

2013

# JUNEAU HEALTHY INDICATORS REPORT

A REPORT THAT FOCUSES ON JUNEAU'S  
HEALTH AND QUALITY OF LIFE

# SPECIAL THANKS

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This publication was prepared by The National Council on Alcoholism and Drug Dependence (NCADD) and reviewed by the McDowell Group.

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We would like to thank the City and Borough of Juneau, the Service Advisory Board for funding this research. The State of Alaska and private donations also assisted in this publication.

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# INTRODUCTION



## HISTORY & PURPOSE

By Matt Felix MS  
NCADD / Researcher

A Community Health Indicator Report (HIR) is an objective gathering of data to clarify health concerns expressed by citizens through surveys. This Health Indicator Report follows two major surveys done in Juneau, Alaska. The 2005 Compass Survey and the 2010 McDowell Community Survey both gave the citizens of Juneau a chance to prioritize their health concerns. This HIR focuses on alcohol and both licit and illicit drugs and includes tobacco. Alcohol and drug use, abuse and addiction was the priority concern of the Juneau population in both surveys. In the McDowell Survey, the statement that received the most responses was *“Alcohol and Drugs is a critical problem in our community and is a key factor in the multiple health conditions in our community”*.

This report begins with a comparative view of Juneau’s health status and rank by including the County Health Rankings data. This study gives a general overview of Juneau’s health and how we compare to Alaska as a state and provides a national benchmark to achieve a healthy population.

This Health Indicator Report attempts to give a better understanding of the health in Juneau and the Southeast region. We have included data on the high incidence of chemical use and the related diseases associated with these rates. We have attempted to compare rates of related diseases and issues in Juneau, the state, and the nation when the data allowed. This attempt at community awareness also presents critical insight for health planners and funders in the future. Most importantly, we hope this data gives direction to disease prevention efforts that may make Juneau a better place to live.

In addition, the latest state wide survey on health, The Healthy Alaskans Report 2020 found that the leading health concern of Alaskans was “Alcohol Use and Abuse.” This concern superseded the cost of health care (2), diet and obesity (3), other substance abuse issues (4) and violence (5).

The HIR focuses on alcohol, drug, and tobacco because these products have been shown to be the greatest contributors to morbidity and mortality in our community as well as the state. Alaska is the only state that lists cancer as the leading cause of death over heart disease. Alcohol and tobacco are major contributors to both of these diseases.

The measures presented in this Community HIR illustrate as current as possible, the environment in which we live, work, and in which our children grow and learn. The report also hints at the rising financial burden on families and government that comes with diseases that have social-legal consequences. Most importantly, this document gives a baseline profile of the Juneau community that validates our citizens concerns. None of the data in this report is confidential.

# GENERAL HEALTH INDICATORS

	Juneau	Alaska	National Benchmark*
<b>Health Outcomes</b>			
<b>Mortality</b>			
Premature death	5,867	7,455	5,317
<b>Morbidity</b>			
Poor or fair health	11%	13%	10%
Poor physical health days	3.4	3.5	2.6
Poor mental health days	3.0	2.9	2.3
Low birthweight	4.9%	5.9%	6.0%
<b>Health Factors</b>			
<b>Health Behaviors</b>			
Adult smoking	19%	22%	13%
Adult obesity	26%	28%	25%
Physical inactivity	18%	23%	21%
Excessive drinking	22%	19%	7%
Motor vehicle crash death rate	7	11	10
Sexually transmitted infections	563	836	92
Teen birth rate	27	42	21
<b>Clinical Care</b>			
Uninsured	19%	21%	11%
Primary care physicians**	827:1	1,206:1	1,067:1
Dentists**	1,077:1	1,286:1	1,516:1
Preventable hospital stays	44	55	47
Diabetic screening	75%	70%	90%
Mammography screening	69%	57%	73%
<b>Social &amp; Economic Factors</b>			
High school graduation**	72%	68%	
Some college	74%	65%	70%
Unemployment	5.3%	7.6%	5.0%
Children in poverty	10%	15%	14%
Inadequate social support	17%	19%	14%
Children in single-parent households	36%	31%	20%
Violent crime rate	426	641	66
<b>Physical Environment</b>			
Drinking water safety	0%	11%	0%
Access to recreational facilities	22	12	16
Limited access to healthy foods**	6%	8%	1%
Fast food restaurants	40%	44%	27%

\* 90th percentile, i.e., only 10% are better.

\*\* Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

Table A

Juneau gets positive rankings in many areas of health, such as environment, clean water, and fewer low birth weight babies. Other health rankings put Juneau ahead of state averages but below the optimum benchmarks. Excessive drinking is one of the few areas that places Juneau at a poorer ranking with both the state and national benchmarks.

Sources: Table A.) <http://www.countyhealthrankings.org/app/home#/alaska/2013/juneau/county/outcomes/overall/snapshot/by-rank>, University of Wisconsin National County Health Rankings

# DEMOGRAPHICS

## WHO LIVES HERE?

PEOPLE	JUNEAU	ALASKA
Population, 2010	31,275	710,231
Persons under 5 years, percent, 2010	6.3%	7.6%
Persons under 18 years, percent, 2010	23.5%	26.4%
Persons 65 years and over, percent, 2010	8.4%	7.7%
Female persons, percent, 2010	49.0%	48.0%
White persons, percent, 2010 (a)	69.7%	66.7%
Black persons, percent, 2010 (a)	0.9%	3.3%
American Indian and Alaska Native persons, percent, 2010 (a)	11.8%	14.8%
Asian persons, percent, 2010 (a)	6.1%	5.4%
Native Hawaiian and Other Pacific Islander, percent, 2010 (a)	0.7%	1.0%
Persons reporting two or more races, percent, 2010	9.5%	7.3%
Persons of Hispanic or Latino origin, percent, 2010 (b)	5.1%	5.5%
White persons not Hispanic, percent, 2010	67.4%	64.1%
(a) Includes persons reporting only one race.		
GEOGRAPHY	JUNEAU	ALASKA
Land area in square miles, 2010	2,701.93	570,640.95
Persons per square mile, 2010	11.6	1.2

Table A

### AGING

Juneau's population is essentially static but rapidly aging. Alaskan seniors are more likely than U.S. seniors as a whole to die of causes linked to behavioral health issues.

# AGING POPULATION

## ALASKA'S AGING POPULATION

POPULATION AGE 60+	60+ % of Area's 2010 Population	CY 2010	CY2009	CY2008	CY2000	% Seniors Change 2000-2010
Southeast*	16.4%	11,764	11,271	10,809	7,740	+52.0%
Age 60-64	39.5%	35,938	32,837	30,395	17,327	+107.4%
Age 65-74	38.9%	35,350	33,081	31,019	22,507	+57.1%
Age 75-84	16.4%	14,877	14,169	13,795	10,558	+40.9%
Age 85+	5.2%	4,711	5,013	4,641	2,634	+78.9%
Rank Among States in growth of Senior population		Ranking #1	Ranking #1	Ranking #1		Fastest growing senior population per capita. Age 65+

Note: \* Southeast includes: Haines, Juneau, Ketchikan, Prince of Wales, Sitka, Skagway-Hoonah-Angoon, Wrangell-Petersburg, Yakutat

Table A

Juneau has one of the fastest growing senior population in Alaska and in 2010, it's senior population (60+) was at 4,495. Drug-induced deaths (including both prescription and non-prescription drugs) are 82% higher among Alaskan seniors than among U.S. seniors. (Source: 2011 Alaska Commission on Aging Senior Snapshot)

Alaskan seniors are more likely to die from cancer and chronic lower respiratory diseases than the national average. Senior death rates from heart diseases are substantially lower in Alaska. Older Alaskans have suicide rates 45% higher than national senior suicide rates, as well as high rates of accidental deaths and alcohol and drug-induced deaths. The figures presented in this section suggest that behavioral health programs targeted to seniors with depression, other mental illness, and substance abuse problems could have a dramatic impact on the quality of life of this age group. (Source: Alaska Commission on Aging FY 2010 Annual Report)

# AGING POPULATION

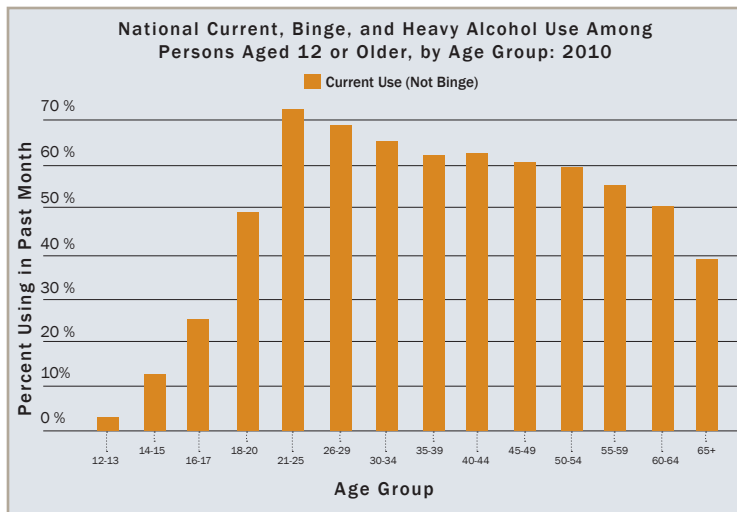


Chart A

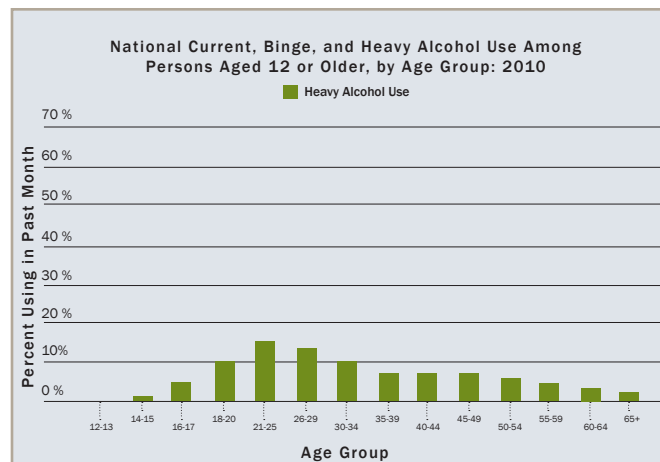


Chart C

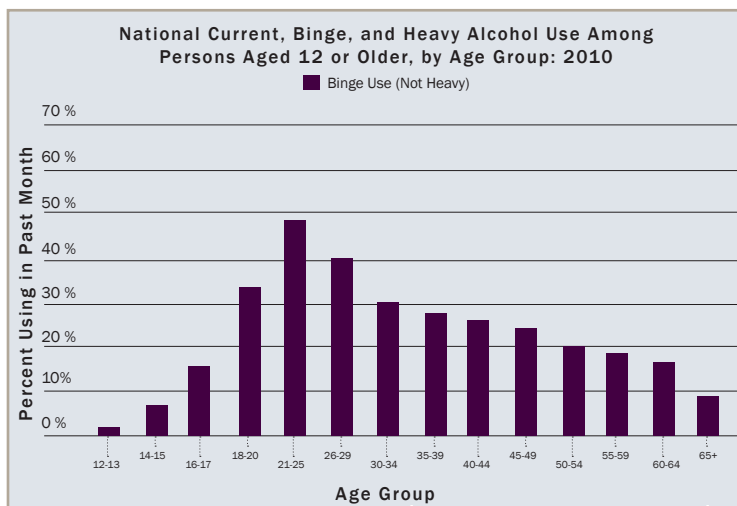


Chart B

Although heavy drinking subsides with age, it is exceedingly high for seniors in Alaska.

Alaskan seniors are over 3 times more likely than U.S. Seniors as a whole to experience an alcohol related death.

(Binge Drinking = 5 or more drinks in a setting)

(Source: 2011 Alaska Commission on Aging Senior Snapshot)

Hospital admissions for non-fatal falls, Age 60+	AK, 2010 706 (76.6% of all non-fatal injury hospitalizations)	AK, 2009 753 (76.6% of all non-fatal injury hospitalizations)	565,029 (74.3% of all non-fatal injury hospitalizations from top 20 causes)
Alcohol Use Suspected	AK, 2010 61 (7.8%)	AK, 2009 66 (8.8%)	-
Age 60+ Binge Drinkers	5%	5.1%	3.5%
Age 60+ Heavy Drinkers	3%	4.1%	3.1%
Age 60+ Smokers	9.9%	8.6%	8.2%

Table A

Sources: Chart(s) A.,B.,C.) SAMSHA 2009, Results from the 2008 National Survey on Drug Use and Health: National Findings (Office of Applied Studies, NSDUH Series H-36, HHS Publication No. SMA 09-4434) Rockville, MD. <http://www.samhsa.gov/data/NSDUH/2k10NSDUH/2k10Results.htm#Fig3-1> Table A). Alaska Trauma Registry; WISQARS data base (CDC), Age 65+ - 2010 BRFSS



