodiak Area	72.2
Bristol Bay	71.7
Anchorage/Mat-Su	70.1
Copper River/Prince William Sound	70.0
Interior	70.0
Norton Sound	69.5
Yukon-Kuskokwim	69.4
Arctic Slope	69.3
Aleutians & Pribilofs	69.2
Northwest Arctic	68.2
Statewide	**70.4**

Appendix C - Data Tables

Table C-17: Age-Adjusted All-Cause Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	Rate	Deaths	Rate
1984-1987	2,122	1,207.3	6,190	997.2
1988-1991	2,223	1,156.8	6,364	895.2
1992-1995	2,384	1,194.2	7,403	858.5
1996-1999	2,442	1,139.6	7,936	798.3
2000-2003	2,771	1,125.7	9,136	768.7
2004-2007	3,026	1,135.6	9,805	694.3
2008-2011	3,382	1,133.1	11,003	676.7
2012-2015	3,716	1,151.7	12,361	661.2
2016-2019	4,566	1,077.7	13,337	635.9

Table C-18: Age-Adjusted All-Cause Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	Rate	Deaths	Rate
Male	2,479	1,165.4	7,725	742.0
Female	2,084	938.4	5,612	531.4
Both Genders Combined	**4,566**	**1,077.7**	**13,337**	**635.9**

Table C-19: Age-Adjusted Alaska Native All-Cause Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	Rate
Copper River/Prince William Sound	70	1,299.4
Northwest Arctic	242	1,148.2
Aleutians & Pribilofs	49	1,101.9
Interior	525	1,095.6
Southeast	609	1,086.0
Anchorage/Mat-Su	1,468	1,041.6
Yukon-Kuskokwim	709	1,039.1
Kodiak Area	74	1,034.5
Norton Sound	281	1,004.8
Arctic Slope	163	970.2
Kenai Peninsula	180	859.5
Bristol Bay	193	847.5
Statewide	**4,566**	**1,077.7**

Note: There were 3 deaths with unknown region during 2016-2019.

Appendix C - Data Tables

Table C-20: Infant Mortality Rate, 1987-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Deaths	Rate per 1,000 Live Births	Deaths	Rate per 1,000 Live Births
1987	47	16.4	52	6.5
1988	47	16.2	50	6.7
1989	47	15.6	47	6.1
1990	53	17.6	50	6.3
1991	38	13.0	52	6.6
1992	31	10.7	53	6.7
1993	32	12.2	33	4.4
1994	27	10.7	42	5.8
1995	28	11.2	34	4.9
1996	28	10.8	34	5.1
1997	26	10.0	29	4.5
1998	18*	6.7	31	4.8
1999	22	8.2	23	3.7
2000	29	10.4	30	4.8
2001	36	12.7	34	5.5
2002	15*	5.5	23	3.7
2003	23	8.2	32	5.1
2004	29	10.0	25	3.9
2005	23	7.5	28	4.4
2006	34	11.2	25	3.7
2007	35	11.3	25	3.7
2008	34	10.6	18*	2.6
2009	30	9.0	27	4.0
2010	13*	4.0	15*	2.2
2011	15*	4.7	18*	2.6
2012	22	7.1	28	4.2
2013	25	8.9	25	3.5
2014	48	16.1	35	5.4
2015	43	14.4	31	4.8
2016	36	11.6	21	3.3
2017	28	9.9	20	3.4
2018	34	12.2	18*	3.2
2019	28	10.3	16*	2.9

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Appendix C - Data Tables

Table C-21: Alaska Native Neonatal and Postneonatal Deaths, 2006-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Neonatal		Postneonatal	
	Deaths	Rate per 1,000 Live Births	Deaths	Rate per 1,000 Live Births
2006	13*	4.3	21	6.9
2007	13*	4.2	22	7.1
2008	11*	3.4	23	7.2
2009	11*	3.3	19*	5.7
2010	N/A	N/A	9*	2.8
2011	6*	1.9	9*	2.8
2012	12*	3.9	10*	3.2
2013	8*	2.8	17*	6.0
2014	13*	4.4	35	11.7
2015	19*	6.4	24	8.1
2016	13*	4.2	23	7.4
2017	11*	3.9	17*	6.0
2018	14*	5.0	20	7.2
2019	9*	3.3	19*	7.0

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Table C-22: Leading Causes of Alaska Native Infant Mortality, 2005-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Number	% of Infant Deaths	Number	% of Infant Deaths
Perinatal Conditions	88	22.2%	125	32.5%
Congenital Malformations	64	16.1%	94	24.4%
SIDS	64	16.1%	44	11.4%
Unintentional Injuries	49	12.3%	34	8.8%
Influenza & Pneumonia	11*	2.8%	N/A	N/A
Other	121	30.5%	86	22.3%
Total	**397**	**100.0%**	**385**	**100.0%**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Table C-23: Alaska Native Infant Mortality Rate per 1,000 Live Births by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Number	Rate per 1,000 Live Births
Yukon-Kuskokwim	59	18.2
Northwest Arctic	15	16.5
Arctic Slope	7*	12.8
Interior	18	11.9
Norton Sound	8*	9.8
Anchorage/Mat-Su	42	9.2
Southeast	10*	8.5
Statewide	**169**	**11.7**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

N/A - Not applicable or not available

Appendix C - Data Tables

Table C-24: Age-Adjusted All-Cause Years of Potential Life Lost per 100,000, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Mean YPLL	YPLL per 100,000	Mean YPLL	YPLL per 100,000
1984-1987	34.6	17,858.5	28.1	7,554.0
1988-1991	34.4	16,163.6	26.1	6,677.7
1992-1995	31.6	14,270.9	24.2	6,440.4
1996-1999	28.9	12,599.1	22.0	5,634.5
2000-2003	28.6	13,126.5	21.8	5,641.0
2004-2007	27.9	12,968.7	21.4	5,461.7
2008-2011	26.7	13,089.9	19.4	5,088.7
2012-2015	26.7	14,024.5	18.7	5,298.6
2016-2019	26.7	14,395.9	18.5	6,207.1

Table C-25: Leading Causes of Years of Potential Life Lost, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Both Genders		Alaska Native Males		Alaska Native Females	
	YPLL	Mean YPLL	YPLL	Mean YPLL	YPLL	Mean YPLL
Unintentional injuries	19,955	36.5	12,663	36.5	7,292	36.6
Suicide	12,850	45.6	9,746	46.2	3,104	43.7
Cancer	8,286	14.8	4,112	14.4	4,174	15.2
Heart Disease	7,772	17.6	5,013	17.2	2,759	18.4
Chronic Liver Disease & Cirrhosis	4,869	26.6	1,215	24.8	3,654	27.3
Homicide	4,397	41.1	2,711	39.9	1,686	43.2
Alcohol Abuse	2,276	21.1	1,332	18.0	944	27.8
Congenital Malformations	2,124	60.7	1,314	59.7	810	62.3
Perinatal Conditions	1,725	75.0	1,125	75.0	600	75.0
COPD	1,284	10.1	655	9.4	629	11.0
All Causes	**85,393**	**26.7**	**50,587**	**27.5**	**34,806**	**25.6**

Table C-26: Age-Adjusted Cancer Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	Rate	Deaths	Rate
1984-1987	344	232.2	1,230	208.0
1988-1991	356	229.3	1,367	198.7
1992-1995	422	247.2	1,663	195.0
1996-1999	498	248.0	1,865	179.1
2000-2003	545	244.0	2,118	174.1
2004-2007	620	243.7	2,296	158.1
2008-2011	678	233.3	2,697	158.9
2012-2015	752	242.7	3,114	154.5
2016-2019	803	196.3	3,092	136.5

Appendix C - Data Tables

Table C-27: Age-Adjusted Cancer Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
Male	406	235.5	1,749	160.2
Female	397	188.2	1,343	116.3
Both Genders Combined	**803**	**196.3**	**3,092**	**136.5**

Table C-28: Age-Adjusted Alaska Native Cancer Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	**Rate**
Kodiak Area	18*	271.0
Interior	101	227.0
Copper River/Prince William Sound	11*	219.9
Aleutians & Pribilofs	9*	218.0
Arctic Slope	34	217.9
Southeast	108	207.4
Kenai Peninsula	38	195.4
Bristol Bay	40	189.2
Norton Sound	48	184.8
Northwest Arctic	36	183.9
Anchorage/Mat-Su	238	181.9
Yukon-Kuskokwim	114	179.9
Statewide	**803**	**196.3**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Table C-29: Age-Adjusted Heart Disease Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
1984-1987	345	274.4	1,532	333.8
1988-1991	374	273.8	1,532	272.2
1992-1995	382	258.7	1,774	249.3
1996-1999	381	226.7	1,867	213.9
2000-2003	435	218.7	2,140	196.5
2004-2007	429	193.7	2,064	156.9
2008-2011	556	201.5	2,277	146.0
2012-2015	618	208.2	2,391	133.3
2016-2019	750	183.3	2,531	120.8

Table C-30: Age-Adjusted Heart Disease Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
Male	451	254.3	1,617	154.3
Female	299	141.7	914	88.3
Both Genders Combined	**750**	**183.3**	**2,531**	**120.8**

Appendix C - Data Tables

Table C-31: Age-Adjusted Alaska Native Heart Disease Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	**Rate**
Copper River/Prince William Sound	12*	239.9
Northwest Arctic	46	235.0
Norton Sound	55	211.8
Southeast	108	207.4
Interior	84	188.8
Anchorage/Mat-Su	233	178.0
Kenai Peninsula	34	174.8
Yukon-Kuskokwim	104	164.2
Arctic Slope	25	160.3
Aleutians & Pribilofs	6*	145.3
Bristol Bay	30	141.9
Kodiak Area	8*	120.4
Statewide	**750**	**183.3**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Table C-32: Age-Adjusted Unintentional Injury Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
1984-1987	492	160.2	1,038	73.4
1988-1991	458	156.1	923	69.5
1992-1995	450	137.0	842	63.5
1996-1999	374	120.6	748	49.8
2000-2003	386	102.6	928	50.2
2004-2007	378	97.2	878	43.6
2008-2011	373	98.6	940	44.2
2012-2015	401	99.4	890	38.9
2016-2019	601	116.9	1,092	48.1

Note: Caution is advised when comparing data between time periods due to changes in ICD code categorization for unintentional injury deaths.

Table C-33: Unintentional Injury Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
Male	375	208.7	779	66.1
Female	226	107.1	313	29.1
Both Genders Combined	**601**	**116.9**	**1,092**	**48.1**

Appendix C - Data Tables

Table C-34: Age-Adjusted Alaska Native Unintentional Injury Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	**Rate**
Northwest Arctic	42	214.6
Yukon-Kuskokwim	112	176.8
Norton Sound	41	157.9
Interior	69	155.1
Anchorage/Mat-Su	191	145.9
Aleutians & Pribilofs	6*	145.3
Bristol Bay	27	127.7
Southeast	66	126.7
Copper River/Prince William Sound	6*	119.9
Kodiak Area	7*	105.4
Arctic Slope	16*	102.6
Kenai Peninsula	14*	72.0
Statewide	**601**	**116.9**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Table C-35: Age-Adjusted COPD Mortality Rate per 100,000 Population, 1984-1987 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
1984-1987	49	40.7	194	43.7
1988-1991	78	57.3	251	45.7
1992-1995	89	61.4	304	43.8
1996-1999	113	69.1	373	46.5
2000-2003	123	64.4	430	43.3
2004-2007	129	59.1	463	36.9
2008-2011	174	73.5	565	38.7
2012-2015	183	68.0	607	35.2
2016-2019	229	56.0	635	31.1

Table C-36: Age-Adjusted COPD Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
Male	117	69.6	308	31.6
Female	112	53.1	327	31.0
Both Genders Combined	**229**	**56.0**	**635**	**31.1**

Appendix C - Data Tables

Table C-37: Age-Adjusted Alaska Native COPD Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	**Rate**
Aleutians & Pribilofs	5*	116.8
Kodiak Area	7*	101.6
Norton Sound	24	89.1
Southeast	40	74.1
Kenai Peninsula	13*	64.5
Arctic Slope	9*	55.6
Northwest Arctic	11*	54.2
Anchorage/Mat-Su	63	46.4
Interior	19*	41.2
Bristol Bay	8*	36.5
Yukon-Kuskokwim	23	35.0
Statewide	**229**	**56.0**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Table C-38: Age-Adjusted Suicide Mortality Rate per 100,000 Population, 1996-1999 to 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
1996-1999	161	36.2	328	17.6
2000-2003	164	35.5	329	16.1
2004-2007	201	43.7	359	16.4
2008-2011	195	39.7	420	17.4
2012-2015	207	40.9	446	17.9
2016-2019	286	39.9	491	20.3

