



# HEALTHY ALASKANS 2020

A JOINT PROJECT OF THE STATE OF ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES & THE ALASKA NATIVE TRIBAL HEALTH CONSORTIUM



**Strategies, Actions, and Key Partners**  
to Reach our 25 Health Improvement Goals

Final April 2015

## Introduction

Healthy Alaskans 2020 (HA2020) is Alaska's statewide health improvement initiative co-sponsored by the State of Alaska, Department of Health and Social Services and the Alaska Native Tribal Health Consortium. Healthy Alaskans 2020 is a framework that supports collaborative efforts among many sectors, agencies, and communities working towards common goals to improve health and ensure health equity for all Alaskans.

Based on the latest scientific evidence, along with community input from more than 3,000 Alaskans, the HA2020 framework identified 25 health priorities for Alaska. The initiative focuses its work on meeting targets that have been established for each priority by 2020.

In spring 2014, HA2020 brought together dozens of subject matter experts to build the foundation for unified health improvement. Twelve Strategy Work Groups, comprised of 120 experts representing Alaska's broad public health system, were involved in this process. For each health priority (Leading Health Indicator), work groups reviewed evidence around what works and recommended up to three strategies for Alaska to pursue to help achieve the HA2020 health improvement goals. For each strategy, work groups identified activities to achieve the strategies and key partner organizations doing the work.

The product of the HA2020 Strategy Work Groups, ***Strategies, Actions, and Key Partners to Reach our 25 Health Improvement Goals***, is a compilation of 75 high level, evidence-based, health improvement strategies that support achievement of Alaska's 25 leading health improvement goals. The document includes all the activities identified by the workgroups, those already underway and those recommended but not currently funded. Finally, this document identifies Key Partners from across Alaska who are contributing to the health of Alaskans.

On behalf of HA2020 leadership, thank you for your interest in improving the health of all Alaskans.

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### HA2020 Special Acknowledgements

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Actions for Success was supported by funds made available from the Centers for Disease Control and Prevention, Office for State, Tribal, Local and Territorial Support, with funding provided to the Alaska Native Tribal Health Consortium (5U58CD001326) and the State of Alaska, Division of Public Health (5U58CD001317). The content of this document is written by its authors and does not necessarily represent official endorsement by the Centers for Disease Control and Prevention.

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## Actions for Success

### Actions and Key Partners

Indicator 1: Reduce the cancer mortality rate to 162.0 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Increase breast, cervical and colorectal cancer screening.</b>
<b>S-1 Action 1</b>	<p><b>Conduct community education around cancer screening through evidence based interventions. Examples include:</b></p> <p>National Breast and Cervical Cancer Early Detection Program (NBCCEDP) Activities:</p> <ul style="list-style-type: none"> <li>• Outreach to rarely/never screened women utilizing paycheck stuffers and worksite presentations on Breast and Cervical Cancer Health Check (BCHC) programs</li> <li>• Outreach to underserved populations (those living in poverty, English as a second language) utilizing YWCA/BCHC Outreach Toolkit</li> <li>• Identify and provide outreach to regions with lowest statewide screening rates</li> </ul> <p>Colorectal Cancer Screening activities:</p> <ul style="list-style-type: none"> <li>• Present on colorectal cancer screening at professional and community conferences and meetings</li> <li>• Develop video testimonials by Alaskans who have been screened for colorectal cancer and make them available statewide through <a href="http://www.alaskacolonealth.com">www.alaskacolonealth.com</a></li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Native Tribal Health Consortium, Cancer Programs</li> <li>• American Cancer Society</li> <li>• Arctic Slope Native Association, Screening for Life</li> <li>• Southcentral Foundation, Screening and Prevention Programs</li> <li>• SouthEast Alaska Regional Health Consortium, Breast and Cervical Health Program</li> <li>• State of Alaska, Comprehensive Cancer Control Program</li> <li>• Municipality of Anchorage, Health and Human Services</li> <li>• State of Alaska, Breast and Cervical Health Check Program</li> <li>• Yukon Kuskokwim Health Corporation, Breast and Cervical Health Check Program</li> </ul>
<b>S-1 Action 2</b>	<p><b>Conduct provider education through both individual and multimedia campaign efforts.</b></p> <ul style="list-style-type: none"> <li>• Conduct Informant interviews with hospitals and providers about efforts to increase colorectal cancer screening in Alaska.</li> <li>• Develop provider fact sheet on breast cancer survival rates, screening rates and how to become a BCHC provider.</li> <li>• Provide a webinar for Alaska Primary Care Association on cancer.</li> <li>• Participate in provider professional conferences to provide education on cancer screening.</li> </ul>

<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Native Tribal Health Consortium, Cancer Programs</li> <li>• Alaska Regional Hospital, Cancer Center</li> <li>• American Cancer Society</li> <li>• Providence Health &amp; Services Alaska, Cancer Center</li> <li>• Southcentral Foundation, Screening and Prevention Programs</li> <li>• State of Alaska, Breast and Cervical Health Check Program</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Measure provider education statewide – both the number of activities and the number of individuals reached through these activities with Alaska Breast Cancer Coalition and Alaska Colorectal Cancer Partnership.</p> <ul style="list-style-type: none"> <li>• Establish a baseline</li> <li>• Measure the baseline</li> <li>• Monitor the measure going forward</li> </ul> <p>All insurance companies doing work in Alaska are required by law to provide colorectal cancer screening. To increase coverage:</p> <ul style="list-style-type: none"> <li>• Advocate statewide for self-insured companies, including the State of Alaska Retired Employees Program, to cover the expense of colorectal cancer screening.</li> </ul>
<b>Strategy 2</b>	<b>Increase participation in clinical trials.</b>
<b>S-2 Action 1</b>	<p><b>Increase cancer patient awareness of clinical trials available:</b></p> <ul style="list-style-type: none"> <li>• Include clinical trial information in patient education packets (including but not limited to information on oncology, urology, radiation, patient navigators etc.), similar to ANMC’s Comfort Bags</li> <li>• Plan and implement Clinical Trials Awareness Month activities (May) through media, public service announcements, and digital stories</li> <li>• Utilize NIH database &amp; <a href="http://www.cancer.org">www.cancer.org</a> to research and disseminate information on all cancer clinical trials</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Providence Health &amp; Services Alaska, Cancer Center</li> <li>• Fairbanks Memorial Hospital Cancer Center</li> <li>• Alaska Regional Hospital Cancer Center</li> <li>• Alaska Native Tribal Health Consortium, Cancer Program</li> <li>• State of Alaska, Comprehensive Cancer Control Program</li> </ul>
<b>S-2 Action 2</b>	<p><b>Increase provider awareness of clinical trials available:</b></p> <p>Provide education/speakers on clinical trials in Alaska to provider groups (Alaska Primary Care Conference, Denali Oncology Chapter Conference, Grand Rounds).</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Providence Health &amp; Services Alaska, Cancer Center</li> <li>• Fairbanks Memorial Hospital Cancer Center</li> </ul>

	<ul style="list-style-type: none"> <li>Alaska Regional Hospital Cancer Center</li> <li>Alaska Native Tribal Health Consortium, Cancer Program</li> <li>State of Alaska, Comprehensive Cancer Control Program</li> </ul>
<b>Strategy 3</b>	<b>Increase use of patient navigation for improving access to cancer screening, timely diagnosis and treatment, and palliative care.</b>
<b>S-3 Action 1</b>	<b>Increase the number of people trained in patient navigation in Alaska:</b> Utilize "Train-the Trainer Model" Utilize webinars
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Native Tribal Health Consortium, Cancer Program</li> <li>American Cancer Society</li> <li>University of Alaska Fairbanks, Center for Alaska Native Health Research</li> <li>Providence Health &amp; Services Alaska, Cancer Center</li> <li>Alaska Regional Hospital Cancer Center</li> <li>Fairbanks Memorial Hospital Cancer Center</li> <li>State of Alaska, Comprehensive Cancer Control Program</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Increase the number of patients who utilize patient navigators.</p> <p>Create and implement a survey to establish a baseline and track measures.</p>



## Actions for Success

### Actions and Key Partners

Indicator 2: Increase the percentage of adolescents (high school students in grades 9-12) who have not smoked cigarettes or cigars or used chewing tobacco, snuff, or dip on one or more of the past 30 days to 80% by 2020.

<b>Strategy 1</b>	<b>Implement Gold Standard Tobacco-Free Campus policies in K-12 School Districts.</b>
<b>S-1 Action 1</b>	Continue work with community grantees to focus on implementing and enforcing the K-12 Gold Standard model policy, including e-cigarettes and other tobacco products.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska School Activities Association, Play for Keeps Program</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>
<b>S-1 Action 2</b>	Partner with Alaska Association of School Boards and pursue other partnerships to promote K-12 Gold Standard model policy in all school districts.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Association of Alaska School Boards</li> <li>Alaska School Activities Association, Play for Keeps Program</li> </ul>
<b>S-1 Action 3</b>	Provide technical assistance to all school districts to implement and enforce K-12 Gold Standard model policy, regardless of grant funding.
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program
<b>Strategy 2</b>	<b>Increase the price of all tobacco products.</b>
<b>S-2 Action 1</b>	Build capacity of local coalitions to promote tax increases and create tax parity. Garner support for youth tobacco prevention.
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program



<b>S-2 Action 2</b>	Provide evidence and technical assistance to local coalitions on effective pricing strategies to prevent youth initiation. Use national resources to calculate specific information for varying price increases.
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program
<b>S-2 Action 3</b>	Advocate for price increases and tax parity for all tobacco products using evidence and Alaska specific impacts.
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program
<b>Strategy 3</b>	<b>Conduct a public education campaign focusing on young people, to prevent tobacco use and promote quitting.</b>
<b>S-3 Action 1</b>	<b>Ongoing development of strategy for tobacco prevention media campaign. Examples include:</b> <ul style="list-style-type: none"> <li>• Industry denormalization</li> <li>• Support policy change while addressing emerging tobacco products.</li> </ul>
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program
<b>S-3 Action 2</b>	Implement and evaluate local and statewide campaigns.
<b>Key Partners</b>	State of Alaska, Tobacco Prevention and Control Program





## Actions for Success

### Actions and Key Partners

Indicator 3: Increase the percentage of adults (age 18 years and older) who currently do not smoke cigarettes to 83% by 2020.

<b>Strategy 1</b>	<b>Enact statewide or community comprehensive smoke-free workplace laws.</b>
<b>S-1 Action 1</b>	Advocate for passage of a strong comprehensive smoke-free workplace law statewide.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Tobacco Control Alliance, Smokefree Workplaces Law Group</li> <li>Alaskans for Tobacco-Free Kids</li> </ul>
<b>S-1 Action 2</b>	Provide education and support for implementation and enforcement in every community using local resources, tailored to the individual community or region.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>State of Alaska, Behavioral Health, Prevention and Early Intervention</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>
<b>S-1 Action 3</b>	Build partnerships to increase local and statewide capacity to implement and enforce a smoke-free workplace law.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>State of Alaska, Behavioral Health, Prevention and Early Intervention</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>
<b>Strategy 2</b>	<b>Adopt and implement comprehensive tobacco-free policies for multi-unit housing and higher education and healthcare campuses.</b>
<b>S-2 Action 1</b>	Advocate for strong smoke-free and tobacco-free post-secondary and healthcare campus or multi-unit housing policies.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>American Lung Association of Alaska, Alaska Tobacco-Free Colleges Initiative</li> <li>University of Alaska Anchorage, Smokefree Taskforce</li> </ul>
<b>S-2 Action 2</b>	Provide education and support for implementation and enforcement using local resources tailored to each organization.

<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Tobacco Control Alliance, Alaska Smokefree Housing Partnership</li> <li>American Lung Association of Alaska, Alaska Tobacco-Free Colleges Initiative</li> <li>University of Alaska Anchorage, Smokefree Taskforce</li> </ul>
<b>S-2 Action 3</b>	Build partnerships to increase local and statewide capacity to implement and enforce a smoke-free or tobacco-free policy.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Tobacco Control Alliance, Alaska Smokefree Housing Partnership</li> <li>American Lung Association of Alaska, Alaska Tobacco-Free Colleges Initiative</li> <li>University of Alaska Anchorage, Smokefree Taskforce</li> </ul>
<b>Strategy 3</b>	<b>Train healthcare providers to Ask at every visit, Advise patients to quit, and Refer to cessation services. Document in the electronic health record systems.</b>
<b>S-3 Action 1</b>	<p>Increase awareness among providers on the need to screen.</p> <ul style="list-style-type: none"> <li>Provide the tools available to assist in screening.</li> <li>Provide the cessation resources available for clients/patients.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Native Tribal Health Consortium, Tobacco Prevention Program</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>
<b>S-3 Action 2</b>	Provide education and technical assistance on Clinical Practice Guidelines for providers, healthcare leadership, and staff.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Native Tribal Health Consortium, Tobacco Prevention Program</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>
<b>S-3 Action 3</b>	Work with healthcare leadership to implement documentation systems and reimbursement protocols.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Native Tribal Health Consortium, Tobacco Prevention Program</li> <li>State of Alaska, Tobacco Prevention and Control Program</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 4.a: Reduce the percentage of **adults** (age 18 years and older) who meet criteria for **overweight** (body mass index of  $\geq 25$  and  $< 30 \text{ kg/m}^2$ ) to 36% by 2020.

