



Healthy Alaskans 2030

State Health Improvement Plan

July 2020/Updated February 2022





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Introduction

The State of Alaska, Department of Health and Social Services (DHSS), in equal partnership with the Alaska Native Tribal Health Consortium (ANTHC), leads the development of the statewide health improvement plan (SHIP), Healthy Alaskans 2030 (HA2030). HA2030 is composed of 15 priority health topics containing 30 health objectives. Each objective has an established target to reach by 2030. Within each objective, there are specific evidence-based strategies and actions that are recommended to move the state closer to achieving the target. Through a comprehensive and inclusive process, Alaskans and organizations representing communities across the state have agreed to the HA2030 objectives and targets for the next decade. Healthy Alaskans teams intend to conduct periodic reviews and updates throughout the decade. HA2030 is aimed at improving the health of all Alaskans and has a vision of *Healthy Alaskans in Healthy Communities*. To support this vision, HA2030 provides a framework for partners and stakeholders who are actively engaged in improving the health of Alaskans. The framework has been grounded in a review of national models such as Healthy People and County Health Rankings, completion of a statewide health assessment, the prioritization of health topics, objectives, and targets, and the identification of strategies and actions to reach those targets. This collaborative planning process has fostered shared ownership and responsibility for the plan's implementation.

Acknowledgements

The development of the Healthy Alaskans 2030 plan reflects the results of a collaborative planning process that involved multiple partners including the Health Objective Development Teams, public health nurses and community health aides across the state, the Advisory Team who prioritized the objectives into a manageable set of 30, the Strategy & Action Teams, and the Data Team. The foundation of this effort included input given by Alaskans around the state who took the time to respond to the Healthy Alaskans survey, participate in community listening sessions and participate in interviews to share what health issues they are most concerned about. Healthy Alaskans is truly a team effort; thank you to all who have participated to make the state health improvement plan as comprehensive and inclusive as possible.

Healthy Alaskans 2030 Steering Team

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Executive Summary



What is Healthy Alaskans?

Alaska’s Statewide Health Improvement Plan, HA2030, is a roadmap for promoting and advancing population health. It is focused on improving health outcomes through prevention and risk reduction with a particular interest in promoting and ensuring health equity for all Alaskans. Healthy Alaskans is an equal partnership between ANTHC and the DHSS, both of which provide statewide public health services. The Healthy Alaskans partnership is unique in that it is the only known statewide health improvement plan in the nation that is developed and co-led by state and Tribal entities. Both entities share the belief that collaboration and shared responsibility will move Alaska closer to meeting our collective health goals as a state. The State/Tribal partnership has allowed the Healthy Alaskans efforts to go a step further by outlining not only objectives but strategies, actions and key partners who can implement a living and active plan. Lastly, this partnership is unique in that we have leadership from both ANTHC and the State of Alaska who are committed to investing resources into making Healthy Alaskans successful. Both organizations dedicate staff time to the project including the two co-chairs, multiple core team members, data team members and communication team members.

HA2030 is composed of 15 priority health topics containing 30 health objectives. Each objective has an established target to reach by 2030. Within each objective, there are specific evidence and local knowledge-based strategies and actions which are recommended to move the state closer to achieving the target. This framework is based on the most recent health data for Alaska and the input from Alaskans across the state. Healthy Alaskans is rooted in the *collective impact* model which brings organizations together, in a structured way, to achieve social change rather than working in silos apart from one another. Healthy Alaskans adopted the collective impact model because it focuses on having:

- Entities that serve as the “backbone support” of the framework by planning and leading the work plan,
- A common agenda,

- Activities that are aligned toward shared goals,
- A shared measurement system, and
- Continuous communication.

Figure 1 Collective Impact Model of Social Change



Improved health and health equity for all Alaskans!

In order for Healthy Alaskans to be successful, it will take effort on the part of all communities, organizations, and entities working in the priority health topic areas.

The state health improvement plan is updated through a comprehensive process involving multiple partners. Although final data for Healthy Alaskans 2020 will not be available until 2021, annual performance scorecards show that Alaska has made progress but still has a lot of work to do in order to reach the shared health goals. To date, Healthy Alaskans 2020 data show that for all Alaskans, targets have been met for reduced cancer deaths, reduced teen smoking, reduced adult and youth binge drinking, reduced teen dating violence, reducing cost as a barrier to healthcare, and increased graduation with a high school diploma. Improvements are still needed in areas such as reducing obesity, suicide, and rape; and increasing the number of communities who provide and maintain optimally fluoridated water. Data also show that for Alaska Native people, progress was made in reducing teen dating violence, teen binge drinking, and reducing cost as a barrier to healthcare.

Healthy Alaskans 2030 builds on components of the previous decade's plan and adds new elements to include emergent health issues and new focus areas based on the data collected during the state health assessment and evaluation of the state's public health system ("Community Capacity Review") using the National Public Health Performance Standards. The state health assessment presented data about population characteristics, social and economic factors, health outcomes and health equity issues in the state as well as the health topics of highest concern to Alaskans. The state health improvement plan is built on this foundational data.

Healthy Alaskans 2030 Structure

Figure 2 Healthy Alaskans Structure



The Advisory Team is made up of approximately 40 professionals from the broader public health arena in Alaska who are subject matter experts in topics that span the entire spectrum of public health services and functions. These include nonprofit, state, Tribal, private and other entities working in areas such as environmental health, injury prevention, mental health, housing, chronic disease and other public health areas. The Advisory Team uses their professional expertise to make recommendations to the Core Team regarding objectives, strategies, implementation and process. The Advisory Team members also serve as active champions of Healthy Alaskans, promoting it among their networks and colleagues, and aligning their work with Healthy Alaskans goals as appropriate.

The Core Team is made up of approximately 10 professionals who represent various areas of expertise within the two backbone entities: ANTHC and DHSS. The Core team is led by the two Co-Chairs who oversee the planning, timeline and implementation of Healthy Alaskans activities that form the framework for the statewide health improvement plan.

Healthy Alaskans is team based, which allows for continuous collaboration towards statewide health improvement. The foundation of this effort includes Alaskans, communities, and organizations working in health and areas that impact health, and the various work groups that have given input throughout the development of HA2030. The Data, Communications and other subject matter teams help evaluate community and work group input, current trends and lead the state health assessment. Healthy Alaskans is grounded in evidence-based action for health improvement and these teams ensure that data is used to propel us forward in our actions and efforts.

The Steering Team represents the high level of commitment to the statewide health improvement plan by ANTHC and the State of Alaska. The Steering Team members include top leadership of both entities who make decisions regarding the direction and outputs of Healthy Alaskans based on the input provided by Alaskans, the multiple work groups and subject matter experts involved in the effort.

How was Healthy Alaskans 2030 developed?

“We take great pride in the fact that the state health improvement plan, Healthy Alaskans, is truly a team effort of multiple organizations, communities and entities that work to improve public health in Alaska. The plan highlights several important health goals that we all agree on. With these shared goals and strong communication, we as Alaskans can find new ways to be stronger together.”

– Anne Zink, MD, FACP, *State of Alaska Department of Health and Social Services*

To develop the statewide health improvement plan, the Healthy Alaskans Core Team completed a State Health Assessment and an evaluation of the state’s public health system (“Community Capacity Review”) using the National Public Health Performance Standards to identify the most important health issues impacting Alaskans, the health improvement needs of the state, and the areas where the public health system is in need of improvement in order to increase capacity to adequately address the public health needs of the state. The state health assessment process gathered quantitative health data about the top health conditions and issues that Alaskans are faced with. It also gathered qualitative information directly from Alaskans through an online survey, listening sessions, and interviews regarding what health issues are most important to them. The Community Capacity Review results indicate which areas, on a system level, Alaska needs to improve on and in which areas we excel. This systems level assessment shows our capacity to adequately respond to and prepare for health conditions, issues, and emergencies.

Work groups composed of subject matter experts carefully reviewed and considered the contents of the State Health Assessment, the Community Capacity Review, Healthy Alaskans 2020 data trends for specific health indicators and annual scorecards and made recommendations to keep, modify or remove the indicator from the state health improvement plan. These recommendations were presented to the Healthy Alaskans Advisory Team, who agreed on an initial set of health objectives and then, through a prioritization process and extensive work sessions with data and subject matter expert input, narrowed the list down to 30 health objectives within 15 priority health topics.

Once the HA2030 health objectives were agreed on, several subject matter expert work groups were convened over the period of several months. These work groups selected appropriate and achievable targets for each objective and identified evidence-based and research-informed strategies and actions that organizations and communities will work on in the coming years to move Alaska toward the established goals.

“Partnering on the HA2030 State Health Improvement Plan allows us to bring Tribal voices to the table, it ensures disparities among the health status of Alaska Native People are addressed, and it supports our vision that Alaska Native people are the healthiest people in the world.”

– Kirsten Kolb, *Alaska Native Tribal Health Consortium*



Healthy Alaskans 2030 Priority Health Topics and Health Objectives

Chronic Disease

1. Reduce the cancer mortality rate per 100,000 population

Environmental Health

2. Increase the percentage of rural community housing units with water and sewer services
3. Increase the percentage of the Alaskan population served by community water systems with optimally fluoridated water

Healthcare Access

4. Increase the proportion of women who receive prenatal care beginning in the first trimester
5. Reduce the percentage of adults (aged 18 years and older) reporting that they could not afford to see a doctor in the last 12 months
6. Reduce the rate of preventable hospitalizations per 1,000 adults (hospitalizations that could have been prevented with high quality primary and preventive care) based on the Agency for Healthcare Research and Quality (AHRQ) definition
7. Increase the percentage of 3-year-olds who have had a well-child checkup in the last 12 months
8. Reduce the percentage of the population without health insurance

Healthy Weight

9. Increase the percentage of children (students in grades K-8) who meet criteria for healthy weight

Infectious Disease

10. Increase the vaccination coverage level of 4 doses of diphtheria-tetanus-acellular pertussis (DTaP) vaccine among children by age 2 years
11. Reduce the incidence rate of gonorrhea per 100,000 population

Injury Prevention

12. Reduce the unintentional injury mortality rate per 100,000 population

Mental Health

13. 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
14. Reduce the mean number of days in the past 30 days adults (aged 18 years and older) report being mentally unhealthy

Nutrition

15. Reduce the percentage of 3-year-olds who drink any sugary drinks on a given day

Physical Activity

16. Increase the percentage of adolescents (high school students in grades 9-12) who meet the Physical Activity Guidelines for Americans (2008 US DHHS Physical Activity Guidelines: adolescents who do at least 60 minutes of physical activity a day, every day of the week)

Protective Factors

17. Increase the percentage of adolescents (high school students in grades 9-12) with 3 or more adults (besides their parent(s)) who they feel comfortable seeking help from
18. Increase the percentage of adolescents (high school students in grades 9-12) who feel like they matter to people in their community

Social Determinants of Health

19. Increase the percent of high school students who graduate within 4 years of starting 9th grade
20. Reduce the percentage of rental occupied households that exceed 50 percent of household income dedicated to housing
21. Increase the percentage of residents (all ages) living above the federal poverty level (as defined for AK)

Substance Misuse

22. Reduce the alcohol-induced mortality rate per 100,000
23. Reduce the drug-induced mortality rate per 100,000
24. Reduce the percentage of adults needing but not receiving substance use disorder treatment

Suicide Prevention

25. Reduce the suicide mortality rate per 100,000 population

Tobacco Use

26. Reduce the percentage of adolescents (high school students in grades 9-12) who have used electronic vapor products, cigarettes, smokeless tobacco, or other tobacco products in the last 30 days
27. Reduce the percentage of adults (aged 18 and older) who currently smoke cigarettes or use electronic vapor products, smokeless tobacco, or other tobacco products

Violence Prevention

28. Reduce the percentage of repeated substantiated child maltreatment within last 12 months
29. Reduce the rate of reported or attempted rape per 100,000 population
30. Reduce the percentage of adolescents (high school students in grades 9-12) who were ever hit, slammed into something, injured with an object or weapon, or physically hurt on purpose by someone they were dating or going out with during the past 12 months

Strategies and Actions for 30 Health Objectives



In 2019 and 2020, the Healthy Alaskans Core Team convened 15 Strategy Work Groups composed of experts representing Alaska’s broad public health system. For each health objective, the work groups reviewed evidence of what works for improved health outcomes and recommended strategies for Alaska to achieve the HA2030 health improvement goals. For each strategy, work groups identified specific activities that partner organizations are already involved in or are planning to implement, or that are recommended. The strategies and actions contained in this document do not represent the full array of health improvement work taking place in Alaska and are not limited to the partners listed. Rather, HA2030 Strategy Work Groups were asked to identify priority strategies, and successful efforts already underway or promising practices that are planned. Capturing these efforts and publishing them will facilitate collaboration and leveraging of resources among agencies undertaking similar activities. The partner list is also a living part of this plan in that not all partners may be identified at this time and some may be listed as their engagement and/or the work they do is linked to the recommended action.

For the purposes of this document, the term “partner” is defined as any organization or individual who is part of the community of practice actively engaged in work that supports or is linked to the actions of the respective objective.

The following pages outline HA2030 objectives, strategies and actions.



Objective #1: Reduce the cancer mortality rate per 100,000 population

Target: 127.4

Increase U.S. Preventive Services Task Force (USPSTF) A and B Recommendation cancer screenings

Strategy 1

Action 1	<p>Promote coverage for USPSTF A and B Recommendation cancer screenings through policy changes, such as:</p> <ul style="list-style-type: none"> • Ensure all insurers cover USPSTF A and B Recommendations • Extend Medicaid coverage for cancer screenings • Extend State of Alaska retired public employee coverage for colorectal cancer screening • Reduce barriers to screening access, such as burden and cost of travel for screenings (i.e. colonoscopy)
Measure	Annual report of policies and guidelines that are created, implemented or updated
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Cancer Society, Cancer Action Network • National Breast and Cervical Cancer Early Detection Program Grantees • National Comprehensive Cancer Control Program Grantees • Health care payers including Medicaid/Medicare • National Colorectal Cancer Control Program Grantees
Action 2	<p>Promote coverage for USPSTF A and B Recommendation cancer screenings through system changes, such as:</p> <ul style="list-style-type: none"> • Implement evidence-based interventions from the Community Preventive Services Task Force (CPSTF) Community Guide: <ul style="list-style-type: none"> ○ client and provider reminders, ○ reducing structural barriers (i.e. clinic hours, patient navigation), and ○ provider assessment and feedback ○ Utilize Community Health Workers • Improve healthcare service workflow, policies, and procedures
Measure	Annual report on policies and procedures that are created, implemented or updated; and evidence-based interventions that are implemented to improve cancer screening systems.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Cancer Society, Cancer Action Network • National Breast and Cervical Cancer Early Detection Program Grantees • National Comprehensive Cancer Control Program Grantees • National Colorectal Cancer Control Program Grantees
Action 3	<p>Promote coverage for USPSTF A and B Recommendation cancer screenings through environmental approaches, such as:</p> <ul style="list-style-type: none"> • Increasing community demand through small media and outreach campaigns • Community clinical linkages (mobile mammography, after-hours screening opportunities) • Provider education
Measure	Annual report on number of outreach activities, media campaigns and provider education opportunities targeting environmental approaches.
Timeframe	2020-2030

Increase U.S. Preventive Services Task Force (USPSTF) A and B Recommendation cancer screenings

Strategy 1

- | | |
|-----------------|--|
| Partners | <ul style="list-style-type: none"> American Cancer Society, Cancer Action Network National Breast and Cervical Cancer Early Detection Program Grantees National Comprehensive Cancer Control Program Grantees Health care payers including Medicaid/ Medicare National Colorectal Cancer Control Program Grantees |
|-----------------|--|

Increase use of patient navigation, Community Health Workers and other community-based navigators for improving access to cancer screening, timely diagnosis and treatment, and palliative care

Strategy 2

- | | |
|------------------|--|
| Action 1 | <p>Promote policy changes to increase use of patient navigation such as:</p> <ul style="list-style-type: none"> Improve reimbursement for patient navigators Establish Alaska quality standards for patient navigators Promote incorporation of patient navigators into health care systems |
| Measure | Annual report on new/revised policies and guidelines that are implemented or changed |
| Timeframe | 2020-2030 |
| Partners | <ul style="list-style-type: none"> ANTHC, Division of Community Health Services, Department of Wellness and Prevention, Cancer Programs American Cancer Society, Cancer Action Network University of Alaska Fairbanks, Center for Alaska Native Health Research Alaska Regional Hospital, Cancer Center Providence Health, Cancer Center Fairbanks Memorial Hospital Cancer Center State of Alaska, Division of Public Health, Section of Chronic Disease Prevention & Health Promotion, Comprehensive Cancer Control Program |
| Action 2 | <p>Promote systems changes to increase use of patient navigation such as:</p> <ul style="list-style-type: none"> Establish Alaska peer-to-peer patient navigator network Promote patient navigator training opportunities Build business case of clinical and financial benefits for cancer continuum patient navigation Encourage health systems to employ and utilize patient navigators |
| Measure | Annual report on patient navigator systems change, training, case development and number of health systems utilizing patient navigators. |
| Timeframe | 2020-2030 |
| Partners | <ul style="list-style-type: none"> American Cancer Society, Cancer Action Network National Breast and Cervical Cancer Early Detection Program Grantees National Colorectal Cancer Control Program Grantees National Comprehensive Cancer Control Program Grantees |

Strategy 3 Improve the number of cancer survivors that receive routine medical care

- | | |
|-----------------|--|
| Action 1 | <p>Support policies and guidelines that ensure that cancer survivors have continuous access to care after treatment</p> <ul style="list-style-type: none"> Ensuring that cancer survivors have a care plan Promoting affordable coverage for cancer survivors Improve access to telehealth |
|-----------------|--|

Strategy 3 Improve the number of cancer survivors that receive routine medical care

Measure	Annual report on new/revised policies or guidelines that are implemented or changed.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Cancer Society, Cancer Action Network • National Comprehensive Cancer Control Program Grantees • Health care payers including Medicaid/Medicare
Action 2	Implement evidence-based system changes to increase the number of survivors with a usual source of primary care to improve care coordination, management of co-morbidities, access to recommended screenings and vaccinations, and to reduce risk factors that can lead to re-occurrence of cancer or susceptibility to other serious health conditions (e.g COVID, diabetes).
Measure	Increase of usual source of care or primary care among cancer survivors in the Behavioral Risk Factor Surveillance System (BRFSS)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Cancer Society, Cancer Action Network • National Breast and Cervical Cancer Early Detection Program Grantees • National Comprehensive Cancer Control Program Grantees • Community-based cancer support organizations • Alaska Primary Care Association
Action 3	Implement environmental approaches to improve cancer survivor care through outreach activities and media campaigns with a focus on: <ul style="list-style-type: none"> • Creating an understanding among the public that cancer is a chronic condition • Encouraging healthy living among cancer survivors • Understand their unique health care needs
Measure	Increased number of outreach activities and media campaigns with a focus on cancer as a chronic condition and healthy living among cancer survivors.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Cancer Society, Cancer Action Network • National Comprehensive Cancer Control Program Grantees • Community-based cancer support organizations

Objective #2: Increase the percentage of rural community housing units with water and sewer services

Target: 90%

Strategy 1 **Establish sustainable water and sanitation services in communities where homes are unserved or underserved.**

Action 1	Complete currently resourced or (ongoing) water and sewer projects.
Measure	Measured annually through the IHS Sanitation Tracking and Reporting System.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Native Tribal Healthy Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Alaska Department of Environmental Conservation, (ADEC) Division of Water (DOW) Tribal Health Organizations (THOs) Rural Communities Indian Health Service (IHS) USDA Rural Development (USDA RD) Environmental Protection Agency (EPA) YKHC Office of Environmental Health & Engineering
Action 2	Advocate for funding to complete water and sanitation projects in unserved and underserved communities.
Measure	Measured annually through report of funded projects from ANTHC and ADEC DOW.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Native Tribal Healthy Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Alaska Department of Environmental Conservation, (ADEC) Division of Water (DOW) Tribal Health Organizations (THOs) Rural Communities ADEC Remote Maintenance Workers (RMW) Grant Program and RMW Grantees Indian Health Service (IHS) USDA Rural Development (USDA RD) Environmental Protection Agency (EPA) Alaska Native Health Board YKHC Office of Environmental Health & Engineering
Action 3	Promote best practices for improving coordinated data collection, analysis and dissemination as it pertains to adequate water service at the local, state and regional level. As part of this action step, create measure to document progress.
Measure	Measure will be collaboratively developed to document progress related to improving coordinated data collection, analysis and dissemination.
Timeframe	2020-2030

Strategy 1 Establish sustainable water and sanitation services in communities where homes are unserved or underserved.