Table C-39: Age-Adjusted Suicide Mortality Rate by Sex, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Deaths	**Rate**	**Deaths**	**Rate**
Male	214	105.8	396	31.9
Female	72	34.1	95	7.8
Both Genders Combined	**286**	**39.9**	**491**	**20.3**

Appendix C - Data Tables

Table C-40: Age-Adjusted Suicide Mortality Rate per 100,000 by Tribal Health Region, 2016-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Deaths	**Rate**
Northwest Arctic	27	118.3
Yukon-Kuskokwim	69	93.3
Kodiak Area	7*	90.3
Norton Sound	19*	62.7
Interior	29	55.9
Arctic Slope	10*	54.9
Anchorage/Mat-Su	80	52.4
Bristol Bay	11*	44.6
Kenai Peninsula	8*	35.3
Southeast	18*	29.6
Statewide	**286**	**39.9**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Table C-41: Cancer Incidence Rate per 100,000 Population, 1969-1973 to 2014-2018

Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry; National Cancer Institute, Surveillance Epidemiology and End Results Program (SEER)

	Alaska Native People Statewide			U.S. Whites		
	Number	**Age-Adjusted Incidence Rate per 100,000**	**95% Confidence Interval**	**Age-Adjusted Incidence Rate per 100,000**	**95% Confidence Interval**	**Rate Ratio**
1969-1973	394	376.8	(335.0-422.3)	-	-	-
1974-1978	493	373.1	(337.4-411.6)	407.9	(406.3-409.6)	0.9
1979-1983	624	422.2	(385.7-461.4)	424.9	(423.4-426.3)	1.0
1984-1988	842	467.6	(433.2-504.1)	460.0	(458.6-461.4)	1.0
1989-1993	1,021	467.5	(436.8-499.8)	497.9	(496.5-499.4)	0.9
1994-1998	1,312	493.7	(465.2-523.5)	489.5	(488.1-490.9)	1.0
1999-2003	1,591	516.8	(489.9-544.8)	496.7	(495.4-498.1)	1.0
2004-2008	1,850	506.6	(482.1-531.9)	489.0	(487.7-490.3)	1.0
2009-2013	2,169	513.5	(490.6-537.3)	469.4	(468.1-470.6)	1.1
2014-2018	2,401	497.6	(476.7-519.2)	450.9	(449.6-452.2)	1.1

Appendix C - Data Tables

Table C-42: Cancer Incidence by Cancer Site, Alaska Native People Statewide, 2014-2018

Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry

	Alaska Native People Statewide			
	Number	Age-Adjusted Incidence Rate per 100,000	95% Confidence Interval	% of Total
Colon and Rectum	405	87.6	(78.8-97.1)	16.9%
Lung and Bronchus	373	83.0	(74.3-92.4)	15.5%
Breast (Women Only)	340	130.8	(116.7-146.0)	14.2%
Kidney and Renal Pelvis	150	28.9	(24.3-34.1)	6.2%
Prostate (Men Only)	126	61.2	(49.9-74.2)	5.2%
Pancreas	84	18.5	(14.5-23.2)	3.5%
Stomach	82	17.2	(13.5-21.5)	3.4%
Thyroid	80	15.0	(11.8-18.9)	3.3%
Urinary Bladder	60	13.9	(10.4-18.3)	2.5%
Corpus Uteri (Women Only)	40	13.7	(9.7-18.8)	1.7%
All Others	661	-	-	27.5%
All Sites	**2,401**	**497.6**	**(476.7-519.2)**	**100.0%**

Table C-43: Trends in Cancer Incidence Rate by Cancer Site (Age-Adjusted Rate per 100,000), Alaska Native People, 2004-2008 to 2014-2018

Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry

	Colon & Rectum			Lung & Bronchus			Breast (Women Only)			Kidney & Renal Pelvis		
	Number	Rate	95% Confidence Interval	Number	Rate	95% Confidence Interval	Number	Rate	95% Confidence Interval	Number	Rate	95% Confidence Interval
2004-2008	312	89.3	(79.0-100.5)	316	97.7	(86.7-109.8)	285	131.7	(116.5-148.5)	77	21.9	(16.9-27.9)
2009-2013	371	90.9	(81.2-101.3)	336	90.3	(80.3-101.3)	342	144.2	(128.7-160.9)	112	25	(20.3-30.4)
2014-2018	405	87.6	(78.8-97.1)	373	83.0	(74.3-92.4)	340	130.8	(116.7-146.0)	150	28.9	(24.3-34.1)

Table C-44: Age-Adjusted Alaska Native Cancer Incidence Rate per 100,000 by Tribal Health Region, 2014-2018

Data Source: Alaska Native Tribal Health Consortium, Alaska Native Tumor Registry

	Alaska Native People		
	Number	Age-Adjusted Incidence Rate per 100,000	95% Confidence Interval
Arctic Slope	112	590.2	(480.8-717.1)
Anchorage/Mat-Su	767	573.7	(529.6-620.6)
Interior	338	568.8	(506.9-636.2)
Kodiak Area	47	536.4	(389.1-721.2)
Norton Sound	141	531.9	(439.2-638.4)
Southeast	361	502.8	(450.7-559.3)
Aleutians & Pribilofs	51	493.4	(361.4-657.7)
Bristol Bay	97	436.4	(349.6-538.2)
Northwest Arctic	98	434.8	(350.9-532.8)
Kenai Peninsula	103	425.1	(336.9-529.2)
Copper River/Prince William Sound	28	401.8	(257.5-597.8)
Yukon-Kuskokwim	258	352.9	(307.4-403.3)
Statewide	**2,401**	**497.6**	**(476.7-519.2)**

Appendix C - Data Tables

Table C-45: Age-Adjusted Alaska Native Prevalence of Diagnosed Diabetes, 2009-2019

Data Source: Alaska Native Medical Center Diabetes Registry

	Alaska Native People Statewide	
	Number	**%**
2009	3,938	5.2%
2010	4,178	4.7%
2011	4,411	4.8%
2012	4,599	5.0%
2013	4,839	5.1%
2014	5,056	5.2%
2015	5,739	5.8%
2016	6,026	6.1%
2017	6,247	6.2%
2018	6,435	6.2%
2019	6,602	6.3%

Table C-46: Age-Adjusted Alaska Native Prevalence of Diagnosed Diabetes by IHS Service Unit, 2019

Data Source: Alaska Native Medical Center Diabetes Registry

	Alaska Native People Statewide (All Ages)	
	Number	**%**
Annette Island	145	11.0%
Anchorage	2,942	8.1%
Interior	804	6.9%
Mt. Edgecumbe	956	6.8%
Dillingham	296	5.6%
Barrow	218	5.5%
Kotzebue	283	4.6%
Bethel	709	4.0%
Norton Sound	249	3.7%
Statewide	**6,602**	**6.3%**

Table C-47: Age-Adjusted Chlamydia Incidence Rate per 100,000 Population, 2004-2018

Data Source: Alaska Department of Health and Social Services, HIV/STD Program

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Number	**Rate**	**Number**	**Rate**
2004	1,835	1,439.9	2,150	374.3
2005	2,113	1,636.4	2,225	378.6
2006	2,298	1,768.6	2,215	368.8
2007	2,390	1,817.9	2,497	410.3
2008	2,462	1,855.8	2,383	387.8
2009	2,617	1,899.0	2,598	421.2
2010	2,849	2,023.8	3,177	510.6
2011	2,749	1,927.7	3,063	491.7
2012	2,545	1,564.7	2,937	437.0
2013	2,601	1,632.3	3,191	477.4
2014	2,618	1,653.8	3,110	463.9
2015	2,633	1,604.6	3,015	509.1
2016	2,796	1,728.6	2,901	499.0
2017	2,970	1,855.8	2,968	516.2
2018	2,992	1,991.3	3,160	565.2

Note: Number and rate do not include cases designated as multi-racial or with unknown race. There were 65 multi-racial cases and 631 unknown race cases during 2018. Caution is advised when comparing data between years because changes to racial classification have occurred over time.

Appendix C - Data Tables

Table C-48: Unadjusted Alaska Native Chlamydia Incidence Rate per 100,000 by Tribal Health Region, 2018

Data Source: Alaska Division of Public Health, HIV/STD Program

	Alaska Native People	
	Number	**Rate**
Norton Sound	281	3,450.4
Yukon-Kuskokwim	811	3,432.4
Northwest Arctic	212	3,211.6
Anchorage/Mat-Su	1,027	1,988.3
Interior	306	1,835.4
Arctic Slope	81	1,785.8
Bristol Bay	99	1,665.3
Copper River/Prince William Sound	20	1,076.4
Kodiak Area	15*	619.3
Aleutians & Pribilofs	8*	552.1
Kenai Peninsula	40	545.3
Southeast	92	534.4
Statewide	**2,992**	**2,022.3**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Table C-49: Age-Adjusted Gonorrhea Incidence Rates per 100,000 Population, 2004-2018

Data Source: Alaska Division of Public Health, HIV/STD Program

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	Number	**Rate**	**Number**	**Rate**
2004	310	256.3	267	46.2
2005	316	269.0	285	49.0
2006	290	240.6	338	57.2
2007	268	227.0	311	51.2
2008	342	279.8	228	37.2
2009	670	541.1	334	53.7
2010	937	724.0	336	54.6
2011	706	535.8	287	46.0
2012	557	387.6	174	25.9
2013	647	439.1	456	68.0
2014	741	510.6	582	87.6
2015	644	426.3	470	77.9
2016	803	535.2	651	109.5
2017	1,155	778.0	1,035	174.8
2018	1,077	730.6	1,178	203.1

Note: Number and rate do not include cases designated as multi-racial or with unknown race. There were 32 multi-racial cases and 167 unknown race cases during 2018. Caution is advised when comparing data between years because changes to racial classification have occurred over time.

Appendix C - Data Tables

Table C-50: Unadjusted Alaska Native Gonorrhea Incidence Rate per 100,000 by Tribal Health Region, 2018

Data Source: Alaska Division of Public Health, HIV/STD Program

	Alaska Native People	
	Number	**Rate**
Northwest Arctic	91	1,378.6
Anchorage/Mat-Su	624	1,208.1
Interior	122	731.8
Norton Sound	48	589.4
Yukon-Kuskokwim	130	550.2
Bristol Bay	15*	267.5
Arctic Slope	12*	205.3
Kenai Peninsula	13*	177.2
Southeast	12*	69.7
Statewide	**1,077**	**726.0**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Table C-51: Adult Tooth Loss, 2004–2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	**95% Confidence**	**%**	**95% Confidence**
2004	65.4%	(60.4%-70.1%)	43.0%	(40.2%-45.8%)
2006	57.6%	(52.0%-63.0%)	39.5%	(36.6%-42.4%)
2008	64.3%	(59.1%-69.3%)	41.8%	(38.8%-44.9%)
2010	57.3%	(50.1%-64.2%)	39.9%	(36.3%-43.6%)
2012	58.9%	(54.5%-63.1%)	41.2%	(39.2%-43.2%)
2014	60.5%	(56.1%-64.7%)	39.3%	(37.0%-41.6%)
2016	50.4%	(43.3%-57.6%)	41.1%	(37.7%-44.4%)
2018	51.7%	(45.8%-57.6%)	36.5%	(33.9%-39.2%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-52: Percent of Alaska Native Adults With Tooth Loss by Tribal Health Region, 3-year Aggregate, 2014, 2016, and 2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	**95% Confidence Interval**
Anchorage/Mat-Su	40.4%	(33.3%-47.4%)
Southeast	53.4%	(45.4%-61.4%)
Interior	55.3%	(47.7%-62.9%)
Bristol Bay	56.5%	(45.0%-67.9%)
Northwest Arctic	56.7%	(42.8%-70.7%)
Aleutians & Pribilofs	56.8%	(38.8%-74.8%)
Kenai Peninsula	61.2%	(45.9%-76.5%)
Norton Sound	62.8%	(49.6%-75.9%)
Yukon-Kuskokwim	67.4%	(57.4%-77.5%)
Statewide	**53.4%**	**(49.9%-56.9%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Appendix C - Data Tables

Table C-53: Unadjusted Birth Rate per 1,000 Population, 1997-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People Statewide		Alaska Whites Statewide	
	Births	Rate	Births	Rate
1997	2,311	22.8	6,419	14.1
1998	2,341	22.6	6,450	14.1
1999	2,342	22.2	6,306	13.7
2000	2,448	22.7	6,204	13.5
2001	2,492	23.0	6,236	13.5
2002	2,392	21.9	6,181	13.2
2003	2,453	22.2	6,303	13.3
2004	2,571	23.1	6,407	13.4
2005	2,699	23.9	6,344	13.1
2006	2,692	23.7	6,686	13.7
2007	2,764	24.3	6,656	13.5
2008	2,875	25.2	6,953	14.0
2009	2,948	25.4	6,708	13.4
2010	2,883	23.9	6,876	13.5
2011	2,823	23.0	6,847	13.3
2012	2,792	22.7	6,587	12.7
2013	2,362	19.2	7,163	13.8
2014	2,983	20.4	6,519	13.2
2015	2,981	20.2	6,430	13.1
2016	3,095	20.9	6,312	12.9
2017	2,821	19.0	5,827	12.0
2018	2,786	18.8	5,578	11.6
2019	2,725	18.4	5,435	11.4

Table C-54: Unadjusted Alaska Native Birth Rate per 1,000 Population by Tribal Health Region, 5-year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native People	
	Births	Rate per 1,000
Yukon-Kuskokwim	3,239	28.9
Northwest Arctic	911	26.3
Aleutians & Pribilofs	153	21.0
Arctic Slope	549	20.9
Anchorage/Mat-Su	4,562	20.6
Interior	1,513	19.9
Norton Sound	816	18.4
Bristol Bay	623	17.6
Copper River/Prince William Sound	148	16.9
Kenai Peninsula	533	16.3
Kodiak Area	180	15.7
Southeast	1,177	13.4
Statewide	**14,408**	**20.6**

Note: There were 4 births with unknown region during 2015-2019.