**Underage Alcohol Use, Juneau, Alaska and U.S,  
2007, 2009, 2011**

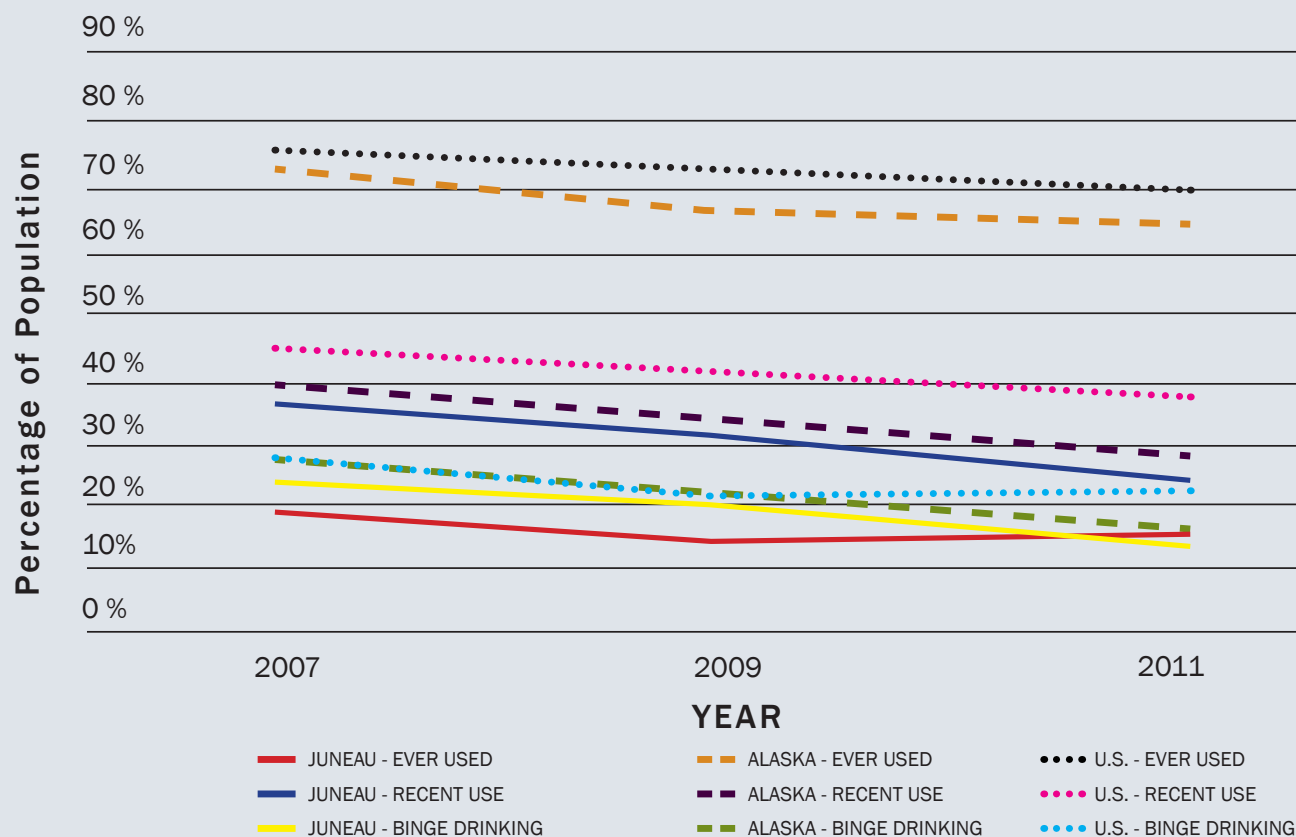
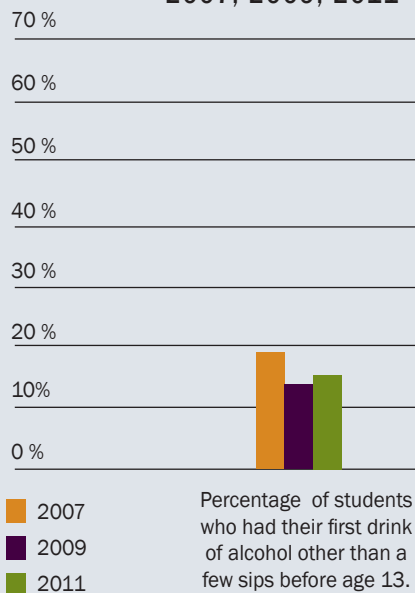


Chart A

**First drink before age 13, Juneau,  
2007, 2009, 2011**



## WHAT IS THE YRBSS?

The Youth Risk Behavior Surveillance System (YRBSS) monitors health-risk behaviors that contribute to the leading causes of death and disability among youth nationally.

The slight reduction in the use of alcohol among Juneau's teens mirrors the national trend. Alcohol still remains the overall drug of choice among teens in Alaska.

Chart B

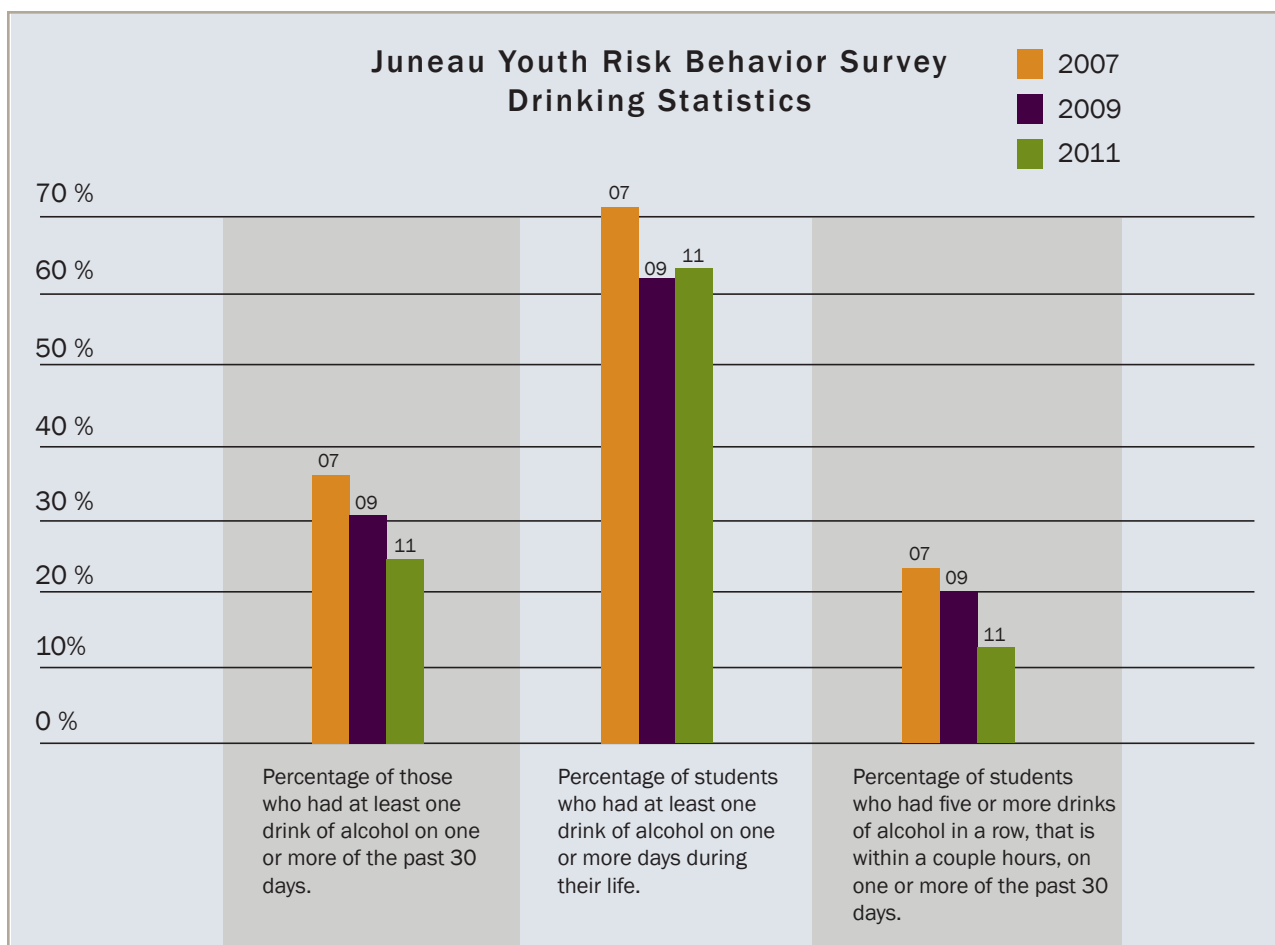


Chart A

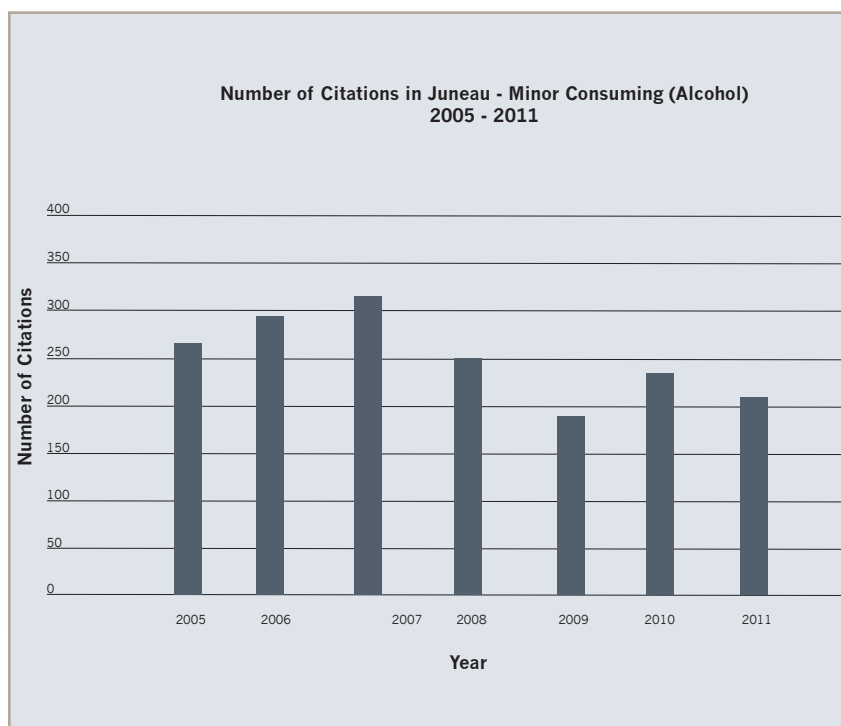


Chart B

## YOUTH AND ALCOHOL

The use of alcohol and tobacco by youth has declined over the last five years. Early onset of alcohol use and binge drinking puts teens at greater risk of developing alcohol addiction later in life times four.

Sources: Chart A.) Youth Risk Behavior Survey 2007, 2009, 2011, Chart B.) Juneau Police Department

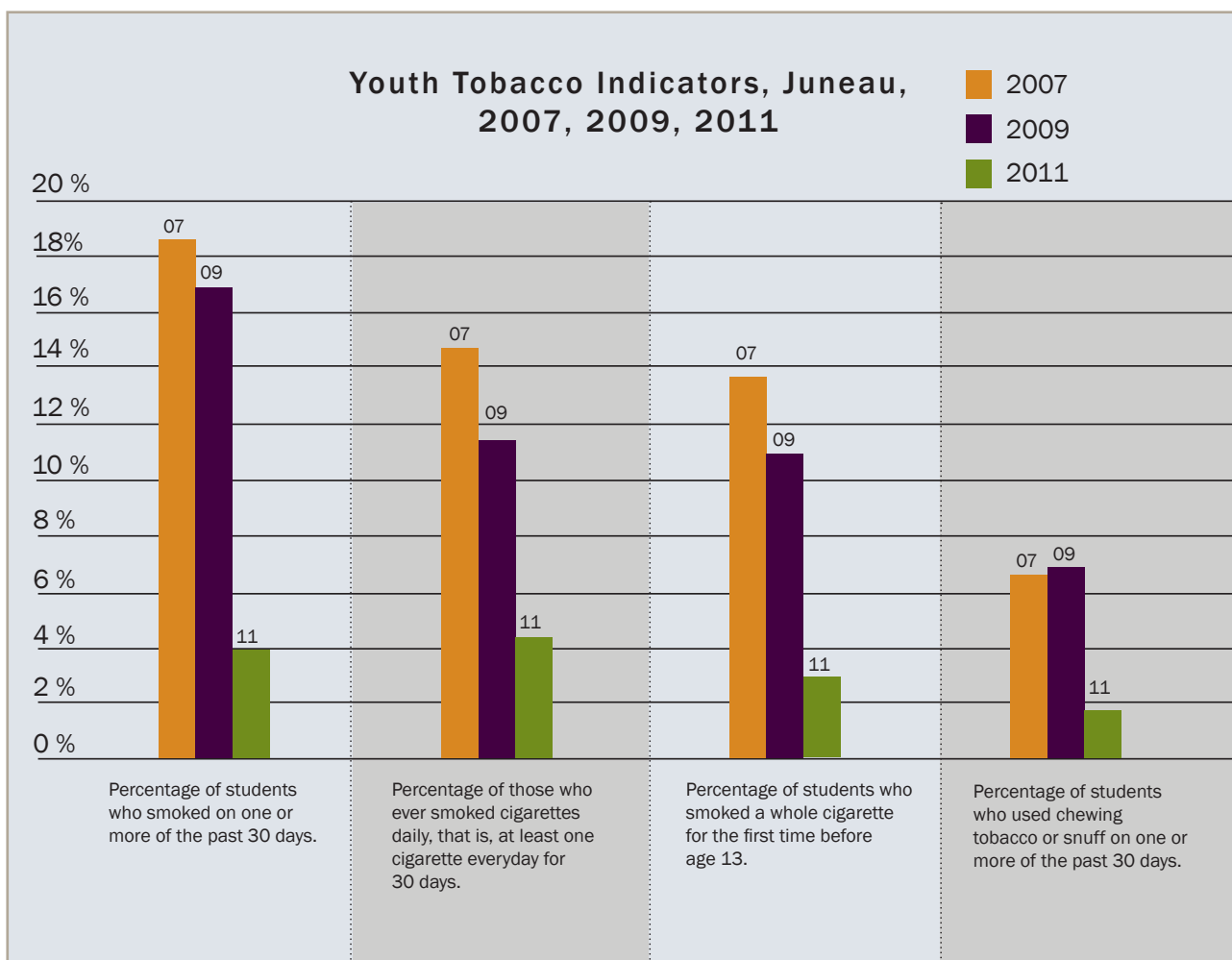


Chart A

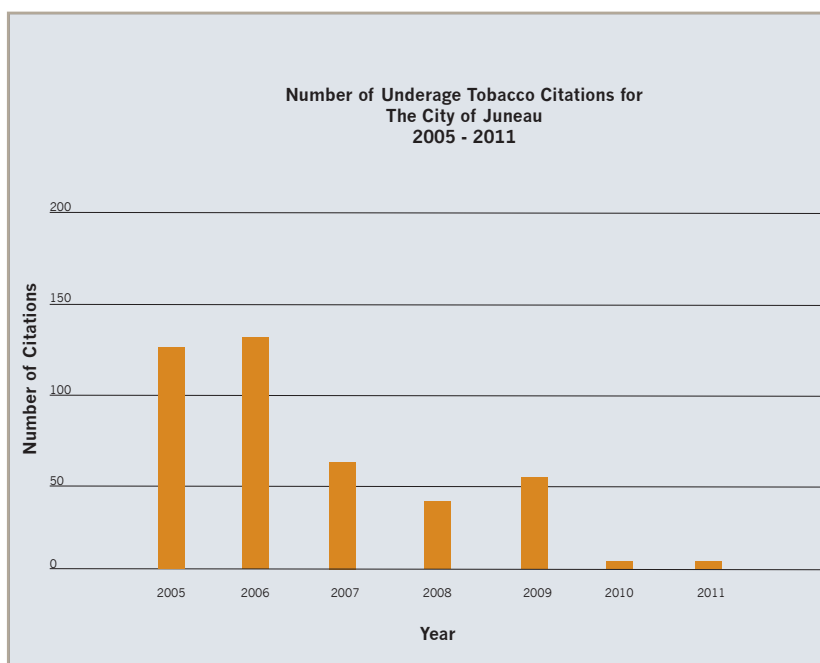


Chart B

## YOUTH AND TOBACCO

Although smoking by teens has declined substantially over the last ten years, the consequences of smoking among this age group will impact the overall health of a community for many years. Eighty-five to ninety percent of adult smoking begins in the teen years. The use of tobacco products is the single most important factor that negatively impacts a community's health.