Partners	<ul style="list-style-type: none"> Alaska Native Tribal Healthy Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Alaska Department of Environmental Conservation (ADEC) Tribal Health Organizations (THOs) Rural Communities YKHC Office of Environmental Health & Engineering
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Strategy 2 Promote value engineering and alternative construction methods that may allow for more homes to be fully served with existing funding; prioritize projects that will provide adequate quantities of affordable water and sanitation services to unserved homes.

Action 1 Complete the Alaska Water and Sewer Challenge to identify technologic approaches that could result in increases in water/sewer services in rural Alaska.

Measure Report from the ADEC DOW Village Safe Water (VSW) program.

Timeframe 2020-2030

Partners	<ul style="list-style-type: none"> Alaska Department of Environmental Conservation, (ADEC) Division of Water (DOW) University of Alaska, Anchorage DOWL Alaska Summit Consulting Services US Arctic Research Commission
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Action 2 Prioritize first time service among unserved and underserved communities.

Measure Annual funded project lists provided by partners.

Timeframe 2020-2030

Partners	<ul style="list-style-type: none"> Alaska Native Tribal Healthy Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Alaska Department of Environmental Conservation, (ADEC) Division of Water (DOW) Tribal Health Organizations (THOs) Rural Communities Environmental Protection Agency (EPA) USDA Rural Development (USDA RD) Indian Health Service (IHS) YKHC Office of Environmental Health & Engineering
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Action 3 Continue to research, develop, implement and measure the success of alternative methods of water delivery for unserved communities.

Measure Annual funded project list from the ADEC DOW Village Safe Water Program.

Timeframe 2020-2030

Promote value engineering and alternative construction methods that may allow for more homes to be fully served with existing funding; prioritize projects that will provide adequate quantities of affordable water and sanitation services to unserved homes.

Strategy 2

Partners	<ul style="list-style-type: none"> Alaska Native Tribal Health Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Alaska Department of Environmental Conservation, (ADEC) Division of Water (DOW) Tribal Health Organizations (THOs) Rural Communities CDC Arctic Investigations Program University of Alaska, College of Health ANTHC EpiCenter ANTHC Clinical Research Services YKHC Office of Environmental Health & Engineering
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Strategy 3 Ensure homes with existing water and sanitation services continue to function.

Action 1	Support and enhance operations and maintenance of rural water/sewer systems.
Measure	Engage local community leaders and technical assistance providers from rural communities to develop simple sustainable sanitation facility infrastructure.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Native Tribal Health Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Tribal Utility Services Alaska Rural Utility Collaborative (ARUC) Remote Maintenance Workers Program (RMW) Alaska Department of Commerce, Community and Economic Development (DCCED) Rural Utilities Business Advisor Program (RUBA) THOs, Offices of Environmental Health Alaska Rural Water Association (ARWA) YKHC Office of Environmental Health & Engineering
Action 2	Engage local community leaders and technical assistance providers from rural communities to develop simple sustainable sanitation facility infrastructure.
Measure	Annual reports from ADEC RMW Program, RUBA and ADEC DOW Village Safe Water Program.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Native Tribal Health Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) Tribal Utility Services Alaska Rural Utility Collaborative (ARUC) Remote Maintenance Workers Program (RMW) Alaska Department of Commerce, Community and Economic Development (DCCED) Rural Utilities Business Advisor Program (RUBA) THOs, Offices of Environmental Health Alaska Rural Water Association (ARWA) YKHC Office of Environmental Health & Engineering
Action 3	Advocate for programs and services that help reduce operational expenses for local water and wastewater utilities. (ie LUMP, ARUC, Northwest Arctic Borough’s Community Utility Assistance Program (CUAP))
Measure	RUBA can provide a report on the number of rural communities with a regional subsidy for water/sewer services.

Strategy 3 Ensure homes with existing water and sanitation services continue to function.

Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium (ANTHC), Department of Environmental Health and Engineering (DEHE) • Tribal Utility Services • Alaska Rural Utility Collaborative (ARUC) • Alaska Department of Commerce, Community and Economic Development (DCCED) Rural Utilities Business Advisor Program (RUBA) • THOs, Offices of Environmental Health • Alaska Rural Water Association (ARWA) • YKHC Office of Environmental Health & Engineering

Objective #3: Increase the percentage of the Alaska population served by community water systems with optimally fluoridated water

Target: 60%

Strategy 1 **Maintain water fluoridation in communities with existing fluoridated community water systems**

Action 1	<p>Monitor monthly fluoride levels in Alaska community water systems using fluoridation.</p> <ul style="list-style-type: none"> • Inform stakeholders when fluoridating systems are not meeting optimal criteria • Recognize optimally fluoridating water systems and operators with Center for Disease Control and Prevention (CDC) Community Water Fluoridation Quality Award certificates • Provide annual report to Association of State and Territorial Dental Directors (ASTDD) State Synopses. Note: The Synopses website is a product of a cooperative agreement between the CDC and the ASTDD
Measure	<p>Combine information reported through the following sources to evaluate monthly fluoride levels in Alaska community water systems: Water Fluoridation Reporting System (WFRS) and ASTDD. Link to CDC where Fluoridation information can be accessed: https://nccd.cdc.gov/DOH_MWF/Default/Default.aspx</p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health-Oral Health Program • ANTHC Division of Environmental Health and Engineering (DEHE) • Tribal Health Organization Environmental Health Offices/ Water Labs • Alaska Department of Environmental Conservation, Division of Environmental Health, Drinking Water Program • Water operators and local utilities
Action 2	<p>Provide educational information and respond to requests for information on community water fluoridation through presentations to health professionals, community stakeholders or policymakers.</p>
Measure	<p>Activities reported annually to Alaska Dental Action Coalition (ADAC) (request ADAC annual report) and Tribal Health Organization Dental Directors. Request dental director's annual report.</p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Dental Action Coalition (ADAC) • Tribal Health Organization Environmental Health and Dental Departments • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health, Oral Health Program • State of Alaska, Division of Public Health, Section of Public Health Nursing • ANTHC Division of Environmental Health and Engineering (DEHE) • University of Alaska, Division of Health Sciences • Centers for Disease Control (CDC) Arctic Investigations Program • Alaska Public Health Association (ALPHA) • Alaska Dental Society/Private Dentists • Alaska Dental Hygienist Association
Action 3	<p>Respond to community water system needs for equipment, shortages in fluoride products or testing supplies for fluoridating rural water systems.</p>
Measure	<p>All records of purchases are maintained by ANTHC DEHE. Request report from ANTHC DEHE Fluoride Program Manager</p>
Timeframe	2020-2030

Maintain water fluoridation in communities with existing fluoridated community water systems

Strategy 1

Partners	<ul style="list-style-type: none"> • ANTHC Division of Environmental Health and Engineering (DEHE) • Alaska Rural Utility Supply Center • Commercial Vendors of Fluoride equipment products and testing supplies
Action 4	Ensure that currently fluoridating systems continue to have properly certified operators and increase the number of properly certified operators.
Measure	This is measured annually by the percentage of rural operators that have proper certification through Alaska Department of Environmental Conservation (ADEC) Operator Certification records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Department of Environmental Conservation (ADEC) Operator Certification • ANTHC Division of Environmental Health & Engineering (DEHE) • Alaska Rural Utility Collaborative • ADEC Remote Maintenance Worker Program • Tribal Health Organization Environmental Health Offices

Provide or promote information and resources that will help communities understand the value of water fluoridation in Alaska

Strategy 2

Action 1	<p>Develop a water fluoridation work group to coordinate and implement fluoride promotion activities. Activities may include:</p> <ul style="list-style-type: none"> • Create community toolkits, and fact sheets, • Create a broad interagency marketing campaign • Create other educational materials for communities looking to implement or support community water fluoridation. <p><i>The following is a list of potential work group members:</i></p> <ul style="list-style-type: none"> • Tribal Health Organizations • Private Dentists • Alaska Dental Therapy Education Program (ADTEP) • Children’s Advocacy Groups • Legislators • Rasmussen Foundation • Alaska State Dental Hygienists Association • Alaska Primary Care Association • Alaska Public Health Association • All Alaska Pediatric Partnership • Alaska Commission on Aging • RurAL Cap Head Start
Measure	Meeting minutes from the work group shared on the HA2030 website including count of activities that promote understanding and implementation of fluoridation programs in Alaskan communities.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Dental Action Coalition • ANTHC-Division of Environmental Health and Engineering • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health, Oral Health Program • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion • State of Alaska, Division of Public Health, Section of Public Health Nursing

Strategy 2 Provide or promote information and resources that will help communities understand the value of water fluoridation in Alaska

Action 2	Provide an annual update on the status of community water fluoridation at the Alaska Health Summit (ALPHA) and the annual meeting of the Tribal Health Organization Dental Meeting.
Measure	Record of presentations provided by ANTHC Division of Environmental Health and Engineering program reports.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • ANTHC Division of Environmental Health and Engineering
Action 3	<p>Share existing and support studies or projects, papers or bulletins that evaluate the health benefits such as, but not limited to, rates of dental decay on Alaskan populations of communities that are served with optimally fluoridated water vs those served with non-fluoridated water.</p> <p><i>The following is a list of additional potential partners:</i></p> <ul style="list-style-type: none"> • CDC Arctic Investigations Program • University of Alaska, College of Health • Alaska Dental Therapy Education Program (ADTEP) • ANTHC Epidemiology Center • Southcentral Foundation • American Fluoridation Society • ANTHC Clinical Research Services • Tribal Health Organizations
Measure	Journal articles, white papers, and bulletins collated and posted on State of Alaska Oral Health website.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health, Oral Health Program • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion • State of Alaska, Division of Public Health, Section of Public Health Nursing

Strategy 3 Initiate community water fluoridation in communities that are not currently fluoridating their community water systems

Action 1	Increase the number of Alaska communities that fluoridate their water.
Measure	<p>This can be tracked through Water Fluoridation Reporting System (WFRS) and Association of State & Territorial Dental Directors (ASTDD)</p> <p>Link to CDC where Fluoridation information can be accessed by the general public: https://nccd.cdc.gov/DOH_MWF/Default/Default.aspx</p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • ANTHC Division of Environmental Health and Engineering • Alaska Dental Action Coalition • ADEC Division of Water, Village Safe Water (VSW) Program • Alaska Military Base Commanders or Coordinator for Water Quality on AK Bases • Tribal Health Organizations • Municipal Governments
Action 2	Identify decision-making bodies in Alaska to inform and re-inform about the health impact and cost savings water fluoridation could have in Alaska.
Measure	List created and reported to Alaska Dental Action Coalition (ADAC), Alaska Tribal Health Organization Dental Directors and the Alaska Public Health Association.

Strategy 3 **Initiate community water fluoridation in communities that are not currently fluoridating their community water systems**

Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • ANTHC Division of Environmental Health and Engineering • Alaska Dental Action Coalition • State of Alaska, Department of Health & Social Services, Division of Public Health • Tribal Health Organizations • Other partners to be identified
Action 3	<p>Inform decision-making bodies in Alaska about the importance and opportunities for positive dental outcomes and cost savings associated with water fluoridation.</p> <ul style="list-style-type: none"> • Cost savings can be detailed utilizing tools such as the CDC Health Economics tool. The cost savings tool can be found here: https://www.cdc.gov/ncezid/dpei/aip/dental-caries.html
Measure	Presentations and information provided to decision-making bodies will be reported to ADAC, the Tribal Health Organization Dental Directors and ALPHA. Reports: ADAC and Dental Director’s Annual Report.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • ANTHC Division of Environmental Health and Engineering • Alaska Dental Action Coalition • State of Alaska, Department of Health and Human Service, Division of Public Health • Tribal Health Organizations • Other partners to be identified
Action 4	<p>Maintain active inventory of communities that would be suitable candidates for fluoridation. Eligibility status includes:</p> <ul style="list-style-type: none"> • Properly certified operator • Regulatory compliance and system capacity • Piped delivery
Measure	Annual reports created by key partners and at ALPHA and Tribal Health Organization Dental Directors meetings.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • ADEC Operator Certification • ANTHC Division of Environmental Health and Engineering • ADEC Division of Water, Village Safe Water • Tribal Health Organization Environmental Health Offices

Objective #4: Increase the proportion of women who receive prenatal care beginning in the first trimester.

Target: 81.8%

Strategy 1 **Increase the number of women who have access to health care providers who support them to manage their pregnancies**

Action 1	Increase and preserve access to sources of medical coverage and services for childbearing people and people of childbearing age. This includes access to family planning.
Measure	Proportion of people of childbearing age with health insurance coverage (BRFSS and American Community Survey).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance, Women, Infants and Children Program (WIC) • Anchorage Project Access • Medicaid • Private insurers • American College of Obstetricians and Gynecologists (ACOG)
Action 2	Increase access to family planning services during the immediate postpartum period. This includes the Long-Acting Reversible Contraception (LARC) Program, and educating women of child bearing age on the importance of spacing out pregnancies.
Measure	<ul style="list-style-type: none"> • Change in Medicaid policies (State of Alaska, Division of Healthcare Services) • A decrease of Induced Termination of Pregnancy (ITOP) (HAVRS) • Increased prenatal care in 1st trimester (HAVRS) • Reduced % unintended pregnancies (PRAMS, State of Alaska, Division of Public Health, Section of Women’s, Children’s Family Health)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance, Women, Infants and Children Program (WIC) • Medicaid • State of Alaska, Department of Health and Social Services, Chief Medical Officer • State of Alaska, Division of Public Health, Section of Women, Children, and Family Health • AK Children Trust • Providence Nurse-Family Partnership
Action 3	Improve Alaska Division of Public Assistance education of pregnant women about their Medicaid prenatal care coverage, including education to enhance women’s understanding that they may be eligible for coverage once pregnant.
Measure	<ul style="list-style-type: none"> • Number of people served from WIC data • A decrease of Induced Termination of Pregnancy (ITOP) (HAVRS) • Increased prenatal care in 1st trimester (HAVRS) • Reduced % unintended pregnancies (PRAMS, State of Alaska, Division of Public Health, Section of Women’s, Children’s Family Health)
Timeframe	2020-2030

Strategy 1 Increase the number of women who have access to health care providers who support them to manage their pregnancies

Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance, Women, Infants and Children Program (WIC) • State of Alaska, Department of Health and Social Services, Chief Medical Officer & Public Information Team • Organization of State Medical Association Presidents • Medication-Assisted Treatment (MAT) providers
Action 4	Reduce time from date of Medicaid application to eligibility determination and patient notification of eligibility to a timeframe that assures access to prenatal care within the first 12 weeks of pregnancy.
Measure	Processing time of enrollment to coverage from Cycle Time Report DHSS, DPA.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance

Strategy 2 Increase the number of women who have their pregnancies confirmed by a health care provider in the first trimester

Action 1	Convene key stakeholders through the Alaska Perinatal Quality Collaborative (AKPQC) to develop strategies to improve reporting of prenatal care on Alaska birth certificates.
Measure	Continued involvement of key stakeholders and improvement of birth certificate data (AK Perinatal Quality Collaborative).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • AK Perinatal Quality Collaborative DHSS, Health Analytics and Vital Records Section • State of Alaska, Division of Public Health, Section of Women, Children, and Family Health • Community-based midwives
Action 2	Encourage education on the importance of early prenatal care, with a focus on Alaska Native people in villages.
	<ul style="list-style-type: none"> • Continue to include in health aide training for Community Health Aides • Include in conferences and community presentations
Measure	<ul style="list-style-type: none"> • Increase in prenatal care in 1st trimester (HAVRS) • Increase in educational materials produced and outreach presentations conducted specific to prenatal care for Alaska Native people (ANTHC CHAP data)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Community Health Aide Program (CHA/Ps) • Alaska Perinatal Quality Collaborative (AKPQC)
Action 3	Encourage a standardized prenatal care schedule according to the current American College of Obstetricians and Gynecologists (ACOG) and American Academy of Pediatrics (AAP) Guidelines for Perinatal Care.
Measure	Dissemination of the standardized prenatal care schedule among birth facilities and providers through the Alaska Perinatal Quality Collaborative (AKPQC)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women, Children, and Family Health • Alaska Perinatal Quality Collaborative (AKPQC) • American College of Obstetricians and Gynecologists (ACOG) • Midwives
Action 4	Increase outreach presentations regarding emerging evidence-based strategies to increase access to prenatal care and improve perinatal health outcomes (e.g., telemedicine and group prenatal care models).