Indicator 4.b: Reduce the percentage of **adults** (age 18 years and older) who meet criteria for **obesity** (body mass index of  $\geq 30 \text{ kg/m}^2$ ) to 27% by 2020.

<b>Strategy 1</b>	<b>Conduct a public education campaign to promote nutrition and physical activity.</b>
<b>S-1 Action 1</b>	Advocate for funding to support a comprehensive social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>Alaska Dietetic Association</li> <li>Alaska Native Tribal Health Consortium, Community Health Services</li> <li>Alaska Public Health Association</li> <li>American Cancer Society Cancer Action Network</li> <li>American Heart Association</li> </ul>
<b>S-1 Action 2</b>	Identify and educate partners to support the social marketing campaign (providing resources, etc.) Build capacity within communities so there are the programs to “plug into” the social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>S-1 Action 3</b>	Implement and evaluate the comprehensive social marketing campaign, including both public education and programmatic components.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 5.a.i: Reduce the percentage of **adolescents** (high school students in grades 9-12) who meet criteria for **overweight** (age- and sex-specific body mass index of  $\geq 85^{\text{th}}$  and  $< 95^{\text{th}}$  percentile) to 12% by 2020.

Indicator 5.a.ii: Reduce the percentage of **adolescents** (high school students in grades 9-12) who meet criteria for **obesity** (age- and sex-specific body mass index of  $\geq 95^{\text{th}}$  percentile) to 10% by 2020.

Indicator 5.b.i: Reduce the percentage of **children** (students in grades K-8) who meet criteria for **overweight** (age- and sex-specific body mass index of  $\geq 85^{\text{th}}$  and  $< 95^{\text{th}}$  percentile) to 15% by 2020.

Indicator 5.b.ii: Reduce the percentage of **children** (students in grades K-8) who meet criteria for **obesity** (age- and sex-specific body mass index of  $\geq 95^{\text{th}}$  percentile) to 14% by 2020.

<b>Strategy 1</b>	<b>Conduct a public education campaign to promote nutrition and physical activity.</b>
<b>S-1 Action 1</b>	Advocate for funding to support a comprehensive social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>Alaska Dietetic Association</li> <li>Alaska Native Tribal Health Consortium, Community Health Services</li> <li>Alaska Public Health Association</li> <li>American Cancer Society Cancer Action Network</li> <li>American Heart Association</li> </ul>
<b>S-1 Action 2</b>	Identify and educate partners to support the social marketing campaign by providing resources, etc. Build capacity within communities so there are the programs to “plug into” the social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>S-1 Action 3</b>	Implement and evaluate the comprehensive social marketing campaign, including both public

	education and programmatic components.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>Strategy 2</b>	<b>Increase the number of breastfeeding-friendly maternity facilities.</b>
<b>S-2 Action 1</b>	<p>Disseminate evidence-based and best practices on increasing breastfeeding to healthcare providers statewide in partnership with:</p> <ul style="list-style-type: none"> <li>The Region X Office of Women’s Health</li> <li>National Partnership for Women and Families</li> <li>US Breastfeeding committee</li> <li>CDC</li> <li>American Academy of Pediatrics</li> <li>American Academy of Family Practice Physicians</li> <li>Academy of Breastfeeding Medicine</li> <li>All Alaska Pediatric Partnership</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Area Health Education Centers</li> <li>State of Alaska, Alaska Breastfeeding Initiative</li> </ul>
<b>S-2 Action 2</b>	<p>Foster coordination and collaboration across major breastfeeding efforts in Alaska, including:</p> <ul style="list-style-type: none"> <li>Women, Infants, and Children (WIC)</li> <li>Alaska Breastfeeding Coalition</li> <li>Local coalitions in Juneau, Fairbanks and Ketchikan</li> <li>Alaska Breastfeeding Initiative</li> <li>Native Hospital Breastfeeding Network</li> <li>Hospitals and maternity facilities across the state</li> <li>Others as they are identified</li> <li>All Alaska Pediatric Partnership</li> <li>Alaska Alliance for Healthy Kids</li> </ul> <p>Coordinate with the US Breastfeeding Committee and Region X Office on Women’s Health:</p> <ul style="list-style-type: none"> <li>Consider disparate distribution of lactation consultants around the state</li> <li>Establish peer-counseling programs or supports around the state (best practice)</li> </ul>
<b>Key Partners</b>	<p>State of Alaska, Alaska Breastfeeding Initiative</p> <p><b>Also recommended but not currently funded:</b></p> <p>Provide trainings to clinical hospital staff statewide on the 10 Steps to achieving a Baby-Friendly designation utilizing many partners, including WIC.</p>

<b>Strategy 3</b>	<b>Implement new school physical activity and nutrition policies, also known as “wellness policies.”</b>
<b>S-3 Action 1</b>	Distribute model policy, developed in partnership with DHSS and Department of Education and Early Development to all districts in the state.
<b>Key Partners</b>	Association of Alaska School Boards
<b>S-3 Action 2</b>	<ul style="list-style-type: none"> <li>• Educate School Boards about elements of the policy and support their adoption of the strongest policy feasible.</li> <li>• Educate key stakeholders about the need for and requirements to have updated school physical activity and nutrition policies.</li> <li>• Adopt model policy.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• State of Alaska, Obesity Prevention and Control Program (OPCP)</li> </ul>
<b>S-3 Action 3</b>	<p>Support community/district/school coordinator with implementation at the district level:</p> <ul style="list-style-type: none"> <li>• OPCP: Currently 9 grantees receive in-depth TA and training.</li> <li>• Non-grantee districts receive training through the annual School Health and Wellness</li> </ul> <p>Institute, the annual School Nutrition Training through Education &amp; Early Development (EED), and related webinars</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Education &amp; Early Development, Child Nutrition Programs</li> <li>• State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>S-3 Action 4</b>	Evaluate policy implementation.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Education &amp; Early Development, Child Nutrition Programs</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 6.a: Increase the percentage of **adults** (age 18 years and older) who meet the 2008 U.S. Dept. of Health and Human Services Physical Activity Guidelines (150 minutes or more total minutes per week of moderate or vigorous exercise) to 61% by 2020.

Indicator 6.b: Increase the percentage of **adolescents** (high school students in grades 9-12) who meet the 2008 U.S. Dept. of Health and Human Services Physical Activity Guidelines (at least 60 minutes of physical activity a day, every day of the week) to 23% by 2020.

<b>Strategy 1</b>	<b>Conduct a public education campaign to promote physical activity.</b>
<b>S-1 Action 1</b>	Advocate for funding to support a comprehensive social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>Alaska Native Tribal Health Consortium, Community Health Services</li> <li>Alaska Public Health Association</li> <li>American Cancer Society Cancer Action Network</li> <li>American Heart Association</li> </ul>
<b>S-1 Action 2</b>	Identify and educate partners to support the social marketing campaign by providing resources, etc. Build capacity within communities so there are the programs to “plug into” the social marketing campaign.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program (OPCP)</li> </ul>
<b>S-1 Action 3</b>	Implement and evaluate the comprehensive social marketing campaign, including both public education and programmatic components.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Alliance for Healthy Kids</li> <li>State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>Strategy 2</b>	<b>Implement new school physical activity and nutrition policies, also known as “wellness policies.”</b>



<b>S-2 Action 1</b>	Distribute model policy (developed in partnership with DHSS and Education & Early Development (EED) and to all districts in the state).
<b>Key Partners</b>	Association of Alaska School Boards
<b>S-2 Action 2</b>	<p>Educate School Boards about elements of the policy and support their adoption of the strongest policy feasible. (Leads: OPCP and EED, Alaska School Nutrition Association (AKSNA), SHAPE America)</p> <ul style="list-style-type: none"> <li>• Educate key stakeholders about the need and requirements for updated school physical activity and nutrition policies (Lead: OPCP and EED)</li> <li>• Adopt model policy (Lead: School Boards)</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• State of Alaska, Education &amp; Early Development, Child Nutrition Programs</li> <li>• State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>S-2 Action 3</b>	<p>Support community/district/school coordinator with implementation at the district level.</p> <ul style="list-style-type: none"> <li>• OPCP: Currently 9 grantees receive in-depth technical assistance and training.</li> </ul> <p>OPCP/EED/AKSNA, SHAPE America: Non-grantee districts receive training through the annual School Health and Wellness Institute, the EED annual School Nutrition Training, and related webinars.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Education &amp; Early Development, Child Nutrition Programs</li> <li>• State of Alaska, Obesity Prevention and Control Program</li> </ul>
<b>S-2 Action 4</b>	Evaluate policy implementation.
<b>Key Partners</b>	State of Alaska, Education & Early Development, Child Nutrition Programs



## Actions for Success

### Actions and Key Partners

Indicator 7.a: Reduce the suicide mortality rate of 15 – 24 year olds to 43.2 per 100,000 by 2020.

Indicator 7.b: Reduce the suicide mortality rate of adults 25 years and older to 23.5 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Create supportive environments that promote resilient, healthy, and empowered individuals, families, schools, and communities.</b>
<b>S-1 Action 1</b>	<p><b>Promote help-seeking and reduce stigma and barriers to seeking treatment for mental health issues.</b></p> <ul style="list-style-type: none"> <li>• Maintain the <b>We Are All Alaskans</b> campaign to educate about mental health and reduce stigma around help-seeking/mental health treatment.</li> <li>• Maintain and expand the <b>Sound Mind in Sound Bodies</b> mental health promotion campaign.</li> <li>• Provide technical assistance to community wellness coalitions to create and strengthen supportive environments in local communities.</li> </ul>
<b>Key Partners</b>	<p>Alaska Mental Health Board</p> <p><b>Also recommended but not currently funded:</b></p> <p>Incentivize employers to offer employee wellness programs that include mental and emotional health promotion.</p> <p>Offer employee assistance programs for mental health and substance use disorder treatment.</p>
<b>Strategy 2</b>	<b>Enhance clinical and community preventive services to ensure timely treatment and support.</b>
<b>S-2 Action 1</b>	<p><b>Ensure timely access to mental health services, whether in the community or via telehealth, for individuals at risk of suicide.</b></p> <ul style="list-style-type: none"> <li>• Conduct evidence-based assessment for suicide risk in OB/GYN, primary care, and specialty practices during routine visits.</li> <li>• Conduct evidence-based assessment for suicide risk of patients presenting in emergency departments (or similar settings) for overdose, poisoning, and intentional and unintentional self-injury.</li> <li>• If integrated mental health services are not available, provide at-risk patients a “warm hand-off” referral to mental health services.</li> </ul>

	<ul style="list-style-type: none"> <li>• Establish individuals at-risk of suicide as a priority population for publicly funded outpatient behavioral health services.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Division of Behavioral Health, Section of Treatment and Recovery</li> <li>• Statewide Suicide Prevention Council</li> <li>• Alaska Native Tribal Health Consortium</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Require suicide-specific continuing education for licensed mental health professionals.</p>
<b>Strategy 3</b>	<b>Fund proven and effective suicide prevention efforts.</b>
<b>S-3 Action 1</b>	<p><b>Preserve and maintain statewide suicide prevention surveillance efforts.</b></p> <ul style="list-style-type: none"> <li>• Alaska Violent Death Reporting System</li> <li>• Alaska Trauma Registry</li> <li>• Alaska Hospital Discharge Data</li> <li>• Alaska Bureau of Vital Statistics</li> <li>• Alaska Youth Risk Behavior Survey</li> <li>• Alaska Behavioral Risk Factor Surveillance System</li> </ul>
<b>Key Partners</b>	State of Alaska, Public Health
<b>S-3 Action 2</b>	<b>Prioritize evidence-based suicide prevention programs and practices for funding in all State of Alaska prevention grant programs.</b>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Education &amp; Early Development, School Health and Safety Program</li> <li>• State of Alaska, Behavioral Health, Prevention and Early Intervention</li> <li>• Statewide Suicide Prevention Council</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Provide state/public financial support for research and evaluation of suicide prevention programs developed and/or adapted by Alaskan communities.</p>



## Actions for Success

### Actions and Key Partners

Indicator 8: Reduce the percentage of adolescents (high school students in grades 9-12) who felt so sad or hopeless every day for 2 weeks or more in a row that they stopped doing some usual activities during the past 12 months to 23% by 2020.

