



Healthy Alaskans 2030 (HA2030)– Implementation Report

Date: January 15, 2022

Name, Title: Marcia Howell, Executive Director – Center for Safe Alaskans

HA2030 Health Objective #: 12

Reduce the unintentional injury mortality rate per 100,000 population

Strategies and Actions Implemented:

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

Action 1 Establish a data work group to prioritize injury topic focus

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

Action 1 Expand linkage of Alaska Trauma Registry and Department of Transportation Crash reports beyond Anchorage, and to include Health Facilities Data Reporting (HFDR) program data

Action 2 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).

<p>What was accomplished</p> <ul style="list-style-type: none"> 3.1 – The Alaska Statewide Violence and Injury Prevention Partnership (ASVIIPP) is a data-driven multi-disciplinary group that prioritized injury work in Alaska. We are beginning the 2022 prioritization process. 3.1 – The Statewide Shared Risk and Protective Factor (SRPF) Community of Practice also has a data workgroup. That group is in the process of prioritizing health concerns that share risk 	<p>Description of how the team achieved the accomplishment; what went well, progress made</p> <ul style="list-style-type: none"> Alaskan ingenuity and our collaborative nature have played a big role in the successes so far. There is not just one team of implementers involved in promoting Objective 12. The varied strategies and action items take teams from a variety of disciplines to move the work forward.
--	---

and protective factors including Injury, and numerous other health concerns in Alaska that are included in HA2030 including indicators 9, 12-14, 16-25 and 28-30.

- 4.1 Anchorage motor vehicle crash data and ATR MV related injury cases are linked from 2009-2019. We are in the process of linking 2020 cases. The plan includes adding HFDR data, but the request for access to the data for the linkage project was denied. We are currently working with the Department of Motor Vehicles and Emergency Medical services to attempt to access and link data to make the data set even richer. A current pedestrian safety effort in Anchorage provides an example of using the linked data for prioritization, intervention design, implementation, and evaluation. Heat maps showing high pedestrian crash locations, driver and pedestrian behavior records combined with demographic and injury severity records are being used to develop a safe pedestrian campaign in Anchorage.
- 4.2 As noted in 3.1, Alaska has an energetic and productive SRPF community of practice. A sub-group is working on utilizing mindfulness training to reduce aggressive and distracted driving. (Mindfulness is arguable also a protective factor for HA2030 objectives 9, 13, 14, 16-19 and 22, 23, and 25-30.) Success is measured by pre and post changes in the YRBS self-regulation question and changes in pre and post mindfulness scale results and scores from an angry driving scale. After a recent 4-week mindfulness session, with a total of 5 hours of training, was offered in October and November scores on the YRBS question: "How often are you able to control your emotions when you need to?" improved 50% and scores on the question: "When things go wrong for you how calm are you able to remain?" improved 14%.

- Braiding multiple funding sources has helped pay for staff time, implementation initiatives, facilitation, trainers. Funders include the Alaska Mental Health Trust Authority, the Division of Behavioral Health, Safe States Alliance, Centers for Disease Control, the Alaska Highway Safety Office, The State's Injury Prevention Unit, the Center for Safe Alaskans to name a few. Additionally, there are over 100 people working on this objective in different ways.
- One key to success has been willingness to work together, people stepping up to work on projects, and a willingness to step outside of our normal siloes with a commitment to combining efforts for the greater good.



<p>Additionally, mindfulness scale scored improved 17% and propensity towards angry driving decreased 20%.</p>	
<p>Challenges</p> <ul style="list-style-type: none"> • 4.1 Denial of access to HFDR data is a challenge for the linkage project. Alaska Trauma Registry data is valuable, but many people are injured in motor vehicle crashes that do not end up hospitalized. ED discharge data would provide a much broader source of information to help guide future injury prevention prioritization, intervention design, implementation, and evaluation. • 4.2 Recruiting participants for Zoom-based mindfulness trainings has been challenging, especially with youth in schools during COVID. Fortunately, there is additional funding to continue refining our recruitment and hopefully we will be able to include in person training. 	<p>Resources needed, questions that exist, etc.</p> <ul style="list-style-type: none"> • There are still several action items that are not reported here related to Strategies 1 and 2. Leads on those are ANTHC and OSMAP among others.

Next steps (assigned tasks, date for completion, etc.):

Related to mindfulness and safe driving, we will be conducting research in March to measure the extent to which a 5 minute mindfulness breathing practice improves driving awareness and attention in a simulated driving experience. Hopefully this will add to the evidence base supporting mindfulness.

Continue to seek additional data sets to add to the linkage project.