

# ANNUAL REPORT: 2009 Update



*“The comprehensive state programs, as well as their individual components, have been shown to be effective. Failure to sustain them will cost lives.”*

— National Academy of Sciences, Institute of Medicine, *Ending the Tobacco Problem: A Blueprint for the Nation*, 2007

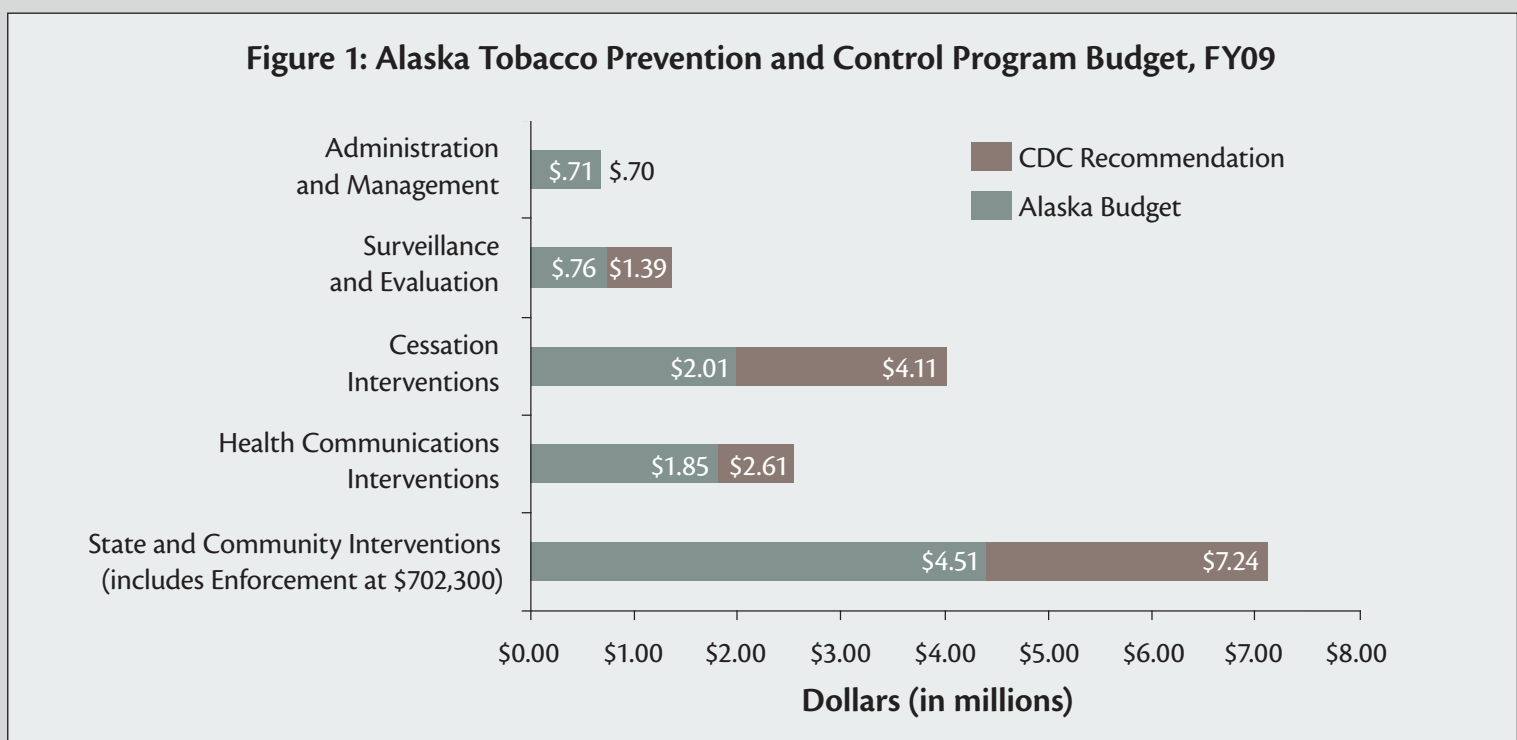
Alaska has made significant progress in reducing the prevalence of cigarette smoking. There have been dramatic reductions in youth smoking rates and adult smoking prevalence continues to show declining trends, providing further testimony that comprehensive and sustained tobacco prevention and cessation programs work. There has been great success over the past decade, but some of the hardest work remains ahead. As noted by the Institutes of Medicine, “earlier progress in reducing tobacco use can quickly be reversed by the social forces that tend to promote smoking.”