<b>Strategy 1</b>	<b>Identify adolescents experiencing or at risk of experiencing severe depression and immediately connect them to screening, treatment, and social support services.</b>
<b>S-1 Action 1</b>	<p><b>Encourage all pediatric and primary care practitioners to provide annual childhood Early &amp; Periodic Screening, Diagnostic, &amp; Treatment (EPSDT) screenings for patients aged 0-21 years.</b></p> <ul style="list-style-type: none"> <li>• Maintain policymaking and planning efforts to standardize and expand use of EPSDT screenings for all children and youth to age 18</li> <li>• Incentivize practitioners to implement annual screenings for all patients aged 0-21 years</li> <li>• Educate parents and practitioners about resources available for children and youth identified through screening as at-risk of or experiencing depression</li> </ul>
<b>Key Partners</b>	State of Alaska, Office of Children's Services, Alaska Infant Learning Program
<b>S-1 Action 2</b>	<p><b>Expand use of evidence-based screenings for depression and suicide in Alaska middle and high schools.</b></p> <ul style="list-style-type: none"> <li>• Educate parents and school administrators about the effectiveness of screening as part of adhering to active parental consent requirements</li> <li>• Educate parents, educators, and school administrators about resources available to children and youth identified through screening as at-risk of or experiencing depression</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Education &amp; Early Development, School Health and Safety Program</li> <li>• Statewide Suicide Prevention Council</li> </ul>
<b>Strategy 2</b>	<b>Provide services and opportunities to support all young people in developing a sense of competence, usefulness, belonging, and empowerment.</b>
<b>S-2 Action 1</b>	<p><b>Promote and provide opportunities for adults to interact with youth in ways that promote positive youth development.</b></p> <ul style="list-style-type: none"> <li>• Increase capacity of mentorship programs (such as Big Brothers Big Sisters, sports programs, etc.)</li> <li>• Increase youth-adult partnerships and community action projects, such as the Youth</li> </ul>

	Alliance for a Healthier Alaska, Youth Policy Summit, Alaska Association of Student Governments, etc.
<b>Key Partners</b>	State of Alaska, Adolescent Health Program
<b>S-2 Action 2</b>	<p><b>Engage and educate adults about ways to interact with youth that promote positive youth development.</b></p> <ul style="list-style-type: none"> <li>• Maintain and expand the Alaska Initiative for Community Engagement</li> <li>• Encourage use of strength-based frameworks in schools, extracurricular and recreational programs, and at home (“catch kids doing something right”)</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Association of School Boards</li> <li>• United Way of Anchorage – Anchorage Youth Development Coalition</li> <li>• State of Alaska, Adolescent Health Program</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 9: Reduce the mean number of days in the past 30 days that adults (age 18 and older) report being mentally unhealthy to 2.9 days by 2020.

<b>Strategy 1</b>	<b>Identify adults who rate their mental health as not good and connect them to screening, treatment, and social support services without delay.</b>
<b>S-1 Action 1</b>	<p><b>Maintain and expand use of evidence-based screening, brief intervention, and referral models such as Screening, Brief Intervention, and Referral to Treatment (SBIRT), Improving Mood - Promoting Access to Collaborative Treatment (IMPACT), and SSI/SSDI Outreach, Access, and Recovery (SOAR).</b></p> <ul style="list-style-type: none"> <li>• Maintain existing projects (Anchorage Neighborhood Health, etc.).</li> <li>• Train primary care and specialty practices on use of tools and models.</li> <li>• Help practices understand and accurately code procedures for reimbursement (Medicaid, private insurance, etc.).</li> <li>• Expand access to culturally appropriate screening, intervention, and referral models.</li> </ul>
<b>Key Partners</b>	State of Alaska, Behavioral Health, Treatment and Recovery
<b>Strategy 2</b>	<b>Create supportive environments that promote resilient, healthy, and empowered individuals, families, schools, and communities.</b>
<b>S-2 Action 1</b>	<p><b>Promote help-seeking and reduce stigma and barriers to seeking treatment for mental health issues.</b></p> <ul style="list-style-type: none"> <li>• Maintain the "We Are All Alaskans" campaign to educate about mental health and reduce stigma around help-seeking and mental health treatment.</li> <li>• Maintain and expand the "Sound Mind in Sound Bodies" mental health promotion campaign.</li> <li>• Provide technical assistance to community wellness coalitions to create and strengthen supportive environments in local communities.</li> </ul>
<b>Key Partners</b>	Alaska Mental Health Board
<p><b>Also recommended but not currently funded:</b></p> <p><b>Strategy: Identify environmental and individual strengths of Alaskans who are mentally healthy to inform health promotion strategies.</b></p> <p>Glean correlates/characteristics of mentally healthy Alaskans from Behavioral Risk Factor Surveillance System data and other sources.</p>	



## Actions for Success

### Actions and Key Partners

Indicator 10: Increase the percentage of adolescents (high school students in grades 9-12) with three or more adults (besides their parents) from whom they feel comfortable seeking help to 47% by 2020.

<b>Strategy 1</b>	<b>Create positive school climates that promote connectedness and healthy youth-adult relationships.</b>
<b>S-1 Action 1</b>	<b>Create the expectation that all Alaska schools will have a positive school climate.</b> <ul style="list-style-type: none"> <li>• Maintain and expand use of the School Climate and Connectedness Survey</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• State of Alaska, Education &amp; Early Development, School Health &amp; Safety Program</li> </ul>
<b>S-1 Action 2</b>	<b>Engage and educate adults about ways to interact with youth that promote positive youth development.</b> <ul style="list-style-type: none"> <li>• Maintain and expand the Alaska Initiative for Community Engagement.</li> <li>• Encourage use of strength-based frameworks in schools, extracurricular and recreational programs, and at home (“catch kids doing something right”).</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• United Way of Anchorage - Anchorage Youth Development Coalition</li> <li>• State of Alaska, Adolescent Health Program</li> </ul>
<b>Strategy 2</b>	<b>Provide services and opportunities to support all young people in developing a sense of competence, usefulness, belonging, and empowerment.</b>
<b>S-2 Action 1</b>	<b>Promote and provide opportunities for adults to interact with youth in ways that promote positive youth development.</b> <ul style="list-style-type: none"> <li>• Increase capacity of mentorship programs (such as Big Brothers Big Sisters, sports programs, etc.)</li> <li>• Increase youth-adult partnerships and community action projects, such as the Youth Alliance for a Healthier Alaska, Youth Policy Summit, Alaska Association of Student Governments, etc.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Behavioral Health, Prevention &amp; Early Intervention</li> <li>• State of Alaska, Adolescent Health Program</li> </ul>





## Actions for Success

### Actions and Key Partners

Indicator 11: Reduce the rate of unique substantiated child maltreatment victims (age 0-17 years) in Alaska to 14.4 per 1,000 by 2020.

<b>Strategy 1</b>	<b>Promote screening and monitoring for child abuse in primary care offices and public health clinics.</b>
<b>S-1 Action 1</b>	<p>Continue bringing together groups and committees working in this area to develop an integrated consistent campaign and implementation tools using:</p> <ul style="list-style-type: none"> <li>• We are Worthy card</li> <li>• Ages &amp; Stages Questionnaires, and other developmental screening tools</li> <li>• National Child Traumatic Stress Network</li> <li>• Training for primary care providers</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Teaching and Learning Support</li> <li>• State of Alaska, Developmental Screening &amp; Brief Behavioral Services Committee</li> </ul>
<b>S-1 Action 2</b>	Develop a plan with strategies to distribute information and support practice changes in primary care offices.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Developmental Screening &amp; Brief Behavioral Services Committee</li> </ul>
<b>S-1 Action 3</b>	Implement the plan, distribute materials and toolkits, and provide training and technical assistance to medical providers.
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>S-1 Action 4</b>	<p>Promote the adoption of policies that encourage screening and integration of behavioral health and primary care.</p> <ul style="list-style-type: none"> <li>• Advocate for changes to State Medicaid reimbursement policy to enable pediatric practices to be reimbursed for services related to screening of parents for mental health, substance abuse or interpersonal violence issues.</li> <li>• Advocate for changes to State behavioral health regulations to permit pediatric practices to embed licensed mental health professionals.</li> </ul>

<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Developmental Screening &amp; Brief Behavioral Services Committee</li> <li>• State of Alaska, Early Childhood Mental Health Workgroup</li> </ul>
<b>Strategy 2</b>	<b>Expand home visiting programs.</b>
<b>S-2 Action 1</b>	<p>Expand programs where need is greatest and infrastructure is available to support programs. These include:</p> <ul style="list-style-type: none"> <li>• The Nurse Family Partnership</li> <li>• Parents As Teachers</li> <li>• Early Head Start</li> <li>• Head Start and Infant Learning Programs</li> </ul> <p>Identify need for services, gaps in services, program expansion opportunities, and potential resources.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Teaching and Learning Support</li> <li>• State of Alaska, Alaska Early Childhood Coordinating Council</li> </ul>
<b>S-2 Action 2</b>	Provide training, coaching, and ongoing support for home visit programs regarding the impacts of adverse childhood experiences and supportive interventions.
<b>Key Partners</b>	<p>State of Alaska, Alaska Early Childhood Coordinating Council</p> <p><b>Also recommended but not currently funded:</b></p> <p>Identify need for services, gaps in services, program expansion opportunities, and potential resources.</p>
<b>Strategy 3</b>	<b>Expand and strengthen quality early childhood programs.</b>
<b>S-3 Action 1</b>	Utilize the Alaska Early Childhood Coordinating Council to identify needs and gaps in services and to articulate quality concerns.
<b>Key Partners</b>	State of Alaska, Alaska Early Childhood Coordinating Council
<b>S-3 Action 2</b>	<p>Develop plan to address lack of quality early childhood programs, and develop support of policy makers and decision makers using:</p> <ul style="list-style-type: none"> <li>• Alaska Early Childhood Comprehensive Systems Plan</li> <li>• Alaska Early Childhood Coordinating Council Strategic Report</li> </ul>

**Key Partners**

- State of Alaska, Alaska Early Childhood Coordinating Council
- Municipality of Anchorage, Health & Human Services

**Also recommended but not currently funded:**

Implement the plan to expand and strengthen Alaska's early childhood programs (such as, include Pre-K, Parents As Teachers, Early Head Start, Head Start and Infant Learning Programs) in collaboration with Alaska Department of Education & Early Development, Alaska Department of Health and Social Services and private sector programs

**Strategy 4**

**Train providers on brain development, adverse childhood experiences (ACES), and resiliency.**

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**S-4  
Action 1**

Identify key communities and representatives to participate in the Train-the-Trainers program.

**Key Partners**

Alaska Children's Trust

**S-4  
Action 2**

Complete certification process for each Master Trainer.

**Key Partners**

Alaska Children's Trust

**S-4  
Action 3**

Train additional individuals to participate in the Speakers Bureau.

**Key Partners**

Alaska Children's Trust

**Also recommended but not currently funded:****Strategy: Use the Strengthening Families Protective Factors framework in family programs.**

- Support the existing Alaska Strengthening Families Leadership Team (Office of Children's Services):
- Solicit communities and programs interested in embedding Strengthening Families in their work
- Assist these communities and programs with self-assessments, and developing implementation plans
- Create local Leadership Teams that include family representatives
- Provide training, ongoing coaching, and technical assistance to programs embedding the Strengthening Families approach.
- Monitor impact of practice changes on families.



## Actions for Success

### Actions and Key Partners

Indicator 12: Reduce the rate of rape to 67.5 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Strengthen the abilities and skills of communities to prevent violence.</b>
<b>S-1 Action 1</b>	<b>Support existing community prevention teams and form new teams that:</b> <ul style="list-style-type: none"> <li>• Coordinate prevention efforts</li> <li>• Oversee planning and coordination</li> <li>• Evaluate prevention strategies across community settings</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Network on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• Municipality of Anchorage, Health &amp; Human Services</li> </ul>
<b>S-1 Action 2</b>	<b>Continue and increase coordination of prevention programming across settings and populations (including youth and youth group leaders) to:</b> <ul style="list-style-type: none"> <li>• Strengthen community-based prevention programming</li> <li>• Sustain multi-agency and multi-disciplinary community prevention coalitions</li> </ul>
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>S-1 Action 3</b>	<b>Continue to strengthen the internal capacity of local agencies and partner with new agencies to implement prevention programming by:</b> <ul style="list-style-type: none"> <li>• Increasing staff time devoted to prevention planning, implementation, and evaluation</li> <li>• Improving understanding of comprehensive prevention, risk, and protective factors</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• Municipality of Anchorage, Health &amp; Human Services</li> </ul>
<b>S-1 Action 4</b>	<b>Promote existing strategies and develop new strategies that improve individual, peer, family, and societal level risk and protective factors that relate to the reduction of rape:</b> <ul style="list-style-type: none"> <li>• Risk factors: early exposure to sexual activity, suicide attempts, traditional gender based attitudes, peer pressure, abuse, ideology of male sexual entitlement, weak legal sanctions</li> <li>• Protective factors: school success, social emotional health and connectedness</li> </ul>

<b>Key Partners</b>	<ul style="list-style-type: none"> <li>State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul>
<b>S-1 Action 5</b>	<p><b>Continue to enhance comprehensive agency programming to prevent violence by implementing prevention programs that:</b></p> <ul style="list-style-type: none"> <li>Are complimentary and reinforce one another</li> <li>Are in more than one setting in the community</li> <li>Engage with youth and provide youth group support and infrastructure</li> <li>Address at least two risk factors and two protective factors relevant to the local community</li> </ul>
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>Strategy 2</b>	<b>Promote values and beliefs that reinforce safe and healthy relationships.</b>
<b>S-2 Action 1</b>	<p><b>Expand current efforts to engage and reach men to promote equitable gender norms and to prevent sexual violence by increasing understanding of consent using sexual violence prevention messaging:</b></p> <ul style="list-style-type: none"> <li>Alaska Men Choose Respect</li> <li>Coaching Boys into Men</li> <li>Compass: A Guide for Men</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Network on Domestic Violence and Sexual Assault</li> <li>State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul>
<b>S-2 Action 2</b>	<p><b>Through programs like Green Dot:</b></p> <ul style="list-style-type: none"> <li>Continue to engage and reach witnesses and victims of violence</li> <li>Empower and enable individual choices to shift current cultural norms from bystander inaction to a community that is active and visibly intolerant of violence</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Network on Domestic Violence and Sexual Assault</li> <li>State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Update Alaska school health education standards to include social and emotional learning and sexual assault prevention.</p> <p>Promote health among teens to:</p> <ul style="list-style-type: none"> <li>Increase knowledge about prevention of HIV, STDs, and pregnancy</li> <li>Develop more positive attitudes and beliefs about abstinence and condom use</li> <li>Improve condom-use skills</li> <li>Gain confidence in ability to negotiate abstinence and safer sex</li> <li>Foster a stronger sense of pride and responsibility in making a difference in their lives</li> </ul>

<b>Strategy 3</b>	<b>Develop plans and approaches for early interventions with juveniles who commit acts of sexual abuse or act out sexually in inappropriate ways.</b>
<b>S-3 Action 1</b>	<b>Develop a statewide group to research this issue in Alaska.</b> <ul style="list-style-type: none"> <li>• Identify gaps in responding to known, early-identified behaviors</li> <li>• Propose solutions on a statewide basis</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Children's Alliance</li> <li>• State of Alaska, Juvenile Justice</li> <li>• State of Alaska, Office of Children's Services</li> </ul>

**Also recommended but not currently funded:**

Encourage local or regional groups to host community conversations that will identify gaps and propose solutions at the local level to inform statewide group.