Appendix C - Data Tables

Table C-55: Teen Birth Rate, 1997-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Teens Statewide		Alaska White Teens Statewide	
	Births	Rate	Births	Rate
1997	351	81.1	544	35.5
1998	373	79.0	521	32.8
1999	374	74.1	499	30.8
2000	440	85.1	552	34
2001	447	81.2	476	27.9
2002	416	71.1	507	28.7
2003	412	68.1	499	28.3
2004	450	72.1	497	28.1
2005	427	67.1	458	26.1
2006	470	73.4	460	26.2
2007	451	71.7	476	27.4
2008	496	82.4	480	28.3
2009	473	81.4	463	27.8
2010	419	75.0	366	22.9
2011	390	72.3	350	22.6
2012	349	67.6	329	21.9
2013	244	47.3	301	20.5
2014	294	48.6	245	18.5
2015	324	52.6	221	17.3
2016	279	45.5	205	16.3
2017	245	40.0	155	12.6
2018	211	34.8	136	11.2
2019	204	33.5	115	9.6

Table C-56: Teen Births by Age Group and Race, 1994-1998 to 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Teens Statewide				Alaska White Teens Statewide			
	15-17 Years		18-19 Years		15-17 Years		18-19 Years	
	Births	Rate	Births	Rate	Births	Rate	Births	Rate
1994-1998	661	50.2	1,077	138.6	840	18.0	1,966	73.2
1999-2003	743	44.8	1,346	138.9	660	12.3	1,873	62.5
2004-2008	690	37.3	1,604	139.4	507	9.1	1,864	55.2
2009-2013	494	30.7	1,381	125.0	380	7.7	1,429	47.6
2015-2019	331	17.8	932	77.9	116	2.9	716	32.0

Appendix C - Data Tables

Table C-57: Alaska Native Teen Birth Rate per 1,000 by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Women	
	Births	**Rate per 1,000**
Northwest Arctic	120	87.1
Yukon-Kuskokwim	379	77.5
Aleutians & Pribilofs	15*	63.3
Arctic Slope	52	54.9
Norton Sound	97	54.3
Copper River/Prince William Sound	12*	48.4
Interior	107	36.6
Bristol Bay	48	33.4
Kodiak Area	17*	33.4
Anchorage/Mat-Su	302	33.2
Southeast	87	28.8
Kenai Peninsula	27	21.6
Statewide	**1,263**	**45.6**

Note: Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Table C-58: Prevalence of Birth Defects, Alaska Statewide, 2007-2017

Data Source: Alaska Division of Public Health, Alaska Birth Defects Registry

	Alaska Native Children Statewide		Alaska Non-Native Children Statewide	
	Number	**Rate per 10,000 Live Births**	**Number**	**Rate per 10,000 Live Births**
2007	174	556.8	312	320.3
2008	189	587.5	324	323.5
2009	203	608.5	315	319.1
2010	167	511.3	336	333.0
2011	169	527.1	337	333.2
2012	171	546.3	339	344.5
2013	180	701.5	339	328.0
2014	158	639.2	272	263.2
2015	166	672.6	323	313.6
2016	139	550.5	329	323.0
2017	149	651.2	254	266.4

Note: These data contain unconfirmed birth defects detected to the Alaska Birth Defects Report Registry. Caution is advised when comparing data between years because changes to inclusion criteria, collection methods, analyzation methods and race classification have occurred over time.

Appendix C - Data Tables

Table C-59: Leading Types of Birth Defects, Alaska Native Children, Statewide, 2014-2017

Data Source: Alaska Division of Public Health, Alaska Birth Defects Registry

	Alaska Native Children		Alaska Non-Native Children	
	Number	**% of all Defects**	**Number**	**% of all Defects**
Cardiovascular	519	33.3%	759	28.2%
Musculoskeletal	375	24.0%	707	26.2%
Orofacial	322	20.6%	440	16.3%
Genitourinary	127	8.1%	399	14.8%
Gastrointestinal	57	3.7%	63	2.3%
Chromosomal	55	3.5%	144	5.3%
Eye	53	3.4%	79	2.9%
Central Nervous System	42	2.7%	94	3.5%
Ear	10	0.6%	11	0.4%
Total	**1,560**	**100.0%**	**2,696**	**100.0%**

Note: These data contain unconfirmed birth defects detected to the Alaska Birth Defects Report Registry. The total number of birth defects do not equal the number of children with birth defects because children may have multiple defects.

Table C-60: Preterm Births (<37 weeks), 1997-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Sections

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Number	**%**	**Number**	**%**
1997	330	12.7%	572	7.3%
1998	350	13.1%	554	7.1%
1999	311	11.7%	627	8.0%
2000	320	11.6%	547	7.0%
2001	359	12.8%	515	6.6%
2002	321	11.8%	516	6.6%
2003	336	12.1%	622	7.9%
2004	334	11.5%	628	8.0%
2005	358	11.8%	612	7.8%
2006	351	11.5%	715	9.1%
2007	358	11.5%	628	8.0%
2008	399	12.5%	619	7.9%
2009	441	13.3%	612	7.8%
2010	364	11.2%	594	7.6%
2011	381	12.0%	618	7.9%
2012	344	11.1%	519	6.6%
2013	342	12.1%	622	7.9%
2014	325	10.9%	467	7.2%
2015	355	11.9%	491	7.6%
2016	350	11.3%	467	7.4%
2017	322	11.4%	424	7.3%
2018	329	11.8%	417	7.5%
2019	366	13.4%	417	7.7%

Appendix C - Data Tables

Table C-61: Length of Gestation, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Number	**%**	**Number**	**%**
<28 weeks	94	0.7%	99	0.3%
28-36 weeks	1,628	11.3%	2,117	7.2%
37-42 weeks	12,665	87.9%	27,331	92.4%
>42 weeks	21	0.1%	35	0.1%
Total	**14,408**	**100.0%**	**29,582**	**100.0%**

Table C-62: Percent of Alaska Native Births That Were Preterm (<37 Weeks) by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants	
	Number	**%**
Aleutians & Pribilofs	23	15.0%
Yukon-Kuskokwim	421	13.0%
Anchorage/Mat-Su	569	12.5%
Copper River/Prince William Sound	18*	12.2%
Northwest Arctic	109	12.0%
Interior	175	11.6%
Bristol Bay	72	11.6%
Norton Sound	93	11.4%
Southeast	125	10.6%
Arctic Slope	52	9.5%
Kenai Peninsula	49	9.2%
Kodiak Area	13*	7.2%
Statewide	**1,722**	**12.0%**

Note: There were 3 preterm births with unknown region during 2015-2019. Rates based on fewer than 20 cases are not statistically reliable and should be used with caution.

Appendix C - Data Tables

Table C-63: Low Birth Weight, 1997-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Number	%	Number	%
1997	136	5.2%	352	5.5%
1998	153	5.7%	348	5.4%
1999	136	5.1%	335	5.4%
2000	150	5.4%	293	4.7%
2001	160	5.7%	310	5.0%
2002	157	5.8%	311	5.1%
2003	163	5.9%	343	5.5%
2004	179	6.2%	360	5.6%
2005	157	5.2%	349	5.5%
2006	156	5.1%	392	5.8%
2007	156	5.0%	371	5.5%
2008	204	6.4%	363	5.2%
2009	201	6.1%	348	5.2%
2010	194	6.0%	355	5.1%
2011	184	5.8%	364	5.2%
2012	199	6.4%	321	4.8%
2013	164	5.8%	390	5.4%
2014	206	6.9%	329	5.0%
2015	189	6.3%	346	5.4%
2016	181	5.8%	324	5.1%
2017	189	6.7%	317	5.4%
2018	181	6.5%	265	4.8%
2019	206	7.6%	278	5.1%

Table C-64: Births by Birth Weight, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants Statewide		Alaska White Infants Statewide	
	Number	%	Number	%
<1,500 grams	189	1.3%	214	0.7%
1500-2499 grams	757	5.3%	1,316	4.4%
2500-3999 grams	11,310	78.5%	24,053	81.3%
≥4000 grams	2,152	14.9%	3,999	13.5%
Total	**14,408**	**100.0%**	**29,582**	**100.0%**

Table C-65: Percent of Alaska Native Births That Were Low Weight (<2,500 Grams) by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Infants	
	Number	%
Aleutians & Pribilofs	14*	9.2%
Northwest Arctic	66	7.2%
Anchorage/Mat-Su	324	7.1%
Yukon-Kuskokwim	221	6.8%
Interior	96	6.3%
Kenai Peninsula	33	6.2%
Copper River/Prince William Sound	9*	6.1%
Norton Sound	49	6.0%
Southeast	69	5.9%
Arctic Slope	31	5.6%
Bristol Bay	29	4.7%
Statewide	**946**	**6.6%**

Note: There was 1 low weight birth with unknown region during 2015-2019. Rates based on fewer than 20 cases are not statistically reliable and should be used with caution. Number and rate not reported for <5 cases.

Appendix C - Data Tables

Table C-66: First Trimester Prenatal Care Initiation, 2014-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Mothers Statewide		Alaska White Mothers Statewide	
	Total Births	%	Total Births	%
2014	1,923	64.5%	4,578	70.2%
2015	1,939	65.0%	4,709	73.2%
2016	2,061	66.6%	4,670	74.0%
2017	1,944	68.9%	4,361	74.8%
2018	1,856	66.6%	4,182	75.0%
2019	1,856	68.1%	3,996	73.5%

Note: This measure of prenatal care is based on the documented month that prenatal care began and is dependent on clinical and birth certificate documentation, and may underrepresent actual prenatal care received.

Table C-67: Prenatal Care Initiation by Trimester, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Mothers Statewide		Alaska White Mothers Statewide	
	Number	%	Number	%
1st Trimester	9,656	67.0%	21,918	74.1%
2nd Trimester	3,593	24.9%	5,366	18.1%
3rd Trimester	834	5.8%	1,353	4.6%
Unknown	325	2.3%	945	3.2%
Total	**14,408**	**100.0%**	**29,582**	**100.0%**

Table C-68: Percent of Alaska Native Mothers That Initiated First Trimester Prenatal Care by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Mothers	
	Number	%
Kodiak Area	139	77.2%
Aleutians & Pribilofs	117	76.5%
Anchorage/Mat-Su	3,358	73.6%
Southeast	853	72.5%
Northwest Arctic	649	71.2%
Norton Sound	571	70.0%
Interior	972	64.2%
Bristol Bay	394	63.2%
Arctic Slope	347	63.2%
Copper River/Prince William Sound	89	60.1%
Kenai Peninsula	317	59.5%
Yukon-Kuskokwim	1,848	57.1%
Statewide	**9,656**	**67.0%**

Note: There were 2 births that received first trimester prenatal care with unknown region during 2015-2019.

