

# Alaska Tobacco Prevention and Control Program



## 2025 Annual Report

Alaska Division of Public Health

# Program Goals and Structure

For over 20 years, the Alaska Tobacco Prevention and Control (TPC) program has led the effort to help all Alaskans live healthy and tobacco-free lives. TPC is grounded in Centers for Disease Control and Prevention (CDC) Best Practices for Comprehensive Tobacco Control Programs and includes five key components:<sup>1</sup>

- |   |                                     |
|---|-------------------------------------|
| 1. State and Community Interventions              | 3. Cessation Interventions          |
| 2. Mass Reach Health Communications               | 4. Data Surveillance and Evaluation |
| 5. Infrastructure, Administration, and Management |                                     |

The program administers these components to achieve the following goals:

- |  |  |   |                                |
|--|--|---|--------------------------------|
| <b>1 Prevent</b><br>youth from starting to use tobacco | <b>2 Protect</b><br>the public from exposure to secondhand smoke | <b>3 Promote</b><br>quitting tobacco products | <b>4 Reduce</b><br>disparities |
|--|--|---|--------------------------------|

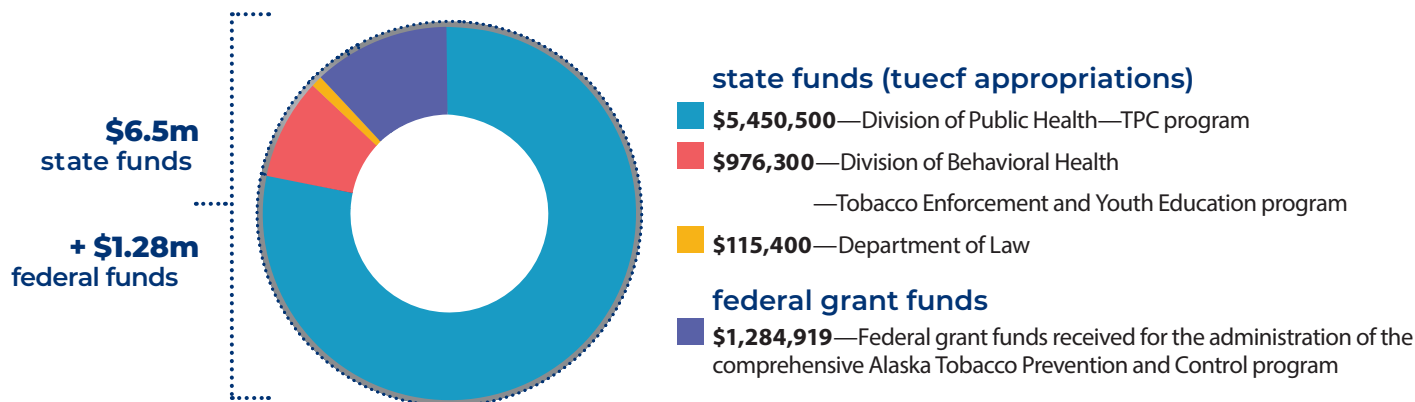
## Support for Alaska's Tobacco Prevention and Control program

The program is funded through federal grant funds and Tobacco Use Education and Cessation Funds (TUECF). TUECF combines funding from cigarette excise tax revenue and the Master Settlement Agreement with tobacco manufacturers. In State Fiscal Year 2025 (SFY25), Alaska's legislature appropriated \$6,542,200 million in TUECF funds towards the administration of a comprehensive tobacco prevention and control program across departments.

The program was awarded \$1,284,919 in federal funds through the CDC's Office on Smoking and Health.

## State Fiscal Year 2025

FUNDING FOR COMPREHENSIVE TOBACCO PREVENTION AND CONTROL PROGRAMMING (DOLLARS IN MILLIONS – M)



## COMMUNITY EFFORTS AND IMPACTS

TPC partners with communities through grants and contracts to localize these efforts based on what each community needs most. With support from the Alaska Tobacco Prevention and Control program, Tracy Gregg from the Norton Sound Health Corporation says they have been able to collaborate on community events, teach people about the health risks of tobacco and vaping, share information and connect people with quitting resources, and build strong partnerships with other programs and organizations, such as the American Lung Association.

“Our community has been impacted by tobacco by the increasing number of cancer patients. It also impacts the health of young adults who start smoking at a young age. The partnership with Alaska Tobacco Prevention and Control program has had a very positive impact on our community.”