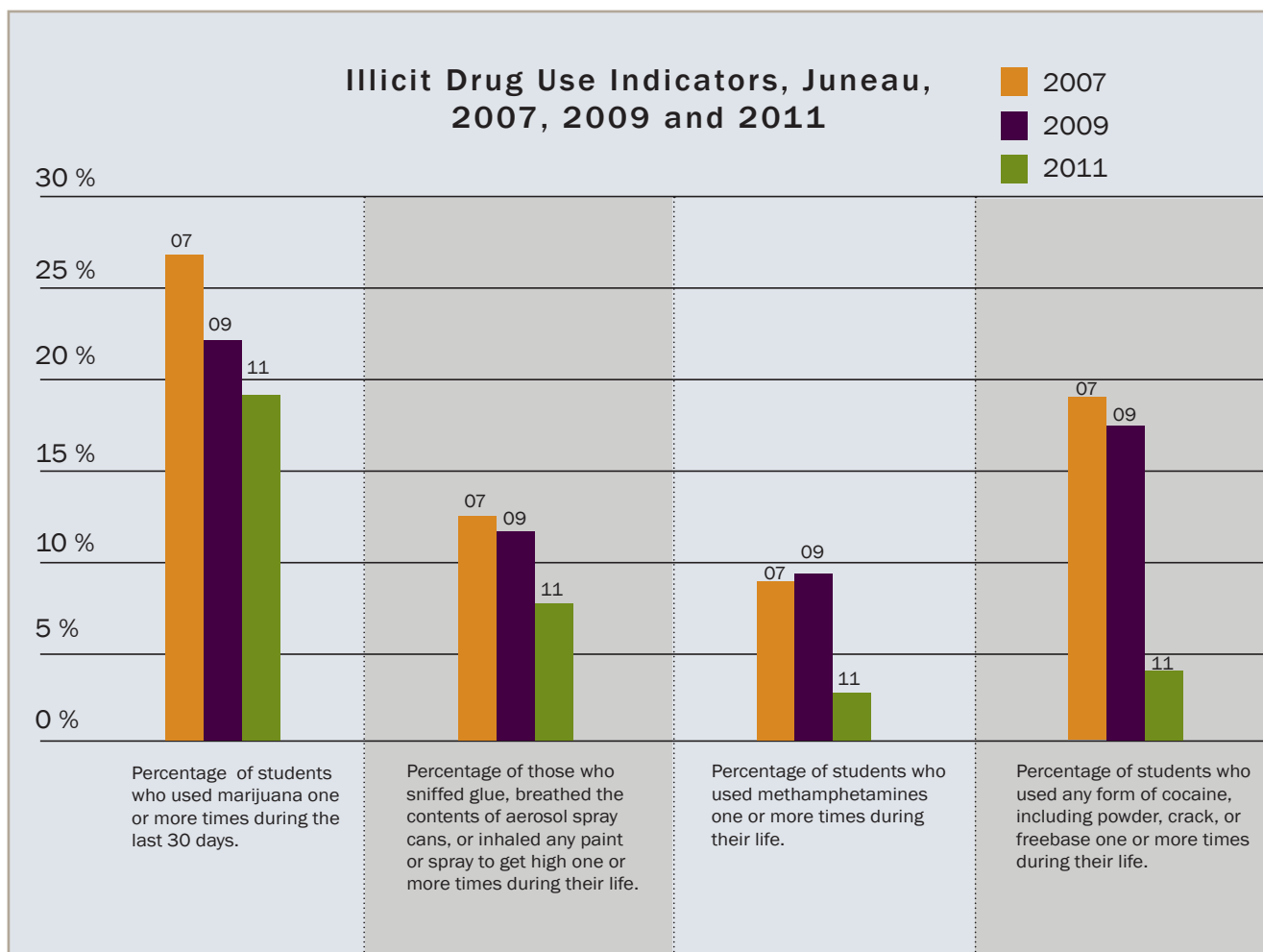


Chart A

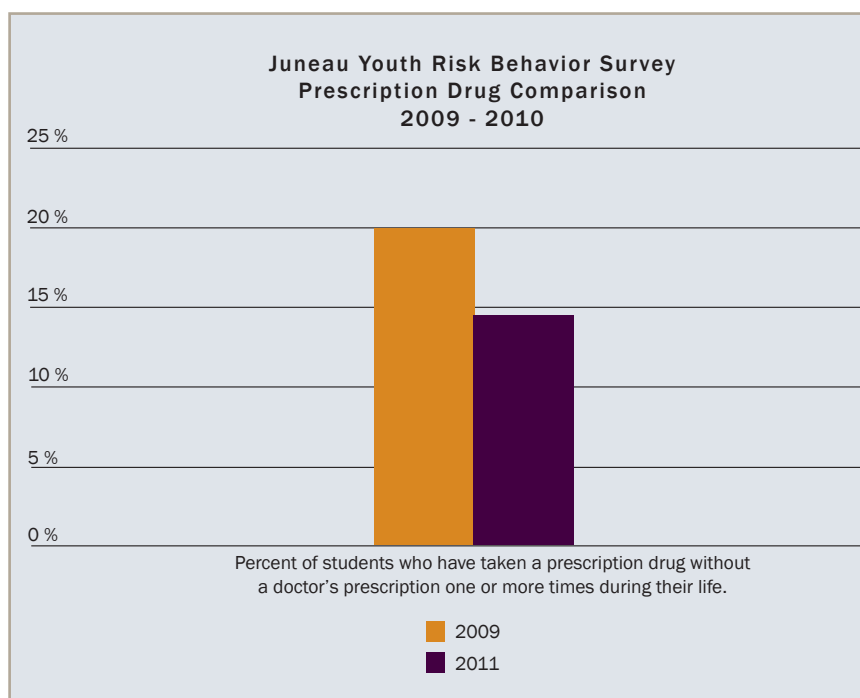


Chart B

## YOUTH AND DRUGS

Drug abuse continues to be a factor in teen health.

It appears that prescription drug use decreased between 2009 and 2011.

Reformulation of opioid prescription medication made it more difficult to abuse.

Sources: Chart A.) Youth Risk Behavior Survey 2007, 2009, 2011, Chart B.) Youth Risk Behavior Survey 2007, 2009, 2011

# ALCOHOL ABUSE & ADDICTION

## WHAT IS A STANDARD DRINK IN THE UNITED STATES?

A standard drink is equal to 14.0 grams (0.6 ounces) of pure alcohol. Generally, this amount of pure alcohol is found in:

- 12-ounces of beer
- 8-ounces of malt liquor
- 5-ounces of wine
- 1.5-ounces or a “shot” of 80-proof distilled spirits or liquor (e.g., gin, rum, vodka, or whiskey)

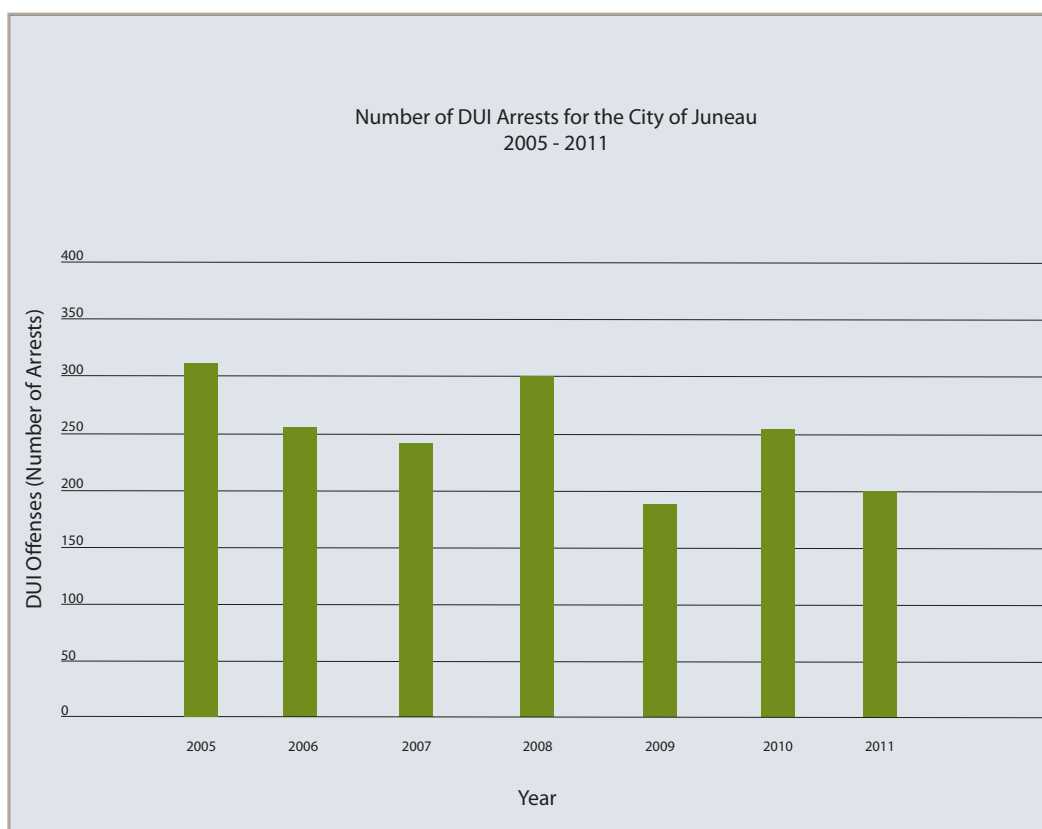


Chart A

## WHY DO WE DRINK SO MUCH?

Community laws and norms encourage or discourage alcohol abuse. Alcohol outlet density or the number of places selling alcohol also significantly influences consumption rates, with consumption increasing as the number of outlets increases. Access (availability) to alcohol greatly influences the amount of use and abuse among all age groups. During the territorial period, the federal jurisdiction issued Juneau many liquor licenses. These licenses and establishments were grandfathered into the state upon statehood. The state issued new licenses from 1959 to 1986 at a population ratio of one license per 1500 people. In 1986, the state amended the statute to mirror other states and began issuing licenses at one type of license per 3,000 population. This effectively cut off new licenses except seasonal and restaurant liquor licenses. Because of this history, Juneau now has many licenses in excess of the allowed by statute.

Alaska statutes stipulate Juneau should have no more than 1 bar and 1 liquor store per 3,000 people, which equals 11 outlets of each type. The estimated population for Juneau is 31,275. (Sources: AS04.11.400, 2010 US Census).

Abundant availability of alcohol influences its use and price in a small community such as Juneau.

