

Community Health Status Assessment February 2014

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COMMON ACRONYMS USED IN COMMUNITY HEALTH STATUS ASSESSMENT

ACS = American Community Survey

ABVS = Alaska Bureau of Vital Statistics

BRFSS = Behavioral Risk Factor Surveillance System

CDC = Centers for Disease Control and Prevention

CHNA = Community Health Needs Assessment

HMC = Homer Medical Clinic

KBFPC = Kachemak Bay Family Planning Clinic

KPBSD = Kenai Peninsula Borough School District

MAPP = Mobilizing for Action through Planning and Partnerships

SVT = Seldovia Village Tribe Health Clinic

SKP = Southern Kenai Peninsula

SPBHS = South Peninsula Behavioral Health Services

SPH = South Peninsula Hospital

YRBS = Youth Risk Behavior Survey

COMMUNITY HEALTH STATUS ASSESSMENT

BACKGROUND

Spearheaded by South Peninsula Hospital in November 2008, forty organizations gathered to conduct the first collaborative, area-wide Community Health Needs Assessment (CHNA), with the goal of identifying opportunities for health improvement and to serve as a catalyst for community action. The Mobilizing for Action through Planning & Partnerships (MAPP) framework developed by the Centers for Disease Control & Prevention (CDC) and the National Association of City & County Health Officials (NACCHO) was selected to guide the assessment process. This eventually became MAPP of the Southern Kenai Peninsula (SKP). Building on the lessons-learned and results from the first CHNA, this second CHNA is composed of updates to the first three of the following four separate assessments:

I. Community Themes & Strengths Assessment

Qualitative input from community members to identify the issues they feel are important

- a. Perceptions of Community Health Survey
- b. Key Informant Survey

II. Community Health Status Assessment

Quantitative community health data (representing cultural, economic, educational, environmental, mental, physical, and spiritual health) that identifies priority health and quality of life issues

III. Forces of Change Assessment

Identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate

IV. Local Public Health Assessment

Measures how well different local public health system partners work together to deliver the Essential Public Health Services. Conducted in 2009 during the first CHNA, but not updated in 2012-2013.

Using the results/observations from all four assessments, a prioritized list of community health needs will be created that guides the community's collective impact efforts through a Community Health Improvement Plan. **It is important to note that the information gathered from each assessment does not stand on its own, but that the information from each assessment is looked at together**

INTRODUCTION

The following measures captured here represent the <u>Community Health Status Assessment</u>. The goal of this broad assessment is to answer the question, "What is the Health Status (broadly defined) of the Southern Kenai Peninsula community?" and ensure that the Community Health Improvement Plan considers specific health status issues (e.g. our leading causes of death or behavioral risk factors). This question could be answered and addressed in many ways as it pertains to cultural, economic, educational, environmental, mental, physical, and spiritual health, so for the purposes of this assessment we break this overarching question down into sub questions that are based on priority indicators and issues now tracked by other collaborative entities such as the County Health Rankings, Healthy Alaskans 2020, and also by the residents and/or organizations that serve the Southern Kenai Peninsula community. In order to provide a few lenses in which to determine the 'Health Status' of the Southern Kenai Peninsula community, the sub-questions are primarily addressed by compiling available Southern Kenai Peninsula community-level data.

To view the other assessments or additional MAPP of the SKP information, please visit www.mappofskp.net. For additional questions, please contact Megan Murphy, MAPP coordinator, at mappofskp@gmail.com or (907) 235-0570.

COMMUNITY HEALTH STATUS ASSESSMENT DATA TEAM MEMBERS

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METHODS

In order to include the diverse quality of life issues that affect our community, the data collected for the second Community Health Status Assessment continued to be broad in nature. This presents a challenge to balance both having a wide range of community-level data available for users to answer specific (user-driven) questions with presenting community data in a manner that elucidates meaningful understanding of specific health needs or community priorities. The challenge to create parameters in which data collected balances these two needs still exists. The priorities that were discussed for data collection included:

- updating data obtained for the first assessment, providing an opportunity to see changes over time
- updating and retrieving data provided by local organizations
- when Southern Kenai Peninsula data available, prioritizing its representation over Kenai
 Peninsula or State of Alaska data to better understand local needs
- highlighting data that informs priorities identified by the community
- improving consistency in reporting measures across organizations to enhance community-level understanding (versus organizational understanding)
- using and locally tracking data prioritized by Healthy Alaskan 2020 (top 25 health indicators released in September of 2013)
- improving data quality, reporting, and focus of collection

Giving consideration to these priorities, this assessment puts forth sub questions to support the overarching question of "What is the Health Status of our Southern Kenai Peninsula community?" These sub questions are based on priority indicators and issues established by the County Health Rankings, Healthy Alaska 2020, and the Southern Kenai Peninsula community.

The sub questions are:



What are the population demographics of the Southern Kenai Peninsula community and how have they changed from 2000 to 2010?



What are the top five leading causes of death in the Southern Kenai Peninsula area and what data are available that track key risk factors for these causes of death?



How does the Southern Kenai Peninsula compare to the state and nation on Healthy Alaska 2020's top 25 leading indicators of health?



What quantitative data do we have on the qualitative issues raised by community members?

- Economics / Affordability
- Substance Abuse
- Mental Health
- Transportation
- Family Issues / Adverse Childhood Experiences
- Teen Resources / Activities



What data are available to track the 'healthy vision' defined by the community in 2010?

In order to support initial analyses, these questions are primarily addressed by available Southern Kenai Peninsula community-level data – US Census 2000 and 2010, American Community Survey results combined for all Southern Kenai Peninsula communities, and State of Alaska vital statistics and behavioral risk factor survey data. A thorough analysis is not provided at this time, but data is provided to support discussion and selection of issues that will be prioritized for further analysis.

DATA QUALITY

This analysis taken from "Summary and Review of Collected Data" report conducted by the Institute of Social and Economic Research on behalf of MAPP of the Southern Kenai Peninsula – see Appendix C for full report.

"Data quality is multi-dimensional, and criteria to assess quality generally vary by project (Pipino, 2002). However, several dimensions of data quality have been identified as common themes (Pipino, 2002; Brackstone, 1999; Carson, 2000), including:

- Relevance
- Accuracy
- Timeliness
- Accessibility
- Interpretability

- Comparability
- Completeness
- Credibility/Integrity/Source
 Reputation

Data quantity can also be considered a dimension of data quality, defined as "the extent to which the volume of data is appropriate for the task at hand" (Pipino, 2002). For the purposes of this report, appropriate data quantity is defined as at least one indicator that meets all of the established data quality criteria for the Southern Kenai Peninsula population.

To allow for an assessment of the SKP MAPP indicators, the dimensions of data quality identified above have been defined specifically for this report:

- Relevance
 - The data is either a census or representative sample of;
 - The entire population of the Southern Kenai Peninsula
 - All communities in the Southern Kenai Peninsula examined in the census
 - OR a clearly defined segment of the Southern Kenai Peninsula population (i.e. all youth under age 18, all women, all Alaska Native individuals, etc.). This data would not be representative of the entire population, but representative of this population sub-set.
- Accuracy
 - o The data is either a complete census OR a representative sample with a margin of

error less than 5%.

• For the purposes of this report, estimates from the American Community

Survey are assumed to have a margin of error greater than 5% at a size less
than the Southern Kenai Peninsula region.

Timeliness

The most recent data point is 2010 or later

Interpretability

The data source, methodology of collection, and population is clearly identified

Comparability

 The data source is an organization that collects data in a standard way across multiple geographic locations (i.e. communities, regions, states, etc.).

Completeness

- Either there is no interruption in a continuous data set (i.e. if the years 2004-2012 are included, data is collected at regular intervals with no intervals missing).
- OR data from a single time-point includes relevant comparisons (i.e. between communities of the Southern Kenai Peninsula, or between SKP, Alaska, and the US)

Credibility

o The data source is, or is part of a local, state or national governmental organization

Accessible

 Data and methodology of collection are easily accessible by any user of this assessment or data populated within the MAPP of SKP website."

In this written assessment, the graphs shown are mostly from secondary data sources that meet the greatest number of data quality dimensions and depict Southern Kenai Peninsula communitylevel data:

- US Census, 2000 and 2010 for the Southern Kenai Peninsula community
- American Community Survey, 2007-2011 5-year estimates for the Southern Kenai Peninsula community
- Alaska Behavior Risk Factor Surveillance System for the Southern Kenai Peninsula community

- Alaska Youth Risk Behavior Survey for Southern Kenai Peninsula schools
- Alaska Bureau of Vital Statistics

Primary and secondary data collected and compiled at the local level (individual efforts, organizations, and communities within the Southern Kenai Peninsula) is highly valued in our MAPP process. MAPP of the SKP's process is informed by the five conditions of Collective Impact (Common Agenda, Shared Measures, Mutually Reinforcing Activities, Continuous Communication, and Backbone Support) to guide its shared community efforts. A critical component of Collective Impact is creating, prioritizing, tracking, and evaluating shared measures. Local level data improves our community's ability to achieve consistent data collection for priority issues and better understand specific community strengths, needs, and changes. The process and communication surrounding consistent and shared local-level data collection reinforces our Collective Impact in addition to improving our ability to strategically address existing needs. Local organizational data collected for this assessment is available in Appendix A and on the MAPP of the SKP website (www.mappofskp.net) under the 'Community Vision' tab.

DATA COLLECTION METHODOLOGY AND PROPERTIES

Measure(s): Population Demographics and Economic, Housing, and Social Characteristics

Source: American Community Survey (2007-2011 averages) and U.S. Census Demographics

Population: Anchor Point, Diamond Ridge, Fox River, Fritz Creek, Happy Valley, Homer City,

Kachemak City, Nanwalek, Nikoleasvsk, Ninilchik, Port Graham, Seldovia City, and Seldovia Village

Methodology: The total estimated population and the estimated number of individuals for each

measure were recorded for each of the communities listed above. The estimated total number of
individuals for each measure and for each community were added together and divided by the
summed estimated population total for all communities. In order to estimate the margin of error
range for the summed Southern Kenai Peninsula community measures, a comparison was made to
the margin of error to Homer City, the largest individual SKP community, and the Kenai Peninsula.