— Tracy Gregg, MPH, RDN, IBCLC, with Norton Sound Health Corporation

# Return on Investment

For every **\$1** spent on tobacco prevention, states can save up to **\$55<sup>2</sup>**



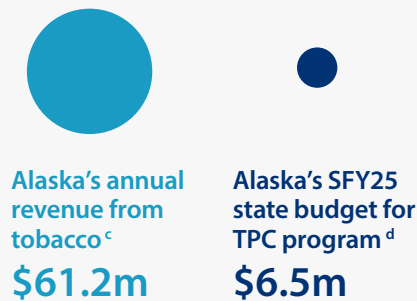
Tobacco remains a leading preventable cause of death and disease in Alaska. Tobacco use and exposure cost Alaskans millions of dollars in health care costs and productivity loss. The Alaska Tobacco Prevention and Control program administers funding for community and statewide efforts to reduce medical costs and lost productivity caused by harms associated with tobacco use.

## SFY2025 Cost of tobacco use and investment in tobacco prevention

**Tobacco costs Alaskans hundreds of millions of dollars annually.**



**Alaska spends \$6.5 million annually to prevent and reduce tobacco and nicotine use.**



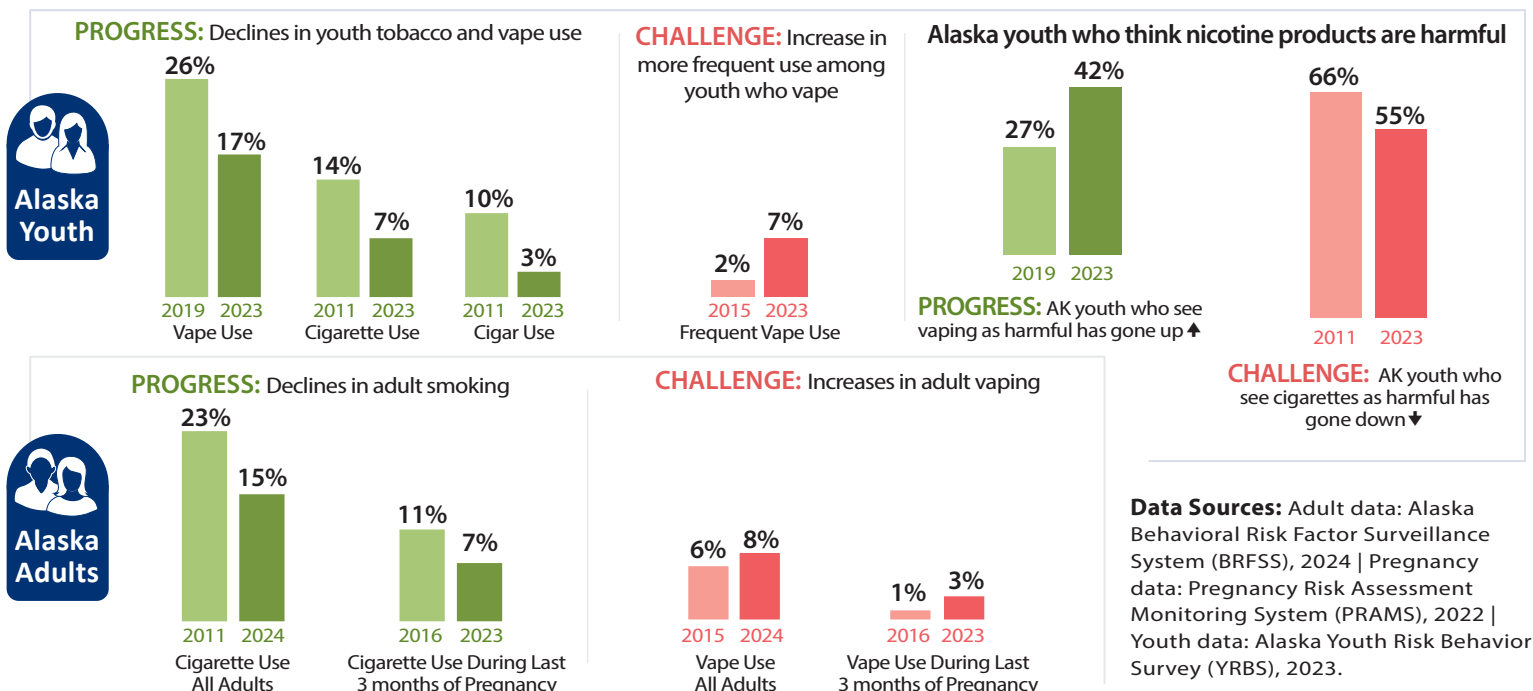
**The CDC recommends \$10.2 million in funding for Alaska annually.**



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 b. Helvoight TL, Lehdorff H, McMillan N. Evergreen Economics. The Cost of Eight Chronic Conditions on Alaska's Medicaid Program. October 18, 2017. Costs were estimated in FY2016.  
 c. Alaska Department of Revenue. Annual Report FY 2025. State of Alaska. Accessed April 1, 2026. <https://tax.alaska.gov/programs/programs/reports/AnnualReport.aspx?Year=2025>.

d. Alaska Tobacco Prevention and Control program. *TPC Budget, FY25*. Internal document. Accessed October 20, 2025. Note: this does not include Federal funds.  
 e. Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs—2014. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.

