Adult Health
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.

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

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.

One in five (19.1%) Alaska Native adults reported binge drinking in the past month.
An estimated 9.0% of the Alaska Native adult population meet dietary recommendations for daily fruit and vegetable consumption.

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**

**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%).
- 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%.

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

[Graph showing the percentage of adults in Alaska Native and non-Native populations reporting very good or excellent health across different time periods.]
Figure 51b. Percent of Alaska Native Adults With General Health Status of Very Good/Excellent by Tribal Health Region, 2015-2018

Statewide % = 40.4%

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

**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.”

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.

**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.
- 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
Adult Health

Physical Activity

**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. 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
**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.¹⁹

**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%.

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

Overweight

**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%.

*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
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
Adult Health

Current Smoking

**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%.

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Data Source: Alaska Division of Public Health, Behavioral Risk Factor Surveillance System
Appendix Table C-110
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-III
**Current Smokeless Tobacco Use**

**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

**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%).
» During 2015–2018, adult current smokeless tobacco use varied widely by Tribal health region, ranging from 1.5% to 40.0%.

**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*
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
Adult Health

Current Binge Drinking

**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.
» During 2015–2018, the percent of Alaska Native adults binge drinking varied by Tribal health region, ranging from 12.8% to 32.1%

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

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
**Adult Health**

**Diet - Fruit & Vegetable Consumption**

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

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage of Adults Meeting Recommendations</th>
</tr>
</thead>
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<tr>
<td>2013</td>
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</tr>
<tr>
<td>2015</td>
<td>9.0%</td>
</tr>
<tr>
<td>2017</td>
<td>5.6%</td>
</tr>
</tbody>
</table>

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. The data show the percentage of adults who report having eaten at least 3 servings of vegetables and 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%.
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

**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. 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.


**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%.

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

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

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).