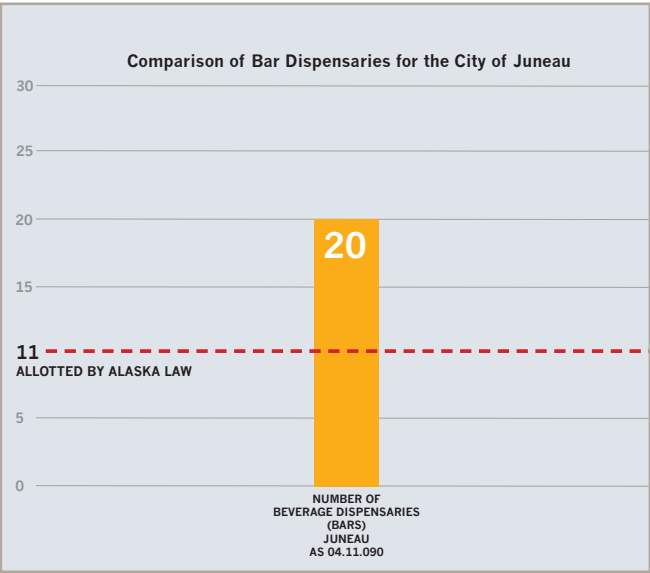


Chart A

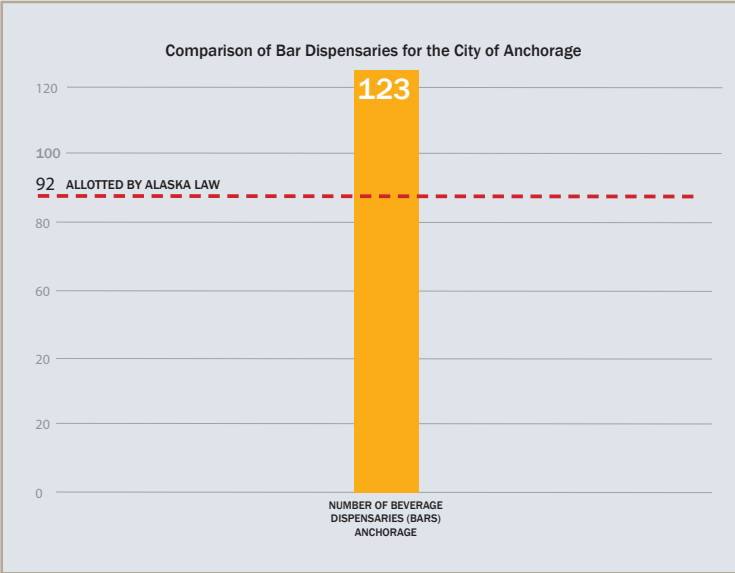


Chart B

Bars & Beverage Dispensary license  
AS 04.11.090

Sources: Chart A.) Alcoholic Beverage Control Board for State of Alaska, Healthy Anchorage Indicators Report, 1998, Chart B.) Alcoholic Beverage Control Board for State of Alaska, Healthy Anchorage Indicators Report, 1998

## Average Yearly Consumption of Gallons of Pure Alcohol

District 1 Average with Tourist  
Influence: 3.4 Gallons

District 1 Average w/o Tourist  
Influence: 3.0 Gallons

U.S. Average: 2.3 Gallons

Table A

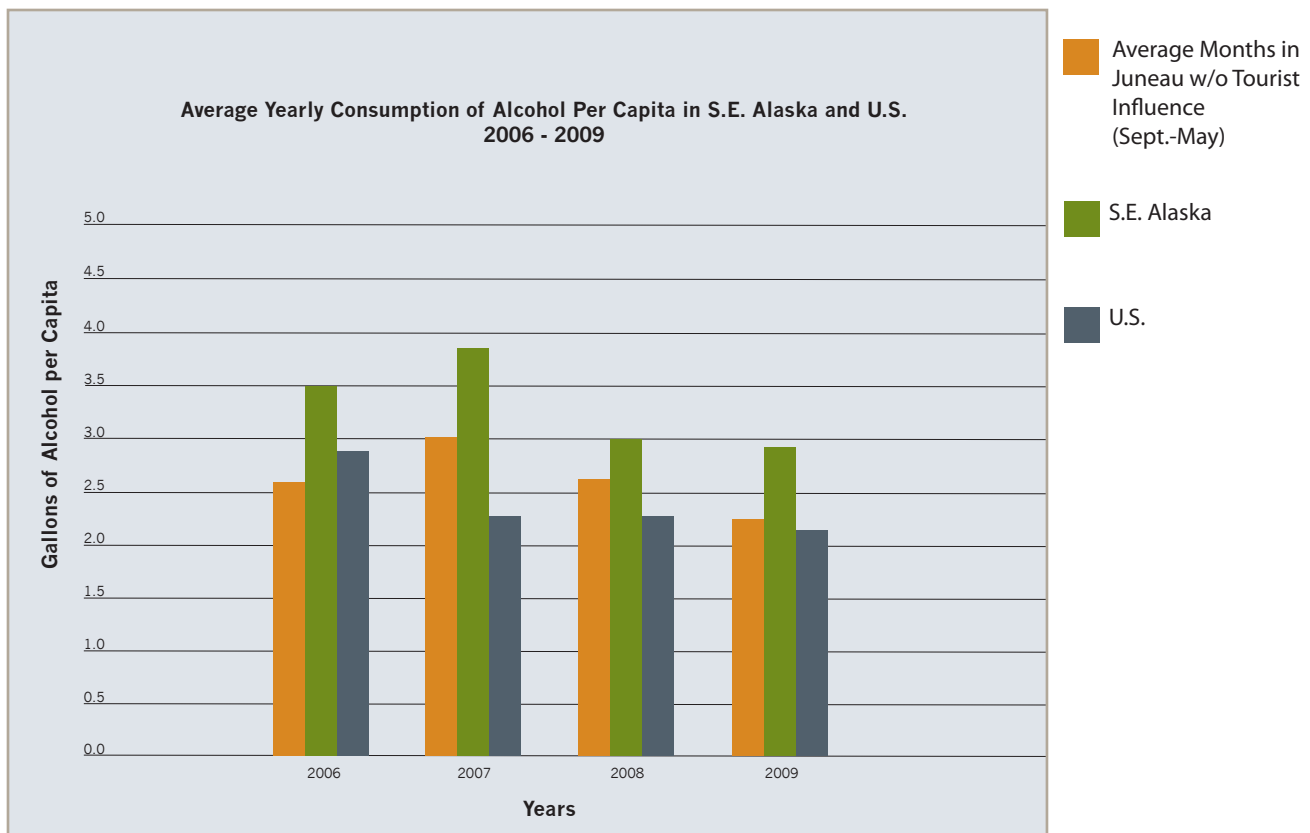


Chart A

A bell weather indicator of a community's health and social problems is the per-capita consumption of alcohol. The amount of alcohol consumption is positively correlated to the health, social, and legal status of a given community or state. This is measured in pure or absolute alcohol consumed by the average resident of a population. Southeast (District 1) is the the heaviest drinking region in the state and one of the highest consuming regions in the nation.

# ALCOHOL ABUSE & ADDICTION

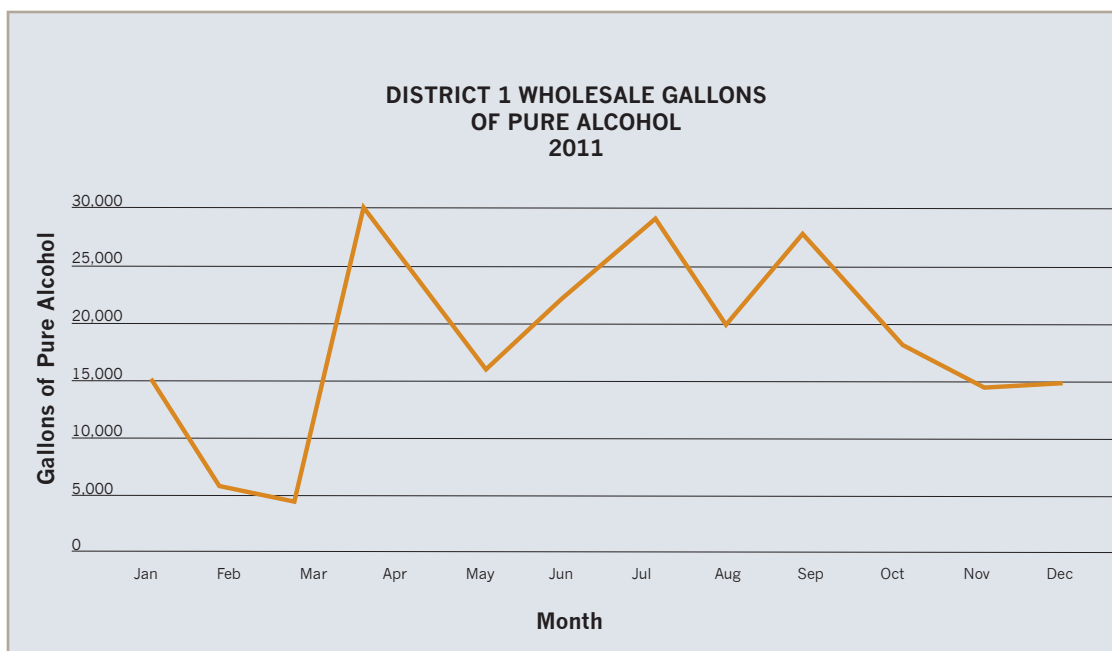


Chart A



Chart B

For the six non-tourists months, 75,860 wholesale gallons of pure alcohol were purchased, averaging to 12,643 gallons per month.

For the six tourists months, 146,625 wholesale gallons of pure alcohol were purchased. For these months the monthly average was 24,437 gallons.

After removing the tourism influences on the per-capita drinking, Juneau still has an exceedingly high rate of alcohol consumption.

Sources: Chart A.) The National Council on Alcoholism and Drug Dependence- Juneau Affiliate, AK Dept. of Revenue, Chart B.) City and Borough of Juneau, AK Dept. of Revenue



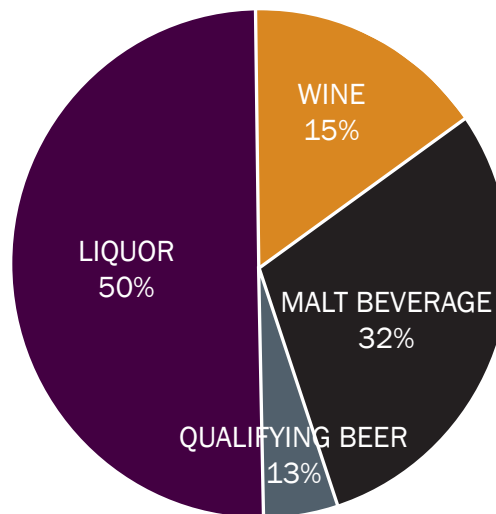
Alcohol consumption is the single most influencing factor in crime, preventable injuries, domestic violence, suicide, drowning, pedestrian and auto fatalities. Recent research demonstrated that alcohol combined with tobacco is a major contributing factor in cancer, especially liver, lung, and breast cancer. Throat and esophageal cancers are most prominent with alcohol use as well. Alcohol is implicated in 70% of fatalities by fire in the state. Alcohol use during pregnancy is the leading preventable cause of birth defects in all regions of the state. (Source: National Council on Alcoholism and Drug Dependence-Juneau).

## SOUTHEAST ALASKA ALCOHOLIC BEVERAGES DISTRIBUTED OR SOLD 2010 - 2011

### Wholesale Pricing

Category	Amount
Liquor:	\$2,680,973
Wine:	\$811,985
Malt Beverage:	\$1,686,745
Qualifying Beer:	\$159,425

Table A



### Pure alcohol % by type sold

Liquor	40%
Wine	13%
Malt Beverage	4.5%
Qualifying Beer	4%

Table B

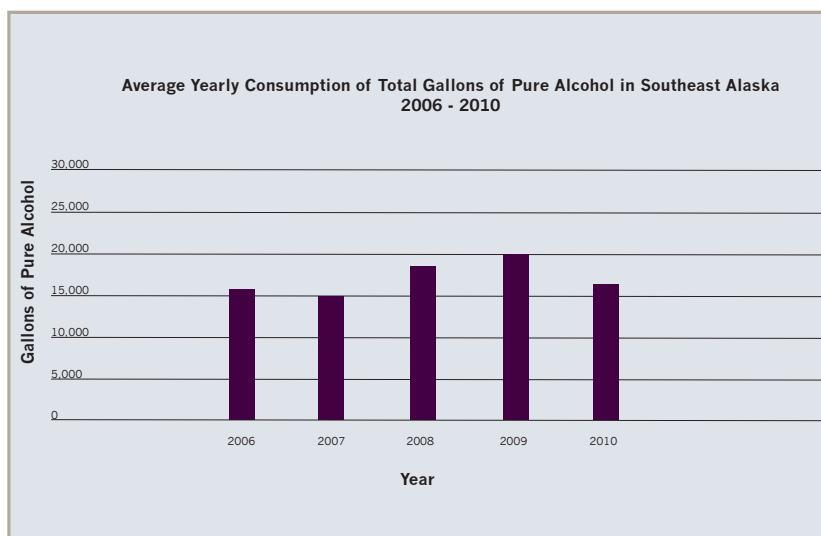


Chart B

## ALCOHOL IS THE #1 HEALTH CONCERN OF ALASKANS

**T**he State of Alaska Department of Health and Social Services and the Alaska Native Tribal Health Consortium joined together for the Healthy Alaskans 2020 initiative (HA2020), a project working to pinpoint Alaska-specific health concerns and guide efforts in the state around common health goals.

HA2020 is a decade-long project that will narrow in on Alaska's most pressing health concerns, set health goals, and look for ways to meet those goals by 2020.

As part of this project, Alaskans were asked to rank the top 10 health issues important to Alaskans in order of priority.

1. ALCOHOL USE AND ABUSE
2. COST OF HEALTH CARE
3. DIET, EXERCISE AND OBESITY
4. OTHER SUBSTANCE ABUSE
5. VIOLENCE
6. COMMUNITY SAFETY
7. QUALITY OF LIFE AND WELL-BEING
8. SEXUAL AND REPRODUCTIVE PRACTICES
9. CHRONIC DISEASE RELATED HEALTH OUTCOMES
10. EDUCATION

This state wide survey has reported similar to the two surveys of Juneau residents rating alcohol abuse as the top concern. (Sources: [www.alaskadispatch.com/article/study-alsohol-number-one-health-concern-alaskans#.UMEnbod93jc.t...](http://www.alaskadispatch.com/article/study-alsohol-number-one-health-concern-alaskans#.UMEnbod93jc.t...))