## TOBACCO USE PROGRESS & CHALLENGES IN ALASKA: What's improving—and where more work is needed



# Community Partner Highlights

## YOUTH PARTNERSHIPS

TPC partners with Rural Alaska Community Action Program, Inc. (RurAL CAP) to empower youth as peer educators, to engage in tobacco prevention and control efforts, and to provide training and support to community coalitions on engaging youth leaders. In State Fiscal Year 2025, RurAL CAP partnered with Youth Encouraging Alaskans Health (YEAH) to host their annual youth conference: 'Empower, Energize, Engage Youth Leadership.' This dynamic two-day event was designed to help youth build leadership skills and strengthen community engagement. More than 30 youth participants traveled from across Alaska to participate.



## COMMUNITY COALITION GRANTS

TPC funds eight regional grants and one statewide contract to engage communities and coalitions in assessing policy priorities and tailoring action plans to address those priorities. Since 2020, four school districts passed comprehensive tobacco-free school policies, including alternatives-to-suspension models with assistance from community grant and statewide contract awardees. Collectively, these policies cover 51,739 students, representing about 29% of Alaska's youth population.

### 8 Regional Grantees

- American Lung Association, Anchorage
- American Lung Association, Mat-Su
- Bristol Bay Area Health Corporation
- Kenaitze Indian Tribe
- Maniilaq Association
- Norton Sound Health Corporation
- Southeast Alaska Regional Health Corporation
- Tanana Chiefs Conference

## EMPOWERING COMMUNITIES THROUGH EDUCATION

Through the TPC Community Grant, the American Lung Association in Alaska partnered with youth coalitions, community members and Anchorage School District Board members to increase community awareness of tobacco, the impacts on students, and the importance of updating the school district's [tobacco-free school policy](#). Here is what Carl Jacobs, Anchorage School District Board member and current president, shared about their decision to update their policy:



“ The rise of vaping as a new nicotine-delivery system—combined with aggressive marketing strategies targeting young people—fundamentally changed the landscape for Alaskan youth... It was a privilege to help facilitate meaningful change in this area, and increase supports for families and students via accountability and community partnerships.

The process of updating the three major ASD Board Policies which covered tobacco and other drugs took nearly a year, and I think the final product represented a balanced approach other school districts can utilize as a starting-off point for drafting their own revised policies.”

— Carl Jacobs, Anchorage School District Board member and current president

# Proven Strategies Help Quit Smoking, Vaping, and Chewing

In SFY25, Alaska's Tobacco Quit Line enrolled:<sup>3</sup>



1,559

total Alaskans from all 7 public health regions

405

Alaska Native adults



34

women who were pregnant, planning to become pregnant, breastfeeding, or postpartum



860

Alaskans who reported behavioral health or mental health conditions

696

Alaskans who were enrolled in Medicaid and

207

Alaskans who were enrolled in Medicare



618

Alaskans who reported any chronic condition

## Alaska's Tobacco Quit Line: Helping Alaskans quit tobacco for more than 20 years.

Alaska's Tobacco Quit Line (Quit Line) offers free, proven support to Alaska adults to quit all forms of tobacco products, including e-cigarettes and pouches, at no cost. Services include individualized quit plans with free quit coaching, supportive texts and emails, and nicotine replacement therapy (NRT), like patches, lozenges, and gum. Services can be accessed anywhere in Alaska through phone, app, or online with direct shipment of NRT. Providers can make direct referrals to the Quit Line through **fax**, **web**, or by establishing electronic referrals.



## Partnering to Improve Patient Access Through Health Systems Change

TPC funds seven health systems to implement evidence-based process improvements within their systems to optimize treatment for patients who use tobacco products.