Appendix C - Data Tables

Table C-69: Prenatal Tobacco Use, 2014-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Mothers Statewide		Alaska White Mothers Statewide	
	Number	%	Number	%
2014	1,039	34.8%	591	9.1%
2015	1,057	35.5%	547	8.5%
2016	873	28.2%	508	8.0%
2017	745	26.4%	406	7.0%
2018	697	25.0%	375	6.7%
2019	647	23.7%	358	6.6%

Table C-70: Percent of Alaska Native Mothers Who Used Tobacco During Pregnancy by Tribal Health Region, 5-Year Aggregate, 2015-2019

Data Source: Alaska Division of Public Health, Alaska Health Analytics and Vital Records Section

	Alaska Native Mothers	
	Number	%
Arctic Slope	262	47.7%
Norton Sound	368	45.1%
Northwest Arctic	393	43.1%
Bristol Bay	246	39.5%
Aleutians & Pribilofs	56	36.6%
Copper River/Prince William Sound	50	33.8%
Kenai Peninsula	145	27.2%
Kodiak Area	42	23.3%
Anchorage/Mat-Su	1,025	22.5%
Interior	329	21.7%
Southeast	201	17.1%
Yukon-Kuskokwim	201	6.2%
Statewide	**3,319**	**23.0%**

Note: There was 1 reported use of prenatal tobacco with unknown region during 2015-2019.

Table C-71: No Alcohol Use in Last Three Months of Pregnancy, 2004-2019

Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System

AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Mothers Statewide	Alaska White Mothers Statewide
	%	%
2004	96.5%	96.0%
2005	95.4%	94.1%
2006	97.0%	95.0%
2007	97.2%	94.4%
2008	95.8%	92.5%
2009	96.4%	92.8%
2010	95.3%	92.0%
2011	94.6%	92.4%
2012	95.5%	92.7%
2013	95.4%	90.5%
2014	96.2%	91.4%
2015	96.6%	90.5%
2016	95.3%	96.1%
2017	96.2%	92.5%
2018	95.2%	93.3%
2019	94.4%	94.2%

Appendix C - Data Tables

Table C-72: Prenatal Physical Abuse by Husband, Partner, or Ex-partner, 2004-2019

Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System

AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Women Statewide	Alaska White Women Statewide
	%	%
2004	6.9%	1.3%
2005	5.3%	3.5%
2006	6.3%	2.1%
2007	4.4%	2.4%
2008	4.0%	2.6%
2009	6.6%	2.1%
2010	6.7%	3.2%
2011	4.1%	2.1%
2012	3.6%	1.1%
2013	4.8%	1.9%
2014	5.1%	1.7%
2015	5.8%	2.3%
2016	4.7%	1.2%
2017	5.8%	1.7%
2018	5.0%	2.3%
2019	6.1%	1.1%

Note: Starting in 2016, physical abuse includes abuse from an ex-partner.

Table C-73: Prenatal Emotional Abuse by Husband or Partner, 2004-2019

Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System

AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Women Statewide	Alaska White Women Statewide
	%	%
2004	9.3%	2.3%
2005	6.5%	3.4%
2006	6.5%	2.8%
2007	4.4%	3.3%
2008	7.3%	4.8%
2009	4.0%	1.8%
2010	6.5%	2.9%
2011	5.1%	3.0%
2012	3.3%	2.3%
2013	6.1%	3.7%
2014	3.7%	2.4%
2015	4.8%	3.3%
2016	7.4%	2.5%
2017	5.7%	2.7%
2018	4.8%	2.6%
2019	4.0%	1.5%

Appendix C - Data Tables

Table C-74: Breastfeeding Initiation, 2004-2019

Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Women Statewide	Alaska White Women Statewide
	%	%
2004	88.3%	93.3%
2005	89.5%	92.6%
2006	91.4%	94.4%
2007	88.7%	92.3%
2008	88.7%	92.7%
2009	90.8%	94.0%
2010	92.6%	94.2%
2011	93.6%	96.3%
2012	91.6%	96.0%
2013	94.5%	96.3%
2014	97.0%	96.4%
2015	94.8%	96.4%
2016	96.2%	96.2%
2017	91.3%	96.3%
2018	95.2%	96.1%
2019	90.8%	96.8%

Table C-75: Breastfeeding at 8 Weeks, 2004-2019

Data Source: Alaska Division of Public Health, Alaska Pregnancy Risk Assessment Monitoring System
AK Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Women Statewide	Alaska White Women Statewide
	%	%
2004	62.0%	73.8%
2005	66.9%	74.8%
2006	65.7%	76.3%
2007	60.9%	76.3%
2008	65.3%	75.9%
2009	64.2%	74.4%
2010	64.1%	78.4%
2011	68.6%	78.7%
2012	71.7%	82.1%
2013	71.3%	84.1%
2014	71.1%	85.2%
2015	76.4%	84.9%
2016	78.3%	87.2%
2017	74.1%	83.4%
2018	78.7%	85.4%
2019	73.9%	84.4%

Appendix C - Data Tables

Table C-76: Abstained from Sweetened Drinks on Previous Day, 3–Year–Old Children, 2014-2015 to 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

		Alaska Native Children Statewide	Alaska White Children Statewide
2014-2015	n (unweighted)	366	458
	% (weighted)	44.9%	82.5%
	95% Confidence Interval	(39.6%-50.3%)	(77.6%-86.6%)
2016-2017	n (unweighted)	387	497
	% (weighted)	45.6%	84.2%
	95% Confidence Interval	(40.5%-50.8%)	(79.7%-87.8%)
2018-2019	n (unweighted)	397	458
	% (weighted)	52.5%	80.6%
	95% Confidence Interval	(47.4%-57.6%)	(75.6%-84.9%)

Note: Alaska total population includes respondents with unknown race.

Table C-77: Abstained from Soda on Previous Day, 3–Year–Old Children, 2014-2015 to 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

		Alaska Native Children Statewide	Alaska White Children Statewide
2014-2015	n (unweighted)	362	460
	% (weighted)	70.8%	89.2%
	95% Confidence Interval	(65.6%-75.5%)	(85.1%-92.2%)
2016-2017	n (unweighted)	388	493
	% (weighted)	79.0%	91.0%
	95% Confidence Interval	(74.4%-83.0%)	(87.2%-93.7%)
2018-2019	n (unweighted)	390	458
	% (weighted)	84.1%	90.8%
	95% Confidence Interval	(79.9%-87.6%)	(86.8%-93.6%)

Note: Alaska total population includes respondents with unknown race.

Table C-78: Sweetened Drink Consumption on Previous Day, 3–Year-Old Alaska Native Children, 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

	Alaska Native Children Statewide		
n (unweighted)			
397	Amount	% (weighted)	95% Confidence Interval
	<1 Cup	92.6%	(89.3%-95.0%)
	1-2 Cups	28.5%	(24.0%-33.4%)
	More than 2 Cups	13.6%	(10.4%-17.6%)

Appendix C - Data Tables

Table C-79: Soda Consumption on Previous Day, 3–Year–Old Alaska Native Children, 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

Alaska Native Children Statewide			
n (unweighted)			
390	Amount	% (weighted)	95% Confidence Interval
	<1 Cup	92.6%	(89.3%-95.0%)
	1-2 Cups	6.3%	(4.1%-9.4%)
	More than 2 Cups	1.1%	(0.4%-3.2%)

Table C-80: Childhood Witness to Violence, 3–Year–Old Children, 2014-2015 to 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

		Alaska Native Children Statewide	Alaska White Children Statewide
2014-2015	n (unweighted)	377	486
	% (weighted)	8.9%	3.0%
	95% Confidence Interval	(6.3%-12.4%)	(1.5%-5.7%)
2016-2017	n (unweighted)	392	520
	% (weighted)	7.9%	3.6%
	95% Confidence Interval	(5.5%-11.2%)	(2.0%-6.6%)
2018-2019	n (unweighted)	402	478
	% (weighted)	10.0%	2.3%
	95% Confidence Interval	(7.2%-13.7%)	(1.1%-4.9%)

Note: Alaska total population includes respondents with unknown race.

Table C-81: Dental Caries Among 3–Year–Old Children, 2014-2015 to 2018-2019

Data Source: Alaska Division of Public Health, Alaska Childhood Understanding Behaviors Survey (CUBS)
Data Analysis: Alaska Division of Public Health, Section of Women's, Children's & Family Health, Maternal & Child Health Epidemiology Unit

		Alaska Native Children Statewide	Alaska White Children Statewide
2014-2015	n (unweighted)	377	484
	% (weighted)	42.7%	8.3%
	95% Confidence Interval	(37.5%-48.0%)	(5.7%-11.9%)
2016-2017	n (unweighted)	395	518
	% (weighted)	41.1%	10.3%
	95% Confidence Interval	(36.1%-46.2%)	(7.4%-14.2%)
2018-2019	n (unweighted)	403	479
	% (weighted)	41.1%	7.3%
	95% Confidence Interval	(36.2%-46.3%)	(4.9%-10.7%)

Note: Alaska total population includes respondents with unknown race.

Appendix C - Data Tables

Table C-82: Dental Caries Among Alaska Kindergarten Children, 2004-2005 to 2010-2011*

Data Source: Alaska Division of Public Health, Alaska Oral Health Assessment

		Alaska Native Children	Alaska White Children
2004-2005	n	70	295
	%	75.7%	37.6%
	95% Confidence Interval	(64.0%-85.2%)	(32.1%-43.4%)
2007-2008	n	133	415
	%	66.9%	31.1%
	95% Confidence Interval	(58.2%-74.8%)	(26.7%-35.8%)
2010-2011	n	128	293
	%	63.3%	28.0%
	95% Confidence Interval	(54.3%-71.6%)	(22.9%-33.5%)

Table C-83: Dental Caries Among Alaska Third Grade Children, 2004-2005 to 2010-2011*

Data Source: Alaska Division of Public Health, Alaska Oral Health Assessment

		Alaska Native Children	Alaska White Children
2004-2005	n	283	580
	%	87.3%	54.7%
	95% Confidence Interval	(82.8%-90.9%)	50.5-58.7
2007-2008	n	131	444
	%	75.6%	53.2%
	95% Confidence Interval	(67.3%-82.7%)	48.4-57.9
2010-2011	n	157	279
	%	83.4%	48.4%
	95% Confidence Interval	(76.7%-88.9%)	(42.4%-54.4%)

Table C-84: High School Student Social Support, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	249	742
	%	39.5%	49.7%
	Confidence Interval	(32.6%-46.7%)	(45.2%-54.1%)
2009	n	299	603
	%	34.1%	50.8%
	Confidence Interval	(25.6%-43.7%)	(46.5%-55.1%)
2011	n	297	651
	%	36.9%	49.3%
	Confidence Interval	(31.3%-42.8%)	(44.8%-53.7%)
2013	n	275	592
	%	38.6%	47.8%
	Confidence Interval	(29.0%-49.2%)	(43.9%-51.6%)
2015	n	349	655
	%	40.8%	50.2%
	Confidence Interval	(35.9%-45.8%)	(45.3%-55.1%)
2017	n	339	571
	%	39.4%	50.2%
	Confidence Interval	(28.7%-51.3%)	(46.4%-54.1%)
2019	n	410	882
	%	46.4%	53.2%
	Confidence Interval	(38.1%-55.0%)	(48.5%-57.9%)

* The Alaska Oral Health Assessment survey methodology uses non-probability quota sampling from a sample of randomly selected Alaska schools. The results may not be representative of all Alaskan kindergarten children. The Alaska total population includes all other races and respondents with unknown race. This report shows the most recent available data (2010-2011). Caution is advised when attempting to compare data between years due to unequal reporting intervals.