# FETAL ALCOHOL SPECTRUM DISORDERS

BIRTH DEFECTS FROM WOMEN DRINKING WHILE PREGNANT ARE PERMANENT, PREVENTABLE

- Fetal alcohol spectrum disorders (FASD) refers to conditions caused by prenatal exposure to alcohol, including fetal alcohol syndrome (FAS).
- FASD are one of the most common causes of developmental disability and the only cause that is entirely preventable.
- FAS is a medical diagnosis defined by the presence of specific growth and nervous system abnormalities and other factors.
- Alaska has the highest rate of FAS in the nation among states that track this data. As many as 180 children are reported to the Alaska Birth

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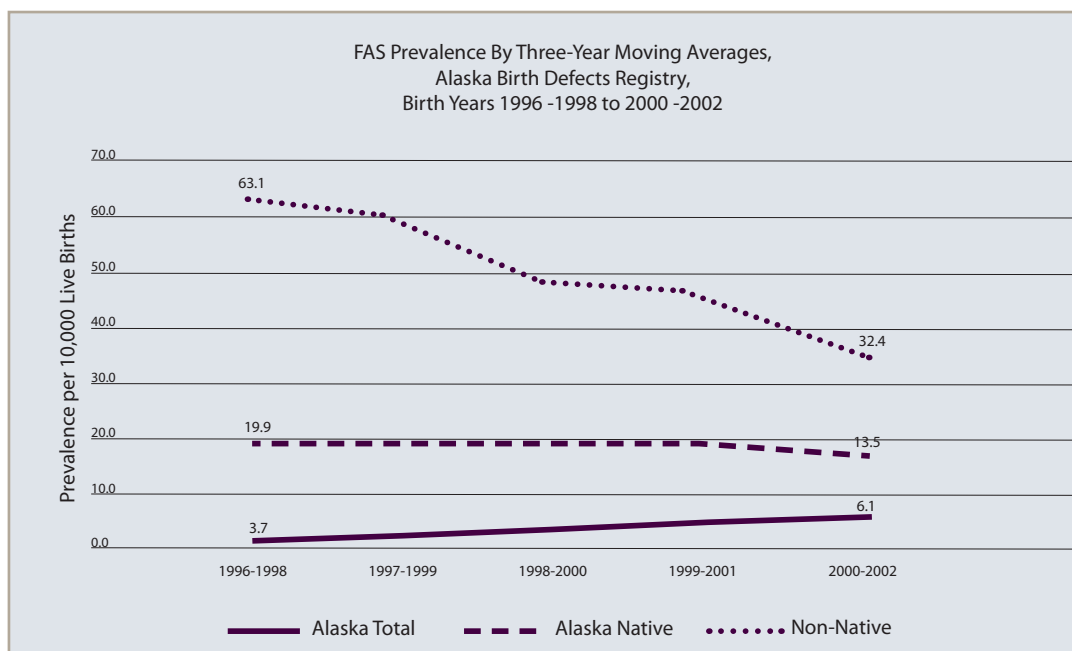


Chart A

The rate of this birth defect continues to decline, demonstrating the effectiveness of the targeted prevention efforts.

Sources: Chart A.) The State of Alaska Epidemiology Bulletin, State of Alaska Department of Health and Social Services, [http://dhss.alaska.gov/News/Documents/press/2010/FAS\\_fs\\_021810.pdf](http://dhss.alaska.gov/News/Documents/press/2010/FAS_fs_021810.pdf)

## TOBACCO-CAUSED ILLNESS AND DISEASE

**A**pproximately 1,330 Americans die each day as a result of tobacco use—nearly one death each minute. Annually in the United States, tobacco use was directly responsible for approximately:

- 30% of all cancer deaths
- 21% of all coronary heart disease deaths
- 18% of all stroke deaths

*(Sources: U.S. Department of Health and Human Services, “The Health Consequences of Smoking: A Report of the Surgeon General”, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2004, “A decade of Progress,” Tobacco Prevention and Control in Alaska)*

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### SMOKELESS TOBACCO RISKS

Smokeless tobacco comes in a variety of styles and is known by different names: snuff, chew, spit, dip, and now the new products - dissolvables in the form of lozenges, pellets and thin film strips similar to breath fresheners, among others.

These highly addictive products contain nicotine, and 28 carcinogens, including formaldehyde, arsenic, cadmium and radioactive polonium-210 along with high levels of carcinogens.

A smokeless user can expect bad breath, stained teeth, bone loss and receding gums. There is an increase risk of oral cancer such as: cancer of the lip, tongue, cheek, roof and even the larynx. Smokeless tobacco increases the risk of stomach and pancreatic cancer as well as heart disease and high blood pressure.

*(Sources: SAMSHA, Office of Applied Studies, National Survey on Drug Use and Health, 2008)*

### SECONDHAND SMOKE

According to a 2011 survey done by The Behavioral Risk Factor Surveillance System (BRFSS), a majority of respondents did not allow smoking in their homes (88%) or their vehicles (79%). In 2011, 88% believe smoking should be prohibited in all workplaces. *(Sources: BRFSS 2011)*

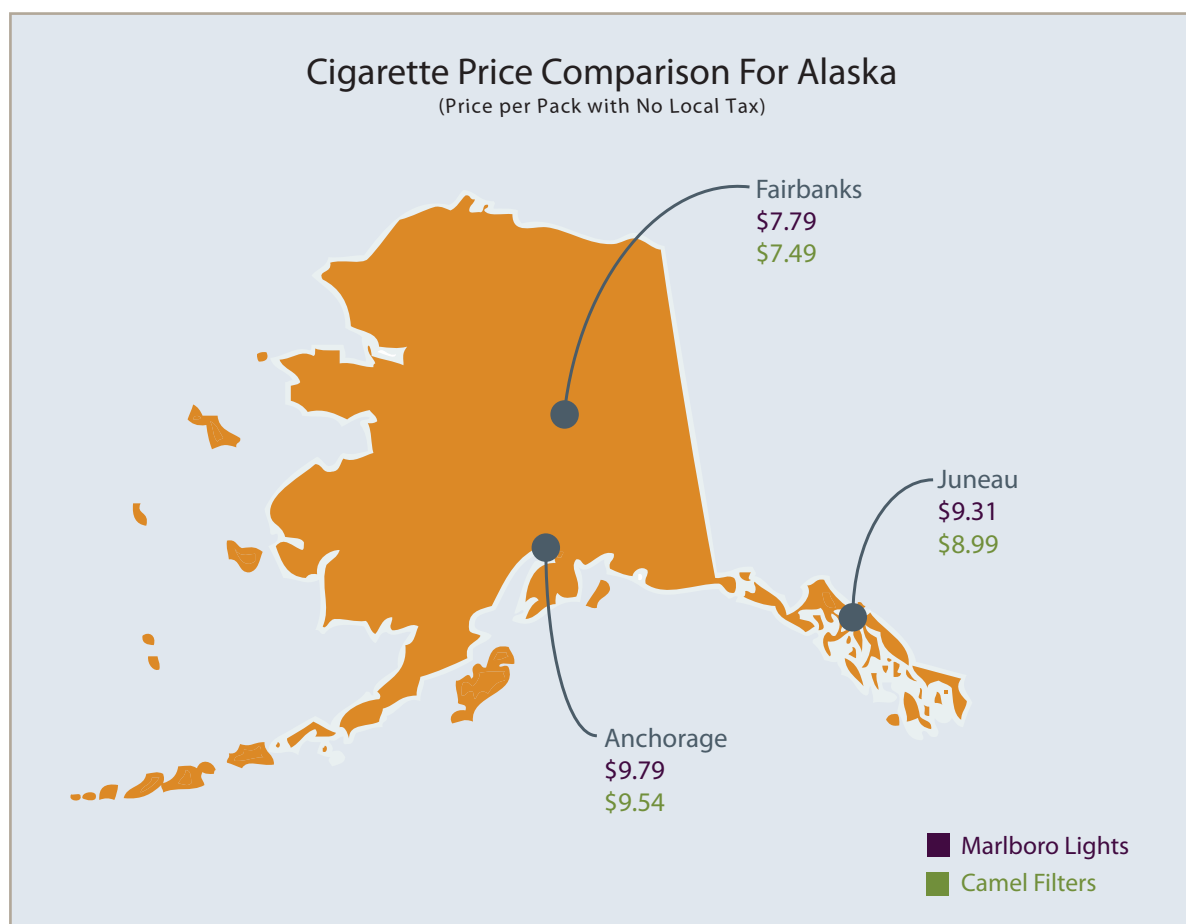


Figure A

## ADULT SMOKING IN SOUTHEAST ALASKA

Significantly fewer (24% v. 31%) respondents are current smokers in 2011 compared to 2008.

Significantly more respondents reported they have never smoked (100 cigarettes in their lifetime) in 2011 (45%) than in 2008 (39%) indicating fewer people are initiating smoking and 56% of current daily smokers in 2011 were 25 to 34 year olds.

Research has shown the price of a product greatly influences its use and onset of first use.

Sources: Figure A.) National Council on Alcoholism and Drug Dependence - Juneau Affiliate, Alaska BRFSSD. 2007-2009. Alaska Department of Health and Social Services, Division of Public Health, Chronic Disease Prevention and Health Promotion Section

# TOBACCO & RELATED ILLNESSES

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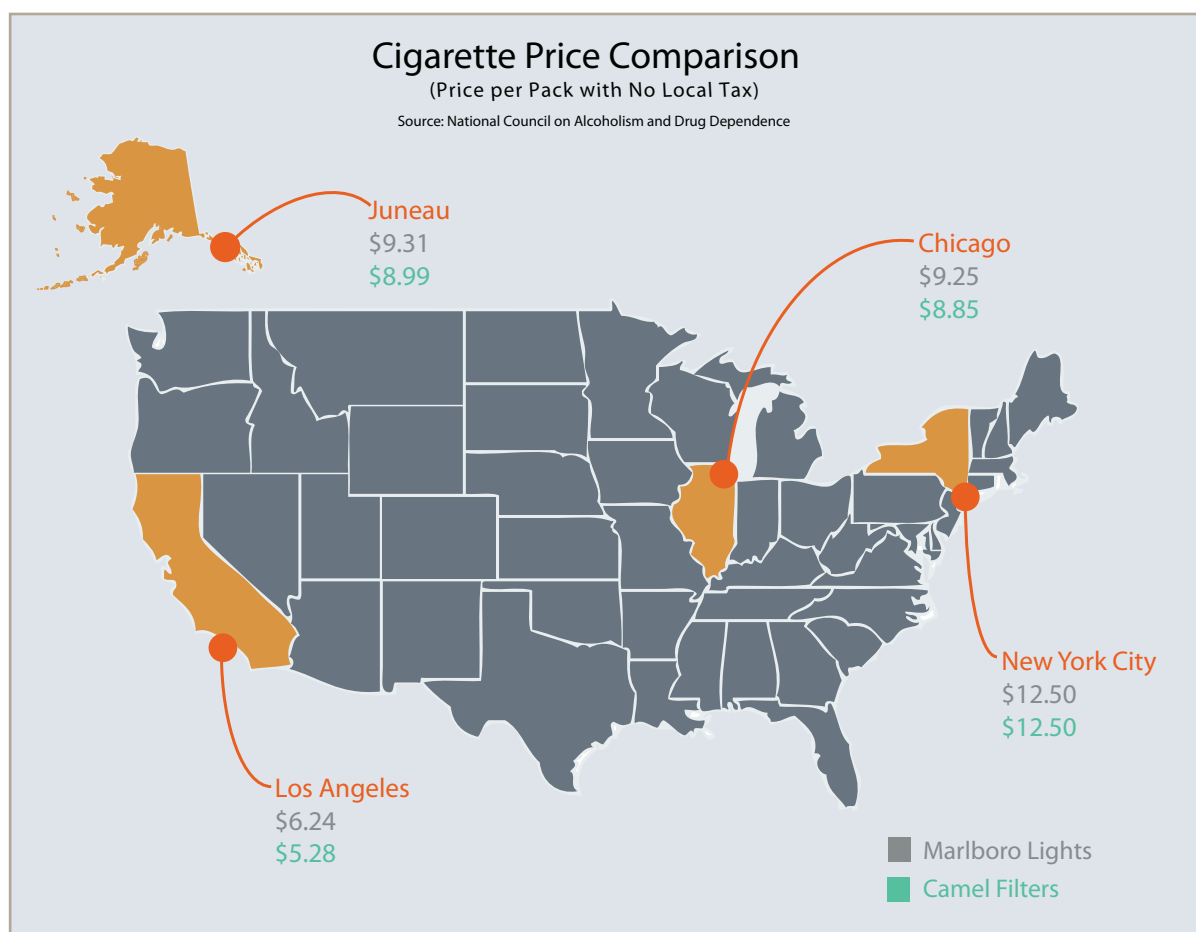


Figure A

## THE COST OF A PACK A DAY FOR 365 DAYS

### CAMEL FILTERS

NEW YORK CITY  
\$4,562.50 per year

CHICAGO  
\$3,230.25 per year

JUNEAU  
\$3,281.35 per year

LOS ANGELES  
\$1,927.20 per year

### MARLBORO LIGHTS

NEW YORK CITY  
\$4,562.50 per year

CHICAGO  
\$3,376.25 per year

JUNEAU  
\$3,398.15 per year

LOS ANGELES  
\$2,277.18 per year

Source: Figure A.) National Council on Alcoholism and Drug Dependence - Juneau Affiliate