Strategy 2 **Increase the number of women who have their pregnancies confirmed by a health care provider in the first trimester**

Measure	Document participation in prenatal care educational offerings through ECHO (UAA Center for Human Development)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Tribal Health System Alaska Perinatal Quality Collaborative (AKPQC) ECHO Super hubs

Strategy 3 **Improve system of services that care for women with addictions (alcohol, drugs, tobacco)**

Action 1	Promote universal verbal screening for substance use during pregnancy utilizing a validated screening tool.
Measure	Annual reports on proportion of pregnant Alaskans screened utilizing the validated AKPQC Substance Exposed Newborns Initiative (SENI) Tool (Data source: WCFH SENI program).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Women, Children, and Family Health AKPQC/Substance-Exposed Newborns Initiative (SENI)
Action 2	Promote access to medication assisted treatment, mental health services, case management, and family planning for all pregnant individuals and families affected by substances.
Measure	Number of people receiving Medication-Assisted Treatment (MAT) and number of MAT providers who serve pregnant people (Data source: Medical board).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Behavioral Health State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention (OSMAP) Mat-Su Opioid Task Force NEST program with Alaska Regional Hospital SOA OSMAP AKPQC/Substance-Exposed Newborns Initiative (SENI)
Action 3	Increase education sessions to promote access to preventive health care for all people of childbearing age. This includes voluntary access to family contraception.
Measure	Increased preventive care visits among women of childbearing age (BRFSS)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Assistance, Women, Infants and Children Program (WIC), Medicaid Program State of Alaska, Department of Health and Social Services, Chief Medical Officer State of Alaska, Division of Public Health, Section of Women, Children, and Family Health AK Children Trust

Objective #5: Reduce the percentage of adults (aged 18 years and older) reporting that they could not afford to see a doctor in the last 12 months

Target: 11.5%

Align all payers, public and private, towards value-based alternative payment models in order to address high health insurance costs

Strategy 1

Action 1	Develop a core set of quality measures across all of the different payers, public and private, in AK.
Measure	Existence of agreed upon set of core quality measures as reported by AK Healthcare Transformation Project.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • AK Healthcare Transformation Project partners • State of Alaska, Department of Health and Social Services, Office of the Commissioner • State of Alaska, Division of Insurance • State of Alaska, Division of Retirement and Benefits
Action 2	Inclusion of quality measures in contracts between payers and providers
Measure	# of healthcare contracts that include quality measures as reported by AK Healthcare Transformation Project.
Timeframe	2020-2027
Partners	<ul style="list-style-type: none"> • AK Healthcare Transformation Project • State of Alaska, Department of Health and Social Services, Office of the Commissioner • State of Alaska, Division of Insurance • State of Alaska, Division of Retirement and Benefits • Envoy Integrated Health and Providence Alaska Medical Center
Action 3	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 in order to increase price and quality transparency for the public.
Measure	Creation of the AK Healthcare Transformation Corporation as reported by the AK Healthcare Transformation Project.
Timeframe	2020-2023
Partners	<ul style="list-style-type: none"> • AK Healthcare Transformation Project • State of Alaska, Department of Health and Social Services, Office of the Commissioner • State of Alaska, Division of Insurance • State of Alaska, Division of Retirement and Benefits

Strategy 2 Improve access to health care for those who are unable to afford care

Action 1	Develop a plan to address barriers and gaps in the health care Safety Net systems identified by the statewide Primary care needs assessment in coordination with community health needs assessments and local implementation plans.
Measure	Completed primary care needs assessment and plan to address gaps identified within the assessment.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Rural Community Health Systems, Office of Healthcare Access

Strategy 2 Improve access to health care for those who are unable to afford care

Action 2	Implement strategies identified in primary care needs assessment and subsequent plan to address barriers and gaps in the health care safety net systems.
Measure	All strategies in plan implemented as evidenced by plan monitoring and reporting mechanism.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Rural Community Health Systems Office of Healthcare Access • State of Alaska, Division of Public Health, Section of Public Health Nursing • Anchorage Project Access
Action 3	Increase the supply of primary care providers through administration of loan repayment and financial incentives for recruitment and retention (for example, Supporting Healthcare Access through Loan Repayment known as Alaska’s SHARP Program, Indian Health Service Loan and scholarship, National Health Service Corp (NHSC), and NurseCorps).
Measure	Number and diversity of Alaska healthcare providers participating in workforce incentive programs as reported by Alaska Division of Public Health, Section of Rural Community Health Systems, Office of Healthcare Access including SHARP demographic and rural diversity data
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Rural Community Health Systems, Office of Healthcare Access • Indian Health Service • SHARP advisory council
Action 4	Increase training and education opportunities for healthcare professionals and paraprofessionals through healthcare degree and certificate programs available in Alaska.
Measure	Number of healthcare degree and certificate programs available in Alaska found on AHEC website at https://www.uaa.alaska.edu/academics/college-of-health/departments/acrhwh/healthcareerresources/
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska's Area Health Education Center (AHEC) • University of Alaska • Alaska Pacific University • Other education institutions

Objective #6: Reduce the rate of preventable hospitalizations per 1,000 adults (hospitalizations that could have been prevented with high quality primary and preventive care) based on the Agency for Healthcare Research and Quality (AHRQ) definition

Target: 6.1 per 1,000

Strategy 1 Address chronic disease management as a preventive measure to hospitalization

Action 1	Increase referrals to educational and support groups for individuals with diabetes, prediabetes or who are at risk to develop prediabetes.
Measure	<ul style="list-style-type: none"> Chronic Disease Self-Management Program/Diabetes Self-Management Program (CDSMP/DSMP): Program records/Annual report developed by the State Diabetes Program and submitted to the Self-Management Resource Center (SMRC) Diabetes Self-Management and Education Support (DSMES): DSMES State Data Report developed by American Diabetes Association (ADA) and Association of Diabetes Care & Education Specialist (ADCES) Annual Status Report Data Diabetes Prevention Program (DPP) and/ or additional lifestyle change programs: Program record/ annual report developed by the State Diabetes Program and submitted to the CDC.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion Alaska Native Tribal Health Consortium, Diabetes Program ASHNHA Health Information Exchange (HIE)
Action 2	Develop and/or expand structured and organized coalitions focused on diabetes, heart disease, cancer and other chronic conditions.
Measure	Existence of organized coalitions with work plans that are working towards a goal related to chronic disease prevention and/or management as reported by State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion Alaska Native Tribal Health Consortium, Tribal Epicenter, WSH Grant Program

Strategy 2 Improve care coordination, community care transitions, and complex case management

Action 1	Develop a statewide closed loop referral management system that includes healthcare, public health, and social services.
Measure	Completion of management system as reported by State of Alaska, Division of Public Health, Section of Public Health Nursing.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Public Health Nursing Alaska Primary Care Association Alaska Native Tribal Health Consortium State of Alaska, Department of Health and Social Services, Division of Behavioral Health

Strategy 2 **Improve care coordination, community care transitions, and complex case management**

Action 2	Implement and monitor the Alaska Patient-Centered Medical Home (PCMH) Initiative https://www.alaskapca.org/patient-centered-medical-home The medical home model holds promise as a way to improve health care in America by transforming how primary care is organized and delivered. Building on the work of a large and growing community, the Agency for Healthcare Research and Quality (AHRQ) defines a medical home not simply as a place but as a model of the organization of primary care that delivers the core functions of primary health care. This model encompasses five functions and attributes: Comprehensive Care, Patient-Centered, Coordinated Care, Accessible Services, and Quality and Safety.
Measure	Report the number of pilots funded through the Initiative; progress on attaining PCMH recognition for each practice; attainment of recognition; progress on recommendations for Alaska-specific PCMH indicators as reported by Alaska Primary Care Association.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Primary Care Association State of Alaska, Department of Health and Social Services, Division of Public Health Section of Rural and Community Federally Qualified Health Centers (FQHCs) Providence Family Health
Action 3	Pilot test integration of behavioral health with primary care services through the SAMHSA Primary and Behavioral Health Care Integration Program (Pilot Sites: Wrangell, Southcentral Foundation); the APCA/DHSS Alaska PCMH-I initiative; and the HRSA behavioral health integration for community health center grant initiative.
Measure	Completion of pilot test through the PCMH-I; also resourced through HRSA BH Integration grants for CHCs.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Primary Care Association State of Alaska, Department of Health and Social Services, Division of Behavioral Health
Action 4	Increase the number of healthcare providers (MDs, RNs, Dentists, PTs, RDs, Behavioral Health) with geriatric specialty/training
Measure	Increase in Alaska’s number of board-certified geriatricians (in 2018, N=8).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Northwest Geriatrics Workforce Enhancement Center UW UAA Healthy Aging Research lab and gerontology minor
Action 5	Increase number of individuals participating in National Family Caregiver Support Program
Measure	Numbers of Alaskans participating.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> ACoA, Alzheimer’s Resource of Alaska AARP State of Alaska, Department of Health and Social Services, Division of Senior and Disabilities Services (SDS), Alaska Commission on Aging
Action 6	Assessment of adequacy of caregiver support is routinely included in hospital discharge planning
Measure	Reports from Health Facilities Licensing and Certification; AS 18.20.500
Timeframe	2020-2030

Strategy 2 Improve care coordination, community care transitions, and complex case management

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| Partners | <ul style="list-style-type: none"> • Aging Disability Resource Centers • Alaska Care Coordination Network • National Family Caregiver Support Program |
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Objective #7: Increase the percentage of 3-year-olds who have had a well-child checkup in the last 12 months

Target: 93.1%

Strategy 1 Increase education outreach on the importance of preventative care among children

Action 1	<p>Educate Alaskans on Bright Futures Guidelines for Health Supervision, American Academy of Pediatrics (AAP), and the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) for well-child visits and coordinate a work group of key partners to develop a systematic way to track this activity.</p>
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Use various modalities to disseminate the information, including to rural communities. For example:

- Project ECHO
- State of Alaska, Division of Public Assistance, Women, Infants, and Children program
- Alaska Head Start Association
- Medical homes
- Health care providers
- Public education (e.g. Reach Out and Read, Imagination Library, Best Beginnings)

Measure	Track contacts in educational programs and the amount/type of public service announcements (PSAs).
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Timeframe	2020-2030
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| Partners | <ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Public Health Nursing • State of Alaska, Division of Public Assistance, Women, Infants, and Children program • American Academy of Pediatrics (AAP) Alaska Chapter • Alaska Native Tribal Health Consortium, Community Health Aide/Practitioners (CHAP/S) • Alaska Children's Trust • All Alaska Pediatric Partnership • Children's Health Insurance Program • School Districts • University of Alaska Anchorage- Center for Human Development • Head Start • Tribal Health Organizations |
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Action 2	<p>Measure compliance with recommended well-child care and promote recommended well-child care through strategies like reminder recall. This would include improving MMIS system and adapting Childhood Understanding Behaviors (CUBS) to track/report well-child compliance with Bright Futures Guidelines.</p>
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Measure	Improved measures are developed and available for use.
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Timeframe	2020-2030
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| Partners | <ul style="list-style-type: none"> • Medicaid • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health • All Alaska Pediatric Partnership: Help Me Grow |
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Strategy 1 Increase education outreach on the importance of preventative care among children

Action 3	<p>Support programs that address health equity by removing barriers to care such as:</p> <ul style="list-style-type: none"> Alaska Medicaid Well-Child Transportation Program Translation services Telehealth Case Management Others that number of people served can be tracked <p>Included as part of this action step is to create a work group of key partners to develop a system to track people served in programs that reduce barriers.</p>
Measure	Track the number of people served.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Public Health Nursing Medicaid School Districts Head Start Healthcare for the Homeless Alaska Children’s Trust All Alaska Pediatric Partnership Tribal Health Organizations

Strategy 2 Routine well-child health supervision should also include developmental screening

Action 1	<p>Incorporate comprehensive routine well-child check-ups to include Bright Futures guidelines for developmental screenings and relevant risk screening, for example, poverty/hunger, firearm safety, water safety, mental health/suicide checks, and trauma/household dysfunction so providers can take advantage of acute or episodic visits to provide well-child checks. Included as part of this action step is to create a work group of key partners to develop a measure for this action.</p>
Measure	Measure is developed and progress reports on Bright Futures Guidelines and relevant risk screenings incorporation into well child screenings are reported to Healthy Alaskans Core team annually.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Public Health Nursing Medicaid American Academy of Pediatrics (AAP) Alaska Chapter Help Me Grow Healthcare for the Homeless Tribal Health Organizations State of Alaska, Division of Senior and Disabilities Services, Infant Learning Program State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health
Action 2	<p>Provide resources and training to providers to support their developmental screenings in a culturally appropriate manner. (ASQ-3)</p>
Measure	Annual report on educational presentations from key partners.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> All Alaska Pediatric Partnership: Help Me Grow State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health

Strategy 2 Routine well-child health supervision should also include developmental screening

Action 3	Refer families to resources like the Alaska Infant Learning Program and Help Me Grow Alaska for free developmental screening, care coordination services, and connections to community resources.
Measure	Annual program report(s) on number of referrals/participants to Alaska Infant Learning Program and Help Me Grow Alaska.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Public Health Nursing • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health • Medicaid • Healthcare providers • UAA Center for Human Development • State of Alaska, Division of Senior and Disabilities Services, Infant Learning Program • All Alaska Pediatric Partnership: Help Me Grow

Strategy 3 Increase/prioritize coverage for well-child care

Action 1	Support efforts to change policy for Medicaid to cover well child screening services during acute or episodic visits.
Measure	Policy change implemented and communicated to providers and the public.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • American Academy of Pediatrics (AAP) Alaska Chapter • Alaska Native Tribal Health Consortium • Alaska Tribal Health Organizations • Pediatrics and Family Medicine Practices • Medicaid
Action 2	Track coverage for children by Medicaid, Children's Health Insurance Program (CHIP), and Private Insurance.
Measure	Annual report on number of children by insurance (ACS) American Community Survey.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Medicaid • American Academy of Pediatrics (AAP) Chapter • Alaska Tribal Health Pediatrics and Family Medicine • Children's Health Insurance Program (CHIP) • Kaiser Permanente • State of Alaska, Division of Health Care Services

Objective #8: Reduce the percentage of the population without health insurance

Target: 11.3%

Strategy 1 Improve insurance coverage for Alaskans who have financial barriers to care

Action 1	<p>Increase health insurance enrollment of children in Alaska through <i>Denali KidCare</i>/Medicaid coverage for children from birth through age 18 and Pregnant Women who meet income eligibility requirements.</p> <p>This is an early intervention action related to potential prevention of child maltreatment as it would allow for children aged 0-5 to come into contact with mandatory reporters and would increase access to healthcare for children.</p>
Measure	# of children insured in Alaska.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance • Alaska Children’s Trust • Anchorage Project Access
Action 2	<p>Examine further the population who is not currently insured to help better understand this population and determine further actions and develop analysis report.</p> <p>Next step: Determine actions as appropriate, based on analysis from Division of Insurance</p> <p>The analysis report will look at publicly available data such as ACS and other data sources to determine what areas in AK have largest population without health insurance coverage, income level, language, other details</p>
Measure	Completion of analysis report as reported by Department of Commerce, Division of Insurance.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Commerce, Community, and Economic Development, Division of Insurance • Alaska Children’s Trust • Anchorage Project Access

Strategy 2 Expand and/or increase health insurance enrollment outreach and support programs

Action 1	<p>Increased capacity and resources for Federally qualified health centers (FQHCs), public and private non-profit health care organizations that receive federal funding under Section 330 of the Public Health Service Act that deliver comprehensive care to uninsured, underinsured, and vulnerable patients regardless of ability to pay in high need communities.</p>
Measure	# of total patients served in FQHCs based on the UDS and/or annual FQHC reports.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Federally Qualified Health Centers (FQHCs) • State of Alaska, Division of Public Health, Section of Rural and Community Health Systems, Office of Healthcare Access • Anchorage Project Access • Alaska Primary Care Association
Action 2	<p>Implement value-based insurance design that promotes high-quality benefits.</p>
Measure	Implementation of value-based plan design provisions across insurance plans as reported by AK Healthcare Transformation Project.
Timeframe	2020-2030

Strategy 2 **Expand and/or increase health insurance enrollment outreach and support programs**

Partners

- AK Healthcare Transformation Project
- State of Alaska, Division of Retirement and Benefits
- State of Alaska, Division of Insurance

Objective #9: Increase the percentage of children (students in grades K-8) who meet criteria for healthy weight

Target: 66%

Strategy 1 Support mothers and providers to encourage breastfeeding

Action 1	Implement interventions supportive of evidence-based (EB) and best practices in breastfeeding recognized for improving maternity care practices in birthing facilities
Measure	CDC's Maternity Practices in Infant Nutrition and Care (mPINC) survey.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women's, Children's and Family Health, Perinatal Health Unit • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Alaska Breastfeeding Initiative (CDPHP and WCFH) • Tribal Maternal Health Services
Action 2	Implement home visiting programs (e.g., Nurse Family Partnership) with breastfeeding components.
Measure	Number of clients served annually (NFP program files).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women's, Children's and Family Health
Action 3	Implement the WIC breastfeeding peer counselor program.
Measure	Program participation, breastfeeding initiation and duration, # of peer counselors (based on PRAMS and State of Alaska, Woman's Infants and Children Management Information System, SOA WIC MIS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance, Alaska Breastfeeding Initiative, Women's, Infants, and Children program
Action 4	Promote/implement Breastfeeding Welcomed Here statewide recognition program for Early Childhood Care providers.
Measure	Breastfeeding Welcomed Here program records
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Assistance, Alaska Breastfeeding Initiative, Women's, Infants, and Children program • Nurse Family Partnership • Alaska childcare providers

Conduct a public education campaign to promote nutrition and physical activity among youth

Strategy 2

Action 1	Use the tactics of an evidence informed health communication and social marketing campaign that include mass media and health-related product distribution in the design of the Play Every Day campaign that includes both reducing sugary drink intake and physical activity promotion.
Measure	Program files document the steps of an evidence informed campaign design.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Alaska Native Tribal Health Consortium
Action 2	Implement the Play Every Day health communication and social marketing campaign.
Measure	Program files, media placement affidavits and social media reports.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Alaska Native Tribal Health Consortium
Action 3	Provide financial resources and professional development required to support low-cost/free after-school physical activity opportunities (e.g., the Healthy Futures Challenge).
Measure	Program records: Number of schools and number of students participating in Healthy Futures Challenge each challenge period; number of trainings and number of training attendees for trainings (school staff and after school staff; trainings on increasing physical activity).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Alaska Native Tribal Health Consortium • Alaska School Activities Association

Strategy 3 Implement school physical activity and nutrition policies and standards

Action 1	Ensure State of Alaska model Wellness Policy for school boards is continuously revised to include the emerging and most current recommended policies around Comprehensive School Physical Activity Programs (CSPAP) and nutrition standards.
Measure	Program files. Up to date Gold Standard wellness policy maintained and shared with Association of Alaska School Boards. Updates reflect emerging and current CSPAP recommendations and nutrition standards.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program
Action 2	Provide training and technical assistance to school personnel on the State of Alaska model Wellness Policy and Comprehensive School Physical Activity Programs (CSPAP) and nutrition standards.
Measure	Program files. Number of trainings offered and attendance records.
Timeframe	2020-2030

Strategy 3 Implement school physical activity and nutrition policies and standards

Partners

- State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program
- UAA

Objective #10: Increase the vaccination coverage level of 4 doses of diphtheria-tetanus-acellular pertussis (DTaP) vaccine among children by age 2 years

Target: 90%

Strategy 1 Increase use of client reminder and recall systems

Action 1	The State of Alaska DHSS Division of Public Health Section of Epidemiology Immunization Program, with the DHSS Public Information Office develops immunization reminder/recall postcards for healthcare provider offices and conducts reminder/recall on behalf of providers who receive state-supplied vaccine.
Measure	Number of providers who request that the Immunization Program conduct reminder/recall on their behalf.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Department of Health and Social Services, Public Information Office • Providers who receive state-supplied vaccine • Tribal health Organizations • State of Alaska, Division of Public Health, Section of Public Health Nursing
Action 2	Evaluate the success of the reminder/recall for providers. The Immunization Program will use the Reminder/Recall Success Report in VacTrAK to analyze the number of patients who received a vaccination after the reminder/recall.
Measure	Reminder/Recall Success Report developed by State of Alaska, Division of Public Health, Section of Epidemiology.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Department of Health and Social Services, Public Information Office • Providers who receive state-supplied vaccine • Tribal health organizations • State of Alaska, Division of Public Health, Section of Public Health Nursing

Strategy 2 Improve data quality in Alaska's Immunization Information System

Action 1	Assess data quality of the VacTrAK system of the State of Alaska, Division of Public Health Section of Epidemiology, Immunization Program.
Measure	2020 and 2021 Immunization Information System Annual Report (IISAR) developed by State of Alaska, Division of Public Health, Section of Epidemiology.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Department of Health and Social Services, Information Technology Office • VacTrAK vendor (STC)
Action 2	Ensure that 25% of providers receiving the VFC vaccine participate in IQIP visits (Immunization Quality Improvement For Providers) on an annual basis per the Alaska Immunization Program's Cooperative Agreement. During these visits, providers are encouraged to keep patient records up-to-date and deactivate patients they no longer see.
Measure	Report on % of providers receiving VFC vaccines participating in IQIP visits.