Develop relationship between statewide group and National Adolescent Perpetration Network to bring knowledge and resources to practitioners, advocacy groups, policy makers, and community members.



## Actions for Success

### Actions and Key Partners

Indicator 13: Reduce the percentage of adolescents (high school students in grades 9-12) who were ever hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months to 8% by 2020.

<b>Strategy 1</b>	<b>Strengthen the abilities and skills of communities to prevent violence.</b>
<b>S-1 Action 1</b>	Support existing community prevention teams and support new teams to coordinate prevention efforts in a community by overseeing the planning, coordination, and evaluation of prevention strategies across community settings.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Network on Domestic Violence and Sexual Assault</li> <li>State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul>
<b>S-1 Action 2</b>	<b>Continue and increase coordination of prevention programming across settings and populations (including youth and youth group leaders) to:</b> <ul style="list-style-type: none"> <li>Strengthen community-based prevention programming</li> <li>Sustain multi-agency multi-disciplinary community prevention coalitions</li> </ul>
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>S-1 Action 3</b>	<b>Continue to strengthen the internal capacity of local agencies and partner with new agencies to implement prevention programming by:</b> <ul style="list-style-type: none"> <li>Increasing staff time devoted to prevention planning, implementation, and evaluation</li> <li>Improving understanding of comprehensive prevention, risk, and protective factors</li> </ul>
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>S-1 Action 4</b>	<b>Promote existing strategies and develop new strategies that improve individual, peer, family, and societal level risk and protective factors that relate to the reduction of dating violence.</b> <ul style="list-style-type: none"> <li>Protective factors: school success, access to safe and caring adults, positive cultural identity;</li> <li>Risk factors: tolerance for dating violence, community sanctions, traditional gender norms that serve to normalize dating violence</li> </ul>



<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>S-1 Action 5</b>	<p><b>Continue to enhance comprehensive agency programming to prevent dating violence by implementing prevention programs that:</b></p> <ul style="list-style-type: none"> <li>• Are complimentary to and reinforce one another</li> <li>• Are in more than one setting in the community</li> <li>• Engage youth and provide youth group support and infrastructure</li> <li>• Address at least two risk factors and two protective factors that are relevant to the local community</li> </ul>
<b>Key Partners</b>	State of Alaska, Council on Domestic Violence and Sexual Assault
<b>Strategy 2</b>	<b>Promote values and beliefs that reinforce safe and healthy relationships.</b>
<b>S-2 Action 1</b>	<p><b>Expand current efforts to engage and reach youth through culturally-based media/online engagement programs and youth leadership action opportunities:</b></p> <ul style="list-style-type: none"> <li>• Stand Up Speak Up Alaska [media campaign and mini-grants]</li> <li>• Lead On! For Peace and Equality [youth leadership conference and community projects]</li> <li>• When I am an Elder Campaign</li> <li>• Girls on the Run</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Network on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul>
<b>S-2 Action 2</b>	Continue to engage and reach parents to provide resources on healthy teen relationships and to increase conversations with teens around healthy relationships (e.g., Talk Now Talk Often Alaska)
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Network on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> </ul>
<b>Strategy 3</b>	<b>Implement evidence-based school violence prevention programs.</b>
<b>S-3 Action 1</b>	<p><b>Continue to provide training and materials and technical assistance to secondary school teachers, and expand partnerships with local schools to:</b></p> <ul style="list-style-type: none"> <li>• Implement the Fourth R Healthy Relationships curriculum</li> <li>• Increase the number of students who complete the Fourth R curriculum</li> <li>• Implement Healthy Relationships Plus curriculum with fidelity</li> </ul>

**Key Partners**

State of Alaska, Teaching and Learning Support

**S-3  
Action 2**

Implement evidence-based, multi-tiered behavioral framework in schools, such as positive behavioral interventions and supports.

**Key Partners**

- Association of Alaska School Boards
- State of Alaska, Teaching and Learning Support

**Also recommended but not currently resourced:**

Implement social and emotional learning programs Pre-k and elementary schools.



## Actions for Success

### Actions and Key Partners

Indicator 14: Reduce the alcohol-induced mortality rate to 15.3 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Ensure access to a seamless system of care throughout Alaska for assessment, treatment, and aftercare for people with both mental health and substance use disorders.</b>
<b>S-1 Action 1</b>	<p><b>Assess the continuum of care regionally for substance abuse and co-occurring disorders to ensure treatment options for all residents.</b></p> <ul style="list-style-type: none"> <li>• The Mat-Su Health Foundation has commissioned a Behavioral Health Environmental Scan which is doing this type of assessment for the Mat-Su Borough</li> <li>• The Mental Health Trust Authority is conducting an Alaska Behavioral Health Systems Assessment Analysis to assess systems of care statewide</li> <li>• This type of assessment is planned on being carried out throughout the state by Behavioral Health Integration Teams which are mandated by the State of Alaska Division of Behavioral Health and are composed of Alaska Division of Behavioral Health grantees.</li> </ul>
<b>Key Partners</b>	<p>Mat-Su Health Foundation</p> <p><b>Also recommended but not currently funded:</b></p> <p>Support the development of systems for access and new programs that need access to complete continuum of care for substance abuse and co-existing disorders for residents from every region of Alaska (based on the results of the assessment in Action Step 1).</p>
<b>Strategy 2</b>	<b>Promote environmental strategies that change community conditions to reduce alcohol consumption.</b>
<b>S-2 Action 1</b>	<p><b>Strategies that lead to long-term outcomes should be selected. Not selling cold, single-serving containers of beer in convenience stores, increasing fines for underage drinking, and increasing access to treatment services by providing counselors who speak the local language are all examples of environmental strategies.</b></p> <p>Stakeholders' review of Title 4 is a two-year process initiated by the Alcoholic Beverage Control (ABC) Board to:</p> <ul style="list-style-type: none"> <li>• Engage Alaska's statutes regarding regulation and control of alcoholic beverages in the State</li> <li>• Engage a diverse group of stakeholders on how to improve the structure, organization, specific policies and implementation in Title 4</li> </ul>

The ABC Board is tasked with interpreting and enforcing the laws of Title 4; this process is intended to benefit:

- The Board as it carries out its mission
- Organizations and individuals whose work, community or business is affected by alcoholic beverage laws and regulations

The ABC Board convened a group of stakeholders from multiple and diverse sectors.

- Stakeholders will identify priority issues and will address within their subcommittees. These issues include: Licensing, the Role of the ABC Board, Underage Drinking, Local Option and Internet Sales of Alcohol

- A Steering Committee composed of ABC Board members, staff and chairs of each subcommittee will coordinate the work of the subcommittees, and make decisions regarding proposals in the final set of recommendations

#### **Key Partners**

State of Alaska, Alcoholic Beverage Control Board



## Actions for Success

### Actions and Key Partners

Indicator 15.a: Reduce the percentage of **adults** (age 18 and older) who report binge drinking in the past 30 days (based on the following criteria: 5 or more alcoholic drinks for men on one occasion; 4 or more alcoholic drinks for women on one occasion) to 20% by 2020.

<b>Strategy 1 Adults</b>	<b>Provide electronic screening and brief intervention (SBIRT) in certain healthcare settings throughout Alaska. SBIRT is an approach to identify and intervene early for substance misuse.</b>
<b>S-1 Action 1</b>	<b>Promote SBIRT training for health care professionals</b> <ul style="list-style-type: none"> <li>• Prepare Alaska's workforce to provide early identification and intervention for substance misuse through SBIRT training and practice</li> <li>• Reduce the health consequences of substance use and abuse</li> <li>• Train diverse healthcare professionals including the Alaska Family Medicine Residency, participants and students enrolled in UAA's Nursing, Social Work, and Psychology Programs</li> </ul>
<b>Key Partners</b>	University of Alaska Anchorage, Center for Behavioral Health Research and Services
	<b>Also recommended but not currently funded:</b>  Incentivize and promote SBIRT screening in all Alaskan physician offices and outpatient hospitals.
<b>Strategy 2</b>	<b>Fund Strategic Prevention Framework Grants that address local needs and reduce substance abuse problems.</b>
<b>S-2 Action 1</b>	<b>The State of Alaska Department of Behavioral Health has a Strategic Prevention Framework Prevention Grant Program with the following goals:</b> <ul style="list-style-type: none"> <li>• Enhance community capacity to connect individuals to needed behavioral health interventions or services in a timely manner</li> <li>• Increase community readiness to prevent behavioral health conditions including substance abuse, suicide and poor mental health</li> <li>• Increase community ability to understand and address behavioral health conditions they identify through data driven decision making</li> </ul>
<b>Key Partners</b>	State of Alaska, Behavioral Health

**Also recommended but not currently funded:**

**Strategy: Expand therapeutic courts that provide treatment programs in place of incarceration for certain alcohol-related offenses throughout Alaska.**

Therapeutic courts in Alaska include:

- Anchorage and Fairbanks Wellness Courts
- Bethel, Juneau, Ketchikan, Therapeutic Courts
- Palmer and Juneau Mental Health Courts
- Fairbanks Juvenile Treatment Court

These courts should be expanded so that every community in Alaska has access to this type of alternative justice model.

Indicator 15.b: Reduce the percentage of **adolescents** (high school students in grades 9-12) who report binge drinking in the past 30 days (based on the following criteria: 5 or more alcoholic drinks in a row within a couple of hours, at least once in the past 30 days) to 17% by 2020.

<b>Strategy 1 Adolescents</b>	<b>Provide the <i>Prime for Life</i> curriculum for alternative high school students, Job Corps participants, and youth caught with alcohol or any illegal substance.</b>
<b>S-1 Action 1</b>	A collaboration of the Anchorage School District, Boys and Girls Clubs Alaska and Volunteers of America's Prevention and Intervention Services offers this program to students with first time alcohol or other drug-related infractions from an Anchorage school. The students are referred to this 5-day alternative-to-suspension course.
<b>Key Partners</b>	Volunteers of America - Alaska, Prevention Services
	<b>Also recommended but not currently funded:</b>  Spread Prime for Life throughout the State via collaboration with the VOA, State of Alaska Alcohol Safety Action Program (ASAP), the State Department of Education and Early Development, and the Alaska Job Corps.
<b>Strategy 2</b>	<b>Conduct a positive community norms focused media campaign to promote attitude and behavior change around alcohol use among youth.</b>
<b>S-2 Action 1</b>	<b>Utilize the Alaska Wellness Coalition Media Campaign</b> , a statewide partnership working with local coalitions throughout the state to reduce underage drinking. The goal is to conduct a coordinated campaign to reduce underage drinking that accounts for messages and efforts at the local, state, and federal level. Each coalition involved in this partnership is implementing a strength-based approach utilizing the Positive Community Norms model in their community. For the collaborative statewide project, Recover Alaska is focusing on making systems, policy, statutory and practice changes that will lead to long-term improvements in reducing harm caused by alcohol use.