**Ask-Advise-Connect**  
to help patients quit<sup>4</sup>

**ASK** about tobacco use  
**ADVISE** to quit  
**CONNECT** to resources

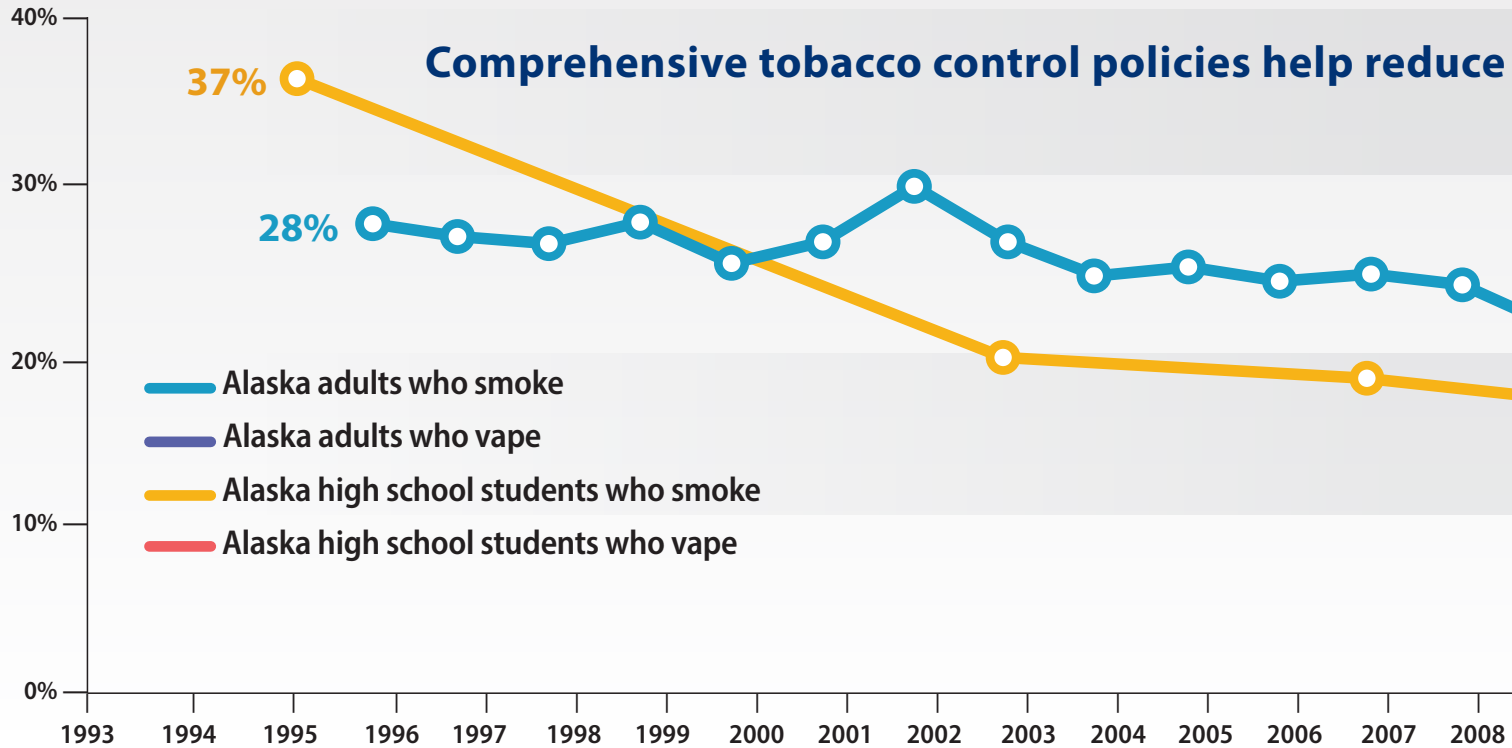
“ The Health Systems Change grant has allowed our providers to engage in more conversations about tobacco cessation with our patients than ever before. Through policy updates, EMR enhancements, visual aid placement and quit kit distribution, PCHS has greatly increased the number of patients screened for tobacco and enhanced the efficacy of our interventions. ”

— Becky Friedman with Peninsula Community Health Services

“ In a rural health care system like Yukon-Kuskokwim Health Corporation (YKHC), the Health System Change grant has been critical in expanding tobacco screening and cessation support across clinics. By standardizing practices and strengthening campus-wide tobacco-free efforts, we are improving access to cessation resources for both patients and staff. ”

— Victoria Galanopoulos with YKHC

# COMPREHENSIVE TOBACCO



*Tobacco Prevalence: Percentage of*

30+ YEARS OF

## 1990-1999

1993

- CDC awarded funds to Alaska for Tobacco Prevention and Control efforts

1997

- Alaska increased the price of tobacco products, not including e-cigarettes, through a statewide tax of \$1/pack and 75% of other wholesale tobacco products