¹ Retrieved on multiple days in 2013 from http://factfinder2.census.gov/faces/nav/jsf/pages/community_facts.xhtml

The margin of error for the Southern Kenai Peninsula community calculations was assumed to be in between these two ranges.

Measure(s): Adult (age 18+ years old) Physical, Mental, and Behavioral Health Indicators

Source: Alaska Behavior Risk Factor Surveillance System

Alaska Department of Health and Social Services

Chronic Disease Prevention and Health Promotion Section

Division of Public Health

Personal correspondence with Charles Utermohle, Public Health Specialist II

Population: Anchor Point, Diamond Ridge, Fox River, Fritz Creek, Happy Valley, Homer City, Kachemak City, Nanwalek, Nikoleasvsk, Ninilchik, Port Graham, Seldovia City, and Seldovia Village Methodology: The Alaska Behavioral Risk Factor Surveillance System (BRFSS)² assesses the prevalence of diseases and risk factors in adults (individuals of 18 years of age and older) statewide through an on-going telephone survey. The Alaska BRFSS has been in place since 1991, interviewing over 64 thousand adult Alaskans through 2011. The Alaska BRFSS is part of the Centers for Disease Control and Prevention's (CDC) BRFSS to track health conditions and risk behaviors in the United States, District of Columbia, and territories. The content of the BRFSS includes demographics, chronic diseases, health risk factors, access to care, health screenings, and perceptions. The current versions of the health profile maps may contain up to 172 health variables with the number of available indicators dependent upon the geographic system depicted and the number of respondents within each area for the time period. BRFSS data analyses require at least 50 respondents within the area and time period. Confidence intervals (95%) are calculated for each measure and population. Three data quality criteria are used in evaluating the BRFSS prevalence estimates which are based upon the Joint Policy on Variance Estimation and Statistical Reporting Standards on NHANES III and CSFII Reports: HNIS/NCHS Analytic Working Group Recommendations.

Measure(s): Youth (grades 9-12) Physical, Mental, and Behavioral Health Indicators
Source: Youth Risk Behavior Survey (YRBS)

² Accessed 11.17.13 from http://dhss.alaska.gov/dph/InfoCenter/Pages/ia/brfss/brfss_health_profiles.aspx

Alaska Department of Health and Social Services

Chronic Disease Prevention and Health Promotion Section

Division of Public Health

Personal correspondence with Charles Utermohle, Public Health Specialist II

Population: Southern Kenai Peninsula high school students from Homer High School, Homer Flex, Nanwalek, Nikolaevsk, Ninilchik, and Voznesenka schools.

Methodology³:

YRBS data are weighted to adjust for school and student nonresponse and to make the data representative of the population of students from which the sample was drawn. Generally, these adjustments are made by applying a weight based on student sex, grade, and race/ethnicity. Weighting is a mathematical procedure that makes data representative of the population from which it was drawn. In the YRBS, only surveys with a scientifically drawn sample, appropriate documentation, and an overall response rate of at least 60% are weighted. State, territory and local YRBS data that are weighted are representative of all public school students in grades 9-12 in the respective jurisdiction. State, territory, and local YRBS data that are not weighted are representative only of the students who completed the survey in the respective jurisdiction.

Measure(s): Leading Causes of Death

Source: Alaska Bureau of Vital Statistics

http://www.hss.state.ak.us/dph/bvs/death statistics/Leading Causes Census/frame.html

Population: Kenai Peninsula and Alaska

Methodology: Death certificates provide the source for state and national mortality statistics. The medical examiner office records the immediate and underlying cause of death on the death certificate. For detailed methods, see the Center for Disease Control's "Physicians' Handbook on Medical Certification of Death".

³ Retrieved on 11.18.13 from http://www.cdc.gov/healthyyouth/yrbs/data/index.htm

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LOCAL COMMUNITY DATA

MAPP of the Southern Kenai Peninsula asked local community members and organizations to share their data that reflected important community health information. Many organizations have contributed and a great deal of local-level, organizational data are integrated into this Community Health Assessment. When applicable to specific health status lenses, lists of available local data are included in a table and the actual data are included in Appendix A and available online.

In October 2012, MAPP of the Southern Kenai Peninsula was awarded a capacity-building grant by the Alaska Community Foundation that supported the purchase of strategic management software, Insightvision. This online tool provides a framework for housing, organizing, and tracking community data and is embedded on the MAPP website (www.mappofskp.net). This online tool makes the majority of health status data more accessible to the community and supports efficient ongoing updates in the future.

RESULTS



Q1. What are the population demographics of the Southern Kenai Peninsula community and how have they changed from 2000 to 2010?

The SKP communities tracked by the U.S. Census include:

- Anchor Point - Kachemak City

- Diamond Ridge - Nanwalek

- Fox River - Nikoleavsk

- Fritz Creek - Ninilchik

- Happy Valley - Port Graham

- Homer - Seldovia City & Village

Kachemak Selo, Razdolna, and Voznesenka are not tracked individually, but are included in the Fox River community values. While Halibut Cove is tracked, the values were inconsistently populated, thus were not included in the SKP calculations.

Table 1. 2000 and 2010 Southern Kenai Peninsula community populations (US Census)

Subject	2000	2010
Southern Kenai Peninsula Community Populations		
Total SKP Population	12,662	13,899
Anchor Point	1,845	1,930
Diamond Ridge	1,802	1,156
Fox River	616	685
Fritz Creek	1,603	1,932
Halibut Cove	35	76
Happy Valley	489	593
Homer	3,946	5,003
Kachemak City	431	472
Nanwalek	177	254
Nikolaevsk	345	318
Ninilchik	772	883
Port Graham	171	177
Seldovia City	286	255
Seldovia Village	144	165

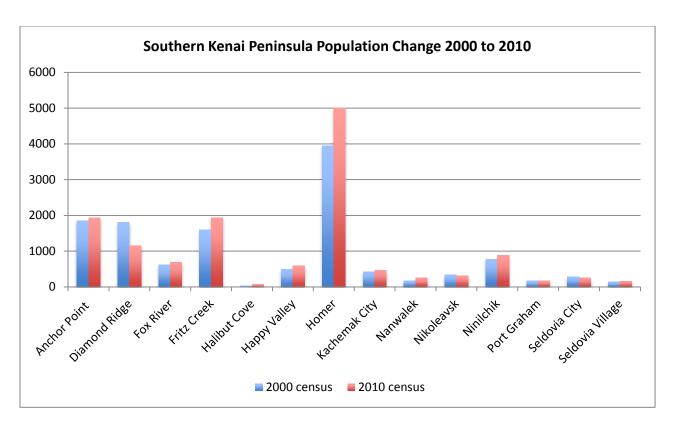


Figure 1. Individual Southern Kenai Peninsula 2000 and 2010 community populations (US Census)

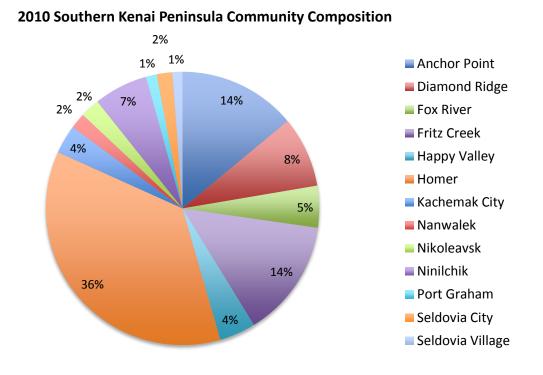


Figure 2. 2010 Southern Kenai Peninsula community composition (US Census)

Table 2. 2000 and 2010 Southern Kenai Peninsula community sex and age (US Census)

Subject	2000	% 2000	2010	% 2010
SEX AND AGE				
Total population	12,662		13,899	
Under 5 years	870	6.9%	811	5.8%
5 to 9 years	1,009	8.0%	826	5.9%
10 to 14 years	1,184	9.4%	944	6.8%
15 to 19 years	1,052	8.3%	927	6.7%
20 to 24 years	524	4.1%	623	4.5%
25 to 34 years	1,200	9.5%	1,470	10.6%
35 to 44 years	2,182	17.2%	1,551	11.2%
45 to 54 years	2,384	18.8%	2382	17.1%
55 to 59 years	724	5.7%	1,458	10.5%
60 to 64 years	468	3.7%	1130	8.1%
65 to 74 years	655	5.2%	1,164	8.4%
75 to 84 years	325	2.6%	463	3.3%
85 years and over	85	0.7%	150	1.1%
Median age (years)	36.9		41.6	
65 years and over	1,065	8.4%	1,777	12.8%
Male population	6,497	51.3%	7,138	51.4%
65 years and over	1,065	8.4%	952	13.3%
Female population	6,167	48.7%	6761	48.6%
65 years and over	536	4.2%	825	12.2%

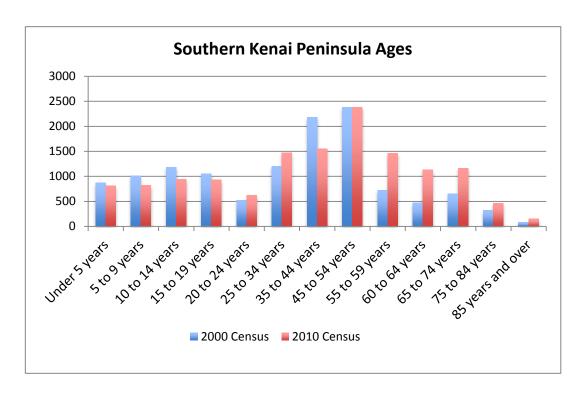


Figure 3. 2000 and 2010 Southern Kenai Peninsula ages (US Census)