<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Wellness Coalition</li> <li>Recover Alaska</li> </ul>
<b>Strategy 3</b>	<b>Increase children’s social and emotional learning through adopting formal standards and curricula for schools in Alaska.</b>
<b>S-3 Action 1</b>	Anchorage Youth Development Coalition has conducted social emotional learning (SEL) informational/educational training sessions with its youth serving agency members. The goal is to expand this project if additional funding can be secured. Additionally, the Anchorage School District has institutionalized SEL through formal learning standards and curriculum.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Initiative for Community Engagement</li> <li>United Way of Anchorage - Anchorage Youth Development Coalition</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Require high quality social and emotional learning standards for all public schools in Alaska.</p>





## Actions for Success

### Actions and Key Partners

Indicator 16: Reduce the unintentional injury mortality rate to 54.8 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Bring partners together and use multiple approaches to reducing deaths from falls by older Alaskans.</b>
<b>S-1 Action 1</b>	Promote activity, nutrition and obesity prevention with younger Alaskans recognizing that these efforts will decrease fall mortality in the future.
<b>Key Partners</b>	<p>Healthy Futures</p> <p><b>Also recommended but not currently funded:</b>            Implement strategies indicated in the <i>CDC Compendium of Effective Fall Interventions: What Works for Community-Dwelling Older Alaskans</i>, 2nd Ed.*            This Compendium was developed to give public health practitioners and aging services providers detailed information about interventions that were scientifically proven to reduce falls in older adults.            *<a href="http://www.cdc.gov/homeandrecreationalsafety/pdf/cdc_falls_compendium_lowres.pdf">http://www.cdc.gov/homeandrecreationalsafety/pdf/cdc_falls_compendium_lowres.pdf</a></p> <p>Develop and implement rural case management to include fall prevention and post-vention. Older urban residents who fall often receive assistance when they return home with physical therapy, follow up care and more. This is missing for older rural residents, and would decrease the likelihood of subsequent falls and deaths.</p>
<b>Strategy 2</b>	<b>Form a taskforce to determine effective approaches to decreasing poisoning deaths and improve data collection.</b>
<b>S-2 Action 1</b>	Maintain Poison Center Hotline and increase awareness of its availability.
<b>Key Partners</b>	<p>State of Alaska, Injury Prevention Program</p> <p><b>Also recommended but not currently funded:</b>            Increase availability of poison prevention information to health professionals throughout Alaska.            Increase availability of poison prevention information to the public.            Fill surveillance data gaps to promote better understanding of the significant unintentional poisoning problem in Alaska.            Develop statewide coalition to develop better understand poisoning issues, beginning with holding a statewide poisoning summit with stakeholders from multiple sectors.</p>

<b>Strategy 3</b>	<b>Promote best practices for reducing transportation related deaths by improving data collection and promoting new and existing strategies.</b>
<b>S-3 Action 1</b>	<p>Conduct studies to gather baseline data to determine whether interventions are successful, including:</p> <ul style="list-style-type: none"> <li>•Helmet use for bicycles, ATV's, snow machines, and PFD use on boats</li> <li>• Gather data related to type of risk exposure as well as incidence data</li> <li>• Implementation of this methodology and analysis of the collected data (not resourced)</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Injury Prevention Center</li> <li>• Alaska Marine Safety Education Association</li> <li>• State of Alaska, Injury Surveillance Program</li> </ul>
<b>S-3 Action 2</b>	<p>Implement strategies in the Strategic Highway Safety Plan to reduce deaths associated with motor vehicles, pedestrians, bicyclists, motorcyclists and ATVs and snow machines used on roads.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Alaska Highway Safety Office</li> <li>• Alaska Injury Prevention Center</li> <li>• State of Alaska, Injury Prevention Program</li> </ul>
<b>S-3 Action 3</b>	<p>Implement strategies in AMSEA's strategic plan to reduce water related fatalities and injuries.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Alaska Highway Safety Office</li> <li>• Alaska Injury Prevention Center</li> <li>• State of Alaska, Injury Prevention Program</li> <li>• Alaska Marine Safety Education Association</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 17: Increase the percentage of children (age 19-35 months) who receive the Advisory Committee on Immunization Practices (ACIP) recommended vaccination series (2013 ACIP recommendation: 4DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella, 4 PCV) to 75% by 2020.

<b>Strategy 1</b>	<b>Enhance provider recall and reminder systems to review and update children's immunization status.</b>
<b>S-1 Action 1</b>	<p><b>Increase the use of Reminder and Recall Systems:</b></p> <ul style="list-style-type: none"> <li>• Client Reminder &amp; Recall</li> <li>• Provider Reminders</li> </ul> <p>State Immunization Program will provide technical assistance to providers who receive an AFIX* visit and select reminder/recall as one of their quality improvement strategies. American Academy of Pediatrics, Alaska Chapter will provide free enrollment for pediatricians in "Improving your Immunization Rates" Maintenance of Certification (MOC) module which uses the Plan-Do-Study-Act model to improve reminder recall. Each Tribal Health Organization will be encouraged to set goals to increase on-time immunizations in monthly rates run with electronic medical record (EMR) system or VacTrAK.</p> <p>*AFIX visits are provided to a new set of practices every 6 months by the Alaska Immunization Program.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• American Academy of Pediatrics, Alaska Chapter</li> <li>• State of Alaska, Immunization Program</li> </ul>
<b>S-1 Action 2</b>	<p><b>Provide technical support for provider capacity and data exchange (VacTrAK, EHR), including individualized education for providers/staff on best practices for using an immunization information system.</b></p> <ul style="list-style-type: none"> <li>• Access/utilize consolidated patient immunization records</li> <li>• Manage vaccine inventory</li> <li>• Utilize clinical decision support tools</li> <li>• Refer to VacTrAK Quick Start Reminder/Recall Guide available on the VacTrAK website</li> </ul>
<b>Key Partners</b>	State of Alaska, Immunization Program
<b>S-1 Action 3</b>	<b>Provide broad-based education in community and with providers while implementing evidence-based practice of community-based interventions. Coordinated interventions will include combinations of staff outreach and tracking clients, mass and small media,</b>

	<p><b>educational activities, and expanded access to vaccination services:</b></p> <ul style="list-style-type: none"> <li>• Health Care Provider immunization education is offered annually (State Immunization Program every other year; Maternal Child Health/Immunization Conference on alternate years); other opportunities such as annual Pediatric Conferences</li> <li>• Regional Coalition meetings and Community Forums with community outreach to schools, day cares, hospitals, public health centers, parent groups</li> <li>• Disseminate information on the Vaccinate Alaska Coalition (VAC) Share Point site regarding conferences &amp; other webinar offerings by the CDC and Children’s Hospital of Philadelphia</li> <li>• Webinars featuring immunization best practices; short presentations by Alaska practices &amp; sharing their strategies; discussions</li> <li>• Develop an Alaska specific toolkit, or feature someone’s favorite IZ tool during webinars</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• American Academy of Pediatrics, Alaska Chapter</li> <li>• Vaccinate Alaska Coalition</li> </ul>
<b>Strategy 2</b>	<b>Expand access to vaccines.</b>
<b>S-2 Action 1</b>	<p><b>Implement the Senate Bill 169 to establish a Vaccine Assessment Account funded by public and private payers, allowing single bulk purchasing at a reduced cost for publicly and privately funded vaccine.</b></p> <ul style="list-style-type: none"> <li>• Reduce front end costs and administrative burden for providers. A Vaccine Assessment Account will allow providers to receive select childhood vaccines from the State Immunization Program.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Academy of Family Physicians</li> <li>• American Academy of Pediatrics, Alaska Chapter</li> <li>• State of Alaska, Immunization Program</li> </ul>
<b>S-2 Action 2</b>	<p><b>Engage programs and increase partnerships with agencies serving children to promote immunizations and well child care.</b></p> <ul style="list-style-type: none"> <li>• Vaccination programs in WIC settings</li> <li>• Home visits to increase vaccination rates</li> <li>• Promote well child visits in a medical home (one of the standards of the National Vaccine Advisory Committee Standards for Child and Adolescent Immunization Practices)</li> <li>• Bright Futures – Periodicity Schedule indicates that every visit should be an opportunity to update and complete a child’s immunizations</li> <li>• Engage programs and groups serving children, particularly low-income families to promote immunizations and well child care (WIC, Early Head Start home based program )</li> <li>• Encourage providers to join the All Alaska Pediatric Partnership and/or First 1,000 Days campaign</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Mat-Su Immunization Coalition</li> <li>• State of Alaska, Medicaid/Denali KidCare</li> <li>• RurAL CAP HeadStart Program</li> <li>• Vaccinate Alaska Coalition</li> <li>• State of Alaska, Women, Infants, and Children Program</li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 18: Reduce the incidence rate of *Chlamydia trachomatis* to 705.2 per 100,000 by 2020.

<b>Strategy 1</b>	<b>Increase awareness of sexually transmitted diseases (STDs) and demand for STD testing.</b>
<b>S-1 Action 1</b>	<p><b>Increase STD awareness in high morbidity communities and in identified at-risk populations</b></p> <ul style="list-style-type: none"> <li>• ANTHC, Alaska Section of Epidemiology (SOE) and Section of Nursing (SON) will promote awareness of <i>Chlamydia trachomatis</i> (CT) epidemic, disease detection, and disease sequelae through: <ul style="list-style-type: none"> <li>-- I Want the Kit (IWTK) program and youth health website <a href="http://iknowmine.org">iknowmine.org</a></li> <li>--Use of radio and print ads</li> <li>--Use of social media</li> <li>--Community presentations</li> </ul> </li> <li>• SON will inform all clients age 18-25 years of STD services at Public Health Nursing centers</li> <li>• ANTHC will promote “Chat Packs” for parents and guardians to support/assist in the dissemination of sexual health information to individuals in their households/community</li> </ul> <p><b>Increase STD awareness among Providers</b></p> <ul style="list-style-type: none"> <li>• SOE will publish annual STD data and rates by service regions via the InstantAtlas on the Epidemiology website</li> <li>• SON will encourage community providers to enhance their STD services through readiness, assessment and education</li> <li>• SOE will publish Epidemiology Bulletins and Recommendations and Reports for providers</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, STD Prevention Program</li> <li>• State of Alaska, Public Health Nursing</li> <li>• State of Alaska, Section of Epidemiology</li> <li>• Municipality of Anchorage, Health &amp; Human Services</li> </ul>
<b>S-1 Action 2</b>	<p><b>Provide easy access to CT tests.</b></p> <ul style="list-style-type: none"> <li>• Increase the availability of at-home testing services to all Alaskans ages 14 and older statewide through the existing I Want the Kit Program at ANTHC and State Public Health Laboratory</li> </ul> <p><b>At-home collected specimens</b> increase screening efforts within high-risk populations that may not seek testing and care in traditional clinic settings. Self-collection has been suggested as a successful testing alternative for geographically remote areas and to alleviate confidentiality issues surrounding clinical testing.</p>

	<p><b>Self-collected in clinical settings (vaginal):</b> Self collection is almost uniformly reported as easy to perform (99%) and preferable to gynecologic exam. Individuals report they would undergo testing at frequent intervals if self-collection were available.</p> <ul style="list-style-type: none"> <li>• Increase the availability of self-collected specimens in clinical settings</li> <li>• Increase free/low cost STD testing through the State Public Health Laboratory</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, STD Prevention Program</li> <li>• State of Alaska, Public Health Nursing</li> <li>• State of Alaska, Section of Epidemiology</li> <li>• State of Alaska, Public Health Laboratories</li> </ul>
<b>S-1 Action 3</b>	<p><b>Provide follow-up with each person tested for CT, assure treatment and provide STD prevention counseling.</b></p> <ul style="list-style-type: none"> <li>• Provide test results to I Want the Kit user, refer to treatment when necessary and provide risk reduction counseling</li> <li>• Provide test results and risk reduction counseling to clients seeking services at SON clinics and SOE disease investigations.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, STD Prevention Program</li> <li>• State of Alaska, Public Health Nursing</li> <li>• State of Alaska, Section of Epidemiology</li> </ul>
<b>Strategy 2</b>	<p><b>Increase the identification, testing, and treatment of sexual partners of individuals infected with <i>Chlamydia trachomatis</i>.</b></p>
<b>S-2 Action 1</b>	<p><b>Every infected individual is offered partner services by trained interviewers.</b></p> <ul style="list-style-type: none"> <li>• Train public health staff in partner elicitation and notification</li> <li>• Providers prepare clients seeking STD services that partner services is available</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, STD Prevention Program</li> <li>• State of Alaska, Public Health Nursing</li> <li>• State of Alaska, Section of Epidemiology</li> </ul>
<b>S-2 Action 2</b>	<p><b>All identified partners are located, offered testing and prophylactic treatment.</b></p> <ul style="list-style-type: none"> <li>• Train providers conducting partner services</li> <li>• Follow CDC testing and treatment guidelines</li> <li>• Make treatment available to all identified partners, including Expedited Partner Therapy (EPT)</li> </ul>
<b>Key Partners</b>	<p>State of Alaska, Section of Epidemiology</p>

<b>S-2 Action 3</b>	SOE will coordinate, record, and return information to providers on all partner service activities (for providers reporting partner services data to SOE/SOA).
<b>Key Partners</b>	State of Alaska, Section of Epidemiology
<b>Strategy 3</b>	<b>Increase annual Chlamydia screening for women with risk factors.</b>
<b>S-3 Action 1</b>	<p><b>Promote CDC recommended guidelines for STD screening to providers throughout Alaska.</b></p> <ul style="list-style-type: none"> <li>• Create best practices hand-out for providers regarding implementation of CDC STD screening protocol</li> <li>• Include CDC recommendations in Epidemiology Bulletins/publications</li> <li>• Offer statewide trainings on best practices for implementing of CDC STD screening protocol</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC STD Prevention Program</li> <li>• State of Alaska, Public Health Nursing</li> <li>• State of Alaska, Section of Epidemiology</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p><b>Develop and promote methods to measure STD (CT) screening coverage. Convene a statewide STD taskforce meeting with state, tribal and other key stakeholders to:</b></p> <ul style="list-style-type: none"> <li>• Provide best practices and technical assistance to measure STD (CT) screening coverage</li> <li>• Encourage providers, when available, to implement HEDIS and GPRA indicators that measure STD (CT) screening coverage</li> <li>• Discuss opportunity for STD/CT screening coverage through the Medicaid plan</li> <li>• Promote the use of STD screening reminders for providers using EHR and provide technical assistance to implement electronic reminders</li> </ul> <p><b>Promote follow-up of those tested, retesting of positives, and STD prevention counseling among providers.</b></p> <ul style="list-style-type: none"> <li>• State of Alaska, Section of Nursing will encourage community providers to adopt CDC recommendations regarding re-screening for CT-positive individuals within 3 months post-treatment</li> <li>• State of Alaska, Section of Epidemiology will publish Epidemiology Bulletins and Recommendations for providers</li> </ul>





## Actions for Success

### Actions and Key Partners

Indicator 19: Increase the percentage of rural community housing units with water and sewer services to 87% by 2020.