1998

- Alaska joined the Tobacco Master Settlement Agreement (MSA) and raised tobacco sale age to 19

1999

- Alaska Legislature allocated MSA funds for tobacco control efforts in Alaska
- CDC released minimum funding recommendations for state tobacco control programs

## 2000-2009

2002

- TPC program established Alaska's Tobacco Quit Line

2004

- Alaska increased the price of cigarettes, not including e-cigarettes, through an additional tax of \$2/pack, spread over 3 years

2009

- The Family Smoking Prevention and Tobacco Control Act granted FDA authority to regulate tobacco products and banned cigarette flavors other than menthol

2010

2011

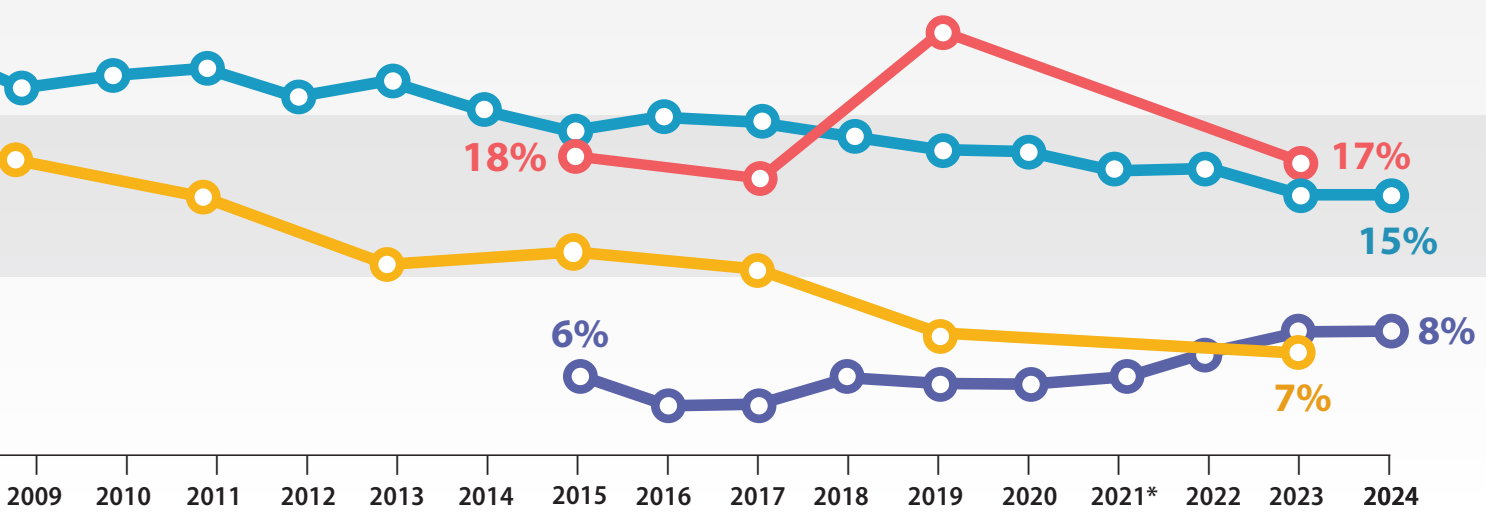
2014

2018

2019

# PROGRAMS WORK OVER TIME

tobacco and e-cigarette use among adults and youth.



Alaskans who Smoke/Vape by Year

\*The Alaska YRBS was not administered in 2021



## 2010-2019

- FDA prohibited tobacco brand sponsorship of events
- Alaska Federation of Natives (AFN) passed resolution supporting smokefree workplaces statewide
- Alaska passed the Alaska Business License Act to regulate the sale of tobacco products through business licensing. TPC program launched What's in the Cloud e-cigarette public education campaign.
- Sitka was the first community in Alaska to raise the tobacco sales age to 21
- Alaska passed Alaska's Smokefree Workplace Law, including e-cigarettes, to protect clean air in enclosed public places and workplaces
- TPC program launched Alaska's Not Buying It youth-focused tobacco and nicotine education campaign. Alaska updated the state youth access law to include e-cigarettes and nicotine products. Anchorage raised the tobacco sales age to 21. Federal law raised the tobacco sales age to 21 across the country.