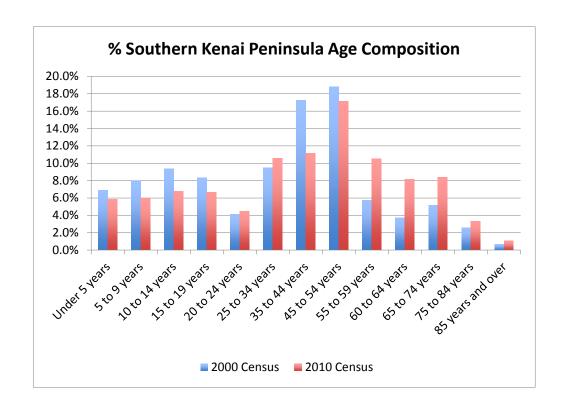


Figure 4. 2000 and 2010 % Southern Kenai Peninsula age composition (US Census)

2010 Southern Kenai Peninsula Age Distribution

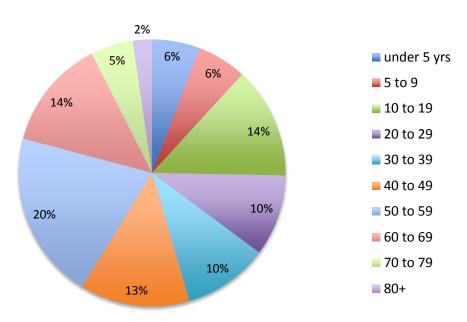


Figure 5. 2010 Southern Kenai Peninsula age distribution (US Census)

The 2010 Southern Kenai Peninsula average median age is 41.1 years

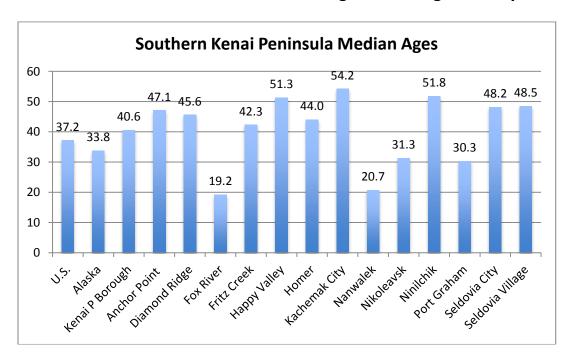


Figure 6. 2010 Southern Kenai Peninsula individual community median ages (US Census)

In 2010, 22.9% of Southern Kenai Peninsula residents were 18 years and younger

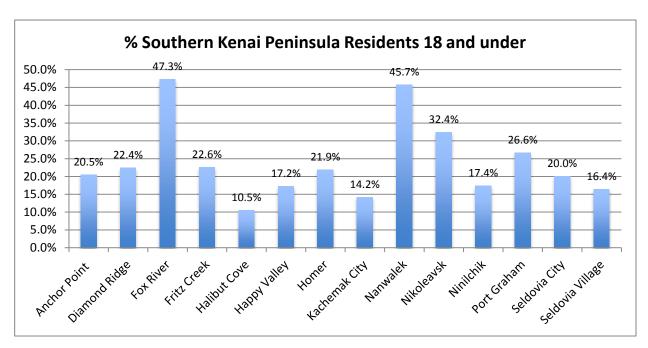


Figure 7. 2010 % Southern Kenai Peninsula individual community residents 18 and under (US Census)

In 2010, 13.3% of Southern Kenai Peninsula residents were 65 years and older

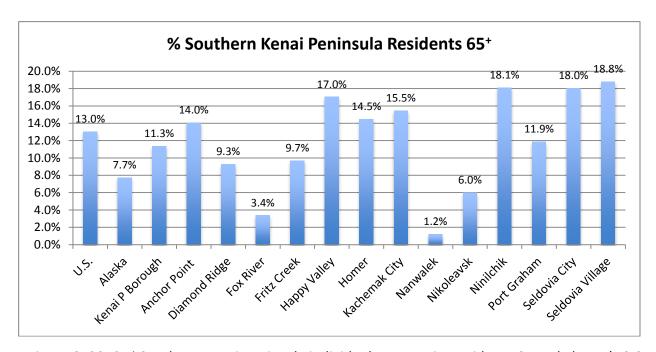


Figure 8. 2010 % Southern Kenai Peninsula individual community residents 65 and above (US Census)

Table 3. 2000 and 2010 Southern Kenai Peninsula community race (US Census)

Subject	2000	% 2000	2010	% 2010
RACE				
Total population	12,662		13,899	
One Race	12,211	96.4%	13,232	95.2%
White	11,116	87.8%	12,010	86.4%
Black or African American	23	0.2%	45	0.3%
American Indian and Alaska Native	899	7.1%	985	7.1%
Asian	73	0.6%	120	0.9%
Native Hawaiian and Other Pacific				
Islander	11	0.1%	10	0.1%
Some Other Race	89	0.7%	62	0.4%



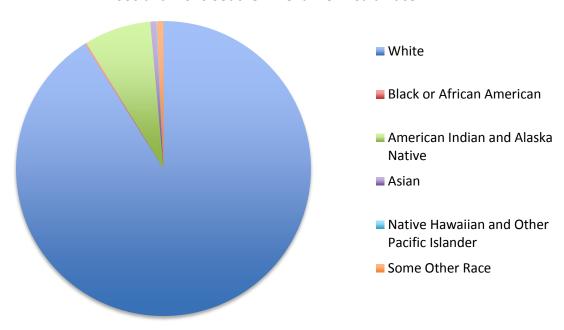


Figure 9. 2000 and 2010 Southern Kenai Peninsula race composition (US Census)

Table 4. 2000 and 2010 Southern Kenai Peninsula community relationship

Subject	2000	% 2000	2010	% 2010
RELATIONSHIP				
Total population	12,662		13,899	
In households	12,523	98.9%	13,825	99.5%
Householder	4,886	38.6%	5,949	42.8%
Spouse	2,626	20.7%	2,909	20.9%
Child	4,076	32.2%	3,679	26.5%
Own child under 18 years	3,581	28.3%	2,958	21.3%
Other relatives	260	2.1%	416	3.0%
Under 18 years	115	0.9%	155	1.1%
Nonrelatives	675	5.3%	872	6.3%
Unmarried partner	351	2.8%	453	3.3%
In group quarters	139	1.1%	74	0.5%
Institutionalized population	30	0.2%	25	0.2%
Non-institutionalized population	109	0.9%	49	0.4%

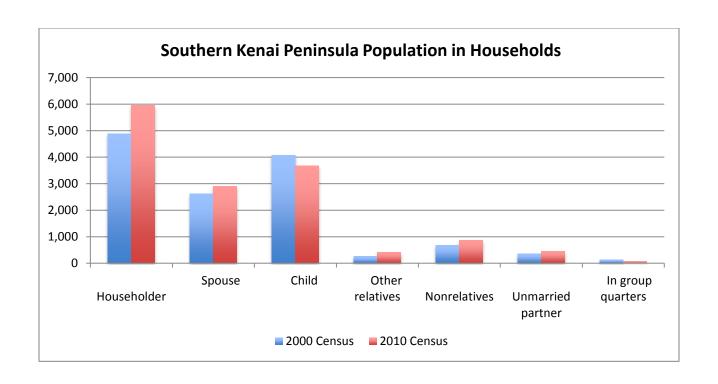


Figure 10. 2000 and 2010 Southern Kenai Peninsula population in households (US Census)

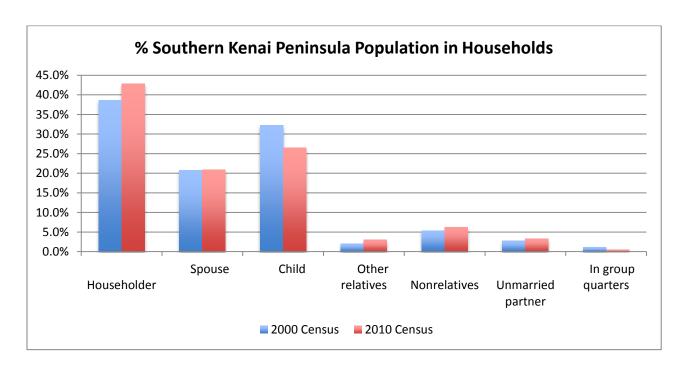


Figure 11. 2000 and 2010 % Southern Kenai Peninsula population in households (US Census)

Table 5. 2000 and 2010 Southern Kenai Peninsula community households (US Census)

Subject	2000	% 2000	2010	% 2010
HOUSEHOLDS BY TYPE				
Total households	4,886		5,949	
Family households (families)	3,205	65.6%	3,627	61.0%
With own children under 18 years	1,753	35.9%	1,512	25.4%
Husband-wife family	2,626	53.7%	2,909	48.9%
With own children under 18 years	1,318	27.0%	1,056	17.8%
Female householder, no husband present	380	7.8%	470	7.9%
With own children under 18 years	292	6.0%	308	5.2%
Nonfamily households	1,681	34.4%	2,322	39.0%
Householder living alone	1,309	26.8%	1,871	31.5%
Households with individuals under 18 years	1,850	37.9%	1,626	27.3%
Households with individuals 65 years and over	746	15.3%	1,321	22.2%
Average household size	2.8		2.6	
Average family size	3.4		3.1	

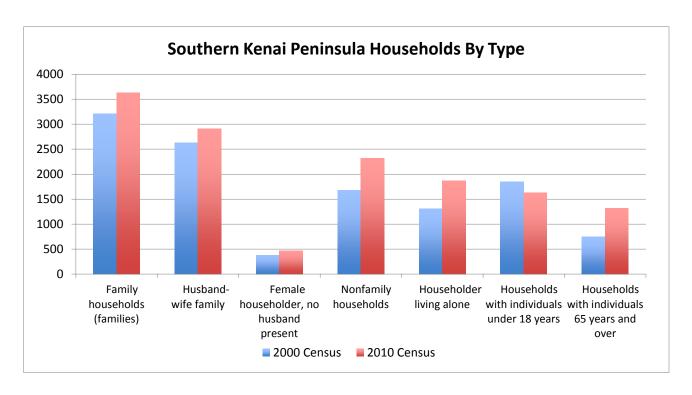


Figure 12. 2000 and 2010 Southern Kenai Peninsula households by type (US Census)