<b>Strategy 1</b>	<b>Establish sustainable water and sanitation services in communities where homes are unserved.</b>
<b>S-1 Action 1</b>	Complete ongoing water and sewer construction projects.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, Division of Environmental Health &amp; Engineering</li> <li>• State of Alaska, Division of Water</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <p>Complete prioritized water and sewer construction projects.</p>
<b>S-1 Action 2</b>	Advocate for funding to complete water and sanitation construction projects.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, Division of Environmental Health &amp; Engineering</li> <li>• State of Alaska, Division of Water</li> </ul>
<b>Strategy 2</b>	<b>Promote research and development that will address the technologic challenges of providing adequate quantities and affordable water and sanitation services.</b>
<b>S-2 Action 1</b>	Complete the Alaska Water and Sewer Challenge to identify technologic approaches that could result in increases in water/sewer services in rural Alaska.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Division of Water</li> <li>• U.S. Arctic Research Commission</li> </ul>
<b>Strategy 3</b>	<b>Ensure homes with existing water and sanitation services continue to function.</b>
<b>S-3 Action 1</b>	Support and enhance operations and maintenance of rural water/sewer systems.



## Key Partners

- ANTHC, Division of Environmental Health & Engineering
- ANTHC, Alaska Rural Utility Collaborative
- State of Alaska, Remote Maintenance Worker Program
- State of Alaska, Rural Utilities Business Advisor Program

### **Also recommended but not currently funded:**

Advocate for the development of a subsidy program to support operations and maintenance or rural water and wastewater services.



## Actions for Success

### Actions and Key Partners

Indicator 20: Increase the percentage of the population served by community water systems with optimally fluoridated water to 58% by 2020.

<b>Strategy 1</b>	<b>Maintain water fluoridation in communities with existing fluoridated community water systems.</b>
<b>S-1 Action 1</b>	Monitor monthly fluoride levels in Alaska community water systems using fluoridation. Inform stakeholders when fluoridating systems are not meeting optimal criteria and recognize optimally fluoridating water systems and operators with CDC Community Water Fluoridation Quality Award certificates.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Dental Action Coalition</li> <li>State of Alaska, Women's, Children's, and Family Health Oral Health Program</li> </ul>
<b>S-1 Action 2</b>	Provide educational information and respond to requests for information on community water fluoridation through presentations to health professionals, community stakeholders or policymakers.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Dental Action Coalition</li> <li>State of Alaska, Women's, Children's, and Family Health, Oral Health Program</li> </ul>
<b>S-1 Action 3</b>	Respond to community water system needs for equipment, shortages in fluoride products or testing supplies for fluoridating rural water systems.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>ANTHC, Division of Environmental Health &amp; Engineering</li> <li>ANTHC, Alaska Rural Utilities Cooperative</li> </ul>
	<p><b>Also recommended but not currently funded:</b></p> <p>Provide one educational forum every 2 years for Alaska community water system operators that includes information on water fluoridation operations, health and safety concerns.</p> <p>Identify, join or develop local, broad-based coalitions to support and defend community water fluoridation.</p>
<b>Strategy 2</b>	<b>Provide information and resources that will help communities understand the value of water fluoridation in Alaska.</b>

<b>S-2 Action 1</b>	Conduct studies or projects that evaluate the health benefits (such as rates of dental decay) in Alaska populations that are served with optimally fluoridated community water systems.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• CDC Arctic Investigations Program</li> <li>• State of Alaska, Women's, Children's, and Family Health, Oral Health Program</li> </ul>
<b>S-2 Action 2</b>	Provide community Toolkits, fact sheets and other educational materials for communities looking to implement or defend community water fluoridation.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Dental Action Coalition</li> <li>• State of Alaska, Women's, Children's, and Family Health Oral Health Program</li> </ul>
<b>S-2 Action 3</b>	Provide an annual update on the status of community water fluoridation at the Alaska Health Summit and the annual meeting of the Alaska Dental Chiefs of the Tribal Health System.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Dental Action Coalition</li> <li>• ANTHC, Division of Environmental Health &amp; Engineering</li> <li>• CDC Arctic Investigations Program</li> </ul>
<b>Strategy 3</b>	<b>Start community water fluoridation in communities that are not currently fluoridating their community water systems.</b>
<b>S-3 Action 1</b>	Increase the number of Alaska communities with piped water for community water systems that are suitable for fluoridation.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• ANTHC, Division of Environmental Health &amp; Engineering</li> <li>• State of Alaska, Village Safe Water Program</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <ul style="list-style-type: none"> <li>• Identify Alaska communities that would be suitable candidates for community water fluoridation.</li> <li>• Institute a statewide mandate of community water fluoridation in communities over a specific population threshold. Identified as a Best Practice by the Association of State and Territorial Dental Directors and currently enacted in 10 states. <a href="http://www.astdd.org/use-of-fluoride-community-water-fluoridation/">http://www.astdd.org/use-of-fluoride-community-water-fluoridation/</a></li> </ul>



## Actions for Success

### Actions and Key Partners

Indicator 21: Reduce the percentage of women delivering live births who have not received prenatal care beginning in the first trimester of pregnancy to 19% by 2020.

<b>Strategy 1</b>	<b>Increase the number of women of childbearing age who report having access to health care providers who support them to plan their pregnancies.</b>
<b>S-1 Action 1</b>	Convene a statewide perinatal task force to investigate issues affecting perinatal health and make recommendations for improving perinatal outcomes.
<b>Key Partners</b>	State of Alaska, Women's, Children's, and Family Health
<b>Also recommended but not currently funded:</b>	
<ul style="list-style-type: none"> <li>• Increase access to sources of medical coverage for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.</li> <li>• Investigate and develop strategies to increase the number of primary care medical appointments available for both non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.</li> <li>• Investigate and develop strategies to increase sources of medical care for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.</li> <li>• Address Alaska Division of Public Assistance education of pregnant women about their true Medicaid prenatal care coverage.</li> </ul>	
<b>Strategy 2</b>	<b>Increase the number of women who have their pregnancies confirmed by a health care provider in the first trimester.</b>
<b>S-2 Action 1</b>	Convene a statewide perinatal task force to investigate issues affecting perinatal health and make recommendations for improving perinatal outcomes.
<b>Key Partners</b>	State of Alaska, Women's, Children's, and Family Health
<b>Also recommended but not currently funded:</b>	
<ul style="list-style-type: none"> <li>• Reduce time from date of Medicaid application to eligibility determination and patient notification of eligibility to a time frame that assures pregnant women's access to prenatal care within the first 12 weeks of their pregnancy.</li> <li>• Address personal barriers including: lack of transportation, too many things to do, can't</li> </ul>	

take time off from work or school, didn't want anyone else to know that she was pregnant, had no childcare.

- Investigate and develop systems to increase access to primary care provider sources of medical care for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.
- Address Alaska Division of Public Assistance education of pregnant women about their true Medicaid prenatal care coverage.
- Investigate and develop systems to increase access to sources of medical coverage for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.

<b>Strategy 3</b>	<b>Improve systems and services that care for women with addictions (alcohol, drugs, tobacco).</b>
<b>S-3 Action 1</b>	Convene a statewide perinatal task force to investigate issues affecting perinatal health and make recommendations for improving perinatal outcomes.
<b>Key Partners</b>	State of Alaska, Women's, Children's, and Family Health

**Also recommended but not currently funded:**

- Reduce time from date of Medicaid application to eligibility determination and patient notification of eligibility to a time frame that assures pregnant women's access to prenatal care within the first 12 weeks of their pregnancy.
- Investigate and develop systems that increase the number of women of childbearing age who are routinely screened and appropriately referred for treatment of addictions (alcohol, drugs, and tobacco).
- Address personal barriers including lack of transportation, too many things to do, can't take time off from work or school, didn't want anyone else to know that she was pregnant, had no childcare.
- Investigate and develop systems that increase access to sources of medical coverage for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.
- Investigate and develop systems that increase access to primary care provider sources of medical care for non-pregnant and pregnant women of childbearing age, including those who are unaware of their current pregnancy status.



## Actions for Success

### Actions and Key Partners

Indicator 22: Reduce the rate of preventable hospitalizations (hospitalizations that could have been prevented with high quality primary and preventive care) based on the Agency for Healthcare Research and Quality definition to 6.7 per 1,000 by 2020.

<b>Strategy 1</b>	<b>Increase access to high quality primary care.</b>
<b>S-1 Action 1</b>	Improve clinical quality through clinician adherence to evidence-based practice and guidelines through integration of critical appraisal skills training in physician, nurse practitioner, and physician assistant programs at the University of Alaska.
<b>Key Partners</b>	University of Alaska, Anchorage, College of Health
<b>S-1 Action 2</b>	Increase the supply of primary care providers through administration of loan repayment and financial incentives for recruitment and retention (for example, Alaska SHARP Program (Supporting Health-care Access through Loan Repayment), Indian Health Service4 Loan and Scholarship, National Health Service Corp (NHSC) – Individual Clinician and NHSC Sites, NurseCorps).
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Health Planning &amp; Systems Development</li> <li>• Indian Health Service, Alaska Area</li> </ul>
<b>S-1 Action 3</b>	Improve access to mental health treatment through telebehavioral health services.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Alaska Psychiatric Institute</li> <li>• SouthEast Alaska Regional Health Consortium</li> </ul>
<b>S-1 Action 4</b>	Increase access to primary care for Veterans Administration beneficiaries through the Alaska Tribal Health System and safety net providers.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Health Planning &amp; Systems Development</li> <li>• Veterans Administration</li> <li>• Alaska Native Tribal Health Consortium</li> </ul>

	<ul style="list-style-type: none"> <li>Alaska Primary Care Association</li> </ul>
<b>Strategy 2</b>	<b>Improve care coordination, community care transitions, and complex case management.</b>
<b>S-2 Action 1</b>	Implement demonstration program to provide care coordination and case management for Medicaid enrollees who over-utilize hospital emergency department services.
<b>Key Partners</b>	State of Alaska, Health Care Services
<b>S-2 Action 2</b>	Reduce avoidable hospital readmissions through Alaska Integrated Care for Populations and Communities Initiative (coordinating post-discharge care).
<b>Key Partners</b>	Mountain-Pacific Quality Health Alaska
<b>S-2 Action 3</b>	Execute, implement and monitor the Alaska Patient-Centered Medical Home Initiative.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Primary Care Association</li> <li>Alaska Mental Health Trust Authority</li> <li>State of Alaska, Public Health</li> <li>State of Alaska, Behavioral Health</li> </ul>
<b>S-2 Action 4</b>	<p>Pilot integration of behavioral health with primary care services through:</p> <ul style="list-style-type: none"> <li>SAMHSA Primary and Behavioral Health Care Integration Program (Pilot Sites: Wrangell, SouthCentral Foundation)</li> <li>APCA/DHSS Alaska PCMH-I initiative</li> <li>HRSA behavioral health integration for community health center grant initiative</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>Alaska Primary Care Association</li> <li>Alaska Mental Health Trust Authority</li> <li>State of Alaska, Public Health</li> <li>State of Alaska, Behavioral Health</li> </ul>
<b>S-2 Action 5</b>	Monitor PeaceHealth Ketchikan’s innovation project to develop care delivery model that improves primary care and overcomes barriers of current payment structure. Support dissemination of results and replication of best practices in new locations in Alaska.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>PeaceHealth Ketchikan Medical Center</li> <li>Alaska State Hospital and Nursing Home Association</li> </ul>

<b>S-2 Action 6</b>	<p>Support hospitals to take a multi-step approach to reduce avoidable all-cause hospital readmissions. Approaches include:</p> <ul style="list-style-type: none"> <li>• Discharge planning and follow-up phone calls</li> <li>• Patient education and engagement, medication reconciliation</li> <li>• Transition communication linkages with other community partners</li> </ul>
<b>Key Partners</b>	<p>Alaska State Hospital and Nursing Home Association, Hospital Engagement Network</p>
<b>S-2 Action 7</b>	<p>Summarize and spread lessons learned from the Tri-State Children’s Health Improvement Consortium that relate to successes and barriers of:</p> <ul style="list-style-type: none"> <li>• Care coordination</li> <li>• Collaborative care teams</li> <li>• Care continuity</li> <li>• Patient engagement</li> <li>• Quality of care</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Health Planning</li> <li>• Alaska Primary Care Association</li> <li>• All Alaska Pediatric Partnership (A2P2)</li> </ul>
<b>Strategy 3</b>	<b>Strengthen community-based and clinical prevention to improve population health.</b>
<b>S-3 Action 1</b>	<p>Reduce use of tobacco products by completing the strategies and action steps laid out for Indicators 2 and 3 of Healthy Alaskans 2020.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Tobacco Prevention and Control Program</li> <li>• Alaska School Activities Association</li> <li>• Association of Alaska School Boards</li> <li>• Alaskans for Tobacco Free Kids</li> <li>• Alaska Tobacco Control Alliance</li> <li>• University of Alaska Anchorage Smoke-free Taskforce</li> <li>• American Lung Association of Alaska</li> <li>• Alaska Smoke-free Housing Partnership</li> <li>• ANTHC Tobacco Control Program</li> </ul>
<b>S-3 Action 2</b>	<ul style="list-style-type: none"> <li>• Identify and establish self-management (SM) education referral protocols among partner members in each of the diabetes, heart disease, and cancer coalitions</li> <li>• Increase self-management education workshop referrals from partner members of the diabetes, heart disease and stroke prevention, and cancer coalitions</li> </ul>



<b>Key Partners</b>	State of Alaska, Chronic Disease Prevention and Health Promotion
<b>S-3 Action 3</b>	Reduce obesity and overweight rates by completing the strategies and action steps for Indicators 4 and 5 of Healthy Alaskans 2020 (obesity) and Indicator 6 (physical activity).
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Alliance for Healthy Kids</li> <li>• American Cancer Society Cancer Action Network Alaska</li> <li>• American Heart Association Alaska</li> <li>• ANTHC Wellness &amp; Prevention Department</li> <li>• Alaska Dietetic Association</li> <li>• Alaska Public Health Association</li> <li>• State of Alaska, Obesity Prevention and Control Program</li> <li>• State of Alaska, Alaska Breastfeeding Initiative</li> <li>• Association of Alaska School Boards</li> <li>• State of Alaska, Education &amp; Early Development, Child Nutrition Programs</li> </ul>
<b>S-3 Action 4</b>	Increase immunization rates by completing the strategies and action steps for Indicator 17 of Healthy Alaskans 2020.
<b>Key Partners</b>	State of Alaska, Immunization Program



## Actions for Success

### Actions and Key Partners

Indicator 23: Reduce the percentage of adults (age 18 or over) reporting that they could not afford to see a doctor in the last 12 months to 14% by 2020.