## 2020-Present

- 2020** • TPC program launched parent e-cigarette education campaign
- 2021** • TPC program began offering the free AK Live Vape Free texting program for Alaska teens
- Over 40 Alaska school districts have updated tobacco policies to include e-cigarettes
- 2023** • Over time, 147 Alaska Tribes have adopted tobacco-free/smokefree/vape-free resolutions

# Surveillance and Evaluation

## How surveillance and evaluation data informs our work

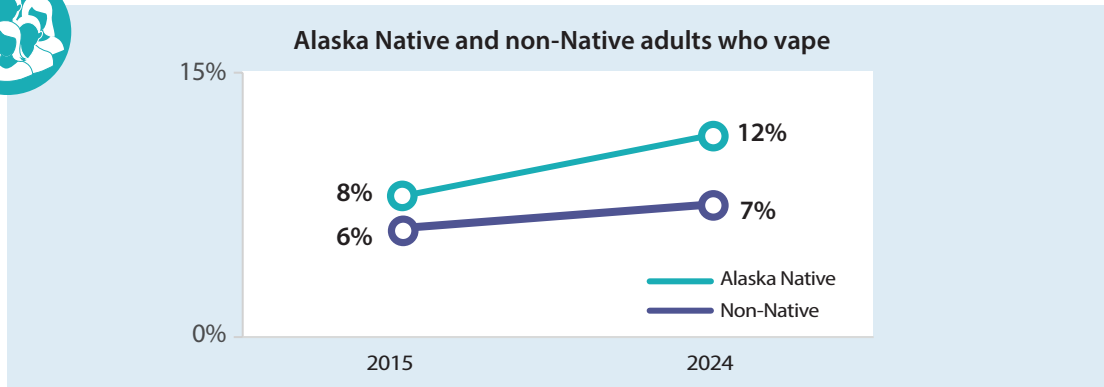
Surveillance means using surveys to collect information on a regular basis. Evaluation is when we use that information to see how well things are working. Together, these two things help us check progress over time, see if goals are being reached, and improve programs for Alaskans. Statewide surveys like the Behavioral Risk Factor Surveillance System (BRFSS), the Online Adult Tobacco Survey (OATS), and the Youth Risk Behavior Survey (YRBS) collect information related to tobacco use from adults and youth across Alaska.

Information from these surveys show great progress has been made in Alaska in terms of tobacco use going down.<sup>5,6</sup> However, smoking and vaping are not going down at the same rate in all communities.<sup>5,6</sup> Surveillance and evaluation help us see these differences and understand why they happen.

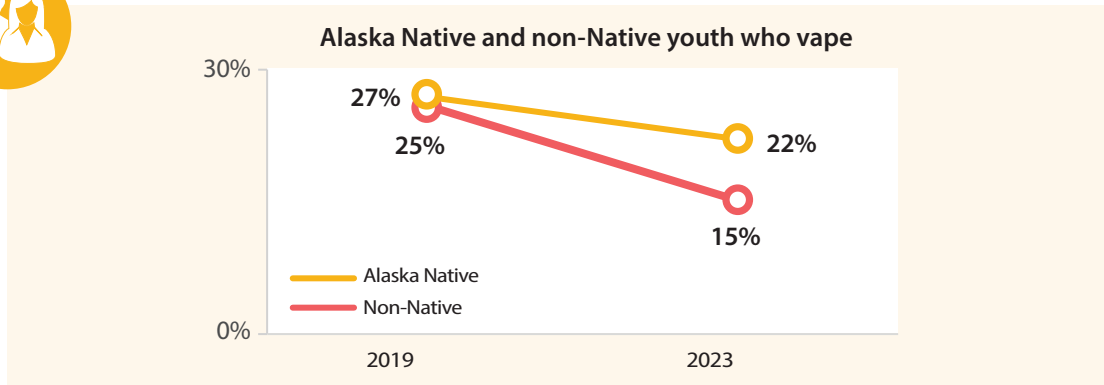
### EMERGING TRENDS: VAPING AMONG ADULTS AND YOUTH



#### Vaping among adults is increasing



#### Vaping among youth is decreasing, though not equally



While looking at this data is needed to highlight concerns, it is important to remember they represent real people and their lives. Every person's health is important, no matter where they live or who they are. By thinking of the people behind the data we start to ask important questions about fairness and what works. Why do quit programs work better for some people or communities? And why aren't we seeing the same decreases in tobacco use in all groups?