Appendix C - Data Tables

Table C-85: High School Student Depression, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	257	752
	%	31.7%	24.4%
	Confidence Interval	(26.6%-37.4%)	(20.4%-28.9%)
2009	n	300	615
	%	25.6%	24.0%
	Confidence Interval	(20.0%-32.2%)	(20.2%-28.2%)
2011	n	294	653
	%	23.4%	25.5%
	Confidence Interval	(19.7%-27.6%)	(21.1%-30.5%)
2013	n	278	584
	%	31.3%	24.3%
	Confidence Interval	(26.5%-36.5%)	(20.3%-28.6%)
2015	n	356	672
	%	30.9%	35.1%
	Confidence Interval	(23.3%-39.7%)	(30.0%-40.6%)
2017	n	333	565
	%	36.2%	37.5%
	Confidence Interval	(30.4%-42.5%)	(32.3%-43.0%)
2019	n	432	916
	%	43.1%	34.2%
	Confidence Interval	(35.2%-51.4%)	(29.9%-38.8%)

Table C-86: High School Student Suicide Attempts, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	220	665
	%	20.2%	6.7%
	Confidence Interval	(13.5%-29.1%)	(4.9%-9.2%)
2009	n	263	535
	%	12.5%*	6.4%
	Confidence Interval	(6.1%-24.1%)	(4.4%-9.3%)
2011	n	262	572
	%	12.0%*	6.3%
	Confidence Interval	(6.4%-21.5%)	(4.3%-9.3%)
2013	n	248	522
	%	15.2%	3.9%
	Confidence Interval	(10.5%-21.6%)	(2.7%-5.4%)
2015	n	303	599
	%	13.7%	7.1%
	Confidence Interval	(10.2%-18.0%)	(5.2%-9.7%)
2017	n	293	511
	%	16.8%	9.0%
	Confidence Interval	(12.1%-22.8%)	(6.2%-12.8%)
2019	n	432	921
	%	24.3%	15.1%
	Confidence Interval	(16.8%-33.8%)	(12.2%-18.5%)

Note: Data marked with an * are considered unstable and should be used with caution.

Appendix C - Data Tables

Table C-87: High School Student Physical Activity, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	248	744
	%	9.6%	21.1%
	Confidence Interval	(5.6%-16.0%)	(17.6%-25.1%)
2009	n	296	609
	%	17.1%	22.8%
	Confidence Interval	(11.6%-24.4%)	(19.0%-27.2%)
2011	n	300	651
	%	23.3%	20.9%
	Confidence Interval	(16.4%-31.9%)	(17.6%-24.5%)
2013	n	280	593
	%	18.9%	22.7%
	Confidence Interval	(14.2%-24.6%)	(19.0%-26.8%)
2015	n	350	658
	%	21.2%	21.2%
	Confidence Interval	(17.2%-25.8%)	(17.9%-24.9%)
2017	n	342	572
	%	15.8%	23.1%
	Confidence Interval	(12.7%-19.6%)	(18.8%-27.9%)
2019	n	420	895
	%	17.5%	21.2%
	Confidence Interval	(12.0%-24.8%)	(17.5%-25.4%)

Table C-88: High School Student Obesity, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	237	732
	%	12.8%	10.1%
	Confidence Interval	(8.2%-19.3%)	(7.9%-12.7%)
2009	n	290	609
	%	11.4%	10.9%
	Confidence Interval	(8.8%-14.7%)	(8.0%-14.7%)
2011	n	292	645
	%	14.8%	9.9%
	Confidence Interval	(10.8%-20.0%)	(7.9%-12.3%)
2013	n	267	571
	%	15.8%	9.5%
	Confidence Interval	(11.2%-21.7%)	(7.4%-12.2%)
2015	n	339	648
	%	14.1%	11.1%
	Confidence Interval	(10.7%-18.4%)	(8.8%-13.8%)
2017	n	328	561
	%	14.2%	11.9%
	Confidence Interval	(11.3%-17.8%)	(9.0%-15.6%)
2019	n	407	878
	%	17.5%	11.4%
	Confidence Interval	(11.9%-25.0%)	(8.9%-14.4%)

Appendix C - Data Tables

Table C-89: High School Student Healthy Weight, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	237	732
	%	64.3%	73.9%
	Confidence Interval	(54.7%-72.9%)	(70.3%-77.2%)
2009	n	290	609
	%	71.9%	74.9%
	Confidence Interval	(66.0%-77.1%)	(70.4%-78.9%)
2011	n	292	645
	%	67.3%	75.2%
	Confidence Interval	(60.7%-73.3%)	(71.2%-78.8%)
2013	n	267	571
	%	70.2%	73.1%
	Confidence Interval	(63.2%-76.5%)	(68.8%-77.1%
2015	n	339	648
	%	68.4%	70.9%
	Confidence Interval	(61.7%-74.4%)	(67.1%-74.5%)
2017	n	328	561
	%	61.1%	71.6%
	Confidence Interval	(56.0%-65.9%)	(65.7%-76.9%)
2019	n	407	878
	%	66.3%	71.0%
	Confidence Interval	(59.7%-72.3%)	(66.2%-75.4%)

Table C-90: High School Student Current Smoking, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	238	721
	%	31.7%	14.1%
	Confidence Interval	(24.4%-40.2%)	(11.3%-17.4%)
2009	n	275	586
	%	23.8%	13.8%
	Confidence Interval	(16.9%-32.6%)	(10.7%-17.6%)
2011	n	275	632
	%	26.4%	10.6%
	Confidence Interval	(16.3%-39.8%)	(7.5%-14.9%)
2013	n	260	571
	%	18.5%	7.7%
	Confidence Interval	(12.9%-25.8%)	(5.6%-10.5%)
2015	n	331	662
	%	19.7%	6.8%
	Confidence Interval	(14.6%-26.1%)	(4.9%-9.3%)
2017	n	320	556
	%	18.0%	7.0%
	Confidence Interval	(12.1%-25.8%)	(4.9%-10.0%)
2019	n	422	899
	%	12.6%	4.8%
	Confidence Interval	(9.6%-16.3%)	(3.1%-7.5%)

Appendix C - Data Tables

Table C-91: High School Student Current Smokeless Tobacco Use, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	252	749
	%	16.5%*	8.2%
	Confidence Interval	(8.0%-31.1%)	(6.3%-10.6%)
2009	n	288	605
	%	22.1%	10.5%
	Confidence Interval	(14.6%-32.1%)	(7.3%-14.8%)
2011	n	303	656
	%	12.4%	6.0%
	Confidence Interval	(9.3%-16.4%)	(4.4%-8.2%)
2013	n	274	587
	%	18.5%	4.0%
	Confidence Interval	(11.4%-28.5%)	(2.6%-6.0%)
2015	n	348	668
	%	24.4%	5.3%
	Confidence Interval	(16.4%-34.8%)	(3.6%-7.8%)
2017	n	341	570
	%	16.0%*	5.1%
	Confidence Interval	(8.1%-29.1%)	(3.5%-7.3%)
2019	n	425	913
	%	20.2%*	3.4%*
	Confidence Interval	(10.5%-35.3%)	(1.8%-6.5%)

Note: Data marked with an * are considered unstable and should be used with caution.

Table C-92: High School Student Current Drinking, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	223	700
	%	40.7%	42.2%
	Confidence Interval	(29.9%-52.6%)	(38.1%-46.3%)
2009	n	270	576
	%	32.0%	35.2%
	Confidence Interval	(27.1%-37.3%)	(30.4%-40.3%)
2011	n	274	614
	%	21.0%	32.0%
	Confidence Interval	(15.4%-28.0%)	(27.5%-36.9%)
2013	n	246	544
	%	17.8%	25.8%
	Confidence Interval	(13.5%-23.1%)	(21.3%-30.9%)
2015	n	323	633
	%	18.8%	24.0%
	Confidence Interval	(14.5%-23.8%)	(20.8%-27.5%)
2017	n	312	527
	%	20.1%	28.0%
	Confidence Interval	(13.0%-29.7%)	(23.6%-33.0%)
2019	n	393	846
	%	16.7%	25.3%
	Confidence Interval	(12.5%-21.8%)	(21.3%-29.9%)

Appendix C - Data Tables

Table C-93: High School Student Current Binge Drinking, 2017-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2017	n	336	557
	%	13.5%	16.6%
	Confidence Interval	(7.9%-22.0%)	(14.0%-19.6%)
2019	n	413	895
	%	10.8%	14.5%
	Confidence Interval	(7.5%-15.4%)	(11.9%-17.6%)

Table C-94: High School Student Current Marijuana Use, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	247	740
	%	31.8%	17.4%
	Confidence Interval	(23.2%-41.7%)	(14.4%-20.9%)
2009	n	295	605
	%	28.7%	19.9%
	Confidence Interval	(20.9%-37.9%)	(16.4%-24.1%)
2011	n	293	647
	%	26.3%	19.8%
	Confidence Interval	(18.3%-36.2%)	(16.8%-23.3%)
2013	n	273	584
	%	29.4%	17.0%
	Confidence Interval	(24.0%-35.3%)	(14.1%-20.3%)
2015	n	340	651
	%	25.8%	15.1%
	Confidence Interval	(19.9%-32.7%)	(12.1%-18.8%)
2017	n	323	548
	%	31.0%	17.9%
	Confidence Interval	(24.8%-38.0%)	(14.2%-22.5%)
2019	n	408	880
	%	27.8%	19.4%
	Confidence Interval	(17.8%-40.6%)	(16.5%-22.7%)

Table C-95: High School Student Prescription Pain Medicine Misuse, 2017-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2017	n	343	569
	%	16.2%	15.2%
	Confidence Interval	(11.9%-21.7%)	(12.1%-19.0%)
2019	n	425	903
	%	13.7%	14.0%
	Confidence Interval	(9.5%-19.3%)	(11.1%-17.5%)

Appendix C - Data Tables

Table C-96: High School Student Soda Consumption, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	252	753
	%	31.3%	18.5%
	Confidence Interval	(26.0%-37.1%)	(15.2%-22.4%)
2009	n	299	609
	%	31.4%	14.0%
	Confidence Interval	(26.1%-37.4%)	(11.7%-16.6%)
2011	n	302	654
	%	28.3%	13.9%
	Confidence Interval	(22.5%-35.0%)	(11.3%-17.0%)
2013	n	281	594
	%	21.8%	11.9%
	Confidence Interval	(16.3%-28.4%)	(9.2%-15.1%)
2015	n	350	664
	%	30.1%	12.6%
	Confidence Interval	(25.0%-35.8%)	(10.3%-15.4%)
2017	n	342	569
	%	18.3%	12.7%
	Confidence Interval	(13.6%-24.2%)	(9.0%-17.7%)
2019	n	424	897
	%	16.7%	10.2%
	Confidence Interval	(10.5%-25.8%)	(7.8%-13.3%)

Table C-97: High School Student Sexual Activity, 2007-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2007	n	238	704
	%	49.3%	45.2%
	Confidence Interval	(43.6%-55.1%)	(40.3%-50.2%)
2009	n	268	582
	%	49.4%	41.3%
	Confidence Interval	(42.3%-56.5%)	(35.8%-47.0%)
2011	n	275	614
	%	42.6%	35.9%
	Confidence Interval	(34.6%-50.9%)	(30.3%-41.9%)
2013	n	250	551
	%	50.0%	35.7%
	Confidence Interval	(44.3%-55.7%)	(30.3%-41.5%)
2015	n	306	625
	%	44.4%	31.8%
	Confidence Interval	(40.2%-48.7%)	(27.3%-36.6%)
2017	n	301	538
	%	39.2%	37.1%
	Confidence Interval	(32.4%-46.4%)	(30.7%-44.0%)
2019	n	372	806
	%	42.8%	35.7%
	Confidence Interval	(37.1%-48.7%)	(31.1%-40.5%)

Appendix C - Data Tables

Table C-98: High School Student Bullying, 2009-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2009	n	301	614
	%	18.6%	22.3%
	Confidence Interval	(14.8%-22.9%)	(18.3%-26.9%)
2011	n	303	659
	%	19.1%	25.3%
	Confidence Interval	(14.5%-24.7%)	(21.5%-29.6%)
2013	n	284	593
	%	19.8%	21.1%
	Confidence Interval	(15.4%-25.0%)	(17.3%-25.6%)
2015	n	354	670
	%	25.5%	21.7%
	Confidence Interval	(19.6%-32.4%)	(18.9%-24.8%)
2017	n	346	575
	%	24.8%	25.4%
	Confidence Interval	(19.3%-31.3%)	(21.6%-29.7%)
2019	n	431	917
	%	31.8%	23.7%
	Confidence Interval	(25.0%-39.5%)	(19.9%-27.9%)

Table C-99: High School Student Intimate Partner Violence, 2013-2019

Data Source: Alaska Division of Public Health, Alaska Youth Risk Behavior Surveillance System

		Alaska Native Students Statewide	Alaska White Students Statewide
2013	n	194	376
	%	10.3%	7.1%
	Confidence Interval	(6.9%-15.1%)	(5.1%-10.0%)
2015	n	229	406
	%	9.8%	8.4%
	Confidence Interval	(5.8%-16.0%)	(5.8%-12.0%)
2017	n	195	336
	%	4.5%*	7.2%
	Confidence Interval	(2.4%-8.2%)	(5.0%-10.4%)
2019	n	257	541
	%	14.0%*	6.0%
	Confidence Interval	(6.4%-27.6%)	(3.8%-9.2%)

Note: Data marked with an * are considered unstable and should be used with caution.