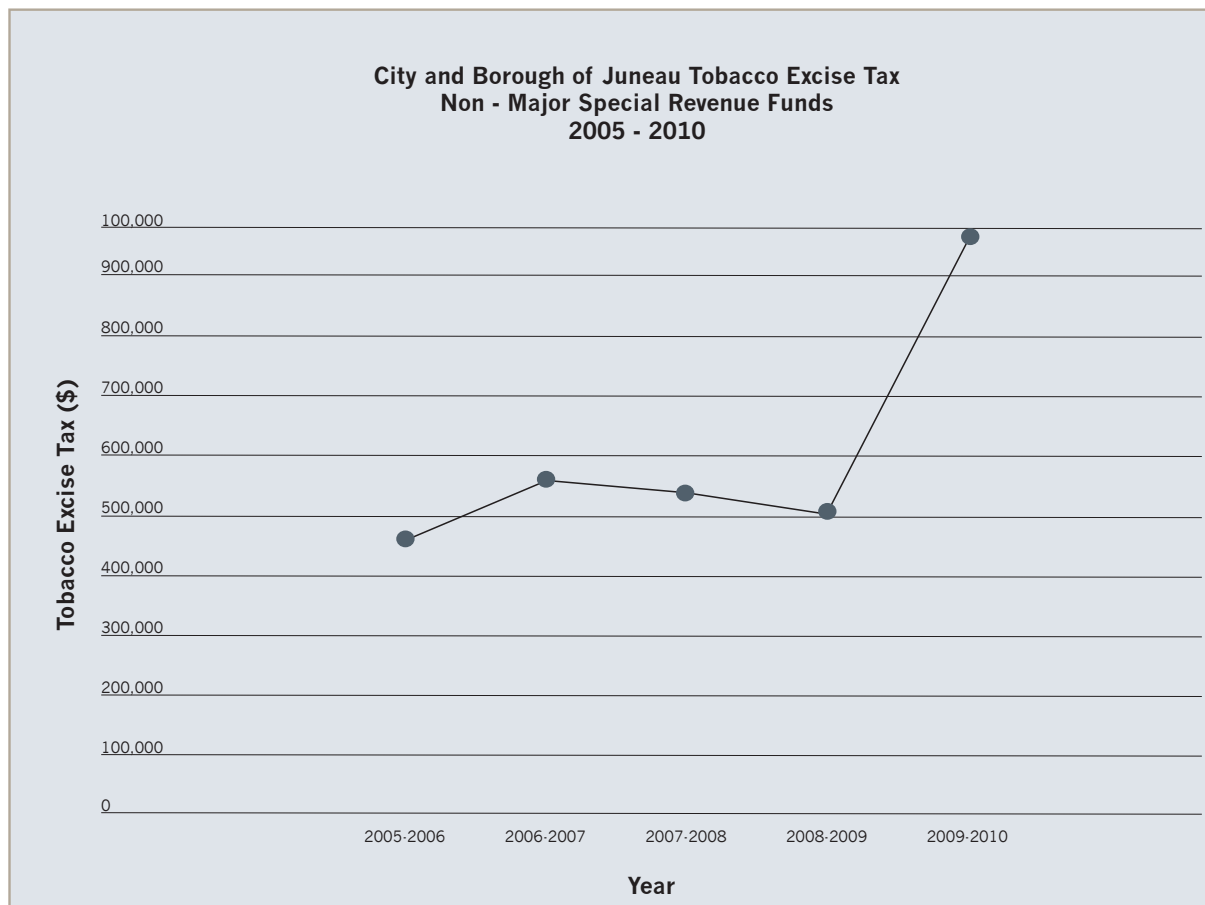


Chart A

## ADULT SMOKING RATES

Current Smoking by Region	Juneau 18.2 %	Alaska 23.4 %	U.S. 17.3 % (a)	Healthy People 2020 Objective 12%
Current Smoking by Gender	Male 20.7 % Female 15.7%			

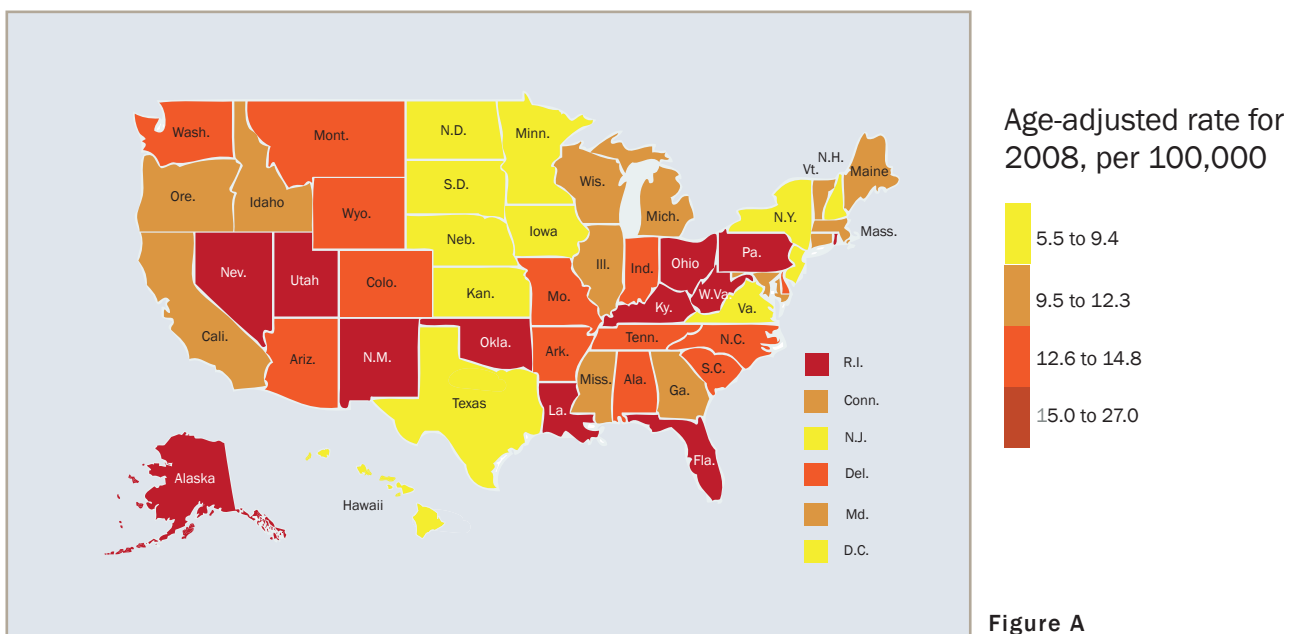
Table B

On average, smoking rates are higher among Juneau men than Juneau women. Juneau adult smoking rates are lower than other areas of the state and near the national average. (Source: Alaska BRFSSD. 2007-2009. Alaska Department of Health and Social Services, Division of Public Health, Chronic Disease Prevention and Health Promotion Section).

Sources: Chart A.) City and Borough of Juneau, Table B.) 2010 BRFSS, Healthy People 2020 Objective

# DRUGS: LICIT & ILLICIT ABUSE

## THE NEW ADDICTION CRISIS: PRESCRIPTION DRUG OVERDOSE RATES



## METHOD OF OBTAINING PRESCRIPTION PAIN RELIEVERS REPORTED BY PAST MONTH NONMEDICAL USERS AGES 12 OR OLDER IN THE U.S. (2009 & 2012 COMBINED ANNUAL AVERAGES)

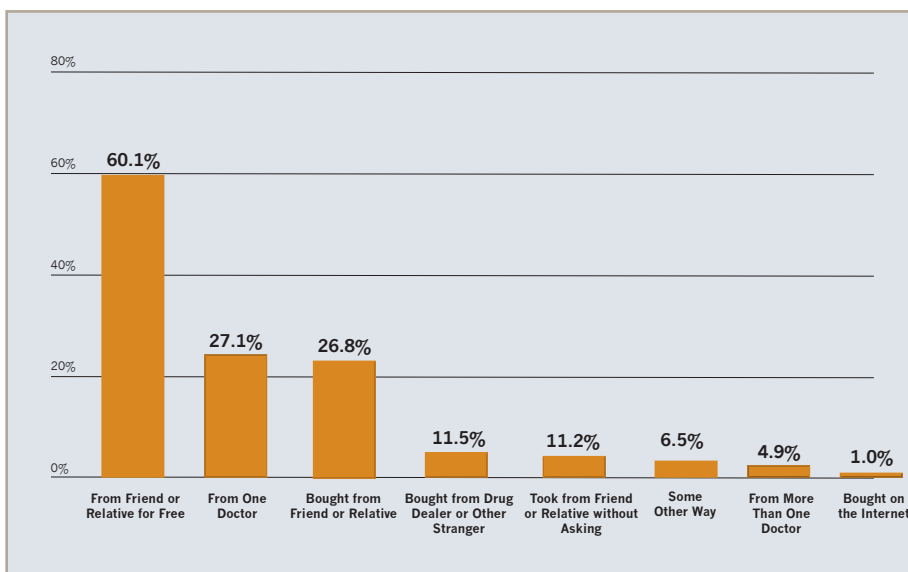


Chart B

Alaska is in the highest percentile of prescription drug overdoses per capita.

Source: Figure A.) Center for Disease Control (CDC), Chart B.) Adapted by CESAR from Substance Abuse and Mental Health Services Administration, Results from the 2010 National Survey on Drug Use and Health: Detailed Tables, 2011. Available online at <http://oas.samhsa.gov/nsduhLatest.htm>. NOTES: Percentages sum to more than 100% because respondents could indicate multiple sources from which they obtained pain relievers for past month nonmedical use. The response options "Wrote a fake prescription" and "Stole from doctor's office, clinic, hospital, or pharmacy" were reported by less than one percent of those who used prescription pain relievers nonmedically in the past year and are not shown in the chart above.



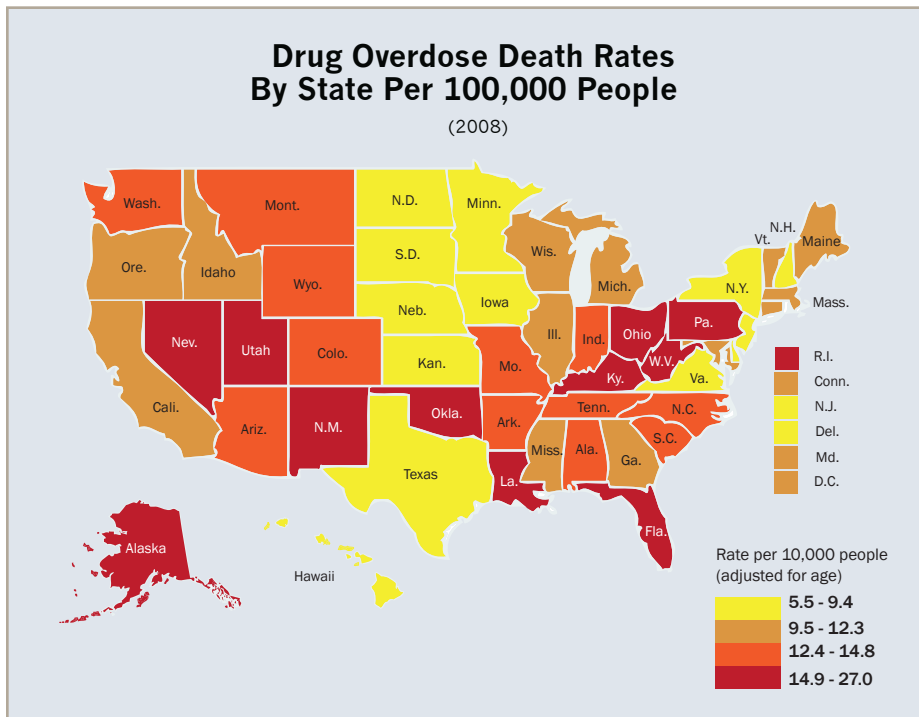


Chart A

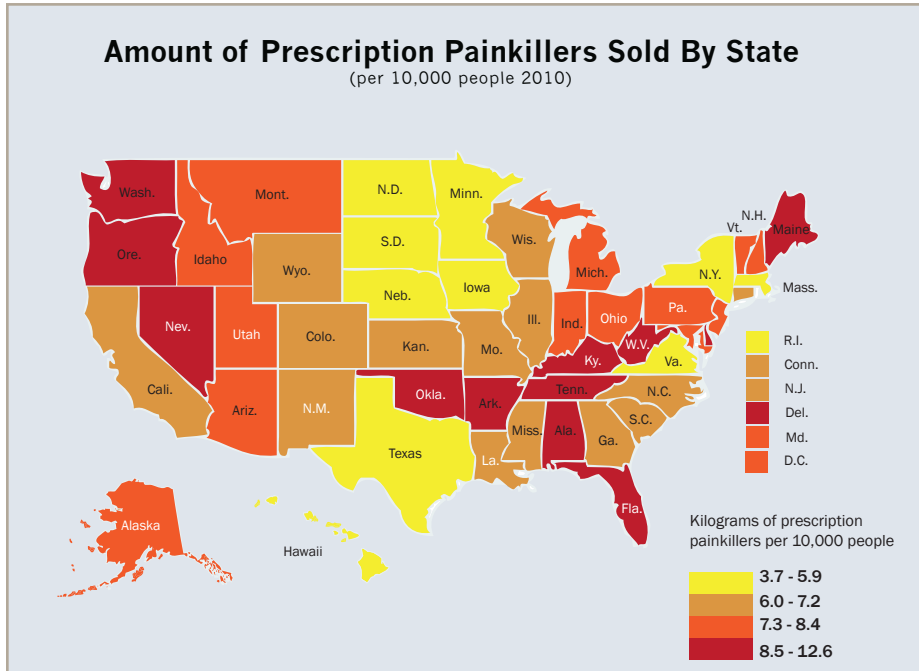


Chart B

There were 16,500 overdose prescription drug painkiller deaths nationally in 2010. Importation of illicit opiates as well as over prescribing by medical professionals has resulted in increased availability over the last ten years.

While Alaska instituted a prescription drug monitoring system in the Department of Commerce in 2011, NCADD was repeatedly denied access to prescription drug sales data in Juneau for this report.