“ I appreciate the State of Alaska's Tobacco Prevention & Control program for taking the time to gather meaningful feedback on the Alaska Tobacco Quit Line from Alaska Native people and Tribal health partners across the state. Public health advances when we engage communities, elevate local expertise, and collaborate meaningfully to address health disparities. Strong partnerships grow through listening, learning, and working together to support healthier outcomes for the communities we serve. ”

— Weather Potdevin, Chief Executive of Community Health Services and Tribal Health Relations, Alaska Native Tribal Health Consortium

## Engaging communities in evaluation

**Program evaluation has the greatest impact when it involves the communities being evaluated.**

For example, our evaluation of Alaska's Tobacco Quit Line (Quit Line) was shaped with help from Tribal health partners to evaluate why we see lower use of the Quit Line by Alaska Native people. This partnership helped make sure the questions were culturally relevant, respectful, and designed to gather insights to help improve services and outreach efforts.

The Quit Line study looked at almost 4,000 people who got help from the Quit Line between August 2021 and September 2023.

People who agreed to be in the study were contacted 7 months after they signed up for the Quit Line (between March 2022 and May 2024). Using an online survey, they were asked questions about their Quit Line experience and current tobacco use.

### What we found:



**Most people (88%) had tried to quit.**<sup>7</sup>



**More than 1 out of 3 adults (37%) who signed up for the Quit Line were able to quit using tobacco like cigarettes or chewing tobacco.**<sup>7</sup>



**Alaska Native people and non-Native people quit at about the same rate.**<sup>7</sup>



Most Quit Line participants were happy with their experience, but **Alaska Native people were more likely than non-Native people to say they were happy with the Quit Line services.** The Tobacco Prevention and Control program is now working with community partners to use this feedback to make improvements to services.<sup>7</sup>

## THE TALKING CIRCLES PROJECT

The Talking Circles Project was a study designed to gather feedback from Alaska Native communities and Tribal health experts to improve and tailor a program within Alaska's Tobacco Quit Line for Alaska Native people. People were invited to share their insights and suggestions in a culturally relevant and respectful way. This helped us better understand their experiences with tobacco and quit services, including what we could do to help improve services. Here are some of the most common things people shared in the Talking Circles Project:



- **Cultural and language support:** Provide training for coaches in cultural and regional differences in verbal communication. Ensure interpretation and translated materials in Native languages when possible. Train coaches in key phrases to build trust and cultural understanding.



- **Nicotine replacement therapy (NRT) education:** Offer clear guidance on nicotine replacement therapy use, benefits, side effects, and tailoring combination therapy to daily life.



- **Accessible services:** Maintain 24/7 access to services with multiple ways to engage such as phone, text, online, and virtual groups. Support connections to local in-person resources.



- **Cultural competency:** Provide coaches who have shared lived experiences (i.e., experience quitting tobacco, living in Alaska, or experience as members of Native communities) and who are familiar with regional cultures, norms, and daily activities in Alaska Native communities.



- **Dedicated coaching:** Assign primary, Alaska-based coaches to support continuity, trust, and relationship building.

## Health communication campaigns are one of the top ways Alaskans hear about Alaska's Tobacco Quit Line.

Alaska's TPC program promotes Alaska's Tobacco Quit Line, runs counter-marketing messages, and shares tobacco and nicotine education statewide. Almost half of Alaskans who enrolled in the Quit Line learned about the program from communication messages.<sup>3</sup>

### Sharing Alaskans' stories

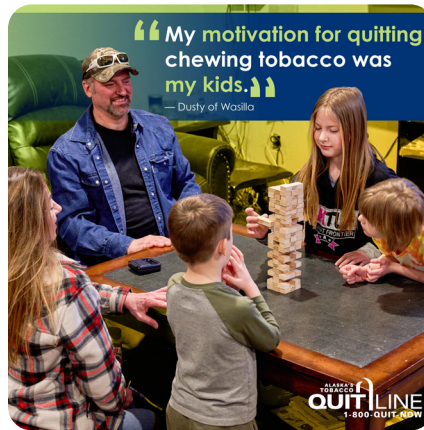
Alaska's Tobacco Quit Line shares stories from Alaskans who quit smoking, chewing, and vaping with the help of Alaska's Tobacco Quit Line. When Alaskans who use tobacco see Quit Line messages, over a third of adults make a change to decrease the amount they smoke, vape or chew.<sup>7</sup>



#### Meet Craig

Craig from Ketchikan was tired of how smoking made him feel. He wanted to break the cycle of tobacco use in his family and protect his kids from the dangers of secondhand smoke. Craig knew he needed help staying on track with his goal to quit smoking, so he reached out to Alaska's Tobacco Quit Line. A quit coach and support from family and friends helped Craig stay on track and stop using cigarettes. Since quitting, Craig says he has more energy when he's out hunting and fishing.

► Watch [Craig's quit story](#).