Table C-100: Adult General Health Status (Very Good/Excellent), 2000-2004 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2000-2004	39.8%	(37.0%-42.6%)	58.6%	(57.3%-59.8%)
2005-2009	39.0%	(37.0%-41.0%)	55.4%	(54.1%-56.8%)
2010-2014	38.1%	(36.1%-40.1%)	54.9%	(53.6%-56.3%)
2015-2018	40.4%	(37.4%-43.4%)	54.2%	(52.8%-55.6%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-101: Percent of Alaska Native Adults With General Health Status of Very Good/Excellent by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Norton Sound	29.0%	(19.0%-39.0%)
Aleutians & Pribilofs	31.2%	(16.2%-46.3%)
Southeast	38.7%	(31.5%-45.8%)
Yukon-Kuskokwim	39.2%	(31.3%-47.0%)
Kenai Peninsula	40.1%	(26.4%-53.7%)
Anchorage/Mat-Su	41.2%	(35.0%-47.4%)
Kodiak Area	41.6%	(22.5%-60.7%)
Interior	42.1%	(35.9%-48.3%)
Northwest Arctic	43.4%	(31.1%-55.8%)
Bristol Bay	46.5%	(33.2%-59.8%)
Arctic Slope	46.8%	(28.8%-64.8%)
Copper River/ Prince William Sound	47.8%	(29.8%-65.8%)
Statewide	**40.4%**	**(37.4%-43.4%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-102: Adult Frequent Mental Distress, 1999-2003 to 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
1999-2003	8.7%	(6.9%-10.5%)	8.0%	(7.2%-8.7%)
2004-2008	9.4%	(8.0%-10.9%)	9.9%	(9.1%-10.8%)
2009-2013	11.0%	(7.6%-14.4%)	8.9%	(8.1%-9.7%)
2014-2018	12.2%	(10.4%-14.0%)	10.2%	(9.5%-11.0%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-103: Percent of Alaska Native Adults That Experienced Frequent Mental Distress by Tribal Health Region, 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Northwest Arctic	7.6%	(3.5%-11.7%)
Yukon-Kuskokwim	8.8%	(5.1%-12.6%)
Norton Sound	10.0%	(3.9%-16.1%)
Aleutians & Pribilofs	11.8%	(0.0%-24.1%)
Interior	11.9%	(7.9%-16.0%)
Copper River/Prince William Sound	12.1%	(4.2%-20.0%)
Kenai Peninsula	13.6%	(2.5%-24.7%)
Southeast	13.7%	(9.3%-18.0%)
Anchorage/Mat-Su	14.9%	(11.0%-18.8%)
Bristol Bay	15.2%	(2.1%-28.3%)
Kodiak Area	15.5%	(9.0%-21.9%)
Statewide	**12.2%**	**(10.4%-14.0%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Table C-104: Adult Physical Activity, 2015-2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2015	19.9%	(14.9%-24.8%)	24.7%	(21.9%-27.5%)
2017	18.0%	(11.8%-24.3%)	23.1%	(20.2%-26.0%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-105: Percent of Alaska Native Adults That Met Physical Activity Recommendations by Tribal Health Region, 2-Year Aggregate, 2015 and 2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Aleutians & Pribilofs	10.4%	(1.3%-19.6%)
Norton Sound	14.9%	(0.0%-30.8%)
Southeast	16.8%	(8.2%-25.4%)
Anchorage/Mat-Su	19.2%	(11.0%-27.3%)
Interior	19.4%	(12.2%-26.5%)
Yukon-Kuskokwim	19.9%	(11.7%-28.0%)
Bristol Bay	25.1%	(3.0%-47.1%)
Statewide	**18.9%**	**(14.8%-22.9%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Appendix C - Data Tables

Table C-106: Adult Obesity, 2000-2004 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2000-2004	28.5%	(26.0%-31.2%)	22.7%	(21.6%-23.8%)
2005-2009	34.0%	(32.1%-36.1%)	27.4%	(26.1%-28.6%)
2010-2014	35.2%	(33.2%-37.3%)	27.7%	(26.5%-29.0%)
2015-2018	36.3%	(33.3%-39.2%)	31.1%	(29.8%-32.5%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-107: Percent of Alaska Native Adults That Were Obese by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Bristol Bay	28.5%	(19.7%-37.3%)
Yukon-Kuskokwim	28.9%	(21.4%-36.3%)
Copper River/Prince William Sound	31.6%	(15.5%-47.6%)
Kenai Peninsula	33.0%	(20.4%-45.5%)
Interior	35.2%	(28.9%-41.4%)
Kodiak Area	36.2%	(20.0%-52.3%)
Southeast	36.5%	(29.6%-43.4%)
Northwest Arctic	36.6%	(24.6%-48.6%)
Anchorage/Mat-Su	37.6%	(31.2%-43.9%)
Norton Sound	39.2%	(27.2%-51.3%)
Arctic Slope	48.2%	(29.0%-67.5%)
Aleutians & Pribilofs	55.3%	(37.4%-73.2%)
Statewide	**36.3%**	**(33.3%-39.2%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-108: Adult Overweight, 2000-2004 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2000-2004	38.8%	(35.9%-41.7%)	38.8%	(37.5%-40.1%)
2005-2009	37.3%	(35.2%-39.5%)	37.9%	(36.5%-39.3%)
2010-2014	34.9%	(32.9%-37.0%)	38.0%	(36.7%-39.4%)
2015-2018	31.3%	(28.5%-34.2%)	35.6%	(34.3%-37.0%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-109: Percent of Alaska Native Adults That Were Overweight by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Norton Sound	16.4%	(9.9%-22.8%)
Aleutians & Pribilofs	25.0%	(11.4%-38.6%)
Kodiak Area	29.1%	(8.5%-49.6%)
Anchorage/Mat-Su	30.8%	(25.0%-36.6%)
Interior	31.4%	(25.4%-37.4%)
Copper River/Prince William Sound	31.6%	(16.3%-46.9%)
Yukon-Kuskokwim	32.1%	(24.9%-39.3%)
Kenai Peninsula	32.9%	(18.2%-47.5%)
Northwest Arctic	34.2%	(21.8%-46.6%)
Bristol Bay	35.6%	(23.0%-48.3%)
Arctic Slope	36.7%	(17.4%-56.0%)
Southeast	37.2%	(30.0%-44.5%)
Statewide	**31.3%**	**(28.5%-34.2%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-110: Adult Current Smoking, 2000-2004 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2000-2004	40.6%	(38.0%-43.3%)	26.5%	(25.3%-27.6%)
2005-2009	39.2%	(37.1%-41.2%)	24.0%	(22.8%-25.2%)
2010-2014	36.4%	(34.4%-38.4%)	20.9%	(19.7%-22.0%)
2015-2018	36.4%	(33.4%-39.4%)	15.8%	(14.7%-16.8%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-111: Percent of Alaska Native Adults That Were Current Smokers by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Copper River/Prince William Sound	30.0%	(14.3%-45.6%)
Aleutians & Pribilofs	31.5%	(13.6%-49.3%)
Anchorage/Mat-Su	31.5%	(25.4%-37.7%)
Kodiak Area	31.6%	(13.4%-49.9%)
Southeast	33.0%	(25.9%-40.0%)
Interior	34.4%	(28.2%-40.6%)
Bristol Bay	38.5%	(24.4%-52.6%)
Kenai Peninsula	39.0%	(24.6%-53.4%)
Yukon-Kuskokwim	41.3%	(33.2%-49.4%)
Northwest Arctic	43.5%	(31.2%-55.8%)
Arctic Slope	52.3%	(33.5%-71.2%)
Norton Sound	53.5%	(41.8%-65.1%)
Statewide	**36.4%**	**(33.4%-39.4%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-112: Adult Current Smokeless Tobacco Use, 2005-2009 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2005-2009	10.1%	(9.1%-11.3%)	4.9%	(4.3%-5.5%)
2010-2014	12.8%	(11.3%-14.4%)	5.1%	(4.5%-5.7%)
2015-2018	12.7%	(10.4%-15.0%)	4.8%	(4.1%-5.5%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-113: Percent of Alaska Native Adults That Were Current Smokeless Tobacco Users by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Southeast	1.5%	(0.1%-2.9%)
Arctic Slope	6.7%	(0.0%-13.7%)
Anchorage/Mat-Su	7.2%	(3.7%-10.7%)
Interior	9.3%	(5.6%-13.0%)
Kenai Peninsula	11.5%	(2.3%-20.8%)
Northwest Arctic	14.9%	(3.3%-26.5%)
Aleutians & Pribilofs	15.8%	(1.1%-30.5%)
Norton Sound	26.6%	(12.5%-40.7%)
Bristol Bay	28.7%	(10.4%-47.0%)
Yukon-Kuskokwim	40.0%	(31.7%-48.3%)
Statewide	**12.7%**	**(10.4%-15.0%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Appendix C - Data Tables

Table C-114: Adult Current Binge Drinking, 1995-1999 to 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
1995-1999	20.1%	(17.7%-22.7%)	18.7%	(17.5%-20.0%)
2000-2004	19.5%	(17.4%-21.8%)	18.4%	(17.4%-19.5%)
2005-2009	17.1%	(15.2%-19.1%)	17.7%	(16.6%-18.9%)
2010-2014	19.8%	(17.6%-22.2%)	19.5%	(18.4%-20.5%)
2015-2018	19.1%	(16.5%-21.6%)	16.4%	(16.4%-18.8%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-115: Percent of Alaska Native Adults That Currently Binge Drank by Tribal Health Region, 2015-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Kenai Peninsula	12.8%	(4.0%-21.5%)
Anchorage/Mat-Su	15.1%	(10.5%-19.6%)
Interior	17.5%	(12.3%-22.7%)
Northwest Arctic	18.1%	(8.2%-28.1%)
Southeast	20.1%	(13.2%-26.9%)
Norton Sound	22.8%	(12.7%-32.9%)
Yukon-Kuskokwim	23.1%	(15.3%-30.8%)
Arctic Slope	24.3%	(8.7%-40.0%)
Aleutians & Pribilofs	28.5%	(8.1%-49.0%)
Bristol Bay	32.1%	(17.3%-46.8%)
Statewide	**19.1%**	**(16.5%-21.6%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Table C-116: Adults Meeting Fruit and VegeTable Consumption Recommendations, 2011-2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2011	11.7%	(7.6%-17.6%)	10.4%	(9.0%-11.8%)
2013	9.0%	(6.2%-12.9%)	12.0%	(10.4%-13.5%)
2015	6.7%	(3.4%-10.0%)	12.5%	(10.4%-14.6%)
2017	9.0%	(3.7%-14.2%)	5.6%	(3.9%-7.3%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-117: Percent of Alaska Native Adults That Met Fruit and VegeTable Consumption Recommendations by Tribal Health Region, 2-Year Aggregate, 2015 and 2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Yukon-Kuskokwim	2.6%	(0.3%-5.0%)
Interior	3.5%	(0.1%-6.9%)
Bristol Bay	4.3%	(0.9%-7.7%)
Anchorage/Mat-Su	6.8%	(1.5%-12.0%)
Norton Sound	11.0%	(0.0%-26.7%)
Southeast	12.4%	(4.1%-20.8%)
Statewide	**7.9%**	**(4.7%-11.1%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Table C-118: Lifetime Intimate Partner Violence for Select Years, 2001-2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
2001	32.2%	(27.3%-37.5%)	25.6%	(23.1%-28%)
2004	30.9%	(25.7%-36.7%)	23.9%	(21.4%-26.4%)
2006	33.2%	(26.4%-40.8%)	22.4%	(19.9%-24.8%)
2009	37.9%	(31.2%-45.1%)	24.2%	(21.1%-27.4%)
2012	35.5%	(30.5%-41.0%)	25.1%	(23.1%-27.0%)
2017	29.7%	(21.2%-38.2%)	24.3%	(21.3%-27.4%)

Note: Data only available for 2001, 2004, 2006, 2009, 2012, and 2017. Caution is advised when attempting to compare data between years. Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-119: Percent of Alaska Native Adults Who Experienced Intimate Partner Violence in Their Lifetime by Tribal Health Region, 2017