<b>Strategy 1</b>	<b>Improve insurance coverage for Alaskans who have financial barriers to care.</b>
<b>S-1 Action 1</b>	Increase education and awareness of federal financial support for insurance premiums and co-payments for health coverage.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• United Way of Anchorage</li> <li>• ANTHC, Outreach and Enrollment Program</li> <li>• Alaska Primary Care Association</li> </ul>
<b>S-1 Action 2</b>	Identify and understand the populations that have financial barriers to coverage; understand the barriers and resources available to them.
<b>Key Partners</b>	State of Alaska, Health Planning & Systems Development
<b>S-1 Action 3</b>	Identify policy reforms to strengthen the State Medicaid Program through Medicaid Reform Advisory Group.
<b>Key Partners</b>	State of Alaska, Medicaid Reform Advisory Group
	<p><b>Also recommended but not currently funded:</b></p> <p>Develop an action plan to address the barriers to coverage.</p>
<b>Strategy 2</b>	<b>Address underlying health care costs that drive higher insurance premiums in Alaska.</b>
<b>S-2 Action 1</b>	Explore the application of payment methodologies in the State Medicaid program and the State of Alaska employee health plans to increase evidence-based medical practice.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Retirement &amp; Benefits</li> <li>• State of Alaska, Medicaid &amp; Health Care Policy</li> </ul>

<b>S-2 Action 2</b>	Explore payment reform options to move payment methodologies from volume-based to value-based in the State Medicaid Program and State of Alaska employee health plans.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Retirement &amp; Benefits</li> <li>• State of Alaska, Medicaid &amp; Health Care Policy</li> </ul>
<b>S-2 Action 3</b>	<p>Increase price and quality transparency for the public:</p> <ul style="list-style-type: none"> <li>• Implement stakeholder process to identify options for increased price and quality transparency including consideration of All Payer Claims Database, discharge data reporting, voluntary industry lead system, vendor tools used by employers and payers, and statutory requirements.</li> <li>• Look to successful models in other states.</li> </ul>
<b>Key Partners</b>	State of Alaska, Health Planning & Systems Development
<b>S-2 Action 4</b>	Explore adoption of consumer driven health plans to engage consumers in increased health care decision making in State of Alaska employee health benefit program.
<b>Key Partners</b>	State of Alaska, Retirement & Benefits
<b>Strategy 3</b>	<b>Improve access to health care safety net services for patients who are unable to afford care.</b>
<b>S-3 Action 1</b>	Increase the supply of primary care providers through administration of loan repayment and financial incentives for recruitment and retention (for example, Alaska SHARP Program (Supporting Health-care Access through Loan Repayment), Indian Health Service <sup>4</sup> Loan and Scholarship, National Health Service Corp (NHSC) – Individual Clinician and NHSC Sites, NurseCorps).
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Health Planning &amp; Systems Development</li> <li>• Indian Health Service, Alaska Area</li> </ul>
<b>S-3 Action 2</b>	Develop a plan to assess and address gaps in the health care Safety Net system - State Primary Care Office tasked with statewide primary care needs assessment in next 5 years
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Health Planning &amp; Systems Development</li> <li>• Alaska Primary Care Association</li> </ul>
<p><b>Also recommended but not currently funded:</b>  Inform communities and underserved populations about the availability of Safety Net providers and their services (to be developed from Governor’s Medicaid Gap Report).</p>	



## Actions for Success

### Actions and Key Partners

Indicator 24: Increase the percentage of the population living above the federal poverty level (as defined for Alaska) to 90% by 2020.

<b>Strategy 1</b>	<b>Support a career and technical education system to prepare the population for Alaska careers.</b>
<b>S-1 Action 1</b>	<p>Make transitions planned and accountable for both successful student progress and systemic cooperation by:</p> <ul style="list-style-type: none"> <li>• Ensuring that every student has a personal learning and career plan (PLCP),</li> <li>• Coordinating program development and delivery among training programs, and</li> <li>• Developing data sharing to track student progress.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education (CTE)</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-1 Action 2</b>	<p>Align curricula at all training institutions to meet current industry standards including academic, professional, and technical skills, from elementary through secondary to postsecondary and professional development levels.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-1 Action 3</b>	<p>Identify and promote career and technical education delivery models that ensure that all Alaskans have the opportunity to attain the knowledge and skills needed for further training and careers.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-1 Action 4</b>	<p>Recruit, develop, support, and retain high quality CTE teachers and faculty.</p>
<b>Key Partners</b>	<p>State of Alaska, Career and Technical Education</p> <p><b>Also recommended but not currently funded:</b></p> <p>Maximize the use of public facilities for training.</p>

- Create an inventory of available public facilities and equipment and disseminating the inventory to training providers, industry and the general public
- Establish a list of basic facility and equipment standards for priority CTE programs
- Identify resources needed to bring public facilities and equipment for statewide priority programs up to standards

<b>Strategy 2</b>	<b>Improve wages and benefits for the Alaskan workforce, so that individuals and families have the income needed to meet the costs of daily living.</b>
<b>S-2 Action 1</b>	<p>Support the work of the Alaska Health Workforce Coalition Direct and the Professionals Wage and Benefits Workgroup.</p> <p>Direct Support Professionals are the primary providers of long-term services/support for individuals with intellectual, cognitive and/or physical disabilities and are essential in maintaining the quality of life for patients needing this service.</p>
<b>Key Partners</b>	Alaska Health Workforce Coalition
<b>S-2 Action 2</b>	<p>The Alaska System for Early Education Development (SEED) is a professional development system for early educators in Alaska. The Alaska SEED Roots Awards pilot rewards eligible early education teachers for retaining their current employment for at least one year and attaining a level 5 or above on the Alaska SEED career ladder – a tool that articulates the path for advancement in the early care and learning profession.</p> <p>The pilot will involve:</p> <ul style="list-style-type: none"> <li>• Marketing the pilot project</li> <li>• Enrolling eligible professionals</li> <li>• Creating a SEED registry (a database supporting early childhood professionals)</li> <li>• Offering trainings to increase positions on the Alaska SEED career ladder.</li> </ul>
<b>Key Partners</b>	Thread
<b>Strategy 3</b>	<b>Reduce the number of unemployed and underemployed in households that fall below the poverty level.</b>
<b>S-3 Action 1</b>	<p>The first step towards the “employment’ strategy is to continue and encourage more collaboration between the Alaska Workforce Investment Board, non-profit arms of Regional Alaska Native Corporations, and economic development leaders to provide appropriate training to underemployed and “unemployed Alaskans looking for jobs.” This training includes workers who want to upgrade their skills to qualify for higher paying jobs. The goal is to provide industry with Alaskan workers and prepare Alaskans for good wage jobs to provide the tools to those living below the poverty line to rise above current financial circumstances. With fewer resources it is important these organizations work together so state and federal</p>

	dollars are directed at those most likely able to rise above their current circumstances and not those who are necessarily the neediest. The strategy should also encourage waivers to allow for grant funding for self-employment in communities where there are few jobs.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Alaska Workforce Investment Board</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-3 Action 2</b>	<ul style="list-style-type: none"> <li>• Create jobs and a support network for people with disabilities. Increase the number of Alaskans with disabilities who achieve and maintain employment in an integrated setting using existing funding, policies and support services, further elevating health and self-sufficiency.</li> <li>• Monitor individuals who fall under the poverty line and provide access to services that improve their economic autonomy</li> <li>• Continue to work towards system improvements, sharing best practices, and working with industry and other non-profit organizations to increase outcomes.</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Mental Health Trust Authority</li> <li>• State of Alaska, Governor's Council on Disabilities and Special Education</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-3 Action 3</b>	<p>Industries (especially in impoverished regions of the state) should work together to incorporate family support systems into their recruitment and job-training programs in order to encourage more local acceptance of high paying positions.</p> <p>Many Alaskans eligible for high-paying positions are unable to pass drug and alcohol tests. Other barriers to accepting high-paying jobs include social pressures that discourage potential workers from accepting positions outside of their home communities.</p> <p>Donlin Gold, located in the Yukon-Kuskokwim region which has the highest poverty rate in the state, has one of the most successful workforce development plans in rural Alaska. Industries should be encouraged to model Donlin's training and mentoring programs to help train workers to develop the skills they need to play effective roles, both at work and in the economic and social lives of their communities.</p>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Alaska Mental Health Trust Authority</li> <li>• State of Alaska, Alaska Workforce Investment Board</li> </ul>
<b>Strategy 4</b>	<b>Ensure adequate, safe, and affordable housing is available for all Alaskans.</b>
<b>S-4 Action 1</b>	<p>Maintain data management and coordination activities:</p> <ul style="list-style-type: none"> <li>• Expand Homeless Management Information System (HMIS) to all federal and state funded homeless programs</li> </ul>

- 
- Coordinate prevention report from all potential funding sources
  - Improve outreach and linkages to housing resources and services

## Key Partners

Alaska Council on the Homeless

### **Also recommended but not currently funded:**

#### **Ensure sufficient supply of permanent affordable housing by:**

- Increasing affordable housing stock (# units available)
- Investing in maintenance of existing stock of housing
- Providing rental subsidies – additional rental assistance vouchers

#### **Support expansion of housing for chronic and special needs homeless and short-term homeless prevention and crisis intervention.**

- Expand housing options
- Increase supplemental support for services not covered by Medicaid
- Increase pool of operating support to preserve existing housing stock
- Create local centralized pool of prevention resources
- Maintain and expand emergency lodging options as needed

#### **Support initiatives that provide coordinated transition from institutionalization to independent living.**

- Provide housing for persons discharged from state custody (DOC, transitioning youth)
- Increase employment and vocational opportunities for persons in transition
- Expand permanent housing options for households with children transitioning from homelessness

#### **Expand housing production incentives and address the housing market including:**

- Housing production incentives
- Tax incentives
- Streamlined permitting processes
- Mixed income housing developments



## Actions for Success

### Actions and Key Partners

Indicator 25: Increase the percentage of 18 – 24 year olds with a high school diploma or equivalency to 86% by 2020.

<b>Strategy 1</b>	<b>Expand and strengthen quality early childhood programs.</b>
<b>S-1 Action 1</b>	Utilize the Alaska Early Childhood Coordinating Council to identify needs and gaps in services and to articulate quality concerns.
<b>Key Partners</b>	State of Alaska, Alaska Early Childhood Coordinating Council
<b>S-1 Action 2</b>	Develop a plan to address lack of quality early childhood programs (using as source documents the Alaska Early Childhood Comprehensive Systems Plan and the Alaska Early Childhood Coordinating Council Strategic Report) and develop support of policy makers and decision makers.
<b>Key Partners</b>	State of Alaska, Alaska Early Childhood Coordinating Council
<p><b>Also recommended but not currently funded:</b></p> <p>Implement the plan, in collaboration with State of Alaska, Education &amp; Early Development, State of Alaska, Health &amp; Social Services (DHSS), and private sector programs</p>	
<b>Strategy 2</b>	<b>Create safe and supportive learning environments in schools.</b>
<b>S-2 Action 1</b>	<p>Foster community engagement and positive youth development:</p> <ul style="list-style-type: none"> <li>• Develop partnerships</li> <li>• Increase communications</li> <li>• Encourage parent, family and community involvement in schools</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• Alaska Children’s Trust</li> <li>• Alaska Mental Health Trust Authority</li> <li>• Anchorage School District, Social and Emotional Learning</li> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Teaching and Learning Support</li> </ul>