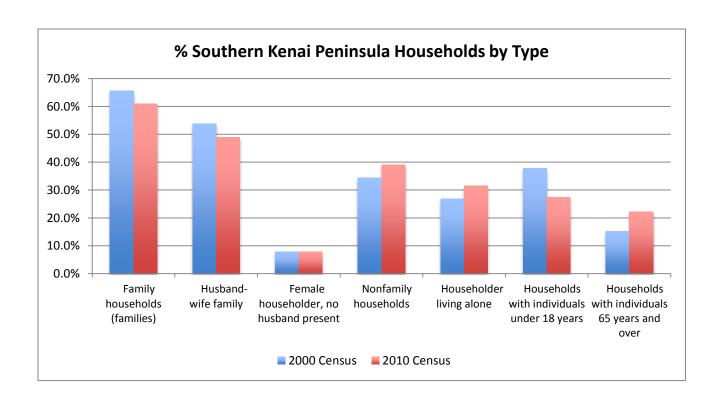


Figure 13. 2000 and 2010 % Southern Kenai Peninsula households by type (US Census)

Table 6. 2000 and 2010 Southern Kenai Peninsula community housing occupancy (US Census)

Subject	2000	% 2000	2010	% 2010
HOUSING OCCUPANCY				
Total housing units	6,877		8,678	
Occupied housing units	4,886	71.0%	5,949	68.6%
Vacant housing units	1,991	29.0%	2,729	31.4%
For seasonal, recreational, or occasional use	1,573	22.9%	1,968	22.7%

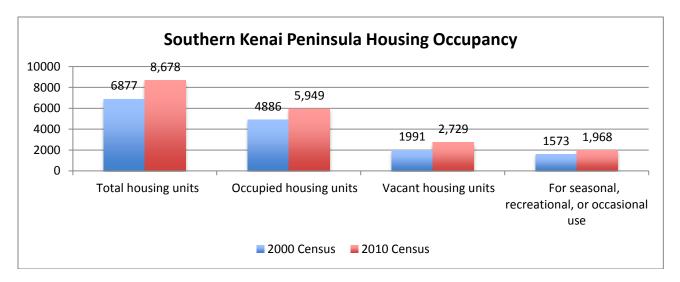


Figure 14. 2000 and 2010 Southern Kenai Peninsula housing occupancy numbers (US Census)

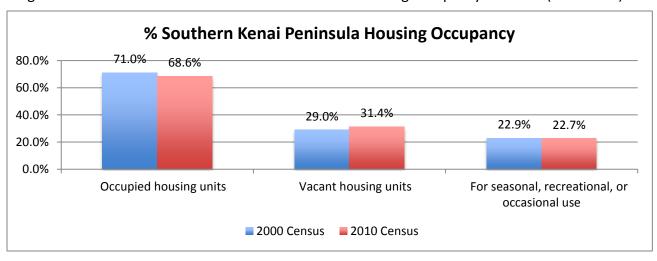


Figure 15. 2000 and 2010 Southern Kenai Peninsula housing occupancy percentages (US Census)

Table 7. 2000 and 2010 Southern Kenai Peninsula community housing tenure (US Census)

Subject	2000	% 2000	2010	% 2010
HOUSING TENURE				
Occupied housing units	4886		5,949	
Owner-occupied housing units	3,664	75.0%	4,311	72.5%
Average household size of owner- occupied units	2.85		2.7	
Renter-occupied housing units	1,222	25.0%	1,638	27.5%
Average household size of renter- occupied units	2.5		2.4	

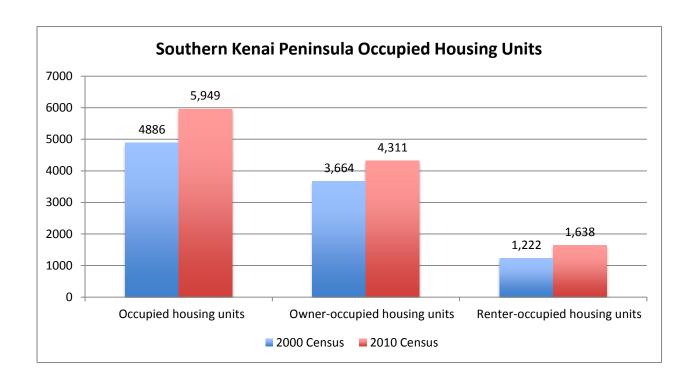


Figure 16. 2000 and 2010 Southern Kenai Peninsula occupied housing units (US Census)



Q2. What are the leading causes of death in the Southern Kenai Peninsula area?

Table 8. Leading Causes of Death in the Southern Kenai Peninsula area 2007-2011 (AK Bureau of Vital Statistics)

	Rank	Cause of Death	Deaths
2007	1	Cancer	45
	2	Heart Disease	28
	3	Accident	8
	4	Stroke	8
	5	Suicide	.5
2008	1	Cancer	51
	2	Heart Disease	41
	3	Accident	24
	4	Suicide	9
	5	Alzheimer's	7
2009	1	Cancer	51
	2	Heart Disease	41
	3	Accident	12
	4	Chronic Lower Respiratory Disease	8
	5	Chronic liver disease and cirrhosis	8
2010	1	Cancer	43
	2	Heart Disease	42
	3	Accident	9
	4	Suicide	8
	5	Chronic Lower Respiratory Disease	5
2011	1	Heart Disease	41
	2	Cancer	40
	3	Accident	15
	4	Chronic Lower Respiratory Disease	12
	5	Suicide	7

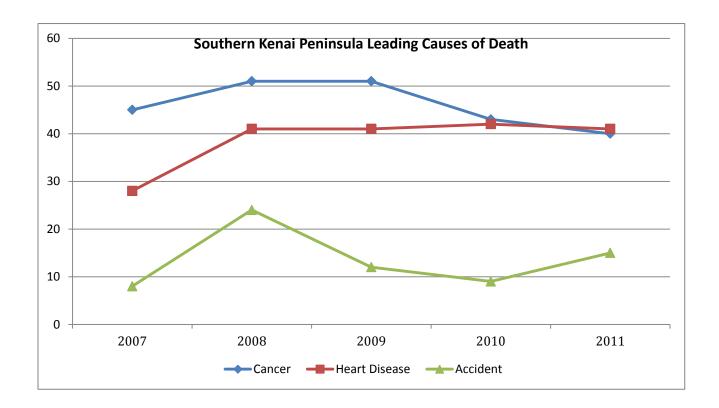


Figure 17. Southern Kenai Peninsula leading causes of death 2007-2011 (AK Bureau of Vital Stats)

Table 9. Southern Kenai Peninsula deaths due to select causes 2007-2011 (AK Bureau of Vital Statistics)

Total Cancer	Heart Disease	Unintentional Injuries	Alcohol-induced	Drug-induced	
231	193	68	35	34	

Top Five Leading Causes of Death in Alaska & the Kenai Peninsula from 2004-20094

- 1. Cancer
- 2. Diseases of the Heart
- 3. Unintentional injuries
- 4/5 Cerebrovascular diseases and Chronic lower respiratory disease (depending on the year)

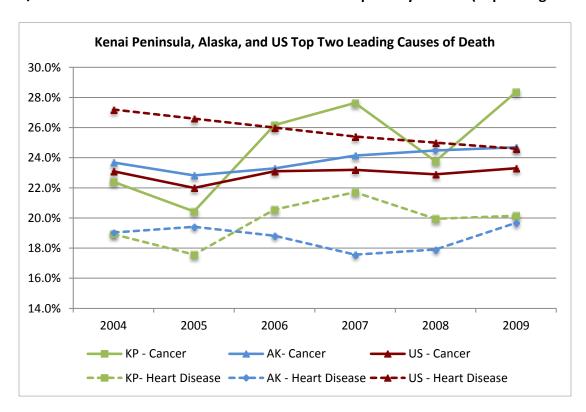


Figure 18. Top two leading causes of death in the Kenai Peninsula, Alaska, and the US (AK Bureau of Vital Statistics)

	2004	2005	2006	2007	2008	2009
KP - cancer	22.4%	20.4%	26.2%	27.6%	23.8%	28.4%
AK - cancer	23.7%	22.8%	23.3%	24.1%	24.5%	24.7%
US - cancer	23.1%	22.0%	23.1%	23.2%	22.9%	23.3%
KP - heart	18.9%	17.6%	20.6%	21.7%	19.9%	20.1%
AK - heart	19.0%	19.4%	18.8%	17.6%	17.9%	19.7%
US - heart	27.2%	26.6%	26.0%	25.4%	25.0%	24.6%

⁴ http://www.hss.state.ak.us/dph/bvs/death_statistics/Leading_Causes_Census/frame.html MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

Q2a. What data are available that track cancer and heart disease (top two causes)?