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Bristol Bay	16.0%	(4.4%-27.5%)
Yukon-Kuskokwim	26.1%	(13.6%-38.7%)
Interior	35.8%	(16.2%-55.5%)
Anchorage/Mat-Su	37.9%	(19.0%-56.9%)
Statewide	**29.7%**	**(21.2%-38.2%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Appendix C - Data Tables

Table C-120: Adverse Childhood Experiences, 2013-2015

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence Interval	%	95% Confidence Interval
≥ 4 Total ACEs	**30.2%**	**(27.0%-33.4%)**	**20.3%**	**(19.0%-21.7%)**
Emotional or Verbal Abuse	34.6%	(31.3%-37.8%)	31.9%	(30.4%-33.3%)
Parents Separated or Divorced	34.0%	(30.7%-37.2%)	30.4%	(28.9%-31.8%)
Witnessed Abuse	31.7%	(28.4%-35.1%)	16.9%	(15.7%-18.1%)
Household Substance Abuse	29.0%	(26.7%-31.2%)	21.6%	(20.6%-22.7%)
Physical Abuse	23.8%	(20.9%-26.7%)	18.4%	(17.2%-19.7%)
Household Mental Illness	21.4%	(18.6%-24.1%)	20.4%	(19.2%-21.7%)
Incarcerated Household Member	19.6%	(17.1%-22.2%)	8.9%	(7.9%-9.9%)
Emotional Neglect	15.9%	(13.1%-18.8%)	16.2%	(14.7%-17.6%)
Physical Neglect	14.4%	(11.5%-17.3%)	10.7%	(9.5%-12.0%)
Sexual Abuse	12.5%	(10.9%-14.2%)	10.6%	(9.9%-11.4%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-121: Adult Dental Care, 1994-1998 to 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence	%	95% Confidence
1994-1998	66.8%	(58.7%-74.9%)	74.7%	(71.1%-78.2%)
1999-2003	67.0%	(60.7%-73.2%)	73.5%	(70.4%-76.7%)
2004-2008	58.3%	(54.6%-62.1%)	69.9%	(68.2%-71.6%)
2009-2013	58.2%	(53.2%-63.2%)	67.5%	(65.0%-69.9%)
2014-2018	59.8%	(56.7%-62.9%)	66.5%	(65.0%-68.0%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-122: Percent of Alaska Native Adults Who Visited a Dentist or Dental Clinic by Tribal Health Region, 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Norton Sound	40.3%	(28.8%-51.7%)
Northwest Arctic	44.6%	(34.2%-55.0%)
Southeast	45.5%	(37.4%-53.6%)
Copper River/Prince William Sound	50.7%	(34.7%-66.6%)
Aleutians & Pribilofs	55.2%	(35.0%-75.5%)
Interior	58.1%	(51.1%-65.1%)
Bristol Bay	60.8%	(49.6%-72.1%)
Kenai Peninsula	62.3%	(48.5%-76.0%)
Anchorage/Mat-Su	63.9%	(57.7%-70.0%)
Arctic Slope	66.1%	(52.2%-80.0%)
Yukon-Kuskokwim	66.7%	(59.5%-74.0%)
Kodiak Area	90.4%	(77.7%-100.0%)
Statewide	**59.8%**	**(56.7%-62.9%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Appendix C - Data Tables

Table C-123: Breast Cancer Screening Among Women Aged 50-74 Years, 2008-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native Women Statewide		Alaska Non-Native Women Statewide	
	%	95% Confidence	%	95% Confidence
2008	74.8%	(62.3%-84.3%)	78.2%	(72.8%-83.7%)
2010	70.9%	(53.5%-83.8%)	74.0%	(67.5%-80.5%)
2012	79.7%	(71.3%-86.0%)	78.8%	(75.4%-82.3%)
2014	73.3%	(63.3%-81.4%)	68.1%	(63.8%-72.4%)
2016	68.3%	(53.0%-83.7%)	67.7%	(62.3%-73.0%)
2018	83.4%	(74.6%-92.3%)	71.5%	(66.1%-76.9%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-124: Percent of Alaska Native Women Aged 50-74 Years Who Underwent Breast Cancer Screening by Tribal Health Region, 3-Year Aggregate, 2014, 2016, and 2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native Women	
	%	95% Confidence Interval
Southeast	63.8%	(50.1%-77.4%)
Anchorage/Mat-Su	73.2%	(55.8%-90.5%)
Interior	82.9%	(72.0%-93.9%)
Statewide	**74.4%**	**(67.5%-81.3%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.
Percent not reported for <5 cases.

Table C-125: Cervical Cancer Screening Among Women Aged 21-65 Years, 2008-2016

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native Women Statewide		Alaska Non-Native Women Statewide	
	%	95% Confidence	%	95% Confidence
2008	88.8%	(79.6%-94.2%)	85.6%	(81.6%-89.6%)
2010	79.4%	(61.3%-90.4%)	85.2%	(80.6%-89.8%)
2012	84.2%	(77.9%-89.0%)	84.1%	(81.4%-86.8%)
2014	70.3%	(62.4%-77.1%)	79.2%	(75.6%-82.8%)
2016	84.3%	(76.0%-92.6%)	76.0%	(71.0%-80.9%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-126: Percent of Alaska Native Women Aged 21–65 Years Who Underwent Cervical Cancer Screening by Tribal Health Region, 3-Year Aggregate, 2012, 2014 and 2016

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native Women	
	%	95% Confidence Interval
Yukon-Kuskokwim	71.1%	(53.6%-88.6%)
Southeast	72.6%	(60.1%-85.1%)
Interior	75.3%	(63.7%-87.0%)
Anchorage/Mat-Su	84.5%	(73.1%-95.8%)
Statewide	**77.6%**	**(71.8%-83.4%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.
Percent not reported for <5 cases.

Appendix C - Data Tables

Table C-127: Colorectal Cancer Screening Among Adults Aged 50-75 Years, 1999-2003 to 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People Statewide		Alaska Non-Natives Statewide	
	%	95% Confidence	%	95% Confidence
1999-2003	33.7%	(24.6%-38.1%)	32.6%	(28.7%-36.5%)
2004-2008	47.8%	(39.0%-53.7%)	56.2%	(51.9%-60.5%)
2009-2013	49.5%	(36.8%-52.1%)	58.2%	(55.3%-61.1%)
2014-2018	65.6%	(60.1%-71.1%)	63.3%	(61.0%-65.6%)

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

Table C-128: Percent of Alaska Native Adults Aged 50-75 Years Who Underwent Colorectal Cancer Screening by Tribal Health Region, 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Yukon-Kuskokwim	52.2%	(37.3%-67.2%)
Bristol Bay	56.3%	(40.4%-72.3%)
Anchorage/Mat-Su	67.0%	(56.5%-77.4%)
Interior	69.5%	(60.4%-78.6%)
Southeast	72.3%	(63.0%-81.5%)
Statewide	**65.6%**	**(65.6%-71.1%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution. Percent not reported for <5 cases.

Table C-129*: 4:3:1:3:3:1:4 Series Completion Among Children Age 19-35 Months, 2010-2019

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control & Prevention, National Immunization Survey

	Alaska Native People Statewide		Alaska Total Population (All Races)		U.S. All Races	
	Total # Vaccinated	%	%	95% Confidence Interval	%	95% Confidence Interval
2010	2,812	76.9%	65.0%	(58.5%-71.5%)	N/A	N/A
2011	2,389	74.7%	66.7%	(58.9%-74.2%)	74.4%	(72.6%-76.1%)
2012	2,260	72.8%	76.0%	(68.7%-82.7%)	75.9%	(74.3%-77.5%)
2013	1,441	78.4%	65.9%	(58.5%-73.2%)	74.8%	(73.3%-76.3%)
2014	2,075	76.2%	76.1%	(69.3%-82.3%)	74.1%	(72.5%-75.7%)
2015	2,471	75.1%	68.9%	(61.4%-76.1%)	74.9%	(73.3%-76.5%)
2016	2,466	72.3%	67.6%	(59.9%-75.0%)	75.3%	(73.6%-77.0%)
2017	2,458	74.1%	69.0%	(61.2%-76.5%)	74.9%	(73.3%-76.4%)
2018	2,291	72.6%	59.2%	(50.0%-68.6%)	75.4%	(73.5%-77.4%)
2019	2,270	72.6%	N/A	N/A	N/A	N/A

Note: Vaccination coverage estimates for Alaska total population and U.S. total population are presented by birth year (birth cohort) rather than survey year. Because of the survey age eligibility range of 19-35 months, children born in three different calendar years appear in the data for each survey year. To estimate vaccination coverage among children born in a particular year, multiple survey years of data were combined and then stratified by birth year (birth cohort).

Appendix C - Data Tables

Table C-130*: HPV Vaccination (3 Doses) Among Females Aged 13-17 Years, 2012-2019**

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)

	Alaska Native People Statewide		Alaska Total Population (All Races)			U.S. All Races		
	Total # Vaccinated	%	n	%	95% Confidence Interval	n	%	95% Confidence Interval
2012	2,551	56.4%	145	31.4%	(23.3%-40.8%)	9,508	33.4%	(31.7%-35.2%)
2013	2,372	55.9%	158	27.1%	(19.6%-36.0%)	8,710	37.6%	(35.7%-39.6%)
2014	2,512	58.7%	200	34.4%	(26.7%-42.9%)	10,084	39.7%	(37.8%-41.6%)
2015	2,919	59.1%	165	36.9%	(29.0%-45.6%)	10,508	41.9%	(40.1%-43.7%)
2016	2,825	57.2%	183	47.8%	(39.0%-56.8%)	9,661	49.5%	(47.6%-51.4%)
2017	3,233	62.4%	175	45.7%	(37.3%-54.3%)	9,845	53.1%	(51.2%-55.0%)
2018	3,269	66.6%	193	45.3%	(37.0%-53.9%)	8,928	53.7%	(51.8%-55.6%)
2019	3,555	65.9%	208	57.8%	(49.6%-65.6%)	8,916	56.8%	(54.6%-59.0%)

Table C-131*: HPV Vaccination (3 Doses) Among Males Aged 13-17 Years, 2015-2019**

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)

	Alaska Native People Statewide		Alaska Total Population (All Races)			U.S. All Races		
	Total # Vaccinated	%	n	%	95% Confidence Interval	n	%	95% Confidence Interval
2015	1,988	38.2%	185	18.8%	(13.2%-26.1%)	11,367	28.1%	(26.6%-29.7%)
2016	2,424	45.2%	209	39.1%	(30.9%-48.0%)	10,814	37.5%	(35.8%-39.2%)
2017	3,001	55.6%	174	39.8%	(31.6%-48.7%)	11,104	44.3%	(42.6%-46.0%)
2018	3,147	61.5%	199	42.9%	(35.1%-51.1%)	9,772	48.7%	(46.8%-50.6%)
2019	3,520	62.4%	218	47.5%	(39.7%-55.5%)	9,872	51.8%	(49.7%-53.9%)

* Indian Health Service Immunization Program data are reported for the end of each fiscal year quarter 1 (ending December 31). National Immunization Survey (NIS) data are reported by calendar year (January - December).

** In December 2016, the Advisory Committee on Immunization Practices updated HPV vaccination recommendations to include a 2-dose schedule for immunocompetent adolescents initiating the vaccine series before their 15th birthday; 3 doses are recommended for persons who initiate the series at age 15–26 years and for immunocompromised persons. A new HPV up-to-date measure was added to the 2016 National Immunization Survey–Teen to account for the revised HPV vaccination schedule. The data for Alaska total population and U.S. all races for 2016 and beyond reports this new measure.