Particularly in rural areas of Alaska, there is a need for more vigorous efforts to implement proven strategies that prevent kids from using tobacco, help those already addicted to quit, and protect everyone from secondhand smoke.

## Fiscal Year 2009

The comprehensive tobacco prevention and control interventions used in Alaska are built on evidence-based “best practices” documented by the national Centers for Disease Control and Prevention (CDC).<sup>1</sup> Through community partnerships and programs across Alaska, tobacco control efforts are implemented at both the state and local level.

The CDC’s 2007 evidence-based guidelines recommend that Alaska invest \$10.7 million per year as a baseline, or \$16.05 million for a fully funded tobacco prevention and control effort. Alaska’s FY09 Tobacco Prevention and Control Program budget of \$9.84 million, relative to CDC’s full-funding recommendation, is shown in Figure 1.

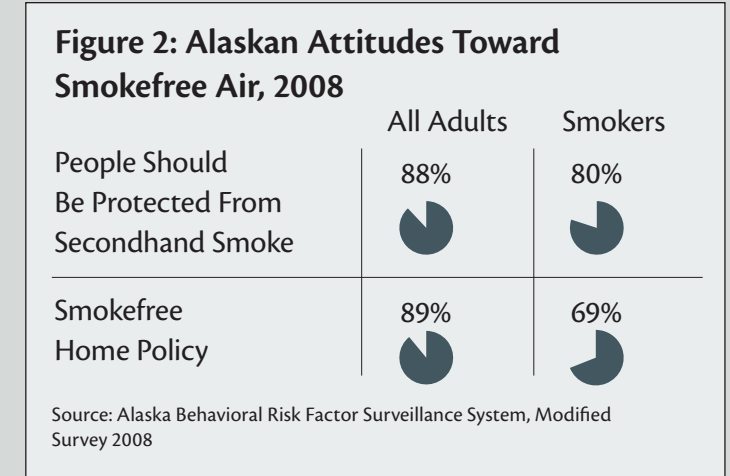


## Protecting Alaskans from Secondhand Smoke

Secondhand smoke is a leading cause of preventable death in the United States, causing approximately 50,000 non-smoker deaths each year from heart disease and lung cancer. Even brief exposure can be harmful. Despite reductions in secondhand smoke exposure, very significant worker health concerns remain.<sup>2</sup> The U.S. Surgeon General has concluded that only the complete elimination of indoor smoking can assure health and safety.

### Alaskans Support Smokefree Air

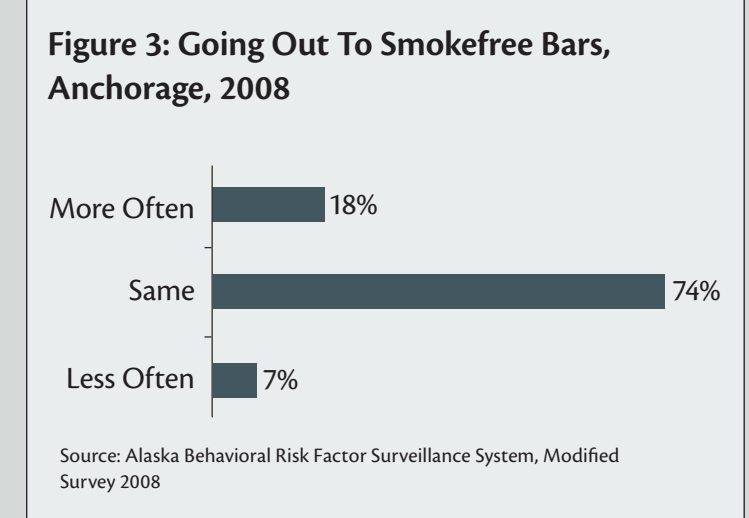
There is widespread agreement in Alaska among all adults (78 percent) as well as self-identified smokers (60 percent) that all indoor workplaces should be smokefree.<sup>3</sup> Nearly all adults (94 percent) as well as the vast majority of self-identified smokers (84 percent) agree that those who smoke should “take it outside” so that others do not have to breathe secondhand smoke.<sup>4</sup> The majority (89 percent) of Alaska adults have a policy of no smoking in their homes (Figure 2). The number of smokers reporting a completely smokefree household policy has substantially increased over the past decade from 48 percent (1998/2000) to 69 percent (2008).<sup>5</sup>