Table 10. Regional and/or Southern Kenai Peninsula community-level data available for cancer and heart disease

	Measure / Indicator	Source (s)	Figure / Value
	Cancer		
1	Kenai Peninsula, AK, US cancer mortality rate 2004- 2011	ABVS	Figure 28
2	Kenai Peninsula cancer mortality rate, 2006-2010	National Vital Statistics System ⁵	195.2
3	Average # of Kenai Peninsula cancer deaths per year, 2006-2010	National Vital Statistics System ⁵	95
4	# of Southern Kenai Peninsula cancer deaths, 2007- 2011	ABVS	231
	Heart Disease		
6	# of coronary heart disease and other heart-related deaths within the Kenai Peninsula	ABVS	Figure 21
7	# of Southern Kenai Peninsula heart disease deaths, 2007-2011		193
8	% of Southern Kenai Peninsula adults who report having cardiovascular disease (heart attack or angina)	BRFSS	Figure 22

BRFSS=Behavioral Risk Factor Surveillance System, ABVS=Alaska Bureau of Vital Statistics

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 $^{^5}$ Retrieved from $\underline{\text{http://statecancerprofiles.cancer.gov/cgi-bin/rate trend by cancer/rtcancer.pl?001\&0\&02\&2\&1\&0\&1}} \text{ on } 12.5.13$

Table 11. Deaths by Type of Cancer, Southern Kenai Peninsula 2007-2011 (AK Bureau of Vital Statistics)⁶

Type of Cancer	Number
Trachea, bronchus and lung	59
Other and unspecified	31
Breast	24
Colon, rectum and anus	23
Pancreas	14
Prostate	14
Liver and intrahepatic bile ducts	10
Brain	8
Esophagus	6
Leukemia	6

Heart disease-related deaths within the Kenai Peninsula



Figure 20. Number of coronary heart disease and other heart-related deaths within the Kenai Peninsula (Alaska Bureau of Vital Statistics)

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⁶ Southern Kenai Peninsula defined by AK Bureau of Vital Statistics as Anchor Point (M04); Fox River (M21); Fritz Creek (M44); Halibut Creek (M09); Happy Valley (M27); Homer (M01); Kachemak City, Kachemak Selo, Kachemak Selo Village, Kachemak Selo Vill (M25); Nanwelak (M08); Nikolaevsk, Nikolaevsk Village, Nikoleausk (M22); Ninilchik (M12); Port Graham (M14); Seldovia (M03); Razdolna, Razdolna Village, Voznesenka, Voznesenka Village, Aleneva Village, Skilak Lake, Kustatan (L99)

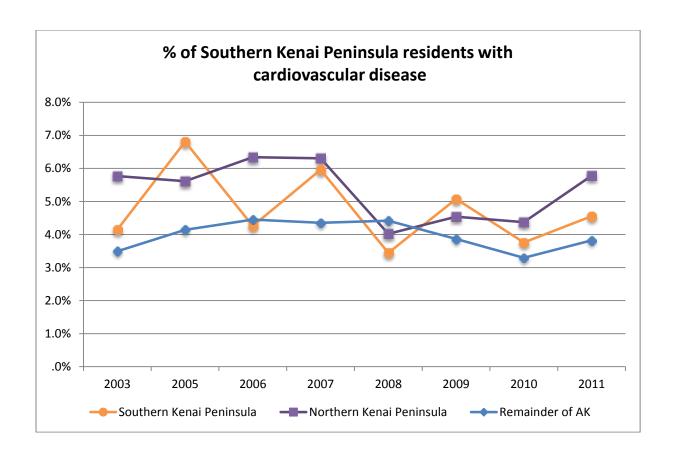


Figure 21. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report having cardiovascular disease (BRFSS). Figure does not reflect 95% confidence intervals for each region.

Table 12. Organizational-level data available for cancer and heart disease

Measure / Indicator	Source (s)		
Cancer			
% of patients with abnormal paps / cervical findings	KBFPC, SVT, SPH		
% of patients with abnormal clinical breast exams	KBFPC, SVT, SPH		
% of patients with abnormal mammograms	KBFPC		
Heart Disease			
% of patients diagnosed with heart disease	KBFPC, SVT, SPH		

KBFPC=Kachemak Bay Family Planning Clinic, SVT=Seldovia Village Tribe Health Center, SPH=South Peninsula Hospital

Q2b. What data are available that track key risk factors for cancer and heart disease

Key Risk Factors for Cancer and Heart Disease Tobacco use, alcohol use, unhealthy diets, physical inactivity, and exposure to ultraviolet (UV) rays from the sun and tanning beds are the main cancer risk factors according to the Centers for Disease Control and Prevention (CDC)⁷. Cancer deaths could be prevented by modifying or avoiding key risk factors, including:

- 1. Tobacco use
- 2. Alcohol use
- 3. Unhealthy diet with low fruit and vegetable intake
- 4. Physical inactivity
- 5. Overexposure to UV rays

Other High Risks:

- 1. Second-hand smoke
- 2. Hepatitis C
- 3. Being overweight or obese

⁷ Retrieved from http://www.cdc.gov/cancer/dcpc/prevention/other.htm *MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14*

According to the CDC⁸, the key risk factors for heart disease are:

Key Risk Factors

- 1. High blood pressure
- 2. High LDL cholesterol
- 3. Smoking

Other High Risks:

- 1. Diabetes
- 2. Overweight and obesity
- 3. Poor diet
- 4. Physical inactivity
- 5. Excessive alcohol use

Cancer and heart disease share some similar risk factors, thus efforts to reduce either cause of death could have shared interventions or actions.

⁸ Retrieved from http://www.cdc.gov/heartdisease/facts.htm
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Table 13. Regional and/or Southern Kenai Peninsula community-level data available for cancer and heart disease KEY and HIGH RISK FACTORS

Measure / Indicator	Source (s)	Figure
Cancer and Heart Disease Risk Factors		
% of Southern Kenai Peninsula adolescents who currently do not smoke cigarettes or cigars or use chewing tobacco, snuff, or dip	YRBS	Figure 29
% of Southern Kenai Peninsula adults who currently do not smoke cigarettes	BRFSS	Figure 30
% of Southern Kenai peninsula adults who report having 5 servings of fruits and vegetables per day	BRFSS	Figure 23
% of Southern Kenai Peninsula adults who report no leisure time physical activity in the past 30 days	BRFSS	Figure 24
% of Southern Kenai Peninsula adults who meet criteria for overweight or obesity	BRFSS	Figure 31
% of Southern Kenai Peninsula students who meet criteria for overweight or obesity (Alaska Department of Health and Social Services, Alaska Student BMI Surveillance System)	DHSS	Figures 32-35
% of Southern Kenai Peninsula adults who report binge drinking in the past 30 days	BRFSS	Figure 47
% of Southern Kenai Peninsula youth who report binge drinking in the past 30 days	YRBS	Figure 48
Heart Disease Risk Factors		
% of Southern Kenai Peninsula adults who were told they had high blood cholesterol	BRFSS	Figure 25
% of Southern Kenai Peninsula adults who were told they had high blood pressure	BRFSS	Figure 26
% of Southern Kenai Peninsula adults who report having non- gestational diabetes	BRFSS	Figure 27

BRFSS=Behavioral Risk Factor Surveillance System, YRBS=Youth Risk Behavior Survey

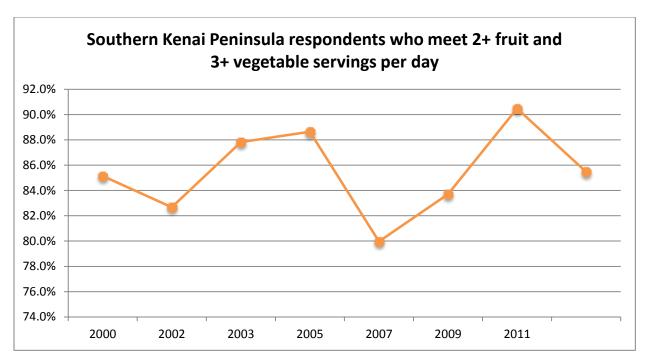


Figure 22. Percentage of Southern Kenai Peninsula respondents who report eating 2+ fruit and 3+ servings of vegetables per day (BRFSS). Figure does not reflect 95% confidence intervals

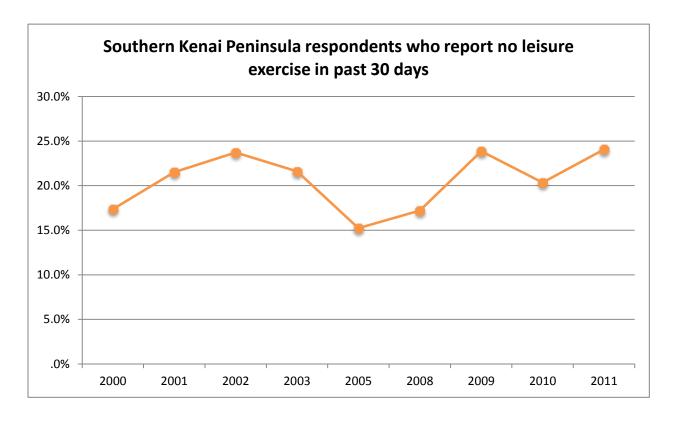


Figure 23. Percentage of Southern Kenai Peninsula respondents who report having no leisure time exercise in the past 30 days (BRFSS). Figure does not reflect 95% confidence intervals

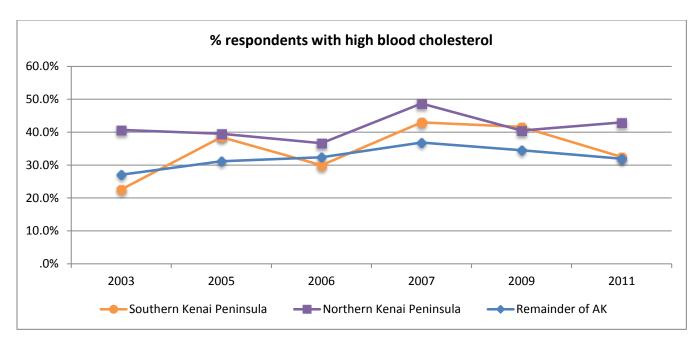


Figure 24. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report having high blood cholesterol (BRFSS). Figure does not reflect 95% confidence intervals for each region