Strategy 2 Improve data quality in Alaska’s Immunization Information System

Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Tribal health organizations • Anchorage Health Department • Providers who receive Vaccines for Children(VFC) vaccine

Strategy 3 Increase provider reminders

Action 1	Per the Alaska Immunization Program’s Cooperative Agreement, 25% of providers receiving VFC vaccine are required to participate in IQIP (Immunization Quality Improvement For Providers) on an annual basis. One of the required IQIP strategies for providers is to schedule the next immunization visit before the patient leaves the office.
Measure	Number of patient visits during which the provider schedules the next immunization visit before the patient leaves the office.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Tribal health organizations • Anchorage Health Department • Providers who receive Vaccines For Children (VFC) vaccine

Strategy 4 Support and promote collaboration around immunizations in communities to build capacity, drive local efforts, and protect Alaskans

Action 1	Supporting local efforts by utilizing state and local data.
Measure	# of community events or # of partners at: meetings, coalitions that have an immunization component as reported to Lead: State of Alaska, Division of Public Health, Section of Epidemiology by partners.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • Alaska Native Tribal Health Consortium • Local Tribal and Community partners
Action 2	Build community capacity and leadership to effectively respond to outbreaks.
Measure	<ul style="list-style-type: none"> • # partners at Point of Dispensing (POD) events/preparedness activities. • # of communities that have PODs, coverage rate Immunization prior to and post POD event as reported by State of Alaska, Division of Public Health, Section of Public Health Nursing to State of Alaska, Division of Public Health, Section of Epidemiology.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Alaska Native Tribal Health Consortium, Tribal EpiCenter • Alaska Pharmacists Association • Local Tribal and Community partners

Objective #11: Reduce the incidence rate of gonorrhea per 100,000 population

Target: 199 per 100,000

Strategy 1 Increase testing for Sexually Transmitted Infections (STIs) - Detection

Action 1	Increase extra genital testing in Alaska.
Measure	Use State Public Health Lab (SPHL) data to measure extra-genital specimens submitted to the lab annually.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Military Health Coordinator at Alaska Bases • ANTHC I Want to Know (IWTK) Program • UAA Student Health and Counseling Center • State of Alaska, Division of Public Health, Laboratories
Action 2	Test for gonorrhea resistance - Gonococcal Isolate Surveillance Project (GISP).
Measure	GISP CDC has work plan in place for measurements at mid-year and end of year data - State of Alaska DHSS Division of Public Health Section of Epidemiology.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Laboratories • Southcentral Foundation • Anchorage Health Department
Action 3	Increased promotion of CDC treatment guidelines regarding partner notification to healthcare providers.
Measure	# of educational publications targeted to providers to promote increased partner notification. Providers will report on partner notification activities.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Southcentral Foundation • Military Health Coordinators on Alaska Bases • AK Native Regional Health Corporations • Planned Parenthood of the Great Northwest and Hawaii
Action 4	Promote national screening standards including Universal Screenings for female adolescents and young adults under 25 years of age which are:
	<ul style="list-style-type: none"> • Annual chlamydia and gonorrhea screenings should be done for women under age 25 as well as older women who are at risk. • Screen all pregnant women for HIV, syphilis and Hepatitis B at the first prenatal visit. • Screen all pregnant women under age 25 for chlamydia and gonorrhea and aged 25 and older if at increased risk.
Measure	Responses to YRBS Q86: <i>During the past 12 months, have you been tested for a Sexually Transmitted Infections (STI) other than HIV, such as chlamydia or gonorrhea?</i>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women's, Children's, and Family Health • State of Alaska, Division of Public Health, Section of Public Health Nursing • Alaska Native Tribal Health Consortium, HIV/EIS • Tribal health organizations • Alaska Pediatric Partnership

Strategy 1 Increase testing for Sexually Transmitted Infections (STIs) - Detection

Action 5	Increase collaborative efforts between the State of Alaska DHSS Division of Public Health Laboratory and the Department of Corrections on universal screening of people within the corrections system for HIV, Hepatitis, and STIs.
Measure	Increased testing from Department of Corrections through the State of Alaska DHSS Division of Public Health Laboratory as reported by the laboratory to the Section of Epidemiology.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Women’s Children Family Health • Alaska Native Tribal Health Consortium, HIV/EIS • Tribal Health Organizations • State of Alaska, Department of Corrections

Strategy 2 Increase CDC recommended treatment regimens of gonorrhea cases

Action 1	Decrease the time from laboratory confirmed diagnosis to treatment to five days or less.
Measure	Time from diagnosis to treatment over a 12 month period.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Military Health Coordinator on Alaska Bases • Alaska Native Health Corporations • UAA Student Health and Counseling Center
Action 2	Increased promotion of CDC treatment guidelines regarding partner notification to healthcare providers.
Measure	Number of publications and training events conducted related to partner notification guidelines and best practices.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Military Health Coordinators on Alaska Bases • Alaska Native Health Corporations • Private providers • UAA Student Health and Counseling Center
Action 3	Promote expedited partner therapy among providers to reduce incidence.
Measure	Publications produced, training events conducted as reported by partner program records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Epidemiology • State of Alaska, Division of Public Health, Section of Public Health Nursing • Military • Alaska Native Health Corporations • Private providers

Strategy 3 Promote prevention methods of gonorrhea

Action 1	Promote comprehensive sexual health education including the normalization of STI prevention, condom use, STI testing, treatment and partner communication.
Measure	<p>School Health Profiles Report:</p> <ul style="list-style-type: none"> • Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 6, 7, or 8 during the current school year AND • Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 9, 10, 11, or 12 during the current school year <ul style="list-style-type: none"> ○ How to create and sustain healthy and respectful relationships ○ How HIV and other STIs are transmitted ○ Health consequences of HIV, other STIs, and pregnancy ○ How to access valid and reliable health information, products, and services related to HIV, other STIs, and pregnancy ○ Communication and negotiation skills related to eliminating or reducing risk for HIV, other STIs, and pregnancy ○ Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STIs, and pregnancy ○ The importance of using condoms consistently and correctly ○ How to obtain condoms ○ How to correctly use a condom (practice) ○ The importance of using a condom at the same time as another form of contraception to prevent both STIs and pregnancy ○ The importance of limiting the number of sexual partners ○ Preventive care (such as screenings and immunizations) that is necessary to maintain reproductive and sexual health
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion • Alaska Native Tribal Health Consortium • Planned Parenthood • Additional non-traditional partners • Alaska Public Health Association • UAA Student Health and Counseling Center
Action 2	Increase Protective factors amongst all youth.
	<ul style="list-style-type: none"> • Positive connection to other positive adults, Social/emotional competence and self-regulation skills. • Positive school climate and school connectedness, Engaged in afterschool programs and positive meaningful activities.
Measure	<p>Supportive Adults (YRBS Q93) Besides your parents, how many adults would you feel comfortable seeking help from if you had an important question affecting your life.</p> <p>School Climate and Connectedness survey Caring adults and Social and Emotional Learning broken down from grades 3-5 and 6-12. Value in looking at both ages.</p> <p><i>See Objective 17 Protective Factors (pg 53) for more information.</i></p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion • Alaska Association of School Boards Initiative for Community Engagement • Department of Education and Early Development • State of Alaska, Division of Public Health (See Objective 17 List)

Objective #12: Reduce the unintentional injury mortality rate per 100,000 population

Target: 56.5%

Bring partners together and use multiple approaches to reduce all injuries and deaths from falls by older Alaskans

Strategy 1

Action 1	<p>Increase training and provision of strength and balance activities for elders at the community level.</p> <p><i>Participating community level organizations may include but not limited to the following:</i></p> <ul style="list-style-type: none"> • Senior Center Activity Programs • Assisted living facilities around the state • Tribal Injury Prevention programs • YMCA • Tribal Injury Prevention Cooperative Agreement Program (TIPCAP) recipients • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion • Statewide Independent Living Council • AARP
Measure	Annual program/grant and activity and/or training records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium, Health Promotion/Disease Prevention Program • Alaska Native Tribal Health Consortium, Injury Prevention Program • State of Alaska Division of Senior and Disabilities Services
Action 2	<p>Increase access to fall prevention training for target audiences which may include but are not limited to the following:</p> <ul style="list-style-type: none"> • Medical Staff • Community Health Aides and Practitioners • Caregivers (Elders in Facilities) • Community Caregivers (Elders or Families) • Direct Providers
Measure	<ul style="list-style-type: none"> • Center for Human Development training records. • Alaska Native Tribal Health Consortium training records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium • State of Alaska, Division of Senior and Disabilities Services • UAA-Center for Human Development • Alaska Pharmacists Association

Strategy 2 Promote environmental strategies that change community conditions to reduce all injuries and deaths that involve problematic alcohol and other substance/drug use

Action 1	<p>Alaska’s Prescription Drug Monitoring Program (PDMP) began in 2008 and is housed with the Board of Pharmacy under the Department of Commerce, Community, and Economic Development (DCCED) – Corporations, Business, and Professional Licensing (CBPL) section. Mandatory registration, reviewing, and reporting requirements went into effect in July 2017. The PDMP is established in the Board of Pharmacy under AS 17.30.200 to contain data on each prescription of a schedule II, III, or IV controlled substance dispensed in the state. Funding for the PDMP comes from several sources, including the Office of Substance Misuse and Addiction Prevention in the Department of Health and Social Services, Division of Public Health through a federal grant for the purposes of PDMP education and providing strategies to increase provider adherence.</p>
	<p>Environmentally control the drug supply in the community through the Prescription Drug Monitoring Program (PDMP) by:</p>
	<ul style="list-style-type: none"> • providing prescribers and pharmacists with a detailed and current controlled substance dispensing history of their patients; • assisting practitioners in prescribing clinically appropriate controlled substance medications; • assisting with investigative efforts to identify and reduce drug diversion; and • reduce the prescribing of inappropriate controlled substance medications.
	<p><i>Additional partners may include but are not limited to:</i></p>
	<ul style="list-style-type: none"> • Boards for pharmacy, dentistry, medicine, nursing, optometry, veterinary.
Measure	<ul style="list-style-type: none"> • Bi-annual reporting to the Bureau of Justice Assistance. • Reporting to the CDC for the Overdose Data to Action grant thru 2023.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • State of Alaska, Department of Commerce, Community, and Economic Development • Office of Substance Misuse and Addiction Prevention (OSMAP) • 4A's
Action 2	<p>Reduce access to prescription medication through distribution of safe disposal materials and locking medication safes. Distribution occurring through ANTHC IknowMine website: https://www.iknowmine.org/provider-materials/safe-medicine.</p>
Measure	Annual report on the number of disposal containers and medication safes distributed.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium, Substance Misuse Prevention Program • OSMAP and 4A's
Action 3	<p>Reduce poisoning deaths from opioid overdoses by increasing access to and distribution of Naloxone kits and training on their use to communities throughout Alaska. Kits are currently available through State of Alaska’s Project Hope (http://dhss.alaska.gov/dph/Director/Pages/opioids/narcan.aspx) and at medical facilities around the state, along with instruction on use. Increasing access to Fentanyl test strips so users can check for Fentanyl content in their drugs and reduce the risk of overdose.</p>
Measure	Annual reports from key partners on the number of disposal containers and medication safes distributed.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention, Project Hope • Alaska Native Tribal Health Consortium, Substance Misuse Prevention Initiative • OSMAP and 4A's

Strategy 3 Promote best practices for reducing unintentional injuries and injury related deaths by improving coordinated data collection, analysis and dissemination

Action 1	<p>Establish a data work group to prioritize injury topic focus</p> <p><i>In addition to key partners, the following is a list of recommended work group members:</i></p> <ul style="list-style-type: none"> • State of Alaska, Division of Public Health (ATR and HAVRS) • State of Alaska, Division of Behavioral Health • University of Alaska Anchorage • Center for Safe Alaskans • Tribal Health Organization IP programs • CDC (WISQARS)
Measure	Work group report to Healthy Alaskans core team annually.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium, Injury Prevention Program • Alaska Statewide Violence and Injury Prevention Plan (ASVIPP) • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion
Action 2	Data work group will create a centralized location to access links and contacts for all available injury data.
Measure	Work group report to HA core team annually.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium, Injury Prevention Program • Alaska Statewide Violence and Injury Prevention Plan (ASVIPP) • State of Alaska, Division of Public Health, Section of Chronic Disease and Health Promotion

Strategy 4 Promote best practices for reducing transportation related injuries and deaths by improving coordinated data collection, analysis and dissemination

Action 1	<p>Expand linkage of Alaska Trauma Registry and Department of Transportation Crash reports beyond Anchorage, and to include Health Facilities Data Reporting (HFDR) program data.</p> <ul style="list-style-type: none"> • Organizations utilize data for resource prioritization, intervention design, implementation and evaluation.
Measure	Annual measurement will include count of years of data and sources of data that are linked, then tracking success of programs utilizing the linked data.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Center for Safe Alaskans • Alaska Traffic Records Coordinating Committee • RKDS Consulting • University of Alaska Fairbanks

Strategy 4 Promote best practices for reducing transportation related injuries and deaths by improving coordinated data collection, analysis and dissemination

Action 2	<p>Promote and practice utilization of a shared risk and protective factor approach to reducing transportation related injuries based on Strategies to Address Shared Risk and Protective Factors for Driver Safety (Safe States Alliance. (2019)). <i>Resource Document: Strategies to Address Shared Risk and Protective Factors for Driver Safety. Atlanta, GA: Safe States Alliance).</i></p> <p>The factors listed below are also included:</p> <ul style="list-style-type: none"> • Utilize mindfulness training to reduce aggressive driving and speeding (Safe States Alliance, p. 24 and 32). Mindfulness encourages emotion-regulation and involves acceptance of, but not reaction to situations. This is also a protective factor for multiple other objectives and health conditions. • Design and implement campaigns focusing on changing group norms around distracted driving, seatbelt use and impaired driving. (Safe States Alliance, p 34, 36 and 62). In addition to the norms of safe behavior, these protective factors include promoting speaking up in unsafe situations and caring for and connection to others, which are protective factors for multiple other Healthy Alaskans’ objectives and health conditions.
Measure	<ul style="list-style-type: none"> • Tracking changes in the self-regulation YRBS question. (2019 was the first year it was asked) • Alternative measure: Use and tracking of results of the self-regulation question in programmatic evaluations. • Include social norms questions in the annual statewide Alaska Driver Survey conducted by Center for Safe Alaskans on behalf of the Alaska Highway Safety Office.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Center for Safe Alaskans • Alaska State Violence and Injury Prevention Partners • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion (CDPDP), Injury Prevention Program
Action 3	<p>Promote collaborative implementation of the strategies in the existing 2018-2022 Alaska Highway Safety Strategic Plan (SHSP). http://dot.alaska.gov/stwdplng/shsp/shsp_plan.shtml Participate in planning and implementation of future SHSPs.</p>
Measure	Use same measures in the Safe Highway Strategic Plan, which are updated annually.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • Alaska Highway Safety Office • Center for Safe Alaskans • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Injury Prevention Program
Action 4	<p>Promote public practice of safe boating behaviors and increase preparedness per the USCG and National Boating Safety Advisory Council. Focus areas of the National Recreational Boating Safety Program 2017-2021 Strategic Plan include:</p> <ul style="list-style-type: none"> • Improve and expand recreational boating education, training, and outreach (e.g. Kids Don’t Float and Cold Water Survival) • Update, leverage, and enforce policies, regulations, and standards; and • Improve upon and expand recreational boating data collection.
Measure	Boating Accident Reporting Database (BARD); Trauma Registry; Vital Stats for Drowning Fatalities; Alaska Drowning Database
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • U.S. Coast Guard • State of Alaska, Department of Natural Resources, Division of Parks and Outdoor Recreation, Office of Boating Safety • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Injury Prevention Program AMSEA

Objective #13: 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

Target: 31%

Provide programs, services and opportunities that support all young people in developing a sense of competence, usefulness, belonging, and empowerment by increasing protective factors and reducing risk factors associated with adolescent depression and suicide.

Strategy 1

Action 1	Collaborate prevention efforts with state, Tribal, regional and community organizations utilizing the shared risk and protective factors approach to reduce adolescent depression and suicide.
Measure	Measure is in development. There is a work group that just resumed that is focusing on collaboration of partners for the purpose of utilizing the “Shared Risk and Protective Factors” framework. Almost 40 people attended this, and want to work toward collaborative prevention efforts, and this is the tool that supports that work.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Center for Safe Alaskans • State of Alaska Department of Health and Social Services Division of Public Health, Section of Chronic Disease Prevention and Health Promotion & Office of Substance Misuse & Addiction Prevention • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council • Alaska Mental Health Board • Safe Alaskans • Statewide and regional non-profits and Tribal organizations • Partnership with the Alaska Association of School Board and the Department of Education and Early Development
Action 2	Increase the protective factors impacting adolescent depression and suicide such as: <ul style="list-style-type: none"> • Supportive adults and connections (LHI 17) • Youth feeling valued and mattering to others (LHI 18) • Social, emotional competence and self-regulation skills • Attending a school with a positive climate (safe, supportive and encouraging) • Participating in quality after-school activities and structured meaningful activities • Sense of cultural identity and connection • Regular physical activity (LHI 16)
Measure	Biannual measurement using YRBS. <ul style="list-style-type: none"> • Percent of 9-12 grade students who: have 3 or more supportive adults (#93); feel like they matter to others (#96); are able to control their emotions and stay calm when needed (#98, 99); have caring teachers that give a lot of encouragement (#95); participate in out of school activities and clubs(#97). • Annual measurement using School Climate and Connectedness Survey (SCCS) – although this includes 6-8th graders. • Percent of 6-12 grade students who report social emotional learning skills (SCCS). • Percent of 6-12 grade students who have a strong sense of belonging to their culture (SCCS).
Timeframe	2020-2030

Provide programs, services and opportunities that support all young people in developing a sense of competence, usefulness, belonging, and empowerment by increasing protective factors and reducing risk factors associated with adolescent depression and suicide.

Strategy 1

Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Public Health, Section of Chronic Disease Prevention Health Promotion & Office of Substance Misuse and Addiction Prevention • State of Alaska Department of Health and Social Services Division of Behavioral Health Prevention and Early Intervention • Alaska Children’s Trust/Alaska Afterschool Network • Alaska Department of Education and Early Development • Alaska Mental Health Trust Authority • Association of Alaska School Boards/ Initiative for Community Engagement • Center for Safe Alaskans/Anchorage Youth Development Coalition • Rural Alaska Community Action Program/ Resource Basket • Regional non-profits and Tribal organizations
Action 3	<p>Reduce the risk factors associated with adolescent depression and suicide</p> <ul style="list-style-type: none"> • Reduce Adverse Childhood Experiences (ACEs) (See LHI 25) • Easy access to firearms • Use of substances (alcohol and other drugs) • Prior suicide attempts • Exposure to Violence • Excessive Screen Time/Social Media usage
Measure	Percent of adolescents (9-12th grade students) who report: attempted suicide in the past year(YRBS #29); use of alcohol in the past 30 days; access to and being ready to fire a gun within 4 hours (YRBS #18); having experienced forced intercourse or other sexual activities or dating, physical/sexual violence(YRBS #19-22); students who use electronics for something that is not school work for 3 or more hours per day (YRBS #83). (See YRBS for exact verbiage, frequency and time duration).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Public Health, Section of Chronic Disease Prevention Health Promotion & Office of Substance Misuse and Addiction Prevention • State of Alaska Department of Health and Social Services Division of Behavioral Health Prevention and Early Intervention • Alaska Children’s Trust/Alaska Afterschool Network • State of Alaska Department of Education and Early Development • Alaska Mental Health Trust Authority • Association of Alaska School Boards/ Initiative for Community Engagement • Center for Safe Alaskans/Anchorage Youth Development Coalition • Rural Alaska Community Action Program/ Resource Basket • Regional non-profits and Tribal organizations • Division of Vocational Rehab • Office of Children’s Services

Identify adolescents at risk of or experiencing severe depression and immediately connect them to trauma-informed/sensitive screening, treatment, and social support services.

Strategy 2

Action 1	Implement universal screening for suicide risk and depression in all primary, hospital (especially emergency department care), behavioral health, and crisis response settings.
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Identify adolescents at risk of or experiencing severe depression and immediately connect them to trauma-informed/sensitive screening, treatment, and social support services.