#### Meet Dusty

Dusty from Wasilla used the Quit Line to quit chewing tobacco.

► Watch [Dusty's quit story](#).



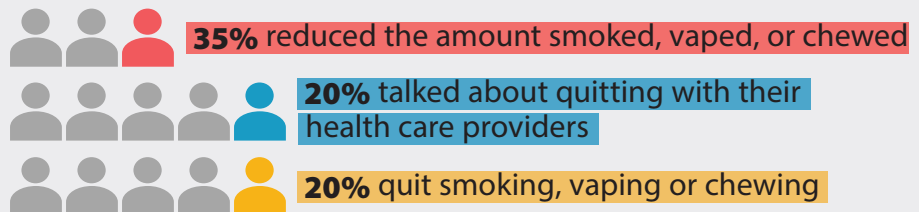
#### Meet Brenda

Brenda quit smoking after 20 years with support from her Tribal tobacco cessation program.

► Watch [Brenda's quit story](#).

## Alaska's Tobacco Quit Line messages are leading to healthy changes.

Among people who use tobacco, after seeing a message from Alaska's Tobacco Quit Line:<sup>7</sup>



## Reaching young Alaskans

Alaska's TPC program created social media messages that increase representation of Alaska Native youth and culture in the [Not Buying It](#) campaign this year. Outreach materials for youth continue to be distributed across the state. Schools, tobacco partners, and health care providers can [order toolkit materials](#) at no cost.

## Sources:

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2. Centers for Disease Control (CDC). January 27, 2023. Smoking and Tobacco Use: State Fact Sheets. Accessed March 10, 2026. [www.cdc.gov/tobacco/stateandcommunity/state-fact-sheets/](http://www.cdc.gov/tobacco/stateandcommunity/state-fact-sheets/) (select Alaska to get factsheet). Data sources for this fact sheet available at [https://www.cdc.gov/tobacco/stateandcommunity/tobacco-control-program-funding/pdfs/ntcp-data-sources-methodologies-p\\_1.pdf](https://www.cdc.gov/tobacco/stateandcommunity/tobacco-control-program-funding/pdfs/ntcp-data-sources-methodologies-p_1.pdf)
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5. Alaska Behavioral Risk Factor Surveillance System (BRFSS): [2015-2024]. Alaska Department of Health, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion. Accessed February 18, 2026. <https://alaska-dph.shinyapps.io/BRFSS/>
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7. Alaska Department of Health, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion. Alaska's Tobacco Quit Line Evaluation Report 2026. Available upon request. [tobacco@alaska.gov](mailto:tobacco@alaska.gov)

## Alaska Tobacco Prevention and Control program resources & fact sheets:



- Alaska Tobacco Prevention and Control program: <https://health.alaska.gov/en/division-of-public-health/chronic-disease-prevention/tobacco-prevention-and-control/>
- Alaska's Tobacco Quit Line: [AlaskaQuitLine.com](http://AlaskaQuitLine.com)
- Alaska's Not Buying It youth prevention and education campaign: [NotBuyingItAK.com](http://NotBuyingItAK.com)
- Tobacco 21 policy resources: <https://Tobacco21.org>

### Fact sheets:

- Tobacco and School Suspensions
- Nicotine and Youth Mental Health
- Tobacco and Alaska Native People
- Tobacco and Diabetes
- Tobacco and Pregnancy



Levi Sutton with Kenaitze Indian Tribe and Sheila Hurst with Copper River Native Association hand out Alaska Tobacco Prevention and Cessation information at Valdez Gold Rush Days.

# Alaska Tobacco Prevention and Control Program

## Key Tobacco Prevention Partners: Working together for a Tobacco-Free Alaska

The Alaska Tobacco Prevention and Control program funds community organizations across the state to tailor proven tobacco control interventions for communities. TPC also partners with non-funded organizations to leverage resources and reach all Alaskans with health education. Those organizations include: Breathe Free Alaska Coalition, Breathe Free Anchorage, Breathe Free Mat-Su, Partnership for Tobacco-Free Southeast, Breathe Free Gulf Coast, American Cancer Society Cancer Action Network, American Heart Association and AARP.

### INTERIOR



### ANCHORAGE



### MAT-SU



### SOUTHEAST



### NORTHERN



### SOUTHWEST



### GULF COAST



### STATEWIDE



#### State of Alaska

Mike Dunleavy, Governor

#### Department of Health

Heidi Hedberg, Commissioner

Robert Lawrence, MD, Chief Medical Officer

#### Division of Public Health

Lindsey Kato, Director

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