N/A - Not applicable or not available

Appendix C - Data Tables

Table C-132*: Tdap (1 Dose) Vaccination Among Persons Aged 13-17 Years, 2012-2019

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)

	Alaska Native People Statewide		Alaska Total Population (All Races)			U.S. All Races		
	Total # Vaccinated	%	n	%	95% Confidence Interval	n	%	95% Confidence Interval
2012	8,760	91.1%	340	77.1%	(72.1%-82.1%)	19,199	84.6%	(83.7%-85.5%)
2013	8,256	90.8%	320	74.3%	(68.5%-80.1%)	18,264	86.0%	(85.1%-87.0%)
2014	8,269	92.9%	377	73.8%	(68.4%-79.2%)	20,827	87.6%	(86.7%-88.5%)
2015	9,411	92.1%	350	69.7%	(63.9%-75.5%)	21,875	86.4%	(85.4%-87.3%)
2016	9,273	88.8%	392	79.4%	(74.1%-83.9%)	20,475	88.0%	(87.1%-88.9%)
2017	9,389	89.3%	349	78.9%	(73.2%-83.6%)	20,949	88.7%	(87.8%-89.6%)
2018	8,994	89.7%	392	79.6%	(74.3%-84.0%)	18,700	88.9%	(88.0%-89.7%)
2019	9,735	88.2%	426	81.7%	(76.6%-85.9%)	18,788	90.2%	(89.2%-91.1%)

Table C-133*: MCV4 Vaccination Coverage (≥1 Dose) Among Persons Aged 13-17 Years, 2012-2019

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Teen (NIS-Teen)

	Alaska Native People Statewide		Alaska Total Population (All Races)			U.S. All Races		
	Total # Vaccinated	%	n	%	95% Confidence Interval	n	%	95% Confidence Interval
2012	8,252	85.8%	340	52.7%	(46.5%-58.9%)	19,199	74.0%	(72.9%-75.1%)
2013	7,868	86.5%	320	55.2%	(48.7%-61.7%)	18,264	77.8%	(76.7%-78.9%)
2014	7,939	89.2%	377	56.9%	(50.8%-63.0%)	20,827	79.3%	(78.2%-80.3%)
2015	9,130	89.4%	350	55.7%	(49.5%-61.9%)	21,875	81.3%	(80.2%-82.3%)
2016	N/A	N/A	392	67.0%	(61.1%-72.4%)	20,475	82.2%	(81.2%-83.2%)
2017	N/A	N/A	349	68.4%	(62.5%-73.8%)	20,949	85.1%	(84.2%-86.1%)
2018	N/A	N/A	392	69.2%	(63.5%-74.3%)	18,700	86.6%	(85.6%-87.5%)
2019	N/A	N/A	426	74.9%	(69.5%-79.5%)	18,788	88.9%	(88.0%-89.8%)

Table C-134: Seasonal Influenza Vaccination Among Adults Aged 18 Years and Older, 2014-2015 to 2019-2020

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control and Prevention, National Immunization Survey-Flu (NIS-Flu); Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System (BRFSS)

	Alaska Native People Statewide		Alaska Total Population (All Races)			U.S. All Races		
	Total # Vaccinated	%	n	%	95% Confidence Interval	n	%	95% Confidence Interval
2014-2015	7,465	29.6%	3,032	40.9%	(37.0%-44.8%)	323,215	43.6%	(43.2%-44.0%)
2015-2016	6,055	25.3%	2,453	34.7%	(31.8%-37.6%)	319,167	41.7%	(41.3%-42.1%)
2016-2017	5,138	25.2%	2,760	36.9%	(33.2%-40.6%)	325,801	43.3%	(42.7%-43.9%)
2017-2018	2,955	25.1%	1,938	37.5%	(33.8%-41.2%)	313,143	37.1%	(36.7%-37.5%)
2018-2019	N/A	N/A	2,486	40.7%	(36.6%-44.8%)	302,148	45.3%	(44.9%-45.7%)
2019-2020	N/A	N/A	2,603	42.1%	(38.6%-45.6%)	286,116	48.4%	(47.8%-49.0%)

Note: Indian Health Service Immunization Program data for seasonal influenza is reported for the end of each fiscal year quarter 2 (ending March 31). National influenza coverage data (NIS-Flu and BRFSS) are reported for July through May of the reported flu season.

* Indian Health Service Immunization Program data are reported for the end of each fiscal year quarter 1 (ending December 31). National Immunization Survey (NIS) data is reported by calendar year (January - December).

N/A - Not applicable or not available

Appendix C - Data Tables

Table C-135*: Immunization Coverage by Vaccine Type Among Alaska Native Adults of Recommended Age, Alaska, 2017

Data Source: Indian Health Service, National Immunization Reporting System; Centers for Disease Control & Prevention, National Health Interview Survey

	Alaska Native People Statewide		U.S. All Races**		
	Total # Vaccinated	%	n	%	95% Confidence Interval
TDaP	16,617	79.6%	15,118	31.2%	(30.0%-32.5%)
HPV (≥ 1 dose) Females	1,865	78.8%	1,069	52.8%	(48.9%-56.6%)
HPV (≥ 1 dose) Males	525	71.1%	327	34.4%	(28.1%-41.3%)
Zoster	2,086	47.3%	9,401	34.5%	(33.2%-35.8%)
Pneumococcal	1,965	68.3%	7,064	69.0%	(67.5%-70.4%)

Note 1: TDaP coverage is for adults age 19 years and older. HPV is for females age 19-26 years and males 19-21 years, zoster is for adults age 60 and older, and pneumococcal is for adults age 65 and older.

Note 2: These data show adults who received the shingles/zoster vaccine known as Zostavax, but as of November 2020 Zostavax is no longer available or recommended. Current recommendations are for adults aged 50 years and older to receive two doses of the vaccine Shingrix, even if a Zostavax vaccine was received in the past.

** U.S. all races data is for 2018.

Table C-136: Percent of Alaska Native Adults who Received a Seasonal Influenza Vaccine by Tribal Health Region, 2014-2018

Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System

	Alaska Native People	
	%	95% Confidence Interval
Copper River/Prince William Sound	23.6%	(13.0%-32.2%)
Kenai Peninsula	29.3%	(20.3%-35.1%)
Arctic Slope	35.0%	(22.3%-49.5%)
Anchorage/Mat-Su	38.2%	(32.5%-41.7%)
Interior	39.9%	(34.0%-43.0%)
Bristol Bay	40.1%	(31.8%-49.6%)
Southeast	40.5%	(34.6%-43.8%)
Yukon-Kuskokwim	42.2%	(36.6%-46.4%)
Norton Sound	42.4%	(34.2%-50.0%)
Aleutians & Pribilofs	43.7%	(34.3%-53.1%)
Northwest Arctic	48.8%	(40.1%-53.7%)
Kodiak Area	51.2%	(39.0%-60.1%)
Statewide	**39.8%**	**(37.2%-40.4%)**

Note: Data with wide confidence intervals are subject to higher relative standard error and should be used with caution.

* Indian Health Service Immunization Program data are reported for the end of each fiscal year quarter 1 (ending December 31).

Appendix C - Data Tables

Table C-137: Rural Households Served by Water and Sewer Service, 2009-2021

Data Source: Indian Health Service, Sanitation Tracking and Reporting System

	Rural Households	
	Total Households	**% of Total**
2009	12,731	74.4%
2010	13,061	76.3%
2011	13,221	77.1%
2012	13,424	77.9%
2013	13,645	78.7%
2014	14,358	83.2%
2015	15,106	83.7%
2016	15,103	83.5%
2017	14,388	83.3%
2018	15,206	85.7%
2019	15,664	88.1%
2020	15,722	87.8%
2021	15,247	85.6%

Table C-138: Percent of Rural Households With Water and Sewer Services by Tribal Health Region, 2021

Data Source: Indian Health Service, Sanitation Tracking and Reporting System

	Rural Households	
	Total Households	**% of Total**
Kodiak Area	348	100.0%
Southeast	1,815	100.0%
Kenai Peninsula	188	99.1%
Copper River/Prince William Sound	282	99.0%
Bristol Bay	2,201	98.8%
Aleutians & Pribilofs	427	98.4%
Northwest Arctic	1,654	98.0%
Arctic Slope	1,220	97.3%
Yukon-Kuskokwim	4,481	79.0%
Interior	1,485	73.3%
Norton Sound	1,144	68.9%
Statewide	**15,247**	**85.6%**

Table C-139: Population Served by Community Water System with Fluoridated Water, 2004-2018

Data Source: Centers for Disease Control and Prevention, Division of Oral Health

	All Alaskans Statewide				U.S. Population		
	# Served by Fluoridated Community Water System	**% Served by Fluoridated Community Water System**	**Rank**	**Total # Served by Community Water System**	**# Served by Fluoridated Community Water System**	**% Served by Fluoridated Community Water System**	**Total # Served by Community Water System**
2004	307,205	59.5	35	516,311	180,632,481	68.7	262,929,376
2006	308,801	59.5	35	518,993	184,028,038	69.2	265,936,471
2008	404,213	62.8	33	643,651	195,545,109	72.4	270,089,930
2010	404,039	62.8	36	643,374	204,283,554	73.9	276,432,414
2012	361,240	52.9	41	682,873	210,655,401	74.6	282,379,894
2014	335,555	49.3	43	680,639	211,393,167	74.4	284,130,601
2016	233,192	49.6	44	469,850	201,565,162	72.8	276,969,134
2018	272,280	49.6	44	548,898	207,426,536	73.0	284,075,868

Note: Rank is among the 50 states, based on percentage of community water system users drinking fluoridated water. 1 represents largest percentage of users and 50 the lowest percentage.

Appendix C - Data Tables

Cause of Death ICD–10 Classification

Cause of Death	ICD-10 Codes
Enterocolitis due to Clostridium difficile	A047
Septicemia	A40-A41
Salmonella infections	A01-A02
Shigellosis and amebiasis	A03, A06
Certain other intestinal infections	A00-A046, A048-A09
Tuberculosis	A16-A19
Whooping cough	A37
Scarlet fever and erysipelas	A38, A46
Meningococcal infection	A39
Syphilis	A50-A53
Acute poliomyelitis	A80
Arthropod-borne viral encephalitis	A83-A84, A852
Measles	B05
Viral hepatitis	B15-B19
Human immunodeficiency virus (HIV) disease	B20-B24
Malaria	B50-B54
Other and unspecified infectious and parasitic diseases and their sequelae	A00, A05, A20-A36, A42-A44, A48-A49, A54, A79, A81-A82, A85.0-A85.1, A85.8, A86-B04, B06-B09, B25-B49, B55-B99
Cancer (Malignant neoplasms)	C00-C97
Benign/in situ neoplasms and neoplasms of uncertain behavior	D00-D48
Diabetes	E10-E14
Alcohol abuse	F10-F10.9
Parkinson's disease	G20-G21
Alzheimer's disease	G30
Heart disease	I00-I09, I11, I13, I20-I51
Essential hypertension	I10, I12, I15
Stroke (cerebrovascular diseases)	I60-I69
Aortic aneurysm and dissection	I71
Other major cardiovascular diseases	I70, I72-I78
Atherosclerosis	I70
Other diseases of arteries, arterioles and capillaries	I72-I78
Influenza and pneumonia	J09-J18
Chronic lower respiratory diseases	J40-J47
Pneumonitis due to solids and liquids	J69
Acute bronchitis and bronchiolitis	J20-J21
Other/unspecified acute lower respiratory infection	J22, U04
Pneumoconioses and chemical effects	J60-J66, J68
Other diseases of respiratory system	J00-J06, J30-J39, J67, J70-J98
Chronic liver disease & cirrhosis	K70, K73-K74
Peptic ulcer	K25-K28
Diseases of appendix	K35-K38
Hernia	K40-K46
Cholelithiasis and other disorders of gallbladder	K80-K82
Other diseases of the digestive system	K00-K22, K29-K31, K50-K66, K71-K72, K75-K76, K83-K92
Kidney disease (nephritis, nephrotic syndrome and nephrosis)	N00-N07, N17 - N19, N25-N27
Conditions originating in the perinatal period	P00-P96
Congenital anomalies	Q00-Q99
Anemias	D50-D64
Nutritional deficiencies	E40-E64
Meningitis	G00, G03
Other disorders of circulatory system	I80-I99
Infections of kidney	N10-N12, N136, N151
Hyperplasia of prostate	N40
Female pelvic inflammatory diseases	N70-N76
Pregnancy complications (maternal deaths)	O00-O99

Appendix C - Data Tables

Cause of Death ICD–10 Classification

Cause of Death	ICD-10 Codes
Sudden Infant Death Syndrome (SIDS)	R95
Symptoms and ill-defined conditions	R00 - R94, R96 - R99
All other diseases	D65 - D89
Accidents (unintentional injuries)	V01-X59, Y85-Y86
Suicide (intentional self-harm)	X60-X84, Y870, U03
Homicide (assault)	X85-Y09, Y871
Other external causes	Y10-Y34, Y35, Y36, Y40-Y84, Y872, Y88-Y89
Discharge of firearms, undetermined intent	Y22-Y24
Other and unspecified events of undetermined intent and their sequelae	Y10-Y21, Y25-Y34, Y872, Y899
Operations of war and their sequelae	Y36, Y891
Complications of medical / surgical care	Y40-Y84, Y88

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