Strategy 2

Measure	<ul style="list-style-type: none"> • Increase the number of primary care, hospital, behavioral health and emergency room departments universally screening for suicide risk • A measurement needs to be developed to track this
Timeframe	2023-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Native Tribal Health Consortium • Tribal Health Organizations • Alaska Mental Health Trust Authority • Alaska State Hospital Nursing Association (ASHNA) • Alaska Primary Care Association • Statewide Suicide Prevention Council • Healthcare organizations in the community
Action 2	<p>Encourage all pediatric and primary care practitioners to use trauma sensitive, age and culturally appropriate, evidence based screenings for adolescents eligible for the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program.</p> <ul style="list-style-type: none"> • Comprehensive health screenings, diagnostic services and treatment services, including mental health screenings, are included in the EPSDT program.
Measure	To be determined
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Health Care Services • Alaska Pediatric Physician Association • Alaska Primary Care Associates

Objective #14: Reduce the mean number of days in the past 30 days adults (aged 18 and older) report being mentally unhealthy

Target: 3.5

Strategy 1 Reduce the impact of mental health and substance use disorders through prevention and early intervention at the individual, family, and community level.

Action 1	<p>Promote help-seeking and reduce stigma and barriers to seeking treatment for mental health issues.</p> <ul style="list-style-type: none"> • Maintain and promote the statewide crisis line as a resource available to all Alaskans. • Support a trauma informed and a culturally and Tribal relevant system • Develop and support campaigns to educate about mental health and reduce stigma around help-seeking and mental health treatment. • Provide technical assistance to community wellness coalitions to create and strengthen supportive environments in local communities.
Measure	<ul style="list-style-type: none"> • Increase in the number of contacts received by the Careline. • Increase in number of service participants using outpatient behavioral health services. • Reduce the negative economic impact of alcohol and drug misuse in Alaska.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Health and Social Services Division of Behavioral Health • State of Alaska, Department of Health and Social Services Division of Public Health • Alaska Mental Health Trust Authority • Alaska Native Tribal Health Consortium • Statewide Suicide Prevention Council • Alaska Mental Health Board • Advisory Board on Alcohol and Drug Abuse
Action 2	<p>Support the integration of primary and behavioral healthcare systems by increasing the number of primary care providers who have adopted policies and procedures related to early access of care. Examples of this include Screening, Brief Intervention, and Referral to Treatment (SBIRT), routine screening for suicide risk, and utilization of the ASAM level of care instrument in all primary, hospital (especially emergency departments), behavioral health, and crisis response settings.</p>
Measure	<ul style="list-style-type: none"> • Increase the # of sites that have adopted SBIRT. • Increase the # of sites incorporating policy and procedures related to early access of care, and universal screening for suicide risk (2022-2030). • Percentage of behavioral health/substance use disorder providers trained in the use of level of care/service intensity tools.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium • Tribal Health Directors and Tribal Behavioral Health Directors • Alaska Native Health Board • Southcentral Foundation • State of Alaska Department of Health and Social Services Division of Behavioral Health • State of Alaska Department of Health and Social Services Division of Public Health, Office of Substance Misuse and Addiction Prevention • Emergency Departments at statewide hospitals • Alaska Mental Health Trust Authority • Alaska State Hospital and Nursing Home Association • Alaska Behavioral Health Association • Alaska Training Cooperative • All Alaska Pediatric Partnership • American Academy of Pediatrics

Strategy 1 Reduce the impact of mental health and substance use disorders through prevention and early intervention at the individual, family, and community level.

Action 3	Increase the number of workplaces trained in effective tools and resources for addressing substance misuse in workplace.
Measure	# of employer Toolkit trainings held.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Public Health Office of Substance Misuse and Addiction Prevention • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Mental Health Trust Authority
Action 4	Increase access to continuing education opportunities for healthcare, behavioral health, and public health workforce, i.e. Project ECHO, DEED eLearning modules, mental health first aid, Behavioral Health Aides and Peer Support Certification.
Measure	<ul style="list-style-type: none"> • # of project echo provider trainings • # of school staff trained – Statewide Suicide Prevention Council • # MH first aid trainings – Statewide Suicide prevention Council • # of BHA certifications • # of Peer support certifications (2022-2030)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium (project ECHO) • Department of Education and Early Development (eLearning modules) • Alaska Training Cooperative (Mental Health First Aid) • State of Alaska Department of Health and Social Services Division of Public Health, Office of Substance Misuse and Addiction Prevention • UAA • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Mental Health Trust Authority • Association of Alaska Schoolboards • Statewide Suicide Prevention Council

Strategy 2 **Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.**

Action 1	<p>Expand mental health and substance use disorder treatment services, as well as community-based recovery supports.</p> <p>This includes:</p> <ul style="list-style-type: none"> • Increase access to community-based crisis intervention and stabilization services; • Increase access to peer support services for youth, families and adults; • Expand access to medication assisted treatment and withdrawal management services, particularly ambulatory withdrawal management; • Improve linkages to care for mental health, substance use disorder treatment, and community supports; • Expand the use of Assertive Community Treatment in communities with high utilizers of emergency department and inpatient hospital services; • Expand culturally appropriate wrap-around behavioral health treatment and rehabilitative services where the client is (in vivo) as well as clinic settings; • Increase the coordination of services with Tribal health providers; • Increased use of telemedicine and use of digital and mobile technologies in delivery of mental health and substance use disorder services; and • Include criminal justice reentry and transition programs to the list of mental health and substance use disorder treatment services.
Measure	<ul style="list-style-type: none"> • Increase the # of outpatient service providers in each region offering 1115 MH/SUD services. • Other OPTUM/ASO measures that will be available.
Timeframe	2021-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health • Tribal Health Organizations • Alaska Mental Health Trust Authority • Healthcare organizations in the community • Advisory Board on Alcohol and Drug Abuse • Alaska Mental Health Board

Objective #15: Reduce the percentage of 3-year-olds who drink any sugary drinks on a given day

Target: 25%

Strategy 1 Conduct a public education campaign to promote nutrition (including components targeting parents of children 0-5)

Action 1	Use the tactics of an evidence-informed health communication and social marketing campaign that include mass media and health-related product distribution in the design of the Play Every Day campaign.
Measure	Program files document the steps of an evidence informed campaign design.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Alaska Native Tribal Health Consortium • ANTHC DEHE
Action 2	Play Every Day mass media broadcast.
Measure	Program files, media placement affidavits and social media reports.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program

Strategy 2 Implement Early Care and Education (ECE) physical activity and nutrition policies and standards

Action 1	Implement and integrate PAN standards into statewide early care and education (ECE) systems such as quality rating improvement systems, state professional development systems, licensing, statewide technical assistance networks, state subsidy programs, statewide recognition programs, and others outlined in the CDC ECE opportunities framework: https://www.cdc.gov/obesity/downloads/spectrum-of-opportunities-obesity-prevention.pdf
Measure	Program files, number of new or enhanced system-level supports in state ECE Spectrum Areas.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program • Child Care Resource and Referral Network
Action 2	Increase the number of ECE sites such as the Child and Adult Care Food Program (CACFP) and Go Nutrition and Physical Activity Self-Assessment for Child Care (NAPSACC)
Measure	Program files, number of technical assistance providers trained/engaged in system level supports.
Timeframe	2020-2030

Strategy 2 **Implement Early Care and Education (ECE) physical activity and nutrition policies and standards**

Partners

- State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program
 - Bristol Bay Native Association
 - Department of Education and Early Development
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Physical Activity

Objective #16: Increase the percentage of adolescents (high school students in grades 9-12) who meet the Physical Activity Guidelines for Americans (2008 US DHHS Physical Activity Guidelines: adolescents who do at least 60 minutes of physical activity a day, every day of the week)

Target: 22%

Strategy 1 Conduct a public education campaign to promote physical activity

Action 1	Use the tactics of an evidence-informed health communication and social marketing campaign that include mass media and health-related product distribution in the design of the Play Every Day campaign.
Measure	Program files document the steps of an evidence informed campaign design.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program Alaska Native Tribal Health Consortium
Action 2	Implement the Play Every Day health communication and social marketing campaign.
Measure	Program files, media placement affidavits and social media reports.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program Alaska Native Tribal Health Consortium
Action 3	Provide financial resources and professional development required to support low-cost/free after-school physical activity opportunities (e.g., the Healthy Futures Challenge).
Measure	Program records: Number of schools and number of students participating in Healthy Futures Challenge each challenge period; number of trainings and number of training attendees for trainings (school staff and after school staff; trainings on increasing physical activity)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Unit Alaska Native Tribal Health Consortium SHAPE Alaska Alaska School Activities Association

Strategy 2 Implement school physical activity policies and standards

Action 1	Ensure State of Alaska model Wellness Policy for school boards is continuously revised to include the emerging and most the current recommended policies around Comprehensive School Physical Activity Programs (CSPAP).
Measure	Program files. Up to date Gold Standard wellness policy maintained and shared with Association of Alaska School Boards. Updates reflect emerging and current CSPAP recommendations.

Strategy 2 Implement school physical activity policies and standards

Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program
Action 2	Provide training and technical assistance to school personnel on the State of Alaska model Wellness Policy and Comprehensive School Physical Activity Programs (CSPAP).
Measure	Program files. Number of trainings offered and attendance records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Physical Activity and Nutrition Program State of Alaska, Department of Education and Early Development Local school districts SHAPE Alaska
Strategy 3 Encourage older adults to engage in regular physical activity	
Action 1	Increase proportion of Older Adults (OAs) who engage in walking or other forms of moderate to vigorous physical activity.
Measure	BRFSS Physical Activity (PA) (total weekly minutes of moderate-level PA), for adults 65 years and older.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Division of Senior & Disabilities Service (DSDS) UAA ANTHC Youth and Elders programs SOA Injury Prevention ANTHC Injury Prevention
Action 2	Increase adoption of evidence-based PA programs within communities (Walk with Ease; Matter Of Balance MOB).
Measure	<p>A map and listing of partners and programs for falls prevention in Alaska can be found at:</p> <p>https://www.ncoa.org/ncoa-map/?location=Alaska&activity=aging-mastery-program-site,cdsme-program-contacts,falls_prevention_partner,benefits-enrollment-center,economic-security-partner,hunger-initiative-partner,senior-employment-partner,nisc-accredited-senior-center,nisc-senior-center-member</p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Division of Senior & Disabilities Services (DSDS) UAA



Protective Factors

Objective #17: Increase the percentage of adolescents (high school students in grades 9-12) with three or more adults (besides their parent(s)) who they feel comfortable seeking help from

Target: 50%

Strategy 1 **Increase student’s experience of positive (safe, supportive and encouraging) school climates and supportive adult relationships**

<p>Action 1</p>	<p>Support school efforts to increase positive climate through:</p> <ul style="list-style-type: none"> • Focused efforts to build culturally-responsive supportive relationships with students, families; • High expectations for student academics, behavior and responsibility; • Use of proactive classroom management strategies to maintain a positive atmosphere; • Physical and emotional safety, fair and respectful treatment of all students; • Consistent acknowledgement of all students and recognition for good work; • Interactive teaching and cooperative learning strategies; • Student voice in school activities and classroom management; • Opportunities to learn about the history and culture of people who live in the community; and • Consistent professional learning for school staff to build school climate and trauma-engaged whole-school practices.
<p>Measure</p>	<p>Biannual measurement YRBS. Annual measurement using two indicators, SCCS.</p> <p>Current Measure:</p> <ul style="list-style-type: none"> • Percent of 9-12 grade students who have caring teachers that give a lot of encouragement (YRBS). <p>Alternative Measure:</p> <ul style="list-style-type: none"> • Percent of 6-12 grade students who believe their school has a respectful climate and is a welcoming place for families like mine (SCCS, two indicators).
<p>Timeframe</p>	<p>2020-2030</p>
<p>Partners</p>	<ul style="list-style-type: none"> • Association of Alaska School Boards (AASB) • State of Alaska, Department of Education and Early Development • Alaska Staff Development Network (ASDN) • Local School Districts
<p>Action 2</p>	<p>Create the expectation that all Alaska schools will have positive, safe, supportive and encouraging school climates through standardized assessment processes.</p> <ul style="list-style-type: none"> • Maintain and enhance tools to measure school climate (e.g. School Climate and Connectedness Survey, Youth Risk Behavior Survey, School Health Profiles etc.).

Strategy 1 Increase student’s experience of positive (safe, supportive and encouraging) school climates and supportive adult relationships

Measure	Annual measurement SCCS. Biannual measurement Youth Risk Behavior Survey, Biannual School Health Profiles. Measure: <ul style="list-style-type: none"> Percent of 9-12 grade students who have caring teachers that give a lot of encouragement (YRBS). Additional Measures: <ul style="list-style-type: none"> Percent of 6-12 grade students who believe their school has a respectful climate (SCCS). Percent of 6-12 grade students who believe their schools a welcoming place for families like mine (SCCS). Percent of schools with a School Improvement Plan that includes objectives related to social and emotional climate, family and community engagement. (School Health Profiles) SHP. Percent of schools that identify “safe spaces” for LGBTQ youth to receive support (SHP).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Association of Alaska School Boards State of Alaska, Department of Education and Early Development

Strategy 2 Increase the percent of children and adolescents participating in quality after-school activities and programming with supportive adults

Action 1	Increase access and capacity of quality after school programs and structured meaningful activities that are supervised by a supportive adult. Quality programs have: <ul style="list-style-type: none"> Trained supportive staff; A friendly and respectful climate; Intentional skill-building instruction (sequenced, active, focused and explicit); Youth centered practices (youth voice and empowerment); Emphasizes continuous improvement; and Focused efforts to recruit and retain staff and students.
Measure	Biannual measurement YRBS and annual measurement by SCCS. <i>Program-level measures available and encouraged for consistent assessment and evaluation of local efforts.</i> Measure: <ul style="list-style-type: none"> Percent of 9-12th grade students who participate in organized afterschool, evening or weekend activities at least twice a week (YRBS). Alternative Measure: <ul style="list-style-type: none"> Percent of 6-12th grade students who participate in organized afterschool, evening or weekend activities at least two hours a week (SCCS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Children’s Trust, Alaska Afterschool Network State of Alaska, Department of Education and Early Development Association of Alaska School Boards, Initiative for Community Engagement (ICE) Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC) State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention RurAL CAP, Resource Basket
Action 2	Develop consistent measures to evaluate the quality of afterschool programs across diverse settings.
Measure	Measures developed and implemented in afterschool programs.
Timeframe	2020-2030

Strategy 2 Increase the percent of children and adolescents participating in quality after-school activities and programming with supportive adults

- Partners**
- Alaska Afterschool Network
 - Suicide Prevention Council

Strategy 3 Increase adolescent’s experience of positive, supportive, encouraging adults in the community

- Action 1** Engage and educate community adults about ways to interact with youth that promote positive youth development, within the cultural context.
- Maintain and expand community initiatives that teach and promote strength-based, culturally appropriate approaches and interactions between all youth-adults.
 - Teach, model and provide trauma-informed opportunities for the practice of culturally responsive social, emotional and self-regulation skills to increase positive communications and supportive relationships. *(See shared protective factor: social emotional competence and self regulation).*
 - Promote social norms and expectations for adults to connect positively with young people in their community.

Measure Biannual measurement YRBS and annual measurement by SCCS. *Program-level measures encouraged for consistent assessment and evaluation of local efforts.*

Measures:

- Percent of adolescents (9-12th grade students) with 3 or more adults (besides their parents) who they feel comfortable seeking help from (YRBS).
- Percent of 9-12 grade students who are able to control their emotions and stay calm when needed (YRBS).

Alternative Measures:

- Percent of 6-12th grade students who report knowing at least one adult (outside of home and school) to talk to, if there was a problem (SCCS).
- Percent of 6-12 grade students who report social emotional learning skills (SCCS).

Timeframe 2020-2030

- Partners**
- Association of Alaska School Boards, Initiative for Community Engagement (ICE)
 - Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC)
 - Alaska Children’s Trust, Alaska Afterschool Network
 - First Alaskans

Action 2 Provide culturally responsive programs, services and opportunities to support all young people in developing a sense of competence, usefulness, belonging and empowerment.

- Increase capacity for evidence-based, formal and informal youth-adult mentoring programs across multiple settings (youth clubs, programs, faith-based groups).
- Increase youth-adult partnerships and community action projects based on youth voice and empowerment best practices *(See shared protective factor: youth mattering to others Objective 18).*
- Increase the number of positive adult role models for children and youth.

Strategy 3 Increase adolescent’s experience of positive, supportive, encouraging adults in the community

Measure	<p>Biannual measurement YRBS and annual measurement by SCCS. <i>Program-level measures encouraged for consistent assessment and evaluation of local efforts.</i></p> <p>Measure:</p> <ul style="list-style-type: none"> Percent of adolescents (9-12th grade students) with 3 or more adults (besides their parents) who they feel comfortable seeking help from (YRBS). <p>Alternative Measure:</p> <ul style="list-style-type: none"> Percent of 6-12th grade students who report knowing at least one adult (outside of home and school) to talk to, if there was a problem (SCCS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Association of Alaska School Boards, Initiative for Community Engagement (ICE) Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC) Alaska Children’s Trust, Alaska Afterschool Network State of Alaska, Department of Education and Early Development State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention Cook Inlet Tribal Council
Action 3	<p>Increase adolescent’s access and connection to adults who are respectful and responsive to youth’s self-identity and their cultural context.</p> <ul style="list-style-type: none"> Promote and provide opportunities for community-based cultural activities and traditions that actively engage youth with supportive adults (<i>see shared protective factor: cultural identity and connection</i>). Promote the implementation of culturally appropriate youth services by caseworkers and social service providers (e.g. Cultural Resources of Alaska Families. Traditional Health and Wellness Guide). Ensure “safe spaces” in schools and the community for LGBTQ youth to receive support services. Ensure “safe spaces” in schools and the community for youth with differing physical, emotional and mental abilities.
Measure	<p>Biannual measurement YRBS, biannual School Health Profiles and annual measurement by SCCS. <i>Program-level measures encouraged for consistent assessment and evaluation of local efforts.</i></p> <p>Measures:</p> <ul style="list-style-type: none"> Percent of adolescents (9-12th grade students) with 3 or more adults (besides their parents) who they feel comfortable seeking help from (YRBS). Percent of 6-12th grade students who report knowing at least one adult (outside of home and school) to talk to, if there was a problem (SCCS). Percent of 6-12 grade students who have a strong sense of belonging to their culture (SCCS). Percent of schools that identify “safe spaces” for LGBTQ youth to receive support (SHP).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> Alaska Native Tribal Health Consortium Association of Alaska School Boards, Initiative for Community Engagement (ICE) State of Alaska, Department of Health and Human Services RurAL CAP Identity, Inc. University of Alaska, Center for Human Development Alaska Mental Health Trust Authority
Action 4	<p>Increase intergenerational connections through participation senior/youth volunteerism and programs that encourage reciprocity among neighbors (numbers of seniors and youth participating in RSVP, RurAL CAP Elder Mentor program, Foster grandparent, Senior Companions, age-in-place village movement).</p>

Strategy 3 **Increase adolescent’s experience of positive, supportive, encouraging adults in the community**

Measure	Numbers of seniors and youth participating in any of these programs: RSVP, RurAL CAP Elder Mentor program, Foster grandparent, Senior Companions, age-in-place village movement.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • RurAL CAP • Department of Commerce, Community, and Economic Development (see ACoA State plan)

Objective #18: Increase the percentage of adolescents (high school students in grades 9-12) who feel like they matter to people in their community

Target: 57%

Increase authentic and diverse student voice, feedback and leadership experiences in school

Strategy 1

Action 1	<p>Support efforts to increase positive school climates (See Objective 17, strategy 1) that emphasize diverse student voice, feedback and leadership in school activities.</p> <ul style="list-style-type: none"> • Support and maintain student advisory boards to improve school climate and positive peer interactions. • Support and maintain student membership on local school board. • Support youth and/or student groups or clubs that focus on helping others in the school and/or community (e.g. peer helpers, cross-age tutoring). • Ensure intentional recruitment to include inherent and acquired diverse representation/participation on advisory committees and boards.
Measure	<p>Annual measurement using three indicators, SCCS.</p> <p>Measures:</p> <ul style="list-style-type: none"> • Percent of 6-12 grade students, who report are given a chance to help make decisions (SCCS). • Percent of 6-12 grade students, who report are involved in helping to solve school problems (SCCS). • Percent of 6-12 grade students who report, the principal asks students about their ideas (SCCS). • Percent of 6-12 grade students who believe there is a teacher or other adult who will miss me when I am absent.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Association of Alaska School Boards • State of Alaska, Department of Education and Early Development • Alaska Staff Development Network (ASDN) • Local School Districts
Action 2	<p>Increase school-community partnerships that encourage culturally relevant, youth engagement (voice, choice, contribution, decision-making and leadership) in community-based activities.</p> <ul style="list-style-type: none"> • Support and maintain programs that encourage internships, student-civic engagement and service learning efforts. • Support academic credits for community-volunteer projects. • Support youth and/or student groups or clubs that focus on helping others in the community, social justice issues or local concerns. • Support the intentional recruitment to include inherent and acquired diverse participation in community-based activities.
Measure	<p>Biannual measurement YRBS and annual measurement by SCCS. <i>Program-level measures encouraged for consistent assessment and evaluation of local efforts.</i></p> <p>Measures:</p> <ul style="list-style-type: none"> • Percent of 9-12 grade students who take part in organized afterschool activities once or more per week (YRBS). • Percent of 6-12 grade students who help other people without getting paid one or more hours per week (SCCS). • Percent of 6-12 grade students who take part in organized afterschool activities one or more hours per week (SCCS).
Timeframe	2020-2030

Strategy 1 Increase authentic and diverse student voice, feedback and leadership experiences in school

- Partners**
- Association of Alaska School Boards
 - State of Alaska, Department of Education and Early Development
 - Alaska Staff Development Network (ASDN)
 - Local School Districts

Strategy 2 Increase the percent of adolescents participating in quality after-school activities and programming that emphasize youth-centered practices and positive youth development principles (Also See Objective 17, strategy 2)

- Action 1 Educate community adults and youth program and service providers about culturally relevant, youth-centered, empowerment practices, as part of youth development best practices. (See Objective 17, strategy 2) Provide training on ways to:**
- Implement youth-centered practices that ensure authentic participation that includes voice (opinions and ideas), choice of roles, contribution, decision-making and leadership.
 - Develop authentic, respectful, supportive relationships with youth.
 - Support youth-led activities, projects or initiatives that help others or improve community conditions.
 - Teach, model and practice culturally relevant social-emotional competence, self-regulation skills.
 - Create and maintain safe, welcoming, supportive settings.
 - Develop consistent measures to evaluate the quality of afterschool programs across diverse settings.