The smokefree indoor air law in Anchorage that applies to all workplaces, including restaurants and bars, is now more popular than ever. Two years following implementation, the ordinance has overwhelming support among adults (84 percent) as well as a substantial majority of self-identified smokers (57 percent).<sup>6</sup> Asked if Anchorage’s hospitality venues, including bars, were now “more/less enjoyable” the response was clearly “more enjoyable” among all adults (86 percent) as well as smokers (65 percent).<sup>6</sup>

### Smokefree Policies and the Hospitality Industry

Recent economic research from Minnesota further reinforces the conclusion of the 2006 U.S. Surgeon General report on secondhand smoke that smokefree policies can have a positive economic impact on the hospitality industry or are neutral in effect. These conclusions are also supported by research in Anchorage where 18 percent of respondents report going out more often to bars now that they are smokefree, 74 percent report going out as often as they did before, and only 7 percent report going out less often (Figure 3).



### Smokefree Multi-unit Housing

In July 2009, the U.S. Department of Housing and Urban Development (HUD) Office of Public & Indian Housing issued a guidance memorandum to all public housing agencies that “strongly encourages” smokefree policies in multi-unit housing. Because secondhand smoke “can migrate between units in multi-family housing, causing respiratory illness, heart disease, cancer and other adverse health effects in neighboring families,” HUD supports the adoption of smokefree policies by all public housing authorities. At least three housing authorities in Alaska have now adopted smokefree policies: North Pacific Rim Housing Authority (2007), Petersburg Indian Association (2008) and the Aleutian Housing Authority (2009).

# Challenges Ahead

*“Research has demonstrated the importance of community support and involvement at the grassroots level...”*

— Centers for Disease Control and Prevention *Best Practices for Comprehensive Tobacco Control Programs*, 2007

Despite substantial progress in reducing tobacco use, cigarette smoking continues to be the leading cause of death and disease in the U.S. as well as in Alaska. A recent CDC analysis of the 2008 National Health Interview Survey found that, while in the last decade the overall proportion of adult current smokers declined, certain populations — especially those with less income and lower educational attainment — continue to report an alarmingly high tobacco use rate and the lowest quit ratios. (Quit ratios were calculated as the ratio of former smokers to ever smokers for each survey year from 1998 to 2008.)<sup>7</sup>