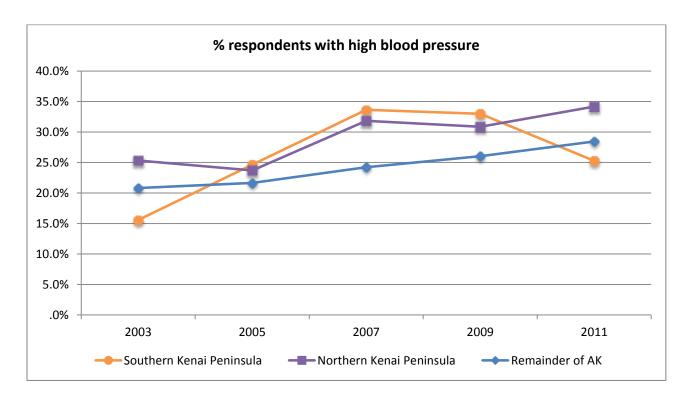


Figure 25. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report having high blood pressure (BRFSS). Figure does not reflect 95% confidence intervals for each region

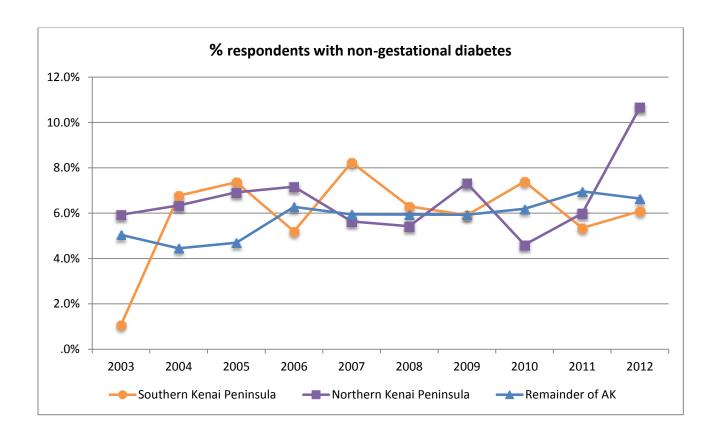


Figure 26. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report having non-gestational diabetes (BRFSS). Figure does not reflect 95% confidence intervals for each region

Table 14. Organizational-level data available for cancer and heart disease

	Measure / Indicator	Source (s)
	Cancer and Heart Disease Risk Factors	
	Inpatients with alcohol disorders	SPH
	ER visits for substance abuse	SPH
	% of patients with alcohol and other substances (non-tobacco) diagnosis	HMC, SVT
	# of clients in substance abuse treatment	Cook Inlet Council on Alcohol and Drug Abuse
	% of patients over 13 years old who are current smokers (or use any kind of tobacco product)	HMC, SVT, SPH
	% of patients over 18 years old who are overweight or obese	SVT, SPH
* /	additional measures related to substance abuse in Commu	nity Priority Issues below
	Heart Disease Risk Factors	
	% of patients over 18 years old currently diagnosed with hypertension	HMC, SVT, SPH
	% of patients over 18 years old currently diagnosed with diabetes	HMC, SVT, SPH

HMC=Homer Medical Clinic, SVT=Seldovia Village Tribe Health Center, SPH=South Peninsula Hospital



Q3. How does the Southern Kenai Peninsula compare to the state and nation on Healthy Alaskan 2020's top 25 leading indicators of health?

"Healthy Alaskans 2020, a joint effort between the state of Alaska Department of Health and Social Services and the Alaska Native Tribal Health Consortium, has recently released its 25 Leading Health Indicators — a list of critical health priorities for Alaska. The indicators provide a science-based framework for identifying public health priorities and are designed to guide efforts in Alaska over the next decade to improve health and ensure health equity for all Alaskans. The selection process was a collaborative effort among a wide spectrum of partners statewide and was both data-



and community-driven. A team of experts spent 10 months reviewing Alaska-specific quantitative data related to a broad range of health factors, gathered information from subject matter experts, and considered input from two public surveys in establishing the 25 indicators. The surveys were conducted in the fall of 2012 and spring of 2013 to ascertain Alaskans' top health concerns and received over 3,000 responses from individuals across the state.

The 25 leading health indicators include reducing the rates of cancer, suicide, and interpersonal violence and sexual assault. Alaskans also wanted to see alcohol, tobacco and drug use curtailed, and an increase in disease prevention through vaccines, improved access to in-home water and wastewater services, and lowering Alaska's obesity rate. Target goals for each of the 25 indicators have been established."

MAPP of the Southern Kenai Peninsula is prioritizing the collection of local data for these indicators to aid in comparison and understanding of our local Southern Kenai Peninsula health. Southern Kenai Peninsula community-level data is available for 14 of the 25 indicators and are shown below. For more information, see the HA2020 baseline data and targets document (released September 16, 2013).

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⁹ Retrieved from http://hss.state.ak.us/ha2020/]

MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

= available Southern Kenai Peninsula regional data

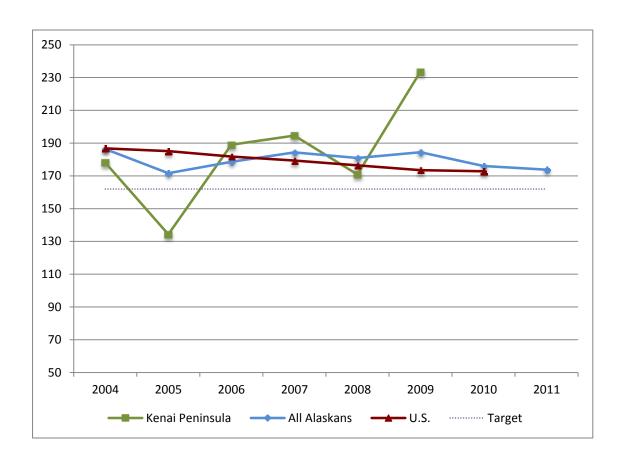
	HEALTHY ALASKANS 2020 LEADING HEALTH INDICATORS AND OB	JECTIVES
0	bjective/Indicator	Target
Re	duce Alaskan deaths from cancer	
1)	Cancer mortality rate per 100,000 population	162 per 100,000
Inc	crease the proportion of Alaskans who are tobacco-free	
2)	Percentage of adolescents (high school students in grades 9-12) who have not smoked cigarettes or cigars or used chewing tobacco, snuff, or dip on one or more of the past 30 d	80% lays.
3)	Percentage of adults (aged 18 years and older) who currently do not smoke cigarettes	83%
Re	duce the proportion of Alaskans who are overweight or obese	
4)	Percentage of adults (aged 18 years and older) who meet criteria for: • Overweight (body mass index of ≥ 25.0 and < 30 kg/m²); or • Obesity (body mass index of ≥ 30 kg/m²)	36% 27%
5)	 Percentage of children and adolescents who meet criteria for: Adolescents (high school students in grades 9-12) Overweight (age- and sex-specific body mass index of ≥ 85th and < 95th percentile); Obesity (age- and sex-specific body mass index of ≥ 95th percentile) 	; or 12% 10%
	 Children (students in grades K-8) Overweight (age- and sex-specific body mass index of ≥ 85th and < 95th percentile); Obesity (age- and sex-specific body mass index of ≥ 95th percentile) 	; or 15% 14%
	crease the proportion of Alaskans who are physically active	
6)	 Percentage of Alaskans who meet the CDC's Physical Activity Guidelines for Americans: Adults, aged 18 years and older (2008 CDC Physical Activity Guidelines: adults who do minutes or more total minutes per week of moderate exercise or vigorous exercise wheach minute of vigorous exercise contributes two minutes to the total) 	
	 Adolescents, high school students in grades 9-12 (2008 CDC Physical Activity Guideline adolescents who do at least 60 minutes of physical activity a day, every day of the wee 	
Re	duce Alaskan deaths from suicide	
7)		3.2 per 100,000 3.5 per 100,000
Re	duce the number of Alaskans experiencing poor mental health	
8)	Percentage of adolescents (high school students in grades 9-12) who felt so sad or hopeles every day for 2 weeks or more in a row that they stopped doing some usual activities during the past 12 months	
9)	Mean number of days in the past 30 days adults aged 18 and older report being mentally unhealthy $ \\$	2.9 days
	crease the proportion of Alaska youth with family and/or social support	
10)	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	47%

Rec	duce the number of Alaskans experiencing domestic violence and sexual assault		
11)	Rate of unique substantiated child maltreatment victims per 1,000 children (aged 0-17 years)	14.4	per 1,000
12)	Rate of rape per 100,000 population	67.5 pe	r 100,000
13)	Percentage of adolescents (high school students in grades 9-12) who were ever hit, slapp or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months	ed,	11%
Rec	duce the number of Alaskans experiencing alcohol and other drug dependence and abus	e	
14)	Alcohol induced mortality rate per 100,000 population	15.3 pe	r 100,000
5)	Percentage of persons who report binge drinking in the past 30 days based on the follow criteria: Adults (aged 18 years and older): five or more drinks for men; 4 or more drinks for women on one occasion Adolescents (high school students in grades 9-12): 5 or more alcoholic drinks in a row within a couple of hours, at least once in the past 30 days	ing	20% 17%
Rec	duce Alaskan deaths from unintentional injury		
	* *	54.8 pe	r 100,000
÷	rease the proportion of Alaskans who are protected from vaccine-preventable infectious	_	
	Percentage of children aged 19-35 months who do receive the ACIP (Advisory Committee Immunization Practices) recommended vaccination series (2013 ACIP recommendation 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella, 4 PCV)	on .	75%
Rec	duce the proportion of Alaskans experiencing infectious disease		
.8)	Incidence rate of Chlamydia trachomatis per 100,000 population 70)5.2 per	100,000
nc	rease the proportion of Alaskans with access to in-home water and wastewater services		
9)	Percentage of rural community housing units with water and sewer services		87%
nc	rease the proportion of Alaskans protected against dental diseases		
20)	Percentage of the Alaskan population served by community water systems with optimally fluoridated water	у	58%
Rec	duce the proportion of Alaskans without access to high quality and affordable healthcare	9	
21)	Percentage of women delivering live births who have not received prenatal care beginning first trimester of pregnancy	ig in	19%
22)	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)	6.7	per 1,000
23)	Percentage of adults aged 18 or over reporting that they could not afford to see a doctor the last 12 months	in	14%
Inc	rease the economic and educational status of Alaskans		
24)	Percentage of residents (all ages) living above the federal poverty level (as defined for Alaska)		90%

86%

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

HA2020 1. Cancer mortality rate per 100,000 population (Figure 27)



	2004	2005	2006	2007	2008	2009	2010	2011
Kenai Peninsula	178.1	134.3	189	194.6	170.9	233.6	-	-
All Alaskans	186.4	171.6	178.6	184.3	180.9	184.4	176	173.8
U.S.	186.8	185.1	181.8	179.3	176.4	173.5	172.8	-

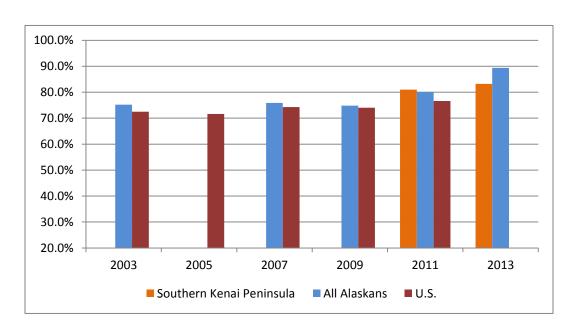
HA2020 Target: 162 per 100,000

Data Sources:

All Alaskans / Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics

U.S. – Centers for Disease Control and Prevention, National Center for Health Statistics Note: Cancer mortality rates are age-adjusted to the 2000 U.S. standard population.