# DRUGS: LICIT & ILLICIT ABUSE

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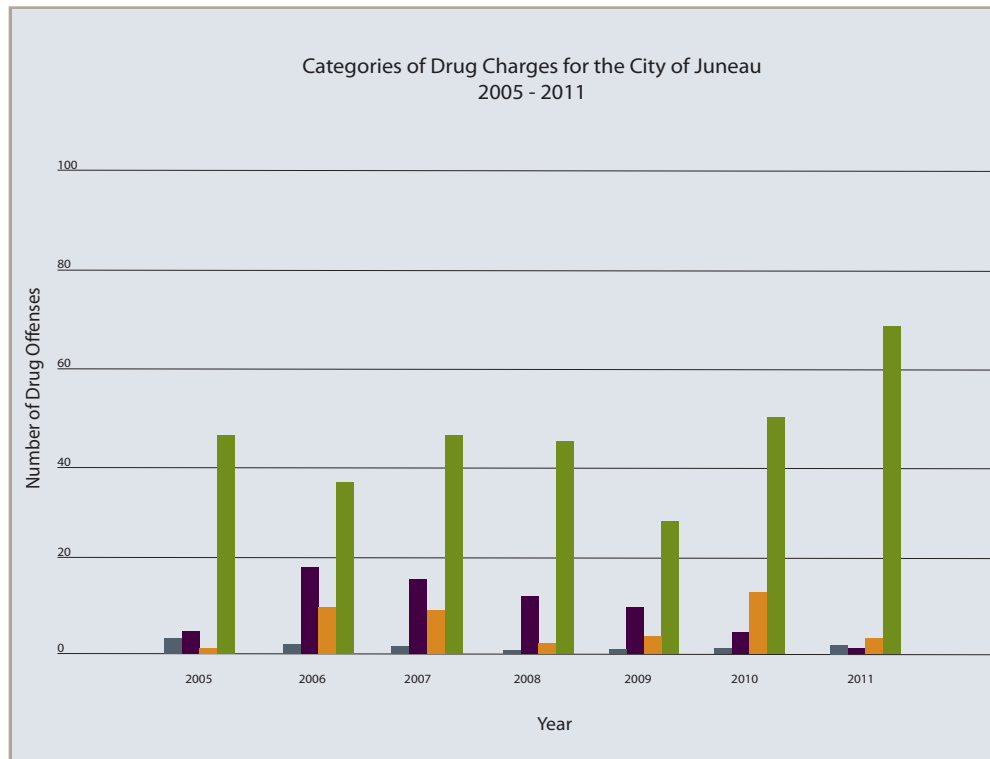


Chart A

Non - Narcotic    Opium / Cocaine    Synthetic    Marijuana

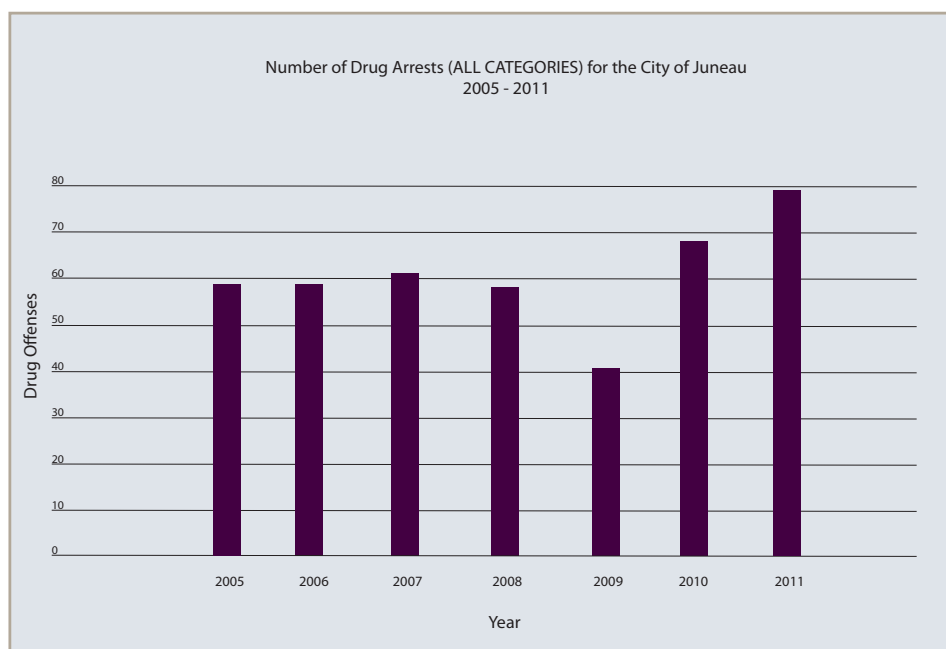


Chart B

Generally, enforcement resources allocated as well as drug availability will determine number of arrests.

Sources: Chart A.) Youth Risk Behavior Survey 2007,2009,2011, Chart B.) Juneau Police Department

# OPIOID PAIN RELIEVERS(OPR) RELATED TOXICITY REPORTS IN NATIONAL POISON DATA SYSTEM (NPDS) ALASKA 2001-2010

	TOTAL *	INTENTIONAL EXPOSURE **	UNINTENTIONAL EXPOSURE	MANAGED IN HCF***
Hydrocodone	465	259 (56%)	171 (37%)	175 (38%)
Oxycodone	388	186 (48%)	171(44%)	150 (39%)
Codeine	203	97 (48%)	95 (47%)	77 (38%)
Tramadol	179	111 (62%)	58 (32%)	97 (54%)
Methadone	86	47 (55%)	29 (34%)	50 (58%)
Morphine	77	7 (9%)	46 (60%)	24 (31%)
Meperidine	24	6 (25%)	12 (50%)	8 (33%)
<b>Total</b>	<b>1,422</b>	<b>713 (50%)</b>	<b>582 (41%)</b>	<b>581 (41%)</b>

Table A

\*Totals include intentional and unintentional exposures, as well as "other" exposures and adverse reactions (data not shown); totals do not include cases where intent was undetermined.

\*\* Defined as intentional improper or incorrect use of substance to achieve a euphoric or psychotropic effect or to cause self-harm.

\*\*\* HCF = health care facility

OPR overdose is a growing health problem nationally and in Alaska. In Alaska (2008) the rate of overdoses of prescription medication is twice as high as the national average. (14.6 vs 6.5 per 100,00 population). In Alaska, 79% of all overdoses, accidental and purposeful were with opioid medication.

During 2001 to 2010, there were 1,422 cases of OPR-related toxicity reports in NPDS, and half of these were identified as intentional exposures. Overall, 41% of the reported cases were managed in a health care facility.

The Alaska Epidemiology Section reports that 82% of the hospitalizations for opiate overdoses between 2001-2010 were due to suicide attempts. The number of opiate overdose hospitalizations is highest in the Anchorage/Mat-Su area. Rates vary by region, with the statewide rate between 3 per 100,000 and 5 per 100,000 since 2007.

# DRUGS: LICIT & ILLICIT ABUSE

## JUNEAU DRUG OVERDOSE DEATH RATES BY YEAR 2006 - 2011

	2006	2007	2008	2009	2010	2011	2006-2011
<b>1.) ALL DRUGS</b>							
Number	3	4	6	2	5	5	25.0
Crude Rate	**	**	9*	**	**	**	0.6
Age-Adjusted Rate	**	**	9*	**	**	**	0.6
<b>2.) PRESCRIPTION DRUGS</b>							
Number	0	1	6	1	5	2	15.0
Crude Rate		**	9*	**	**	**	4*
Age-Adjusted Rate		**	9*	**	**	**	0.6
<b>3.) OPIOID PAIN RELIEVERS</b>							
Number	0	1	5	1	5	2	14.0
Crude Rate		**	**	**	**	**	3*
Age-Adjusted Rate		**	**	**	**	**	4*
<b>4.) ILLICIT DRUGS</b>							
Number	0	2	1	1	0	2	6.0
Crude Rate		**	**	**		**	1*
Age-Adjusted Rate		**	**	**		**	1*

Table A

**Notes:**

1. Deaths with underlying causes of unintentional drug poisoning, suicide drug poisoning, homicide drug poisoning, or drug poisoning of undetermined intent, as coded in the International Classification of Diseases, 10th Revision.
  2. Drug overdose deaths, as defined, that have prescription drugs as contributing causes.
  3. Drug overdose deaths, as defined, that had other opioids, methadone, and other synthetic narcotics as contributing causes.
  4. Drug overdose deaths, as defined, that have heroin, cocaine, hallucinogens, or stimulants as contributing causes.
- \*Rates based on fewer than 20 occurrences are statistically unreliable and should be used with caution.
- \*\*Rates based on fewer than 6 occurrences are not reported.

Source: Table A.) Alaska Bureau of Vital Statistics, last updated on 01/09/2013

## RAINFOREST RECOVERY CENTER EMERGENCY SERVICES PATROL PROGRAM

ADMISSIONS - 2010											
JAN	FEB	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC
52	60	72	81	100	57	79	64	81	87	60	82

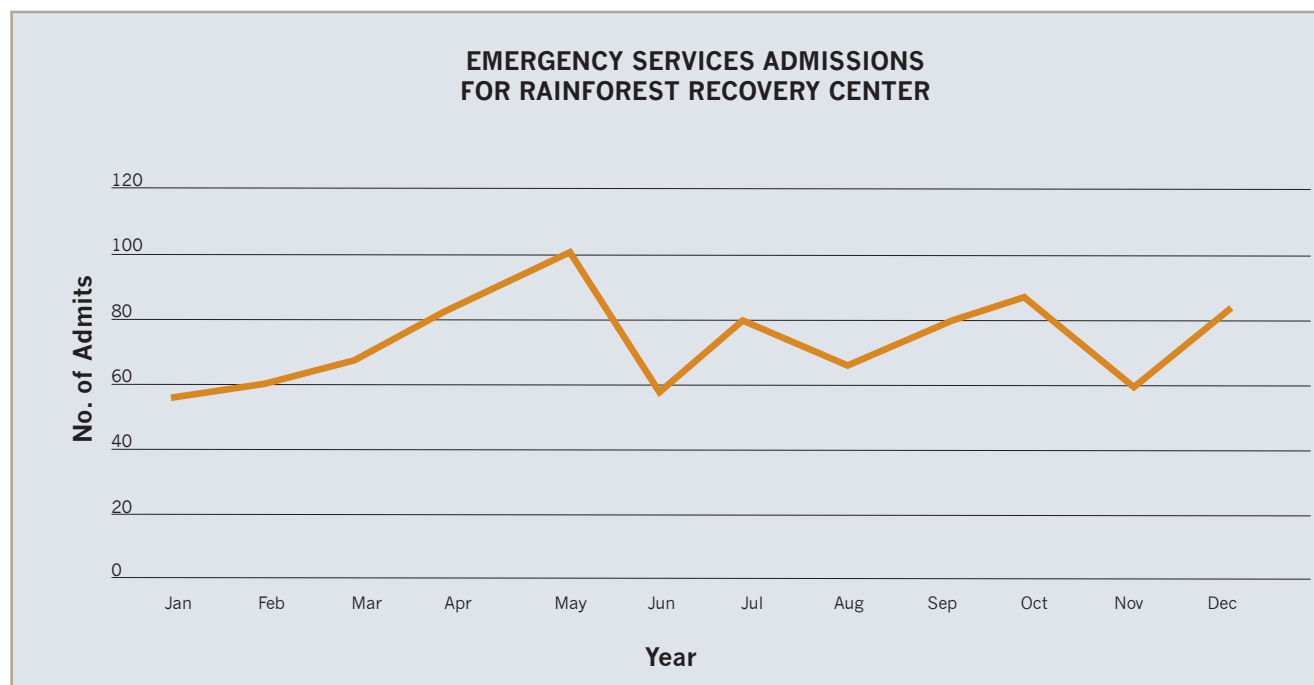


Chart A

## PATIENT VISITS THROUGH THE BARTLETT REGIONAL HOSPITAL EMERGENCY DEPARTMENT WITH ALCOHOL INTOXICATION OR DRUG MISUSE DIAGNOSIS RELATED GROUPS (DRGS)

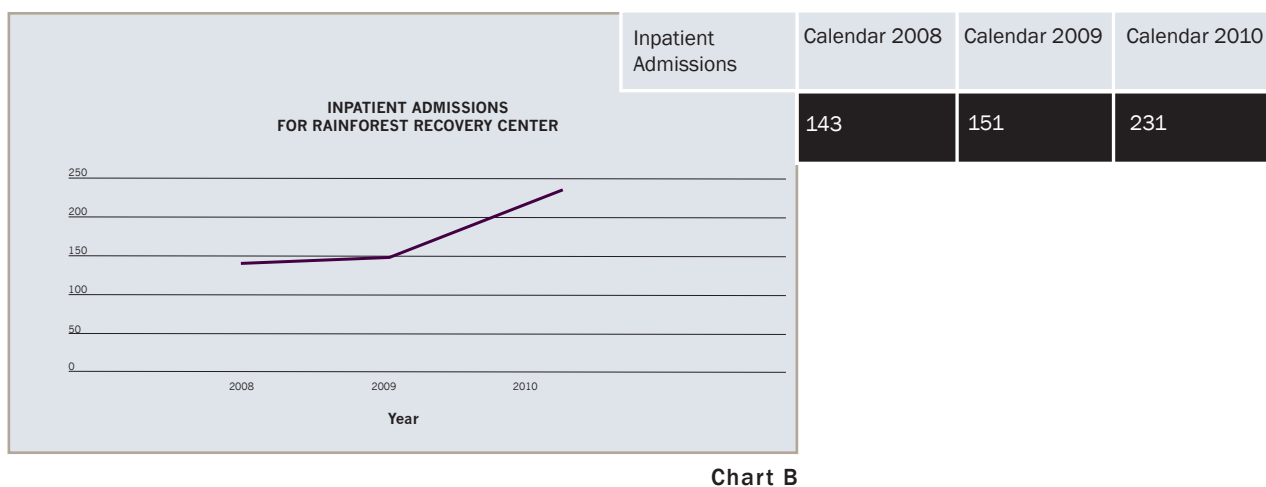
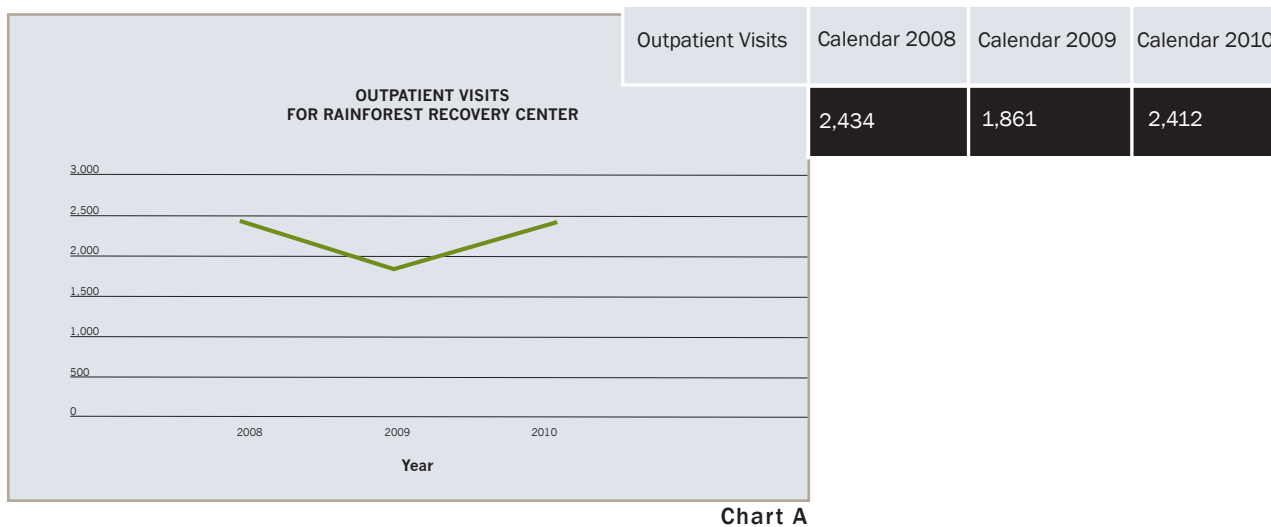
	Alcohol Abuse (intoxication)	Other drug use including multiple, amphetamine, cocaine, hypnotics	Total
CY 2010	396	60	456
CY 2011	288	41	329

Table A

Source: Charts A. & Table A.) Rainforest Recovery Center \*NOTE- data have not been verified, totals subject to error. This is number of visits, not number of patients (same patients often seen regularly). This data does not include patients seeking detox services, or suffering from alcohol withdrawal. Rainforest Recovery Center

# DRUGS: LICIT & ILLICIT ABUSE

## RAINFOREST RECOVERY CENTER CLIENT NUMBER COMPARISONS 2008-2010



### OUTPATIENT

Outpatient services provide diagnostic and primary treatment services on a scheduled and nonscheduled basis in a nonresidential setting. Those qualifying for this level of clinical care must demonstrate physical and emotional status allowing them to function in their usual environment including the maintenance of health.