Measure Training/education-based process measures, at the population level- do not exist. For that reason, PYD principle-based program-level measures are highly encouraged for consistent assessment and evaluation of local efforts.

Measures: Proxy measures for this strategy area could be the same as used for Strategy 2/Action Step 2

- Percent of 9-12 grade students who take part in organized afterschool activities once or more per week (YRBS).
- Percent of 6-12 grade students who help other people without getting paid one or more hours per week (SCCS).
- Percent of 6-12 grade students who take part in organized afterschool activities one or more hours per week (SCCS).

Timeframe 2020-2030

- Partners**
- Association of Alaska School Boards, Initiative for Community Engagement (ICE)
 - Alaska Children’s Trust, Alaska Afterschool Network
 - Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC)

- Action 2 Support culturally relevant youth-community engagement activities, projects and quality afterschool programs that incorporate youth-centered practices and positive youth development principles. (See Objective 17 Strat 2)**
- Increase youth-adult partnerships and community action projects.
 - Support youth and youth groups or clubs that focus on helping others in the community, social justice issues or local concerns.
 - Support youth-conducted research or surveys to identify local issues, solutions and create follow-up action plans with their group.

Increase the percent of adolescents participating in quality after-school activities and programming that emphasize youth-centered practices and positive youth development principles (Also See Objective 17, strategy 2)

Strategy 2

Measure	Biannual measurement YRBS and annual measurement by SCCS. <i>Program-level measures encouraged for consistent assessment and evaluation of local efforts.</i> Measure: <ul style="list-style-type: none"> • Percent of 9-12 grade students who take part in organized afterschool activities once or more per week (YRBS). • Percent of 6-12 grade students who help other people without getting paid one or more hours per week (SCCS). • Percent of 6-12 grade students who take part in organized afterschool activities one or more hours per week (SCCS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • Association of Alaska School Boards, Initiative for Community Engagement (ICE) • Alaska Children’s Trust, Alaska Afterschool Network • Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC)

Increase diverse youth inclusion, influence and leadership within state, Tribal, local governments, public agencies (e.g. library, parks, recreation, museums) and youth serving organizations

Strategy 3

Action 1	<p>Engage and educate youth and adults about effective ways to work together to improve conditions in the school, community or within the state.</p> <ul style="list-style-type: none"> • Educate adults about ways to respectfully interact and be supportive of young people in informal settings. • Educate adult organizational staff, board and commission members about ways to recruit, retain, and respectfully engage diverse youth (inherent and acquired), to seek input to improve programs, policies services and conditions within the community. • Train youth about roles and responsibilities of serving on an advisory committee, board or commission. • Support youth leadership programs that teach social emotional competence, decision-making skills and emphasize civic and service- based activities.
Measure	Training/education-based process measures, at the population level across ages do not exist. For that reason, program-level measures are highly encouraged for consistent assessment and evaluation of local efforts. Proxy measures: <ul style="list-style-type: none"> • Percent of 9-12 grade students who take part in organized afterschool activities once or more per week (YRBS). • Percent of 6-12 grade students who take part in organized afterschool activities one or more hours per week (SCCS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Association of Alaska School Boards, Initiative for Community Engagement (ICE) • Alaska Children’s Trust, Alaska Afterschool Network • Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC)

Increase diverse youth inclusion, influence and leadership within state, Tribal, local governments, public agencies (e.g. library, parks, recreation, museums) and youth serving organizations

Strategy 3

Action 2	<p>Provide multiple opportunities for diverse youth to contribute to and influence the decisions and policies of public and private organizations at local, regional and statewide levels. Increase youth involvement through:</p> <ul style="list-style-type: none"> • Host youth forums to identify issues, problems and solutions; support follow-up action groups to facilitate change. • Support youth participation in civic activities e.g. elections, issue research, advocacy, legislation, hosting candidate debates. • Include youth on local, regional, Tribal and statewide boards, commissions and advisory boards. • Establish and/or coordinate with existing youth advisory boards/councils to local, regional, Tribal and statewide boards, commissions, assemblies and legislative bodies. • Youth inclusion on non-profit organization’s board of directors and/or major committees.
Measure	<p>Biannual measurement YRBS and annual measurement by SCCS. <i>Program-level measures encouraged for consistent assessment and evaluation of local efforts.</i></p> <p>Measure:</p> <ul style="list-style-type: none"> • Percent of 9-12 grade students who take part in organized afterschool activities once or more per week (YRBS). • Percent of 6-12 grade students who take part in organized afterschool activities one or more hours per week (SCCS).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Association of Alaska School Boards • State of Alaska, Department of Education and Early Development • Youth Courts of Alaska • Alaska Center
Action 3	<p>Align adolescent-related policies and practices with positive youth development principles across youth-serving public agencies, private foundations and Tribal entities, to increase adolescent health and wellbeing and increase youth supports and mattering.</p> <ul style="list-style-type: none"> • Incorporate shared adolescent risk and protective factors and positive youth development principles into strategic plans, block grants, program performance measures, population-based indicators, logic models, assessments and state RFPs /RFAs grants and contracts. • Incorporate shared risk and protective factors across the lifespan into data collection, surveillance systems, and state RFPs /RFAs grants and contracts. • Develop measure to evaluate progress on this action step.
Measure	<i>TBD –included in action above</i>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Behavioral Health • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health



Social Determinants of Health

Objective #19: Increase the percent of high school students who graduate within 4 years of starting 9th grade

Target: 90%

Strategy 1 **Implement evidence-based practices that create safe and supportive learning environments in schools**

Action 1	Increase number of educators who complete trauma engaged eLearning trainings.
Measure	# of educators completing trauma engaged eLearning courses.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Dept. of Education and Early Development (DEED), Teaching and Learning Support • Association of Alaska School Boards • Alaska Children’s Trust • Alaska Mental Health Trust Authority • Alaska Dept. of Public Safety (DPS), Council on Domestic Violence and Sexual Assault, Alaska DHSS, Behavioral Health • Statewide Suicide Prevention Council
Action 2	Increase number of students who have access to school-based mental health services.
Measure	<ul style="list-style-type: none"> • # of schools in Alaska that provide school based mental health services compared to the year prior. <p>School Health Profiles measures (CDPHP):</p> <ul style="list-style-type: none"> • # of schools that report working with mental health or social services staff in health education. • # of schools where lead health teacher received professional development in emotional or mental health.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Behavioral Health • Association of Alaska School Boards • Alaska Mental Health Board • Alaska Mental Health Trust Authority • Volunteers of America • Providence St. Joseph Health – Alaska Region • State of Alaska, Dept. of Education and Early Development (DEED), Teaching and Learning Support • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion (CDPHP)
Action 3	Increase the number of children served by child nutrition programs (National School Lunch Program, School Breakfast Program, Summer Food Service, Afterschool Snack Program, Supper Program, etc.).
Measure	Alaska Child Nutrition Programs regular/annual reports on utilization of programs https://education.alaska.gov/cnp .
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Child Nutrition Programs in Department of Education • Alaska School Nutrition Association • Food Bank of Alaska • Alaska Afterschool Network • Food Research and Action Center

Strategy 1 Implement evidence-based practices that create safe and supportive learning environments in schools

Action 4	<p>Increase access and capacity of quality after school programs and structured meaningful activities that are supervised by a supportive adult. Quality programs have:</p> <ul style="list-style-type: none"> • Trained supportive staff; • A friendly and respectful climate; • Intentional skill-building instruction (sequenced, active, focused and explicit); • Youth centered practices (youth voice and empowerment); • Emphasizes continuous improvement; and • Focused efforts to recruit and retain staff and students.
Measure	<p>Main measure: Percent of 9-12th grade students who participate in organized afterschool, evening or weekend activities at least twice a week (Youth Risk Behavior Survey, odd years)</p> <p>Alternative Measures:</p> <ul style="list-style-type: none"> • Percent of 6-12th grade students who participate in organized afterschool, evening or weekend activities at least twice a week (School Climate and Connectedness Survey). • Indicators available on CDC’s School Health Profiles for secondary schools (6-12) on even years (State of Alaska, Division of Public Health, Section of CDPHP).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Association of Alaska School Boards, Initiative for Community Engagement (ICE) • Alaska Children’s Trust, Alaska Afterschool Network • Center for Safe Alaskans, Anchorage Youth Development Coalition (AYDC) • State of Alaska, Department of Education and Early Development • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • RurAL CAP, Resource Basket • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion
Action 5	<p>Implement the <i>Transforming Schools: A Framework for Trauma-Engaged Practice in Alaska</i> https://education.alaska.gov/trauma-engaged-schools.</p>
Measure	<ul style="list-style-type: none"> • Number of districts receiving the transforming schools framework. • Number of school districts that have received training and materials related to the Transforming Schools Implementation toolkit.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Dept. of Education and Early Development (DEED), Teaching and Learning Support • Association of Alaska School Boards • Alaska Mental Health Board • Anchorage Community Mental Health • First Alaskans • Alaska Afterschool Network • Alaska Mental Health Trust Authority • State of Alaska, Department of Public Safety (DPS) • Council on Domestic Violence and Sexual Assault
Action 6	<p>Increased implementation of attendance interventions for chronically absent students/reduction in chronically absent students.</p>
Measure	<p>Annual Every Student Succeeds Act (ESSA) reporting https://education.alaska.gov/akessa Annual local district report card to the public https://education.alaska.gov/compass/report-card.</p>
Timeframe	2020-2030

Strategy 1 Implement evidence-based practices that create safe and supportive learning environments in schools

Partners	<ul style="list-style-type: none"> Alaska Dept. of Education and Early Development (DEED), Innovation and Education Excellence (IEE) United Way of Anchorage State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion All local school districts that report to DEED
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Strategy 2 Expand and strengthen quality early childhood programs

Action 1 Identify needs and gaps in services and to articulate quality concerns through as assessment conducted by the Alaska Early Childhood Coordinating Council.

Measure Completion of internal reports of Alaska Early Childhood Coordinating Council
<http://dhss.alaska.gov/Commissioner/Pages/aeccc/default.aspx>.

Timeframe 2020-2030

Partners

- State of Alaska Department of Health and Social Services (DHSS) Alaska Early Childhood Coordinating Council

Action 2 Develop a plan to address lack of quality early childhood programs (using as source documents Alaska’s Early Childhood Needs Assessment, Alaska’s Early Childhood Strategic Plan, and the Alaska Early Childhood Coordinating Council Strategic Report) and increase support from policy makers and decision makers.

Measure Internal reports of Alaska Early Childhood Coordinating Council
<http://dhss.alaska.gov/Commissioner/Pages/aeccc/default.aspx>.

Timeframe 2020-2030

Partners

- State of Alaska Department of Health and Social Services (DHSS) Alaska Early Childhood Coordinating Council

Action 3 Improve the quality of early childhood education by increasing the number of participants in Learn & Grow, Alaska SEED.

Measure # of ECE programs participating in Learn & Grow Levels 1-5.
 # of ECE programs advancing Level of Learn & Grow quality.
 Nov 20, 2019: 144 Programs (Level 2 Programs = 31; Level 1 Programs = 94; ‘Enrolled Programs’ = 19)
<https://www.threadalaska.org/learn-and-grow/for-educators/become-a-program/participating-programs>.

Timeframe 2020-2030

Partners

- thread
- Alaska SEED
- Learn & Grow
- Childcare Program Office
- Juneau’s Best Starts
- Alaska Children’s Trust-Alaska Afterschool Network
- State of Alaska, Department of Education and Early Development, Headstart Program
- State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion

Strategy 3 **Support a career and technical education system to prepare the population for Alaska careers**

Action 1	<p>Make transitions planned and accountable for both successful student progress and systemic cooperation by:</p> <ul style="list-style-type: none"> • Ensuring that every student has a personal learning and career plan (PLCP). • Coordinating program development and delivery among training programs. • Developing data sharing to track student progress.
Measure	Carl Perkins Program data
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Education and Early Development, Career and Technical Education • State of Alaska, Department of Labor and Workforce Development • U.S. Department of Labor Office of Registered Apprenticeship, Alaska
Action 2	<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>
Measure	Program files, Alaska EED, Career and Technical Education.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Education and Early Development, Career and Technical Education • State of Alaska, Department of Labor and Workforce Development • Post-secondary Institutions
Action 3	<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>
Measure	Program files, Alaska DEED, Career and Technical Education.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Education and Early Development, Career and Technical Education • State of Alaska, Department of Labor and Workforce Development • Post-secondary institutions; secondary institutions and DOL

Objective #20: Reduce the percentage of rental occupied households that exceed 50 percent of household income dedicated to housing

Target: 14%

Strategy 1 Ensure adequate, safe, and affordable housing is available for all Alaskans

Action 1	Expand Homeless Management Information System (HMIS) to all federal and state funded homeless programs. Improve outreach and linkages to housing resources and services. Coordinate prevention report from all potential funding sources.
Measure	<ul style="list-style-type: none"> • % bed coverage in Homeless Management Information System (HMIS). • % coverage in prevention report. • Use of AK Housing locator.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • The Alaska Coalition on Housing and Homelessness (AKCH2) • Anchorage Coalition to End Homelessness
Action 2	Increase funding and sources of supportive services for Adults, Youth, and Families experiencing or at-risk of homelessness.
Measure	<ul style="list-style-type: none"> • # housing units for chronic and special needs homeless. • # households served with short term assistance. • # project based rent assistance. • Establishment of coordinated homeless fund.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Mental Health Trust Authority • State of Alaska, Division of Senior and Disabilities Services, Adult Protective Services • State of Alaska, Department of Corrections • RurAL Cap • Catholic Social Services • Forget Me Not – Juneau • Volunteers of America • Alaska Tribal Organizations • Alaska Housing Finance Corporation • Covenant House Alaska • Choosing our Roots • Providence St. Joseph Health – Alaska Region • Shiloh Baptist – try to get full name • Veterans Administration • Tribal Housing Authorities • Tribal Health Organizations • Tribal Non-Profits • State of Alaska Medicaid • DBH • Home For Good
Action 3	Ensure sufficient supply of permanent affordable housing by:
	<ul style="list-style-type: none"> • Increasing affordable housing stock (# units available). • Providing rental subsidies – additional rental assistance vouchers.
Measure	<ul style="list-style-type: none"> • # of affordable housing units added throughout Alaska. • # households assisted by rental assistance vouchers.
Timeframe	2020-2030

Strategy 1 Ensure adequate, safe, and affordable housing is available for all Alaskans

Partners

- Alaska Housing Finance Corporation
 - Cook Inlet Housing Authority
 - Habitat for Humanity
 - Neighbor Works
 - Volunteers of America
 - Rural Cap
 - AK Native Office of Native American Programs
 - Tribal Housing Authorities
 - Association of Alaskan Housing Authorities
 - DCCED
 - Alaska Municipal Management Association
 - Alaska Municipal League
 - AHFC Senior Housing representative
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Objective #21: Increase the percentage of residents (all ages) living above the federal poverty level (as defined for AK)

Target: 90%

Improve wages and benefits for the Alaskan workforce, so that individuals and families have the income needed to meet the costs of daily living

Strategy 1

Action 1	<p>Implement the Alaska System for Early Education Development (SEED), Alaska’s statewide professional development system for early childhood educators (ECE) in Alaska to impact and improve ECE educators’ wages and compensation including:</p>
	<ul style="list-style-type: none"> • 1.A Attain ECE and K-3 minimum wage parity by 2025. • 1.B Support ECE programs to establish their own pay scale that reflects experience years and education; Encourage ECE program to provide transparent pay scale information, which will provide data for leadership. • 1.C Award ECE educators’ tenure for demonstrated competency based on years of experience in the field. • 1.D Support ECE programs to develop, deliver, and document benefits packages for educators; Establish partnerships to provide universal health insurance options and retirement plans. • 1.E Seek ways to address ECE educators’ living expenses needs through innovative partnerships with public and private sectors. • 1.F Address wage and compensation issues of broader ECE community, including assistant teachers. • 2.A Further examination of specific professional development needs related to content and delivery mechanisms for Alaskan ECE educators. • 2.B Improvement of the SEED Registry to provide seamless support for ECE educators and to increase their participation. • 2.C Exploration and consideration of the unique needs of the broader ECE community, including family child care. • 2.D Offering mental health and leadership support to improve the quality of the workforce. • 2. E Implementation of entry and exit surveys to understand ECE educators’ job attitudes and turnover intention; Exploration of the possibility of providing a recruitment platform through the SEED Registry.
Measure	<ul style="list-style-type: none"> • # of enrolled eligible professionals in SEED Registry; • # of issued SEED certificates verifying placement on the SEED Career Ladder; • # of ECE who remain in the field for 3, 5, 10, 15, 20, 25 + years; • # of ECE whose wages are commensurate K-3 grade educators by 2025; • # of ECE who participate in entry and exit surveys regarding job attitudes and turnover retention; • # of ECE program that provide benefits package; • # ECE who are compensated for their tenure and demonstrated competency based on year of experience in the field; and • # partnerships established with public and private sectors who provide support for addressing EC educators’ living expenses.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • thread • Child Care Program Office • SEED Steering Committee • Learn & Grow