HA2020 2. Percentage of adolescents (high school students in grades 9-12) who have not smoked cigarettes or cigars or used chewing tobacco, snuff, or dip on one or more of the past 30 days (Figure 28)



	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula					81.0%	83.2%
	75 20/		75.00/	74.00/	90.00/	
All Alaskans	75.2%		75.9%	74.8%	80.0%	89.4%
U.S.	72.5%	71.6%	74.3%	74.0%	76.6%	

HA2020 Target: 80%

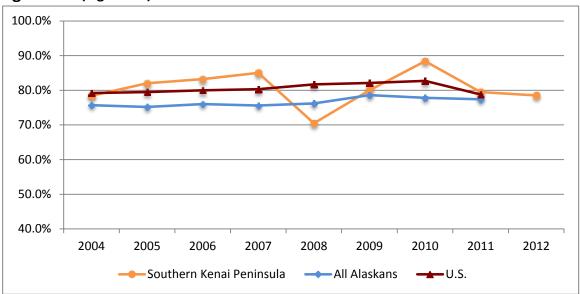
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. – Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals

HA2020 3. Percentage of adults (aged 18 years and older) who currently do not smoke cigarettes (Figure 29)



	2004	2005	2006	2007	2008	2009	2010	2011	2012
Southern Kenai									
Peninsula	78.4%	82%	83.2%	85%	70.5%	80%	88.4%	79.5%	78.5%
All Alaskans	75.7%	75.2%	76.0%	75.6%	76.2%	78.6%	77.8%	77.4%	
U.S.	79.2%	79.5%	80.0%	80.3%	81.7%	82.1%	82.7%	78.8%	

HA2020 Target: 83%

Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System

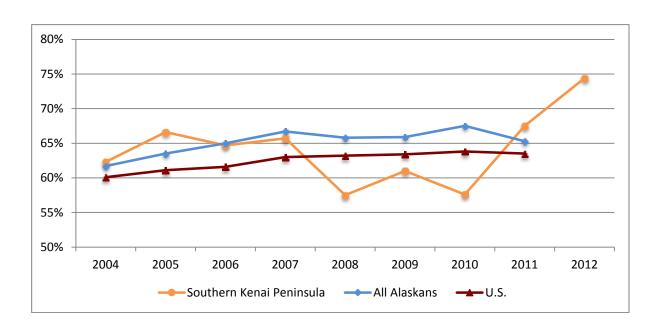
U.S. – Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Note: Alaska data were obtained from the Standard and Supplemental AK BRFSS surveys combined from 2004 through 2011. The Supplemental BRFSS survey is conducted using identical methodology as the Standard BRFSS and allows a doubling of the BRFSS sample size for those measures included on both surveys.

Post-stratification weights were used for Alaska data from 2000 through 2006; raking weights were used from 2007 through 2011. For more on this methodological change see:

http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx.

HA2020 4. Percentage of adults (aged 18 years and older) who meet criteria for overweight (body mass index \geq 25.0 and < 30 kg/m²) or obesity (body mass index of \geq 30 kg/m²) (Figure 30)



	2004	2005	2006	2007	2008	2009	2010	2011	2012
Southern Kenai									
Peninsula*	62.3%	66.6%	64.7%	65.7%	57.5%	61%	57.6%	67.5%	74.4%
All Alaskans*	61.7%	63.5%	65.0%	66.7%	65.8%	65.9%	67.5%	65.3%	
U.S.*	60.1%	61.1%	61.6%	63.0%	63.2%	63.4%	63.8%	63.5%	

HA2020 Target: 36% overweight, 27% obese, 63% overweight or obese combined

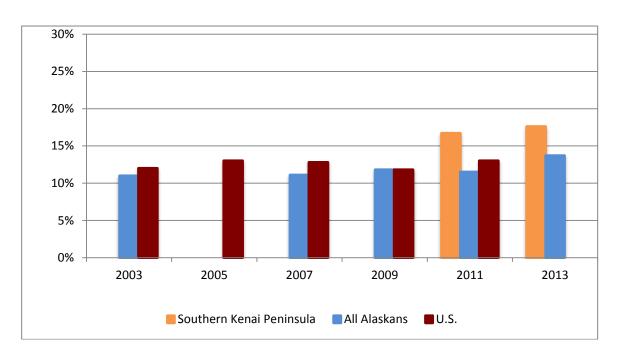
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System

U.S. – Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System Note: Post-stratification weights were used for Alaska data from 2000 through 2006; raking weights were used from 2007 through 2011. For more on this methodological change see: http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx.

^{*}Combined percentages for overweight and obese as this is the way in which values reported in SKP BRFSS file from Charles Utermohle

HA2020 5. Percentage of high school students who are overweight (BMI ≥85th percentile < 95th percentile) (Figure 31)



	2001	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula						16.7%	17.8%
All Alaskans		14.4%		16.2%	14.4%	14.4%	13.7%
U.S.	13.6%	14.6%	15.6%	15.6%	15.6%	15.2%	

HA2020 Target: 12%

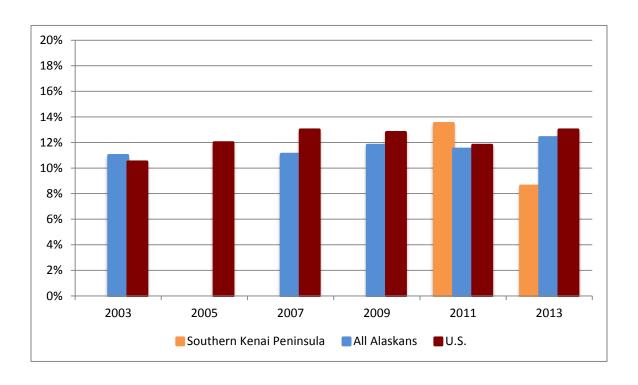
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. – Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

HA2020 5. Percentage of high school students who are obese (BMI ≥95th percentile) (Figure 32)



	2001	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula						13.5%	8.6%
All Alaskans		11.0%		11.1%	11.8%	11.5%	12.4%
U.S.	10.5%	12.0%	13.0%	12.8%	11.8%	13.0%	70

HA2020 Target: 10%

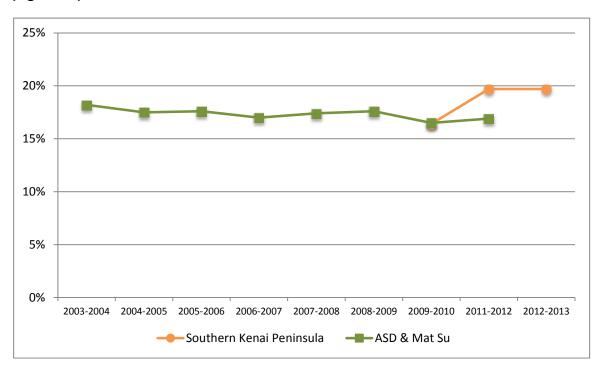
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. – Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

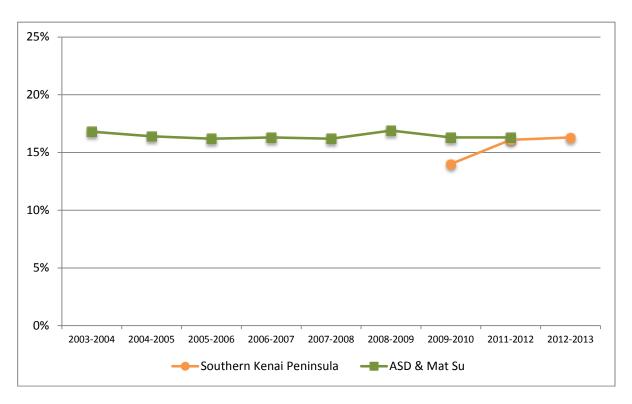
Percentage of children who are overweight (BMI ≥85th and < 95th percentile) (Figure 33)



	2003-	2004-	2005-	2006-	2007-	2008-	2009-	2011-	2012-
	2004	2005	2006	2007	2008	2009	2010	2012	2013
Southern Kenai Peninsula							16.4%	19.7%	19.7%
ASD & Mat Su	18.2%	17.5%	17.6%	17.0%	17.4%	17.6%	16.5%	16.9%	

HA2020 Target: 15%

Percentage of children who are obese (BMI ≥95th percentile) (Figure 34)



	2003-	2004-	2005-	2006-	2007-	2008-	2009-	2011-	2012-
	2004	2005	2006	2007	2008	2009	2010	2012	2013
Southern Kenai Peninsula							14.0%	16.1%	16.3%
ASD & Mat Su	16.8%	16.4%	16.2%	16.3%	16.2%	16.9%	16.3%	16.3%	