### INPATIENT

Inpatient treatment provides a planned regime of care of addiction and mental health disorders in a residential setting and is reserved for most critically ill. Medical and psychiatric care is coordinated with this service.

Source: Charts A. & Chart B.) Rainforest Recovery Center \*NOTE- data have not been verified, totals subject to error. This is number of visits, not number of patients (same patients often seen regularly). This data do not include patients seeking detox services, or suffering from alcohol withdrawal. Rainforest Recovery Center

## ALASKA DRUG OVERDOSE DEATH RATES BY SELECTED CHARACTERISTICS 2006-2011

	1.) ALL DRUGS	2.) PRESCRIPTION DRUGS	3.) OPIOID PAIN RELIEVER	4.) ILLICIT DRUGS
<b>OVERALL</b>	13.9	8.7	7.0	3.6
<b>SEX</b>				
Men	16.2	10.2	8.5	5.0
Women	11.4	7.2	5.4	2.1
<b>RACE</b>				
White	14.6	9.0	7.8	3.6
Black	9.9*	4.4*	**	4.5*
Asian/Native Hawaiian or Pacific Islander	**	**	**	**
American Indian /Alaska Native	17.8	11.8	6.8	5.3
<b>AGE GROUP</b>				
0-14	**	**	**	**
15-24	10.9	7.1	5.9	2.5*
25-34	18.9	10.5	8.9	5.8
35-44	24.2	15.5	12.2	7.0
45-54	28.9	18.0	15.1	7.8
55-64	14.9	9.2	6.5	3.1*
65+	6.2*	4.6*	3.3*	**
<b>INTENT</b>				
Unintentional	11.6	7.1	6.0	3.4
Undetermined	1.0	0.7	0.5	2*
Suicide	1.4	1.1	0.6	**

Note:

Table A

1.) Deaths with underlying causes of unintentional drug poisoning, suicide drug poisoning, homicide drug poisoning, or drug poisoning of undetermined intent, as coded in the International Classification of Diseases, 10th Revision.

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Source: Table A.) Alaska Vital Statistics

# INFECTIOUS DISEASES & NON INFECTIOUS DISEASES

## NUMBER OF INCIDENT CASES OF INFECTIOUS DISEASES 2006-2011

ILLNESS		2006	2007	2008	2009	2010	2011
Hepatitis A	Juneau Borough	5	0	0	0	0	*
	Southeast Region	1	1	0	1	0	*
Hepatitis B (acute)	Juneau Borough	0	<5	0	0	0	*
	Southeast Region	1	2	0	0	0	*
Hepatitis C**	Juneau Borough	36	55	64	42	30	*
	Southeast Region	74	130	120	96	82	*
Chlamydia	Juneau Borough	105	121	125	131	177	*
	Southeast Region	266	285	297	332	433	*
Gonorrhea	Juneau Borough	15	<5	<5	17	7	*
	Southeast Region	74	130	120	96	82	*
HIV	Juneau Borough	<5	<5	<5	<5	<5	<5
	Southeast Region	3	3	2	1	2	2

Table A

Excessive drinking and drug use are a risk factor for a number of adverse health outcomes such as sexually transmitted infections, alcohol poisoning, hypertension, acute myocardial infarction, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence, and motor vehicle crashes. (Source: 2011 County Health Rankings)

Source: Table A.) State of Alaska Center of Epidemiology Juneau level data indicating less than 5 cases have been suppressed, per Section policy.  
\*2011 data for these conditions are not yet available \*\*Numbers for Hepatitis C represent incident and prevalent cases each time period, not just incident (new) cases.



# MORTALITY INDICATORS - JUNEAU

## SELECTED CAUSES OF DEATH TO JUNEAU RESIDENTS 2006-2010

ILLNESS	NUMBER OF DEATHS
Aortic aneurysm and dissection	3
Atherosclerosis	1
Cerebrovascular diseases	34
Acute myocardial infarction	22
Malignant neoplasm of bladder	3
Malignant neoplasm of esophagus	7
Malignant neoplasms of kidney and renal pelvis	3
Malignant neoplasm of larynx	1
Leukemia	4
Malignant neoplasms of trachea, bronchus and lung	40
Malignant neoplasm of pancreas	13
Malignant neoplasm of stomach	4
Asthma	4
Emphysema	4
Chronic lower respiratory diseases	32

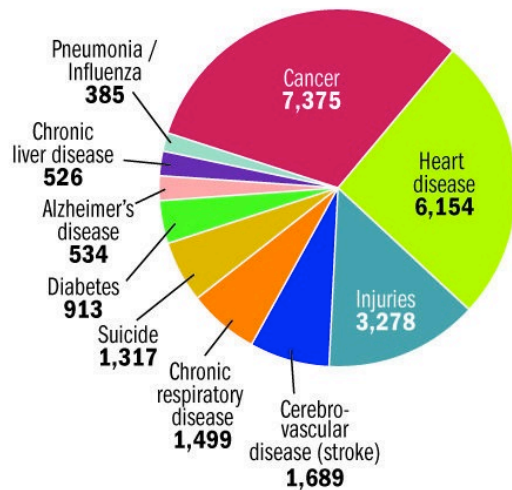
Table A

Source: Table A.) State of Alaska Chronic Disease Prevention and Health Promotion, Vital Statistics

# MORTALITY INDICATORS - JUNEAU

## 9 OUT OF 10 OF THE LEADING CAUSES OF DEATH IN ALASKA INVOLVE ADDICTION AND SUBSTANCE ABUSE.

**Leading causes of death in Alaska**  
1999 - 2008



Tobacco, alcohol, and other drugs are implicated in most of the leading causes of death. These chemicals either cause mortality directly such as lung cancer, cirrhosis, and overdoses or indirectly such as pneumonia and suicide. Alcohol and tobacco are implicated in significant numbers of all hospital admissions. A substantial number of emergency room visits are due to the use and abuse of these products. These admissions to inpatients, impact the cost of care in Alaska.

**Factors contributing to cause of death**

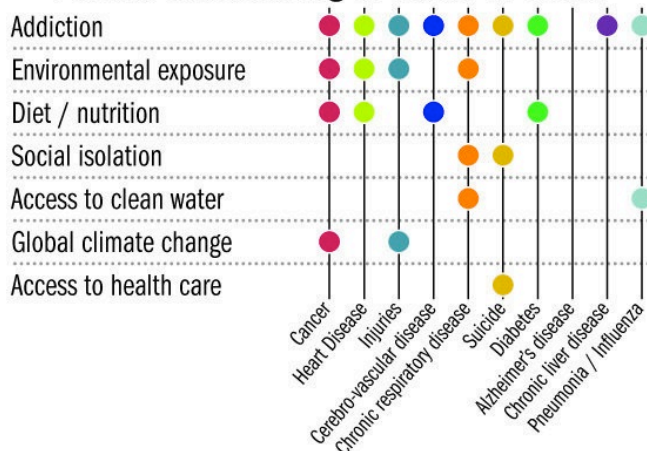


Figure A

Sources: Figure A.) "Social and Physical Determinants of Circumpolar Health: A meta-analysis" David Driscoll, PhD, MPH, MA, Bruce Dotterrer, MS Institute for Circumpolar Studies University of Alaska, Anchorage Graph created by Pamela Dunlap-Shohl/Anchorage Daily News, Alaska Bureau of Vital Statistics (1999 - 2008); [ichs.uaa.alaska.edu](http://ichs.uaa.alaska.edu)

# TOP 5 LEADING CAUSES OF DEATH FOR JUNEAU 2007- 2009

Cause of Death	Deaths	Age - Adjusted Rate	Alaska Age-Adjusted Rate
1.) Malignant Neoplasms	105	144.8	182.9
2.) Diseases of the Heart	91	143.6	151.2
3.) Unintentional Injuries	40	47.4	55.3
4.) Chronic Lower Respiratory Diseases	20	33.8	46.5
5.) Cerebrovascular	18	29.1	43.1
6.) Intentional Self Harm (Suicide)	18	21.5	22.7
TOTAL DEATHS	466	684.0	764.3

\* per 100,000 population

Table A

Alaska is the only state where cancer supersedes heart disease as the leading cause of death. This phenomenon could be attributed partially due to the heavy use of tobacco and alcohol. Tobacco smoking has been implicated in lung cancer and chewing tobacco is associated with mouth and stomach cancers. Alcohol users have a higher rate of esophageal, stomach, breast and liver cancer.

# PROTECTIVE FACTORS

## WHAT ARE PROTECTIVE FACTORS?

### Protective Factors

Protective factors are characteristics within the individual and/or conditions in the family, school or community that help someone cope successfully with life challenges. When people can successfully negotiate problems and deal with pre-existing risk factors, they are less likely to engage in unhealthy behavior. Protective factors are instrumental in healthy development; they build resiliency, skills and connections. Building upon strengths and protective factors leads to more positive health outcomes including a reduction in substance use.

*The more protective factors are increased and risk factors reduced the more likely unhealthy behavior and its associated problems can be prevented.*

### Protective factors offered in Juneau:

- Nationally accredited local treatment system
- Active Parks and Recreation Department involve Youth and Substantial afterschool programs
- Funding provided to nonprofits by local government
- Curfew ordinance and Youth Court diversion
- School District alternative programs targeting high risk youth and Drug-Alcohol Counselors in schools
- State Public Health Center located locally, a substantial medical community, Supported accredited treatment center locally (Rainforest Recovery Center, Substantial Youth Treatment Center (Juneau Youth Services)
- Availability of family services
- Local taxes on alcohol and tobacco

**PROTECTIVE FACTORS**

Characteristics within the individual or conditions in the family, school or community that help youth cope successfully with life challenges and existing risk factors.

**RISK FACTORS**

Characteristics within the individual or conditions in the family, school or community that increase the likelihood youth will engage in problem behavior.

**WHAT JUNEAU OFFERS**

Programs and organizations in Juneau that relate to these domains.

**FAMILY CONNECTEDNESS**

(Attachment & bonding)

- Positive parenting style
- Living in a two parent family
- Higher parent education
- High parental expectations about school

**DEATH BY SUICIDE OF A FAMILY MEMBER**

- Family history of the problem behavior
- Family management problems
- Family conflict
- Favorable parental attitudes and involvement in problem behaviors
- Household access to substances or guns

- Fun nights at Gastineau Elementary
- Public Skate
- Bowling
- Arts and Theater
- First Friday Events
- Folk Festival

**CONNECTED TO SCHOOL**

- Caring school climate
- Student participation in extracurricular activities

- Academic failure
- Lack of personal commitment to school

- Afterschool programming
- RALLY
- Students Against Destructive Decisions (SADD)
- CHOICE

**POSITIVE CONNECTION TO OTHER ADULTS**

- Safe supportive, connected neighborhood
- Strong community infrastructure (services for those in need)
- Local, state policies and practices that support healthy norms and child-youth programs
- Range of opportunities in the community for meaningful youth engagement

**AVAILABILITY OF ALCOHOL/OTHER DRUGS**

- Community norms and laws
- Availability of firearms
- Transitions and mobility
- Low neighborhood attachment and community disorganization
- Poverty

- Girls on the Run and Coaching Boys into Men (AWARE)
- Catholic Community Service's Young Parent Healthy Teen Center
- Community Schools Express
- Youth Group (clergy)
- Discovery Southeast
- Gruening Park Homework Clubs
- Rotaract

**ENGAGEMENT IN MEANINGFUL ACTIVITIES**

- Life skills and social competencies (social Emotional/Employability Skills)
- Cultural identity
- Positive personal qualities
- Positive self concept
- Positive peer role models
- Religious identity
- High grade point average

**EXPERIENCED CHILD ABUSE (PHYSICAL, SEXUAL) OR OTHER FAMILY VIOLENCE**

- Early initiation of the problem behavior
- Loss of cultural identity
- Early and persistent antisocial behavior
- Friends who engage in the problem behavior
- Favorable attitudes toward the problem behavior (low perceived-risk of harm)
- Gang involvement
- Older physical appearance than peers
- Paid work more than 20 hrs/week
- Perceived risk of untimely death

- Teens Against Tobacco Use (T.A.T.U.)
- Zach Gordon Youth Center
- Little Leagues/ sports etc.
- Rainforest Recovery Center
- Juneau Youth Services
- NCADD
- Gastineau Human Services
- Private providers



*HELP IS JUST A CALL OR VISIT AWAY - MAKE THE CONTACT NOW!*

NCADD 24 HOUR HOTLINE

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This publication was produced by  
The National Council on Alcoholism and Drug Dependence (NCADD).

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