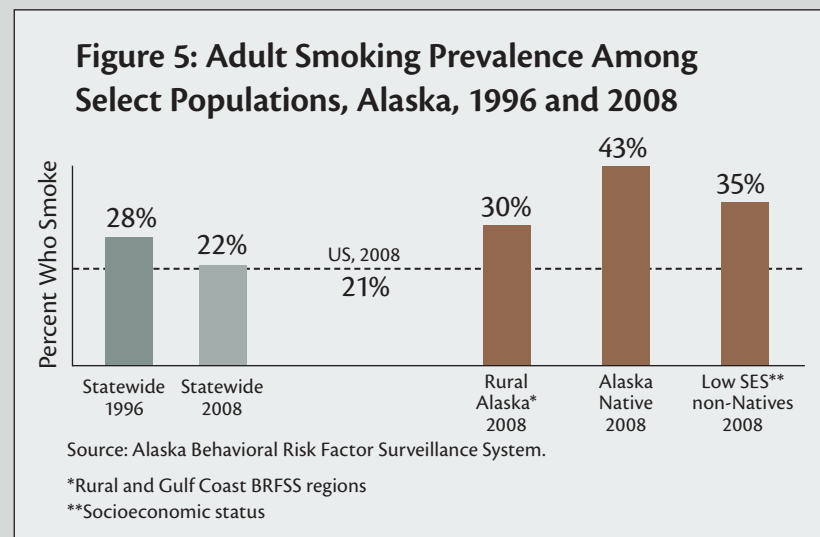
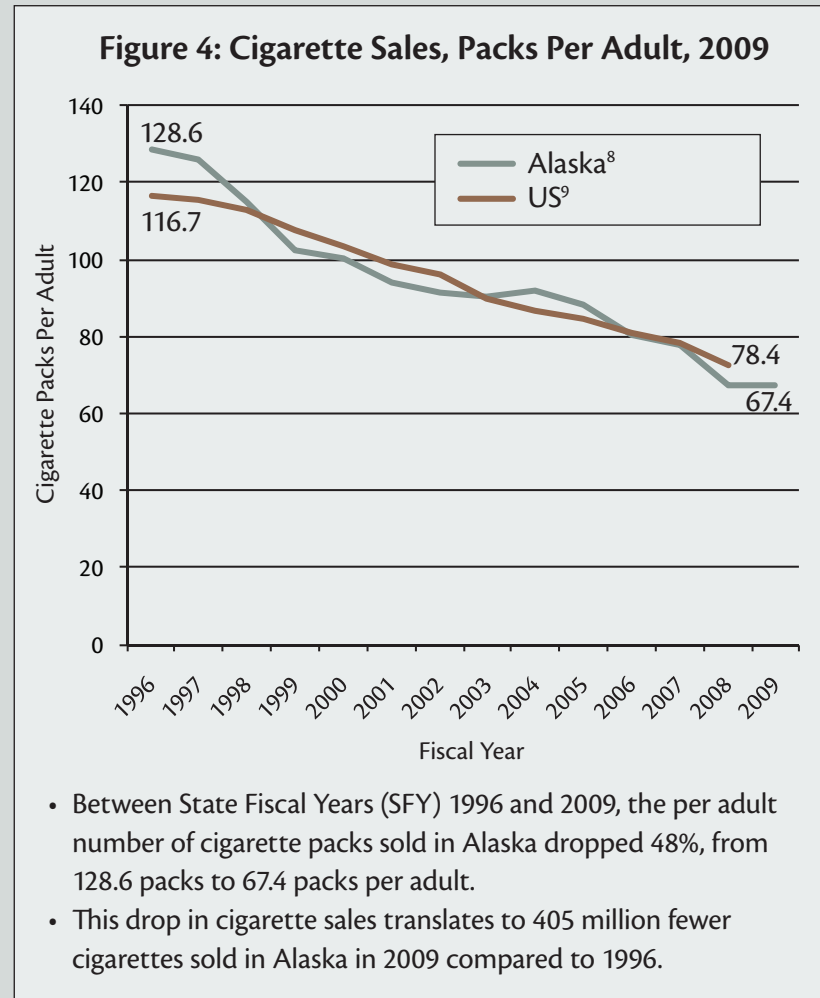
Smokeless tobacco use in Alaska remains a serious concern. The use of smokeless products among Alaska Native girls and women in particular is exceptionally high.

In Alaska, while there has been a large decrease in tobacco consumption overall (Figure 4), there is a disproportionately high rate of smoking and use of smokeless tobacco in rural Alaska. Smoking prevalence in rural areas is 50 percent higher than in urban areas (Figure 5).

## Sustaining the effort

Efforts continue to support local programs via community, school-based and cessation grant programs, along with media message opportunities to expand community awareness of the health hazards of tobacco use.

As stated by the CDC, funding at the “recommended levels is needed to continue and improve state comprehensive tobacco control programs, especially when reaching populations that have disproportionately high rates of smoking ... evidence based programs known to reduce smoking should be intensified among these groups.”<sup>7</sup>



# Other Program Highlights



## Helping Alaskans Quit

The Alaska Tobacco Quit Line provides free tobacco cessation services, including counseling and nicotine replacement therapy (patches) to all adult Alaskans interested in quitting. An evaluation of the Quit Line completed in FY09 showed that over 97 percent of survey respondents were satisfied with the Quit Line services. This, combined with a relatively high 44 percent quit success rate,<sup>10</sup> demonstrates that the Alaska Tobacco Quit Line is an effective resource for Alaskans who wish to stop using tobacco.

Ongoing efforts tailor cessation services — for all forms of tobacco — to specific populations around the state, including Alaska Natives, pregnant women, and rural populations.

The Tobacco Cessation Interventions grant program supports nine healthcare centers across Alaska with funds to build comprehensive, sustainable health care systems that identify and treat tobacco users. Following CDC-recommended best practices, a key component of this program is training staff in Alaska’s hospitals and clinics to screen patients for tobacco use and exposure to secondhand smoke, and refer them to cessation services, such as the Alaska Tobacco Quit Line.



## Community and School-based Programs

The following community and school-based program highlights demonstrate continuing success in promoting tobacco-free policies:

- Unalaska’s community-wide smokefree workplace ordinance went into effect
- All Aleutian Housing Authority buildings went smoke-free
- The North Slope communities of Nuiqsut and Kaktovik passed clean indoor air ordinances
- The Kashunamiut School District in Chevak removed all “designated smoking areas” from school grounds
- The Yukon Koyukuk School District revised their tobacco-free school policy to include enforcement strategies.



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