Chronic Disease Data Facts: Four Healthy Habits

Healthy Habits are Known to Promote Quality of Life and Longevity

- Chronic diseases cause over half (56%) of all deaths in Alaska.¹
- Four healthy habits not smoking, limiting consumption of sugary drinks, being physically active, and maintaining a healthy weight — are associated with reduced risk for chronic diseases, such as cancer, heart disease, stroke, and type 2 diabetes.²



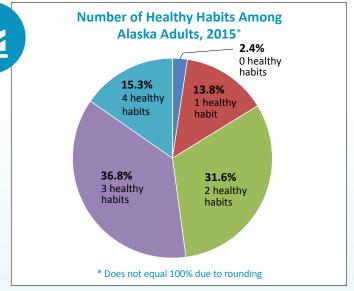
4. Healthy Weight

Few Alaskans Have the Four Healthy Habits Known to Prevent Chronic Disease

- Only 15% of Alaska adults have all four healthy habits.
- The least common healthy habits are maintaining a healthy weight and being physically active.

Healthy Habits in Alaska, 2015		
Healthy Habit	Definition	Prevalence
Not smoking	Current non-smoker, including former smokers	81%
Limiting consumption of sugary drinks	Drinking less than one sugary drink per day ³	77%
Being physically active	Being physically active: meeting the national guidelines for adults for aerobic physical activity of 150 minutes per week ^{4,5}	59%
Maintaining a healthy weight	Maintaining a healthy weight: Body Mass Index (BMI) of 18.5-24.9 ⁶	32%

Source: Alaska Behavioral Risk Factor Surveillance System, 2015



Source: Alaska Behavioral Risk Factor Surveillance System, 2015

Some Groups of Adults Report Fewer Healthy Habits Than Others

The number of healthy habits reported by adults varies by several characteristics, including sex, race, poverty, and the number of adverse childhood experiences (ACEs).

Compared to those with **all 4 healthy habits**, Alaskans who report **none of the 4 healthy habits** are more likely to be:



Source: Alaska Behavioral Risk Factor Surveillance System, 2015

Using Alaska Data to Measure Healthy Habits

The Alaska Behavioral Risk Factor Surveillance System (BRFSS) gathers information about the health-related behaviors of Alaska adults. This fact sheet reports data from the 2015 Alaska BRFSS:

www.dhss.alaska.gov/dph/Chronic/Pages/brfss

Detailed information on each healthy habit can be found on AK-IBIS: ibis.dhss.alaska.gov/indicator/ index/Alphabetical.html



What can we do?

While making healthy choices requires some level of personal responsibility, those choices are also strongly influenced by where we live, learn, work, play, and receive care.

Increasing the prevalence of these four healthy habits will require making changes within communities, schools, workplaces, and health care systems that make the healthy choice the easier choice.

Community partners and public health professionals



- Recognize that many Alaskans have more than one unhealthy habit.
- Develop policies or programs that address multiple healthy habits.
- Choose solutions and actions that specifically improve the health of vulnerable groups and result in overall population health improvements, including:
 - providing smoke-free workplaces.
 - enhancing the availability of parks and walking trails that support physical activity in a safe way.
 - ensuring all foods and beverages for sale at schools are nutritious and promote health.
 - o offering all students quality health and physical education in schools.
 - supporting early childhood education and programming.
 - providing care in schools and clinical settings that accounts for violence and trauma children may have experienced.

Individuals

• Take an active role in your health and your family's health by:



- \circ avoiding the use of tobacco products.
- o drinking fewer sugary drinks.
- choosing water and low-fat or nonfat milk instead of sugary drinks.
- o maintaining a healthy weight.

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being physically active.

- eating more healthy fruits, vegetables, whole grains, and lean proteins.
- limiting television and screen time that is not work- or school-related to no more than two hours per day.

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Healthcare providers

 Ask and advise patients about physical activity, sugary drink consumption, and tobacco use.



- Refer tobacco users to Alaska's Tobacco Quit Line (1-800-0UIT-NOW / 1-800-784-8669) or other tobacco cessation services.
- Measure height and weight, and discuss maintaining a healthy weight.
- Recommend limiting consumption of sugary drinks.

Resources

Obesity Links

- Alaska Obesity Prevention and Control Program: www.dhss.alaska.gov/dph/Chronic/Pages/Obesity/
- Play Every Day: www.playeveryday.alaska.gov

Tobacco Links

- Alaska Tobacco Prevention and Control Program: www.dhss.alaska.gov/dph/Chronic/Pages/Tobacco/
- Alaska's Tobacco Quit Line: www.alaskaguitline.com
- Tobacco-Free Alaska: www.tobaccofree.alaska.gov

ACEs in Alaska

www.dhss.alaska.gov/abada/ace-ak

References/Notes

- State of Alaska, Health Analytics and Vital Records. 2015 annual report. http://dhss.alaska.gov/dph/VitalStats/Documents/PDFs/ VitalStatistics_Annualreport_2015.pdf. Accessed February 15, 2017.
- Ford ES, Bergmann MM, Kroger J, et al. Healthy living is the best revenge: findings from the European Prospective Investigation into Cancer and Nutrition-Potsdam Study. Arch Intern Med 2009; 169(15): 1355-1362.
- Sugary drinks include regular soda or pop, fruit drinks with added sugar, sweetened powdered mixes, vitamin drinks, sweet tea or coffee drinks, and sports or energy drinks.
- U.S. Department of Health and Human Services. 2008 physical activity guidelines for Americans. https://health.gov/ PAGuidelines/pdf/paguide.pdf. Accessed February 15, 2017.
- ⁵ Being physically active was defined as 150 minutes of moderateintensity or 75 minutes of vigorous-intensity aerobic physical activity per week or equivalent.
- Body mass index (BMI) is calculated as: Weight (in kilograms) / Height (in meters)²
- Poverty guidelines are issued each year in the Federal Register by the Department of Health and Human Services (HHS): https:// www.federalregister.gov/documents/2015/01/22/2015-01120/ annual-update-of-the-hhs-poverty-guidelines.
- Adverse childhood experiences (ACEs) were defined by the Adverse Childhood Experiences (ACE) study: https://www.cdc.gov/ violenceprevention/acestudy/about.html.



CHRONIC DISEASE PREVENTION HEALTH PROMOTION