Strategy 2 **Reduce the number of unemployed and underemployed in households that fall below the poverty level**

Action 1	<p>Improve Alaska employment policies, procedures, or regulations around individuals with disabilities thereby increasing 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.</p> <p>(Aligned with Governor’s Council on Disabilities & Special Education State Plan).</p>
Measure	<p>The success of this step can be tracked through State of Alaska DOWLD disability employment statistics and through the Governor’s Council on Disabilities and Special Education’s strategic plan implementation progress reports.</p>
Timeframe	<p>2020-2026</p>
Partners	<ul style="list-style-type: none"> • Governor’s Council on Disabilities and Special Education • Alaska Mental Health Trust Authority • State of Alaska, Division of Vocational Rehabilitation

Objective #22: Reduce the alcohol-induced mortality rate per 100,000 population

Target: 23.6

Strategy 1 Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce alcohol-induced mortality

Action 1	<p>Promote and support policy changes such as:</p> <ul style="list-style-type: none"> • Increases to the alcohol taxes statewide and/or locally, • Continue with Title 4 review work, • Create health and safety regulations for curbside and home delivery of alcohol, • Revise Local Option Laws after thorough research and work with people in rural Alaska who are impacted by these laws, • Prioritize and pursue other best practices in health policy.
Measure	New/revised policies and healthcare guidelines get passed or changed.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Recover Alaska • Alaska Mental Health Trust Authority • Mat-Su Health Foundation • Alcoholic Beverage Control Board • Advisory Board on Alcoholism and Drug Abuse (ABADA) • Marijuana and Alcohol Control Board
Action 2	<p>Shift in the way problems are solved across the local to state level through system changes that develop and support prevention and treatment professionals, including:</p> <ul style="list-style-type: none"> • Build communities of practice and cultivate the prevention profession, (e.g. Cohorts and coursework developed, Prevention Summit organized and implemented, prevention certification as a standard practice statewide). • Build communities of practice and cultivate the treatment profession, (e.g. Peer Certification, Direct Service Provider Core Competencies, SHARP Program-Loan Repayment Program). • Address barriers experienced by rural and marginalized communities trying to access resources, (e.g.: resource flows from state and other funders). • Centralize data and story collection that provides real information that agencies and communities can trust and use.
Measure	Implementation of coursework, prevention summit, and certification as statewide standard; equitable distribution of funding that represents the needs of communities; and community involvement in the development and use of data and information.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Alcohol Misuse Prevention Alliance (AAMPA) • Community and local Stakeholders • Alaska Training Cooperative • University of Alaska Anchorage • Alaska Native Tribal Health Consortium

Strategy 1 **Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce alcohol-induced mortality**

Action 3	<p>Change the context that affects alcohol-induced mortality through the development and introduction of messaging to increase health and wellbeing, including:</p> <ul style="list-style-type: none"> • Conduct research on perceptions and beliefs around alcohol across the state, for use of localized data in media and health campaigns. • Develop and disseminate media that shifts social norms, amplifies community efforts, and re-writes the narrative in favor of a healthy and healing Alaska.
Measure	<p>Analysis and dissemination of data from existing data sources (e.g. NSDUH, BRFSS, and YRBS) on knowledge, perceptions, and beliefs around alcohol use; and implementation of a strategic communication plan that measures the outcomes of media and health campaigns.</p>
Timeframe	<p>2020-2030</p>
Partners	<ul style="list-style-type: none"> • Recover Alaska • Mat-Su Health Foundation • Alaska Alcohol Misuse Prevention Alliance (AAMPA) • Department of Health and Social Services

Objective #23: Reduce the drug-induced mortality rate per 100,000 population

Target: 14.2

Strategy 1 Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce drug-induced mortality

Action 1	Develop State government initiated policies and laws regarding controlled Substances Scheduling, Prescribing and Dispensing Policies, Harm Reduction, treatment, Integrated-information sharing, and linkages to care.
Measure	<ul style="list-style-type: none"> • New/revised policies are developed and implemented. • Laws regarding controlled Substances Scheduling, Prescribing and Dispensing Policies, and Harm Reduction, get passed.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • State of Alaska, Department of Public Safety • Alaska Mental Health Trust Authority • Advisory Board on Alcoholism and Drug Abuse (ABADA) • Marijuana and Alcohol Control Board • Alaska Pharmacists Association • Senior Care Clinics
Action 2	Conduct professional development and provider trainings related to substance misuse, abuse and prevention to shift the way problems are solved across the local to state level through system changes including:
	<ul style="list-style-type: none"> • Build communities of practice and cultivate the prevention profession, (e.g. cohorts and coursework developed, Prevention Summit organized and implemented). • Shared Factors work groups commence. • Provider education strategies aka Academic Detailing to promote judicious prescribing of opioids and other substances of concern, + project echo.
Measure	<ul style="list-style-type: none"> • # of Academic Detailing Trainings held. • # of Project Echo meetings held. • # of Shared Factors work group meetings held.
Timeframe	2020-2023
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • Alaska Native Tribal Health Consortium • State of Alaska, Division of Behavioral Health • UAA CHD, ANTHC, DOLWD
Action 3	Conduct Employer Toolkit “Addiction in the Workplace” trainings to change the context that affects drug-induced mortality through the development and introduction of messaging to increase health and wellbeing by supporting workforce wellness as it relates to substance use and access to supportive resources among Alaskan employers.
Measure	# of Employer Toolkit “Addiction in the Workplace” disseminated and trainings held.
Timeframe	2020-2021
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention • Recover Alaska • ANTHC
Action 4	Conduct research on perceptions and beliefs around substance misuse across the state, for use of localized data in health literacy campaigns, and develop and disseminate evidence-informed Core Messages.
Measure	# of Core Messages developed and disseminated to inform public education, public education campaigns go live.
Timeframe	2020-2021

Strategy 1 Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce drug-induced mortality

Partners • State of Alaska, Division of Public Health, Office of Substance Misuse and Addiction Prevention

Strategy 2 Develop Strategy for Hepatitis C (HCV) elimination in Alaskans with Substance Use Disorder (SUD) to reduce morbidity and mortality in the SUD population

Action 1 Reduce mortality through policy, system and environmental changes with an emphasis on rural Alaska including:

- Enhance access to treatment with innovative drug pricing models.
- Expand DOC treatment eligibility to all individuals with active HCV viremia.
- Support syringe exchange programs.
- Expand and increase lab testing capacity.

Measure Increased testing of at-risk population, increased funding for syringe exchange programs, increased number of labs for testing, decreased Hepatitis C (HCV) infection rates in Alaska correction facilities.

Timeframe 2020-2029

Partners

- HCV Elimination Committee of Hepatitis Advisory Work Group (HAWG)
- State of Alaska, Department of Corrections (DOC)
- Alaska Native Tribal Health Consortium, Liver Disease and Hepatitis Program
- State of Alaska, Division of Public Health, Section of Epidemiology, Hepatitis Prevention program
- State of Alaska, Department of Health and Social Services, Chief Medical Officer
- Medicaid

Objective #24: Reduce the percent of adults needing but not receiving substance use disorder treatment

Target: 7.9%

Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce unmet needs for continuum of care for alcohol and substance use disorders, including but not limited to detox, treatment, and recovery.

Strategy 1

Action 1	<p>Advocate for policy changes with an emphasis on rural Alaska including:</p> <ul style="list-style-type: none"> • Increasing access to treatment. • Increase sustainability of treatment by improving reimbursement for effective practice models.
Measure	New/revised policies and healthcare guidelines are passed or updated and reported annually to Healthy Alaskans Core Team.
Timeframe	2020-2030
Partners	<p>Federal, State and Local partners including:</p> <ul style="list-style-type: none"> • State of Alaska, Department of Public Safety • Alaska Mental Health Trust Authority • Alaska Native Tribal Health Consortium, Liver Disease and Hepatitis Program • Advisory Board on Alcoholism and Drug Abuse (ABADA) • Marijuana and Alcohol Control Board
Action 2	<p>Implement systems change across the state and local level to:</p> <ul style="list-style-type: none"> • Improve the measurement of unmet treatment needs (e.g. purchase oversampling to increase NSDUH sample size). • Increase use of Screening Brief Intervention Referral to Treatment (SBIRT) and/or AUDIT screening tool across providers statewide .Encourage providers to familiarize and utilize MAT for alcohol use disorders. • Sustain partnerships with Division Juvenile Justice in their provision of treatment options for justice-involved youth • Increase implementation of the full continuum of care and various treatment levels and options.
Measure	Increased availability of robust data (coverage, oversampling), increased usage of SBIRT, increased integration of behavioral health and primary care.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium • Alaska Mental Health Trust Authority • State of Alaska, Department of Health and Human Services • Health care and treatment facilities • Emergency responders
Action 3	<p>Change the context that affects alcohol misuse through the development and introduction of messaging to increase health and wellbeing, including:</p> <ul style="list-style-type: none"> • Develop and disseminate media that aims to shift social norms and amplify community efforts around substance misuse. • Increase promotion of tools connecting people to support services statewide (ie. MatSu Connect, Alaska 211, Crisis Now, treatmentconnection.com)
Measure	Implementation of a strategic communication plan including an evaluation plan that measures the outcomes of the media and health campaigns.
Timeframe	2020-2030

Promote policy, systems, and environmental changes that are designed to enhance community conditions to reduce unmet needs for continuum of care for alcohol and substance use disorders, including but not limited to detox, treatment, and recovery.

Strategy 1

Partners	<ul style="list-style-type: none"> • Recover Alaska • Alaska Alcohol Misuse Prevention Alliance • OSMAP
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Strategy 2 Develop Strategy for Hepatitis C (HCV) elimination in Alaskans with Substance Use Disorder (SUD) by improving treatment in the SUD population

Action 1	<p>Improve treatment through policy, system and environmental changes with an emphasis on rural Alaska including:</p> <ul style="list-style-type: none"> • Enhance access to treatment with innovative drug pricing models and STI Screening. • Support and utilize Mobile Health Units to connect SUD population to screening, treatment, and counseling. • Support funding for HAV screening and treatment programs among SUD population. • Develop peer counselor strategies to message important knowledge about HCV among the SUD populations. • Support programs that improve continuity of care and counseling support to inmates returning to community setting. • Expand the range of Medication Assisted Treatment (MAT) and ensure Hep C is not a barrier for individuals seeking MAT • Expand and increase lab testing capacity.
Measure	Increased testing of at risk population, model drug pricing programs implemented, increased funding, implementation of peer counseling programs, decreased HCV infection rates in Alaska correction facilities, increased number of labs that test for HCV in AK.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • HCV Elimination Committee of Hepatitis Advisory Work Group (HAWG) • State of Alaska, Department of Corrections (DOC) • ANTHC Liver Disease and Hepatitis Program (LDPH) • State of Alaska, Division of Public Health, Section of Epidemiology, Hepatitis Prevention program • State of Alaska, Department of Health and Social Services, Chief Medical Officer • Medicaid

Objective #25: Reduce the suicide mortality rate per 100,000 population

Target: 25 per 100,000

Strategy 1 Coordinate prevention efforts to ensure that Alaskans have access to a comprehensive suicide prevention system.

Action 1	<p>Provide training in evidence-based suicide prevention, intervention and postvention models.</p> <ul style="list-style-type: none"> • Postvention education and planning increases the capacity of a community to respond effectively to a suicide death in order to prevent additional suicides and promote healing for survivors of suicide loss. Update the Alaska Postvention Guide; Preparing to Heal.
Measure	Number of reported evidence based suicide prevention, intervention and postvention trainings delivered annually.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services, Division of Behavioral Health • State of Alaska Department of Education and Early Development • Alaska Training Cooperative • Statewide Suicide Prevention Council • Alaska Native Tribal Health Consortium • Other community organizations
Action 2	<p>Provide public education on mental health and suicide through statewide collaboration and coordination with emergency responders, law enforcement, emergency room staff, direct service professionals, criminal justice staff, schools, and Tribal providers.</p>
Measure	<ul style="list-style-type: none"> • Number of Youth and Adult Mental Health First Aid participants trained annually. • Number of healthcare or behavioral healthcare providers trained in responding to suicidal crisis or people experiencing suicidal ideation. • Number of Crisis Intervention Team (CIT) trainings for law enforcement. • eLearning classroom lessons for students “Navigating Transitions: Promoting Wellness to Prevent Suicide Grades 5-12. • Number of Suicide Awareness, Prevention & Postvention Training delivered in eLearning format to educators.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services, Division of Behavioral Health & Division of Public Health • State of Alaska Department of Education and Early Development • Alaska Native Tribal Health Consortium • Alaska Training Cooperative • Statewide Suicide Prevention Council • State of Alaska Department of Corrections • American Foundation for Suicide Prevention • UAA Center for Human Development • Other community organizations.
Action 3	<p>Provide safe and effective messaging for suicide prevention that supports positive messaging, community conversations and media efforts to change social norms and perceptions about mental illness, addiction, depression and suicide, and promote seeking treatment and recovery. Messaging will be consistent with Suicide Prevention Resource Center guidelines.</p>
Measure	<ul style="list-style-type: none"> • Number of social media posts by DHSS - DBH will report. • Number of media organizations educated on safe messaging guidelines.

Strategy 1 **Coordinate prevention efforts to ensure that Alaskans have access to a comprehensive suicide prevention system.**

Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health & Division of Public Health • Statewide Suicide Prevention Council • Alaska Mental Health Trust Authority • Department of Education and Early Development • ANTHC Injury Prevention Program
Action 4	Raise awareness and educate Alaskans about safe storage and temporarily limiting access to lethal means of suicide during a crisis.
Measure	<ul style="list-style-type: none"> • Number of health care and behavioral health care organizations that were provided information about counseling on access to lethal means. • # of “access to lethal means” educational materials distributed (brochures, gun locks, information cards). • # of Narcan kits distributed • # of medication disposal bags, lock boxes distributed
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Behavioral Health • Statewide Suicide Prevention Council • Alaska Mental Health Trust Authority • State of Alaska Office of Substance Misuse and Prevention • ANTHC Injury Prevention Program
Action 5	Develop a statewide work group dedicated to engaging state and regional organizations such as gun shops, law enforcement, veterans, military, and health care and behavioral health care, to identify practical and relevant strategies and measures to reduce access to lethal means during times of crisis.
Measure	<p>Task force is developed.</p> <p># of meetings in the reporting period</p>
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health • Statewide Suicide Prevention Council • Alaska Mental Health Trust Authority • Alaska Native Tribal Health Consortium
Action 6	Increase utilization of Alaska’s Careline, the statewide suicide prevention, someone to talk to line and the National Suicide Prevention Lifeline (988)
Measure	# of communications received annually (ex. Calls, Texts)
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health

Strategy 2 **Evidence based treatment and recovery services are available for people at risk of suicide.**

Action 1	Implement universal screening for suicide risk in all primary, hospital (especially emergency department care), behavioral health, and crisis response settings.
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Strategy 2 Evidence based treatment and recovery services are available for people at risk of suicide.

Measure	<ul style="list-style-type: none"> • Increase the number of primary care, hospital, behavioral health and emergency room departments universally screening for suicide risk. • A measurement needs to be developed to track this.
Timeframe	2023-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Native Tribal Health Consortium • Tribal Health Organizations • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council • Healthcare organizations in the community
Action 2	Community health providers offer appropriate services to Alaskans in crisis when they need them and as close to home as possible.
Measure	Increase in the number of providers implementing new waived services available through 1115 waiver for SUD/MH, regionally and statewide. – 2021-2030.
Timeframe	2021-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Native Tribal Health Consortium • Tribal Health Organizations • Alaska Mental Health Trust Authority • Healthcare organizations in the community

Strategy 3 Quality data and research is available and used for planning, implementation, and evaluation of suicide prevention efforts.

Action 1	Coordinate statewide suicide data and develop a suicide data surveillance system that identifies trends in Alaska that will help support a coordinated, targeted and more immediate response.
Measure	The development of a collaborative data base including data from partners listed below. Alaska Violent Death Reporting System. Alaska Trauma Registry. Alaska Hospital Discharge Data. Alaska Youth Risk Behavior Survey. Alaska Behavioral Risk Factor Surveillance System. Alaska Health Analytics and Vital Records.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Behavioral Health & Division of Public Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council

Strategy 4 Create supportive environments that promote resilient, healthy, and empowered individuals, families, schools, and communities.

Action 1	Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.
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	<ul style="list-style-type: none"> • Support community education on ACEs. • Increase access to family and peer support services that address resiliency by reducing early adversity, toxic stress, and childhood trauma, and by building protective relationship supports, cultural identity, and self-regulation skills. • Support parenting skill development through community programs and activities, building upon local, natural supports. • Support resiliency development efforts with training and technical assistance on practice-informed interventions for trauma-engaged providers and communities. • Support services and staff training that address trauma and resiliency for youth involved with the juvenile justice and child welfare systems. <p>Provide technical assistance to community wellness coalitions to create and strengthen supportive environments in local communities.</p>
Measure	% of children who have experienced one or more adverse childhood experiences Data Source: National Survey of Children’s Health https://www.childhealthdata.org/browse/survey , Alaska, Child and Family Health Measures; Family Health and Activities; Indicator 6.13: Has this child experienced one or more adverse childhood experiences (ACEs) from a list of 9 ACEs?
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Healthy, Prevention and Early Intervention Section • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Public Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council • Alaska Mental Health Board
Action 2	Identify and support targeted strategies for populations with disproportionate rates of suicide.
Measure	Decrease in rates of suicide by vulnerable population.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska Department of Health and Social Services Division of Behavioral Healthy, Prevention and Early Intervention Section • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Public Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council

Strategy 5 Reduce suicide among youth and young adults (15-24) through targeted, culturally and age appropriate strategies to reduce the risk factors and increase the protective factors impacting adolescent depression and suicide.