	<ul style="list-style-type: none"> <li>• State of Alaska, Behavioral Health</li> <li>• United Way of Anchorage</li> <li>• 90% by 2020 Community Partnership</li> </ul>
<b>S-2 Action 2</b>	Provide professional development and professional development resources to districts and school on how to implement policies and programs related to positive school climate and safe school environments.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• Alaska Children’s Trust</li> <li>• Alaska Mental Health Trust Authority</li> <li>• State of Alaska, Council on Domestic Violence and Sexual Assault</li> <li>• State of Alaska, Teaching and Learning Support</li> <li>• State of Alaska, Behavioral Health</li> </ul>
<b>S-2 Action 3</b>	Increase access to school-based mental health services for students.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• Association of Alaska School Boards</li> <li>• Alaska Mental Health Board</li> <li>• Alaska Mental Health Trust Authority</li> <li>• State of Alaska, Teaching and Learning Support</li> <li>• State of Alaska, Behavioral Health</li> </ul> <p><b>Also recommended but not currently funded:</b></p> <ul style="list-style-type: none"> <li>• Implement evidence-based, multi-tiered behavioral framework in schools, such as positive behavioral interventions and supports.</li> <li>• Implement social and emotional learning programs Pre-K and elementary schools.</li> </ul>
<b>Strategy 3</b>	<b>Support basic education and GED preparation for young Alaskan adults who have not graduated from high school.</b>
<b>S-3 Action 1</b>	Provide training to help Alaskans get their GED or high school diploma.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Alaska Adult Basic Education Program</li> <li>• Alaska Job Corps</li> <li>• Alaska Military Youth Academy</li> </ul>
<b>Strategy 4</b>	<b>Support a career and technical education system to prepare the population for Alaska careers.</b>
<b>S-4 Action 1</b>	<p>Make transitions planned and accountable for both successful student progress and systemic cooperation by:</p> <ul style="list-style-type: none"> <li>• Ensuring that every student has a personal learning and career plan (PLCP)</li> </ul>

	<ul style="list-style-type: none"> <li>• Coordinating program development and delivery among training programs</li> <li>• Developing data sharing to track student progress</li> </ul>
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education</li> <li>• State of Alaska, Labor and Workforce Development</li> <li>• U.S. Department of Labor Office of Registered Apprenticeship, Alaska</li> </ul>
<b>S-4 Action 2</b>	Align curricula at all training institutions to meet current industry standards including academic, professional, and technical skills, from elementary through secondary to postsecondary and professional development levels.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-4 Action 3</b>	Identify and promote career and technical education delivery models that ensure that all Alaskans have the opportunity to attain the knowledge and skills needed for further training and careers.
<b>Key Partners</b>	<ul style="list-style-type: none"> <li>• State of Alaska, Career and Technical Education</li> <li>• State of Alaska, Labor and Workforce Development</li> </ul>
<b>S-4 Action 4</b>	Recruit, develop, support, and retain high quality CTE teachers and faculty.
<b>Key Partners</b>	State of Alaska, Career and Technical Education
	<p><b>Also recommended but not currently funded:</b></p> <p><b>Maximize the use of public facilities for training.</b></p> <ul style="list-style-type: none"> <li>• Create an inventory of available public facilities and equipment, and disseminate inventory to training providers, industry and the general public</li> <li>• Establish a list of basic facility and equipment standards for priority CTE programs</li> <li>• Identify resources needed to bring public facilities and equipment for statewide priority programs up to standards</li> </ul>

# Healthy Alaskans 2020 Actions for Success

## Strategy Work Group Members

*HA2020 Actions for Success* is the work of dozens of Alaska subject matter experts, convened in April 2014 as HA2020 Strategy Work Groups. Each of the twelve groups had a designated convener, multiple members, and a HA2020 staff liaison. We gratefully acknowledge the professionalism and care shown by these individuals in reviewing the scientific evidence of effective health improvement approaches for Alaska, prioritizing strategies, and documenting their decisions.

Strategy Work Group members are listed here, by work group number and the leading health indicators (LHI) addressed by the group.

### **Group 1:**

LHI 1: Rate of deaths due to cancer

Convener: Verné Boerner, Alaska Native Health Board

Members:

Tia Conley, American Cancer Society, Alaska Chapter  
Christine DeCourtney, Alaska Native Tribal Health Consortium, Cancer Program  
Joe Klejka, Yukon Kuskokwim Health Corporation  
Karen Morgan, Alaska Native Tribal Health Consortium, Cancer Program  
Judith Muller, Alaska Native Tribal Health Consortium, Cancer Program  
Emily Nenon, American Cancer Society, Alaska Chapter  
Julia Thorsness, Alaska Cancer Prevention Program  
Andrew Tooyak, Community Health Aide Program  
Laura Trawicki, Alaska Native Medical Center, Oncology Clinic  
Kelly Tschida, State of Alaska, Chronic Disease Prevention and Health Promotion

### **Group 2:**

LHI 2: Percentage of adolescents who do not currently use tobacco of any kind

LHI 3: Percentage of adults who do not currently smoke cigarettes

Convener: Alison Kulas, Alaska Department of Health & Social Services

Members:

Karen Doster, Alaska Native Tribal Health Consortium, Tobacco Program  
Gabe Garcia, University of Alaska Anchorage  
Betty MacTavish, Alaska Tobacco Control Alliance  
Nancy Miller, Alaska Society for Human Resource Management State Council  
Katie Reilly, State of Alaska, Women, Children, and Family Health

### **Group 3:**

LHI 4: Percentage of adults who are overweight or obese

LHI 5: Percentage of adolescents and children who are overweight or obese

LHI 6: Percentage of adults and adolescents who meet current physical activity guidelines

Convener: Darcy Harris, State of Alaska, Division of Parks and Outdoor Recreation

Members:

Jamie Blei, Alliance for Healthy Kids; Alaska Center for Pediatrics  
Jo Dawson, State of Alaska, Education & Early Development  
Karol Fink, State of Alaska, Obesity Prevention and Control Program

Sherrell Holtshouser, State of Alaska, Women, Children, and Family Health  
Cassie Hulse, THREAD  
Jennifer Johnson, State of Alaska, Family Nutrition Programs  
Diane Peck, State of Alaska, Obesity Prevention and Control Program  
Joseph Reeves, Association of Alaska School Boards  
Lisa Sadlier-Hart, Sitka Local Foods Network Board  
Paul Sugar, State of Alaska, Education & Early Development, Head Start  
Kathleen Wayne, State of Alaska, Family Nutrition Programs

**Group 4:**

LHI 7: Rate of deaths due to suicide among Alaskans aged 15-24 years, and 25 years and older  
LHI 8: Percentage of adolescents feeling so sad or hopeless every day for 2 weeks or more that they stopped doing usual activities  
LHI 9: Average number of days per month that adults report being mentally unhealthy  
LHI 10: Percentage of adolescents with 3 or more adults, besides their parent(s) who they feel comfortable seeking help from

Convener: Kate Burkhart, Alaska Council on Suicide Prevention

**Members:**

Jenny Baker, Youth Alliance for a Healthier Alaska  
Sharon Fishel, State of Alaska, Education and Early Development  
Randall Jones, Providence Behavioral Health  
Lindsey Kato, Juneau Suicide Prevention Coalition  
Eric Morrison, Alaska Council on Suicide Prevention  
Stacy Rasmus, Center for Alaska Native Health Research  
Sally Rue, Association of Alaska School Boards  
Pat Sidmore, Alaska Mental Health Board  
Kyle Wark, First Alaskans Institute

**Group 5:**

LHI 11: Rate of child maltreatment  
LHI 12: Rate of rape  
LHI 13: Percentage of adolescents who were ever physically hurt on purpose by their boyfriend or girlfriend

Conveners: André Rosay and Marny Rivera, University of Alaska Anchorage

**Members:**

Lisa DeCora, Indian Health Service  
Michelle DeWitt, Bethel Community Services Foundation  
Lori Grassgreen, Alaska Network on Domestic Violence and Sexual Assault  
Linda McLaughlin, Alaska Native Justice Center  
Patty Owen, State of Alaska, Education & Early Development  
Shirley Pittz, State of Alaska, Office of Children's Services  
Ann Rausch, State of Alaska, Council on Domestic Violence and Sexual Assault  
Trevor Storrs, Alaska Children's Trust

**Group 6:**

LHI 14: Rate of alcohol induced deaths  
LHI 15: Percentage of adults and adolescents who binge drink alcohol

Convener: Melissa Kemberling, Mat-Su Health Foundation

**Members:**

Michael Baldwin, Alaska Mental Health Trust Authority  
Kathleen Baldwin-Johnson, Alaska Mental Health Trust Authority  
Donn Bennice, Alaska Family Services  
Diane Casto, State of Alaska, Behavioral Health  
Deborah Hull-Jilly, State of Alaska, Section of Epidemiology  
Michael Kerosky, Cook Inlet Tribal Council, Partners for Success  
Philip Licht, Set Free Alaska  
Megan Murphy, MAPP of Southern Kenai Peninsula  
Natasha Pineda, Alaska Mental Health Trust Authority  
Elizabeth Ripley, Mat-Su Health Foundation  
Aleesha Towns-Bain, Recover Alaska  
Ray Watson, Yukon Kuskokwim Health Corporation

**Group 7:**

LHI 16: Rate of deaths due to unintentional injury

Convener: Marcia Howell, Alaska Injury Prevention Center

**Members:**

Maria Bailey, State of Alaska, Chronic Disease Prevention and Health Promotion  
Amanda Cooper, Governor's Council on Disabilities & Special Education  
Sylvia Craig, Alaska Injury Prevention Center  
Jerry Dzugan, Alaska Marine Safety Education Association  
Jo Fisher, State of Alaska, Chronic Disease Prevention and Health Promotion  
Deborah Hull-Jilly, State of Alaska, Section of Epidemiology  
Krystal Mason, National Institute for Occupational Safety and Health  
Ambrosia Romig, State of Alaska, Emergency Programs  
Jaylene Wheeler, Alaska Native Tribal Health Consortium, Injury Prevention

**Group 8**

LHI 17: Percentage of children (19-35 months) who receive the recommended vaccination series

LHI 18: Rate of Chlamydia infections

Convener: Emily Read, Alaska Native Tribal Health Consortium

**Members:**

Leanne Barske, Municipality of Anchorage, Health and Human Services  
Marcy Custer, State of Alaska, Women, Children, and Family Health  
Rosalyn Singleton, Alaska Native Tribal Health Consortium, Immunization Program  
Tom Hennessy, Centers for Disease Control and Prevention  
Connie Jessen, Alaska Native Tribal Health Consortium, STI Prevention  
Susan Jones, State of Alaska, Section of Epidemiology  
Joe McLaughlin, State of Alaska, Section of Epidemiology  
Wendy Walters, Municipality of Anchorage, Health and Human Services  
Geri Yett, State of Alaska, Section of Epidemiology

**Group 9:**

LHI 19: Percentage of rural community housing units with water and sewer services

LHI 20: Percentage of the Alaskan population served by community water systems with optimally fluoridated water

Convener: Tom Hennessy, Centers for Disease Control and Prevention

Members:

Jennifer Dobson, Yukon Kuskokwim Health Corporation  
Chris Fish, Alaska Native Tribal Health Consortium, Environmental Health  
Bill Griffith, State of Alaska, Environmental Conservation  
Korie Hickel, Alaska Native Tribal Health Consortium, Environmental Health  
Brehan Kohl, State of Alaska, Environmental Conservation  
Brian Lefferts, Yukon Kuskokwim Health Corporation  
Mollie McGrath, Oral Health Coalition  
Troy Ritter, Alaska Native Tribal Health Consortium, Environmental Health  
Cheryl Rosa, U.S. Arctic Research Commission  
James Temte, Alaska Native Tribal Health Consortium, Environmental Health  
Dennis Wagner, Environmental Protection Agency  
Brad Whistler, Oral Health Coalition

**Group 10:**

LHI 21: Percentage of women who did not receive prenatal care beginning in the first trimester of pregnancy

Convener: Stephanie Wrightsman-Birch, State of Alaska, Women, Children, and Family Health

Members:

Cristina Belli, Anchorage Neighborhood Health Clinic  
Cindy Christensen, State of Alaska, Health Care Services  
David Compton, Yukon Kuskokwim Health Corporation  
Sherrell Holtshouser, State of Alaska, Women, Children and Family Health  
Ellen Hodges, Alaska Association of Family Medicine  
Claire Lewis, Yukon Kuskokwim Health Corporation  
Matt Lindemann, Denali OB-GYN Clinic  
Alex Malter, State of Alaska, Health Care Services  
Rebekah Morisse, State of Alaska, Women, Children and Family Health  
Anita Powell, State of Alaska, Public Health Nursing  
Dawyn Sawyer, Norton Sound Health Corporation  
Carrie Truett, State of Alaska, Health Care Services  
Tammy Wilkerson, Interior Neighborhood Health Clinic

**Group 11:**

LHI 22: Rate of hospitalizations that could have been prevented with high quality primary and preventive care

LHI 23: Percentage of adults who could not afford to see a doctor in the last 12 months

Convener: Nancy Merriman, Alaska Primary Care Association

Members:

Carla Britton, Alaska Native Tribal Health Consortium, Epidemiology Center

Verlyn Corbett, Southcentral Foundation

David Driscoll, University of Alaska Anchorage

Deb Erickson, Alaska Healthcare Commission

Tom Hennessy, Centers for Disease Control and Prevention

Susan Mason-Bouterse, State of Alaska, Health Planning and System Development

Jeannie Monk, Alaska State Hospital and Nursing Home Association

Alice Rarig, Private participant

**Group 12:**

LHI 24: Percentage of all residents living above the federal poverty level as defined for Alaska

LHI 25: Percentage of 18-24 year olds with high school diploma or equivalency

Convener: Sue Brogan, United Way of Anchorage

Members:

Verné Boerner, Alaska Native Health Board

Brenda Moore Byers, Christian Health Associates

Patty Owen, State of Alaska, Education and Early Development

Trevor Storrs, Alaska Children's Trust