Action 1	<p>Reduce the risk factors impacting adolescent depression and suicide such as:</p> <ul style="list-style-type: none"> • Adverse childhood experiences (ACEs); • Mood disorders, anxiety and depression; • Easy access to firearms; • Use of substances (alcohol and other drugs); • Prior suicide attempts; • Exposure to Violence; and • Excessive Screen Time/Social Media usage.
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Measure	Percent of adolescents (9-12th grade students) who report: attempted suicide in the past year(YRBS #29); use of alcohol in the past 30 days; access to and being ready to fire a gun within 4 hours (YRBS #18); having experienced forced intercourse or other sexual activities or dating, physical/sexual violence(YRBS #19-22); students who use electronics for something that is not school work for 3 or more hours per day (YRBS #83). (See YRBS for exact verbiage, frequency and time duration).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Center for Safe Alaskans • State of Alaska Department of Health and Social Services Division of Public Health, Section of Chronic Disease Prevention and Health Promotion and Office of Substance Misuse and Addiction Prevention, • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council • Alaska Mental Health Board • Safe Alaskans • Regional non-profits and Tribal organizations
Action 2	<p>Increase the protective factors impacting adolescent depression and suicide such as: (See LH13 for more detail)</p> <ul style="list-style-type: none"> • Supportive adults and connections (LHI 17). • Youth feeling valued and mattering to others (LHI 18). • Social, emotional competence and self-regulation skills. • Attending a school with a positive climate (safe, supportive and encouraging). • Participating in quality after-school activities and structured meaningful activities. • Sense of cultural identity and connection. <p>Regular physical activity.</p>
Measure	Measure: Percent of 9-12 grade students who: have 3 or more supportive adults (#93); feel like they matter to others (#96); are able to control their emotions and stay calm when needed (#98, 99); have caring teachers that give a lot of encouragement (#95); participate in out of school activities and clubs(#97).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • Center for Safe Alaskans • State of Alaska Department of Health and Social Services Division of Public Health, Section of Chronic Disease Prevention and Health Promotion and Office of Substance Misuse and Addiction Prevention, • Alaska Native Tribal Health Consortium • State of Alaska Department of Health and Social Services Division of Behavioral Health • Alaska Mental Health Trust Authority • Statewide Suicide Prevention Council • Alaska Mental Health Board • Safe Alaskans • Regional non-profits and Tribal organizations

Objective #26: Reduce percentage of adolescents (high school students in grades 9-12) who have used electronic vapor products, cigarettes, smokeless tobacco, or other tobacco products in the last 30 days

Target: 32%

Promote public policies that have been demonstrated to reduce tobacco use among youth

Strategy 1

Action 1	Enact a strong statewide minimum legal sales age policy of 21 for all tobacco and electronic smoking products. Although the Federal Tobacco 21 (T21) law is in place, Alaska should maintain elements of a stronger policy, such as including retailer penalties. (Not currently included in the Federal law).
Measure	Stronger T21 legislation passed in Alaska (Alaska statutes).
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> American Lung Association, Alaska American Cancer Society, Alaska American Heart Association
Action 2	Provide support so that the FDA restrictions on the sale of flavored tobacco and electronic smoking products are implemented as intended.
Measure	Violations of FDA restrictions (DBH Tobacco Enforcement data).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program State of Alaska, Division of Behavioral Health, Tobacco Enforcement Unit
Action 3	Increase the price of all tobacco products, including e-cigarettes.
	<ul style="list-style-type: none"> Build capacity of local coalitions to promote tax increases and create tax parity. Garner support for youth tobacco prevention. 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. Advocate for price increases and tax parity for all tobacco products using evidence and Alaska specific impacts. Create tax parity to include e-cigarettes. Assess coalitions for youth partners
Measure	<ul style="list-style-type: none"> Relevant trainings provided, # attendees (Program records). Tax legislation passed in Alaska (Alaska statutes).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program Alaska Native Tribal Health Consortium American Lung Association, Alaska American Cancer Society, Alaska American Heart Association

Strategy 2 Support evidence-based tobacco cessation interventions for youth

Action 1	Expand Alaska’s Tobacco Quit Line to include education and cessation interventions for youth under 18 years. Continue to review research on youth treatment of nicotine addiction.
Measure	Eligibility criteria for Alaska’s Tobacco Quit Line (Program records).
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program
Action 2	Train school professionals, behavioral health providers, and healthcare providers in evidence-based tobacco cessation referral processes for youth under 18 years, including for e-cigarette use. <ul style="list-style-type: none"> Provide the tools available to assist in screening. Provide evidence based cessation resources available for providers/clients/patients.
Measure	Relevant trainings provided, # attendees (Program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program Alaska Native Tribal Health Consortium Alaska Pharmacists Association

Strategy 3 Implement counter marketing, mass-reach health communication interventions to the public

Action 1	Use social marketing tactics to reach youth with media to change social norms around tobacco use. Campaigns will focus heavily on e-cigarette use.
Measure	Media metrics, flights, placement, etc (Program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program Alaska Native Tribal Health Consortium

Objective #27: Reduce the percentage of adults (aged 18 and older) who currently smoke cigarettes or use electronic vapor products, smokeless tobacco, or other tobacco products

Target: 25%

Strategy 1 Adopt and implement comprehensive tobacco-free post-secondary and healthcare campus policies, and smoke free multi-unit housing policies

Action 1	Advocate for comprehensive tobacco-free post-secondary and healthcare campus policies, and smoke free multi-unit housing policies.
Measure	Relevant policies passed in Alaska (Campus and organization policies, available online or as program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program and grantees
Action 2	Provide education and support for policy implementation and enforcement, using local resources tailored to each organization.
Measure	Relevant trainings provided, # attendees (Program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program American Lung Association, Alaska
Action 3	Distribute funding to local and statewide organizations to implement and enforce smoke free or tobacco-free policies.
Measure	# of communities that have funding (as TPC grantee or through tax revenue) dedicated to implementation or enforcement of smoke free or tobacco-free policies; TPC grantee self-efficacy to address secondhand smoke in their communities (Community of Practice evaluation survey).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program

Strategy 2 Support evidence-based changes to behavioral health, health systems and reimbursement policies that enhance tobacco cessation interventions

Action 1	Train behavioral health and healthcare providers on evidence-based tobacco cessation referral processes, including for e-cigarette use.
	<ul style="list-style-type: none"> Provide the tools available to assist in screening. Ensure that evidence-based cessation resources are available for providers/clients/patients.
Measure	Relevant trainings provided, # attendees (Program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program Alaska Native Tribal Health Consortium

Strategy 2 Support evidence-based changes to behavioral health, health systems and reimbursement policies that enhance tobacco cessation interventions

Action 2	Work with behavioral health and healthcare leadership to implement documentation systems and reimbursement protocols within health systems. Support use of: <ul style="list-style-type: none"> • Electronic referral to Alaska’s tobacco quit line. • EHR to ensure tobacco screening and referral happens with every patient.
Measure	# of e-referrals to Alaska’s Tobacco Quit Line (Quit line reports); Participation of TPC in collaborative planning efforts related to systematizing e-referral (program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program • Alaska Native Tribal Health Consortium • Alaska Pharmacists Association
Action 3	Support evidence-based tobacco cessation treatment coverage and reimbursement by working with payers to: <ul style="list-style-type: none"> • Allow tobacco cessation treatment to be a reimbursable service for substance abuse and mental health providers • Expand insurance coverage of proven cessation treatments (dropping co-pays, paying right providers).
Measure	# of different payers TPC is working with to expand coverage (program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program

Strategy 3 Implement counter marketing, mass-reach health communication interventions

Action 1	Implement campaigns, which may include: <ul style="list-style-type: none"> • A focus on e-cigarette use, (e.g., “Switching is Not Quitting” theme). • Promotion of evidence-based cessation services. • A focus on mental health and quitting
Measure	Media metrics, flights, placement, etc. (Program records).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program • Alaska Native Tribal Health Consortium

Strategy 4 Promote public policies that have been demonstrated to reduce tobacco use

Action 1	Increase the price of all tobacco products, including e-cigarettes. <ul style="list-style-type: none"> • Build capacity of local coalitions to promote tax increases and create tax parity. Garner support for youth tobacco prevention. • 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. • Advocate for price increases and tax parity for all tobacco products using evidence and Alaska specific impacts. • Create tax parity to include e-cigarettes.
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Strategy 4 Promote public policies that have been demonstrated to reduce tobacco use

Measure	Relevant trainings provided, # attendees (Program records); Tax legislation passed in Alaska (Alaska statutes).
Timeframe	2020-2030
Partners	<ul style="list-style-type: none">• State of Alaska, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Tobacco Prevention & Control Program• Alaska Native Tribal Health Consortium• Health Care Services• American Lung Association, Alaska• American Cancer Society – Cancer Action Network• American Heart Association

Objective #28: Reduce the percentage of repeated substantiated child maltreatment within last 12 months

Target: 9.5%

Strategy 1 Promote early intervention in maltreatment and with families at risk for maltreatment

Action 1	Develop information sharing agreement for OCS to share intake cases that are “screened out” or those that are repeatedly screened out with local agencies, Tribes or contractor who works for local agencies. Tribes to reach out to screened out families who have provided consent to assess and address conditions with the aim of preventing further contact with OCS and escalation of child neglect or abuse.
Measure	OCS has either developed a data sharing agreement and mechanism to share screened out information with a contractor or developed an internal process to supported screened out families in place.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Office of Children’s Services • Alaska Children’s Trust • R.O.C.K Mat-Su • Alaska Impact Alliance
Action 2	Explore funding for contractors to provide outreach to families who have been screened out of the OCS case intake system to help support their needs.
Measure	Funding secured and contract in place.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Office of Children’s Services • Alaska Children’s Trust • R.O.C.K. Mat-Su

Strategy 2 Promote early childhood home visiting programs

Action 1	Identify need for services, gaps in services, program expansion opportunities, and potential resources through the State of Alaska DHSS Division of Public Health Section of Women’s Children’s, Family Health Maternal Infant Early Childhood Home Visiting (MIECHV) Needs Assessment.
	This assessment is a resource to assist in meeting the needs of families. It will 1. Identify communities with concentrations of risk, 2. Identify the quality and capacity of existing programs for early childhood home visiting 3. Discuss the State’s capacity for providing substance abuse treatment 4. Coordinate with other early childhood partner’s and program’s needs assessments.
Measure	Maternal Infant Early Childhood Home Visiting (MIECHV) Needs Assessment completed.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • AK Early childhood Coordinating Council • State of Alaska, Department of Education and Early Development

Strategy 2 Promote early childhood home visiting programs

Action 2	Provide training, coaching, and ongoing support for home visit programs regarding the impacts of adverse childhood experiences and supportive interventions.
Measure	Number and percent of home visiting staff participating in training and coaching.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • State of Alaska, Office of Children’s Services • AK Early Childhood Coordinating Council • State of Alaska, Department of Education & Early Development • Southcentral Foundation • Providence Nurse Family Partnership • Kid’s Corps • Southeast Alaska Association for the Education of Young Children (AEYC) • RurAL CAP • Alaska Family Services
Action 3	Conduct comprehensive impact evaluation on current home visiting programs that the State of Alaska Division of Public health funds.
Measure	Completed evaluation report with recommended actions.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • State of Alaska, Department of Education and Early Development • Alaska Early Childhood Coordinating Council • Help Me Grow

Strategy 3 Adopt a universal Pre-K education system in Alaska for children ages 0-5

Action 1	Passage of Senate Bill 6 (increasing access to early childhood education).
Measure	Passage of SB6 (BASIS).
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • Local government, service providers and coalitions • RuralCAP: Parents as Teachers program • State of Alaska, Department of Education and Early Development
Action 2	Support communities (i.e. local governments, service providers and coalitions) to explore potential of generating local revenue dedicated to the investment in early childhood education.
Measure	Number of communities who dedicate funds to support early childhood education.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • Local government, service providers and coalitions

Strategy 4 Decrease the rate of children that are uninsured in Alaska

Action 1	Develop a mobile texting system to provide information and support related to Medicaid/CHIP to potential eligible families. (Funded by AK Children’s Trust (Partnership between AK Children’s Trust and 2-1-1/United Way of Anchorage).
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Strategy 4 Decrease the rate of children that are uninsured in Alaska

Measure	Mobile texting system in place and in use.
Timeframe	2020-2021
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • 2-1-1 United Way of Anchorage • ASHNA • ANTHC
Action 2	Launch an outreach program in the 4 primary communities (Anchorage, Mat-Su Valley, Fairbanks and Kenai) to notify families of the resource. (Funded by AK Children’s Trust (Partnership between AK Children’s Trust and 2-1-1/United Way of Anchorage).
Measure	Outreach program implemented in 4 primary communities.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • 2-1-1 United Way of Anchorage

Strategy 5 Promote parent education programs

Action 1	Develop and launch Request for Proposals (RFP) targeting 13 identified rural communities with greatest need for parenting classes.
Measure	Number of adults and children trained in parenting classes.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • State of Alaska, Office of Children’s Services
Action 2	Award parent training grants and provide on-going support to selected grantees.
Measure	Number of grant awards issued.
Timeframe	2020-2022
Partners	<ul style="list-style-type: none"> • AK Children’s Trust • State of Alaska, Office of Children’s Services

Strategy 6 Implement child welfare compacting

Action 1	Remove barriers to establishing child welfare compacting.
Measure	Existence of child welfare compacting.
Timeframe	2020-2025
Partners	<ul style="list-style-type: none"> • State of Alaska, Office of Children’s Services • Tribal Health Orgs

Objective #29: Reduce the rate of reported or attempted rape per 100,000

Target: 146.5

Strengthen the capacity of communities to prevent violence through coalition work, data driven practices and evaluation

Strategy 1

Action 1	Communities are building their capacity to reduce violence through the development and/or expansion of community coalitions. The goal of these coalitions is to engage community members, local organizations, agencies, as well as faith based and Tribal entities in building or enhancing culturally appropriate responses that prevent rape, teen dating violence and/or domestic violence.
Measure	<ul style="list-style-type: none"> • Quarterly reports that address capacity and risk and protective factors of strategies being implemented. • Annual Capacity Assessment from all Grantees. • Annual evaluation of CDVSA funded Primary Prevention Grantees. • Biennial Evaluation of Statewide Primary Prevention Summit.
Timeframe	2021-2024
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • AK Network on Domestic Violence and Sexual Assault (ANDVSA) • Missing and murdered indigenous persons coalition, DOJ • ANTHC
Action 2	Communities are engaged in the identification and implementation of evidence based and/or promising practice strategies that address risk and protective factors related to the reduction of rape across the social ecological model.
Measure	<ul style="list-style-type: none"> • Quarterly reports that address capacity and risk and protective factors of strategies being implemented. • Annual Capacity Assessment from all Grantees. • Annual evaluation of CDVSA funded Primary Prevention Grantees. • Biennial Evaluation of Statewide Primary Prevention Summit.
Timeframe	2021-2024
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • AK Network on Domestic Violence and Sexual Assault (ANDVSA) • AK Native Women’s Resource Center

State level prevention efforts are integrated and promote societal norms, values and beliefs that reinforce safe and healthy relationships

Strategy 2

Action 1	<p>Implement statewide AK Safe Children’s Act curriculum</p> <ul style="list-style-type: none"> • Erin’s Law- information to schools on child sexual assault prevention. • Bree’s Law- Grades 7-12, teen dating violence preventions. • These are both unfunded mandates but schools are required to implement these curricula. Elements of teacher and parent training within these laws. • Online curriculum is currently being piloted. <p>AS 14.30.355 (Erin’s Law) AS 14.30.356 (Bree’s Law).</p>
Measure	<ul style="list-style-type: none"> • Annual survey of school districts implementing K-12 Erin’s Law Curriculum- DEED. • Annual survey of school districts implementing 7-12, Bree’s Law Curriculum-DEED. • Biennial review of YRBS sections on Violence and Bullying. • Annual review of CDVSA Dashboard sections on prevention.

Strategy 2 **State level prevention efforts are integrated and promote societal norms, values and beliefs that reinforce safe and healthy relationships**

Timeframe	2021-2030
Partners	<ul style="list-style-type: none"> • Department of Education & Early Development (DEED) • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault • AK Network on Domestic Violence and Sexual Assault (ANDVSA)
Action 2	Expand statewide 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.
Measure	<ul style="list-style-type: none"> • Statewide Coaching Boys into Men program implementation and evaluation through Alaska School Activities Association (Mollie Rosier with WCFH will have this information (CBIM). • Statewide social media campaign (in development) process evaluation in development (funded by RPE and DELTA/ANDVSA)- Mollie and Rae Romberg with ANDVSA will have this information.
Timeframe	2020-2024
Partners	<ul style="list-style-type: none"> • State of Alaska, Division of Public Health, Section of Women’s, Children’s, and Family Health • AK Network on Domestic Violence and Sexual Assault (ANDVSA) • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault
Action 3	Implement standardized curriculum for earlier adolescent (12-15) youth, as a means to prevent acts of sexual violence or acting out sexually in inappropriate ways.
	The Division of Juvenile Justice provides educational information to all youth admitted to DJJ facilities in compliance with the federal <i>Prison Rape Elimination Act</i> (PREA). The PREA educational materials and follow up discussion with staff provides youth with information about what constitutes sexual abuse and sexual harassment, their right to be free of abuse, the division’s zero tolerance policy for abuse, how to report abuse or suspected abuse, and how reports are addressed. In FY2020, all 461 youth admitted to a DJJ facility received this information.
Measure	# of youth admitted to a DJJ facility who complete the PREA curriculum on annual basis.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Health and Social Services (DHSS), Division of Juvenile Justice • Alaska Children's Alliance • State of Alaska, Office of Children's Services

Objective #30: Reduce the percentage of adolescents (high school students in grades 9-12) who were ever hit, slammed into something, injured with an object or weapon, or physically hurt on purpose by someone they were dating or going out with during the past 12 months.

Target: 6.6

Strengthen the capacity of communities to prevent violence through coalition work, data driven practices and evaluation

Strategy 1

Action 1	Increased community capacity to reduce violence through the development and/or expansion of community coalitions. The goal of these coalitions is to engage community members, local organizations, agencies, as well as faith based and Tribal entities in building or enhancing culturally appropriate responses that prevent rape, teen dating violence and/or domestic violence.
Measure	<ul style="list-style-type: none"> • Quarterly reports that address capacity and risk and protective factors of strategies being implemented. • Annual capacity assessment from all Grantees (Prevention Grantees). • Annual evaluation of CDVSA funded primary prevention grantees. • Biennial Evaluation of Statewide Primary Prevention Summit.
Timeframe	2021-2023
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault • State of Alaska, Division of Public Health, Section of Women’s, Children Family Health • AK Network on Domestic Violence and Sexual Assault (ANDVSA) • Missing and murdered Indigenous persons coalition • ANTHC

Strategy 2 Implement evidence-based school violence prevention programs

Action 1	Implement statewide AK Safe Children’s Act curriculum
	<ul style="list-style-type: none"> • Erin’s Law- information to schools on child sexual assault prevention. • Bree’s Law- Grades 7-12, teen dating violence preventions. • These are both unfunded mandates, but schools are required to implement these curricula. Elements of teacher and parent training within these laws. • Online curriculum is currently being piloted.
Measure	<ul style="list-style-type: none"> • Annual survey of school districts implementing K-12 Erin’s Law Curriculum- DEED. • Annual survey of school districts implementing 7-12, Bree’s Law Curriculum-DEED. • Biennial review of YRBS sections on Violence and Bullying. • Annual review of CDVSA Dashboard sections on prevention.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Education & Early Development (DEED) • State of Alaska, Department of Public Safety, Council on Domestic Violence and Sexual Assault • AK Network on Domestic Violence and Sexual Assault (ANDVSA)

Implement social and emotional learning (SEL) curriculum in Alaska schools grades

Strategy 3 K-12

Action 1	Support children, youth and adults in developing skills for life and school related to the five SEL skill areas or competencies – self-awareness, self-management, social awareness, relationship skills, and responsible decision making. These skills help students manage life tasks such as learning, developing positive relationships, solving everyday problems, and operating in the workplace.
Measure	CDVSA dashboard: <ul style="list-style-type: none"> • School Climate and Connectedness Survey through AASB related to SEL. • YRBS related to SEL and other protective factors.
Timeframe	2020-2030
Partners	<ul style="list-style-type: none"> • State of Alaska, Department of Safety, Council on Domestic Violence and Sexual Assault • Association of Alaska School Boards • All School districts in Alaska • Center for Safe Alaskans, Anchorage Youth Development Coalition • DEED

Next Steps: Healthy Alaskans Implementation



This plan outlines the high-level strategies that will guide our work toward health improvement together as a state. Many partners are already working on implementing some of these strategies, while others will require further refinement and structured support. Healthy Alaskans implementation activities will include a focus on:

Shared Agenda: Developing and building partnerships and creating a shared agenda and implementation plan with the communities most affected by, and experiencing inequities such as: Alaska Native people, people with disabilities, people living in remote/rural areas where resources are limited, those of lower socioeconomic status and others experiencing health disparities.

Partnerships: Identifying additional partners that will carry forward this important work, and take on a leadership role to guide implementation and progress for any given objective.

Evaluation: Using a system to track overall progress through annual Health Objective Scorecards, and tracking annual progress on implementation of strategies and actions will help drive activity to achieve population health improvement.

It is the intent of the Healthy Alaskans Core Team to conduct periodic updates to this plan based on future state health assessments ensuring that the statewide health improvement plan is truly a living document that focuses on the most current and important health areas of needed improvement. In the future, additional iterations of the Statewide Health Improvement Plan will be developed to continue gathering input from Alaskans.



State Health Improvement Plan, Healthy Alaskans 2030

For more information, please contact healthyalaskans@alaska.gov
or visit <https://www.healthyalaskans.org>



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