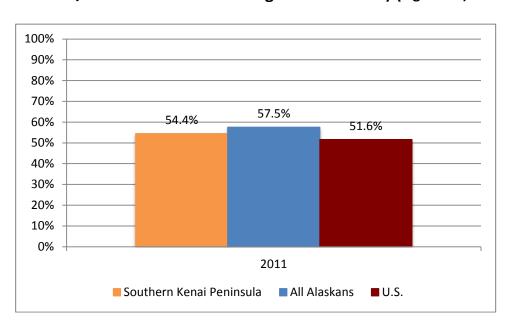
HA2020 Target: 14%

Data Source: Alaska Department of Health and Social Services, Section of Chronic Disease Prevention and Health Promotion, Obesity Prevention and Control Program, Alaska Student BMI Surveillance System

Note: ASD & Mat Su data shown are for Anchorage School District and Mat-Su combined (weighted) for Grades K, 1, 3, 5, 7

Southern Kenai Peninsula data are unweighted results, calculated for grades K-8 from Chapman school, McNeil Canyon elementary, Paul Banks elementary, Nanwalek schook, Nikolaevsk school, Ninilchik school, Port Graham school, Razdolna school, Susan B English school, Fireweed Academy, Homer Middle school, West Homer elementary, Kachemak Selo school, and Voznesenka elementary

HA2020 6. Percentage of Alaskans who met 2008 guidelines for physical activity (150 minutes/week of moderate or vigorous exercise) (Figure 35)



HA2020 Target: 61%

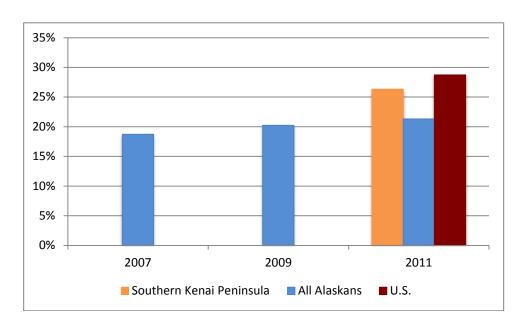
Data Sources:

All Alaskans/Southern Kenai Peninsula - Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System.

U.S. – Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Note: There have been changes in physical activity guidelines during the past decade. The above data reflect the new guidelines, and starting in 2011, the BRFSS measure was once again changed. Raking weights were used to calculate 2011 estimates. For more on this methodological change see: http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx

HA2020 6. Percentage of high school students who met 2008 Physical Activity Guidelines (2008 CDC Physical Activity Guidelines: adolescents who do at least 60 minutes of physical activity a day, every day of the week) (Figure 36)



	2007	2009	2011
Southern Kenai Peninsula			26.3%
All Alaskans	18.7%	20.2%	21.3%
U.S.			28.7%

HA2020 Target: 23%

Data Sources:

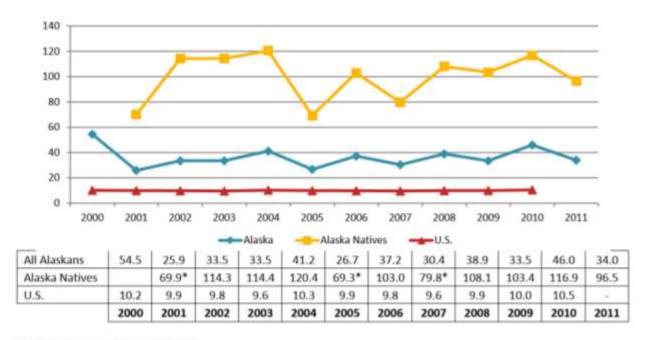
All Alaskans/Southern Kenai Peninsula - Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed in 2011 include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. - Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, and 2011. Figure does not reflect 95% confidence intervals. Because of changes in question content starting in 2011, national YRBS prevalence estimates derived from the 60 minutes of physical activity question in 2011 are not comparable to those reported in 2009 or earlier. On the 2005-2009 national YRBS questionnaire, physical activity was assessed with three questions (in the following order) that asked the number of days students participated in: 1) at least 60 minutes of aerobic (moderate and vigorous) physical activity, 2) at least 30 minutes of moderate physical activity, and 3) at least 60 minutes of aerobic (moderate and vigorous) physical activity. On the 2011 national YRBS questionnaire, only the 60 minutes of aerobic physical activity question was included.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 7. Suicide mortality rate per 100,000 population among population aged 15-24 years (Figure 37)



HA2020 Target: 43.2 per 100,000

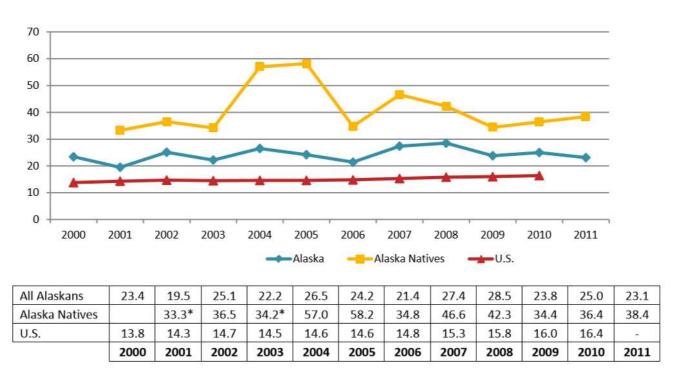
Data Sources:

All Alaskans/Alaska Natives – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics U.S. – Centers for Disease Control and Prevention, National Center for Health Statistics (retrieved from CDC WONDER Online Database)

^{*}Rates based on fewer than 20 occurrences are statistically unreliable and should be used with caution.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 7. Suicide mortality rate per 100,000 population among population aged 25 years and older (Figure 38)



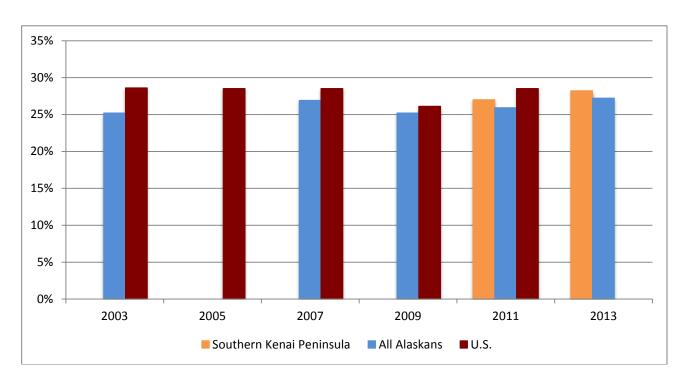
HA2020 Target: 23.5 per 100,000

Data Sources:

All Alaskans/Alaska Natives – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics U.S. – Centers for Disease Control and Prevention, National Center for Health Statistics (retrieved from CDC WONDER Online Database)

^{*}Rates based on fewer than 20 occurrences are statistically unreliable and should be used with caution.

HA2020 8. 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 (Figure 39)



	2003	2005	2007	2009	2011	2013
Southern Kenai						
Peninsula					27.0%	28.2%
All Alaskans	25.2%		26.9%	25.2%	25.9%	27.2%
U.S.	28.6%	28.5%	28.5%	26.1%	28.5%	

HA2020 Target: 23%

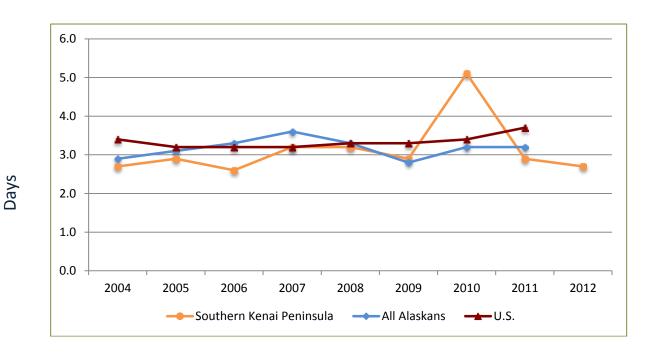
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. - Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

HA2020 9. Mean number of days in the past 30 days adults aged 18 and older report being mentally unhealthy (Figure 40)



	2004	2005	2006	2007	2008	2009	2010	2011	2012
Southern Kenai Peninsula	2.7	2.9	2.6	3.2	3.2	2.9	5.1	2.9	2.7
Kenai Peninsula							3.2	3.1	
All Alaskans	2.9	3.1	3.3	3.6	3.3	2.8	3.2	3.2	
U.S.	3.4	3.2	3.2	3.2	3.3	3.3	3.4	3.7	

HA2020 Target: 2.9 days

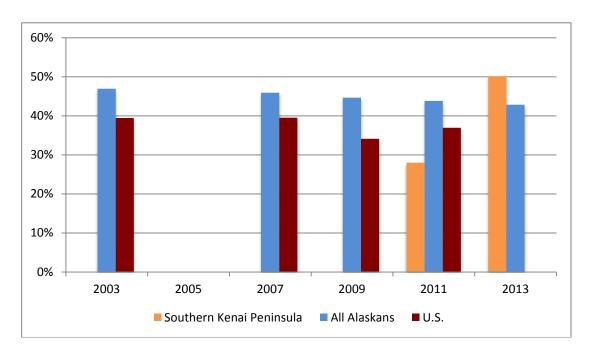
Data Sources:

All Alaskans/Kenai Peninsula/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System

U.S. – Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Note: The 2002 U.S. data is for 23 states. Post-stratification weights were used for Alaska data from 2000 through 2006; raking weights were used from 2007 through 2011. For more on this methodological change see: http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx.

HA2020 10. Percentage of adolescents (high school students in grades 9-12) with 3 or more adults (besides their parent(s)) from whom they feel comfortable seeking help (Figure 41)



	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula					28.0%	49.9%
All Alaskans	46.9%		45.9%	44.6%	43.8%	42.8%
U.S.	39.4%		39.5%	34.1%	36.9%	

HA2020 Target: 47%

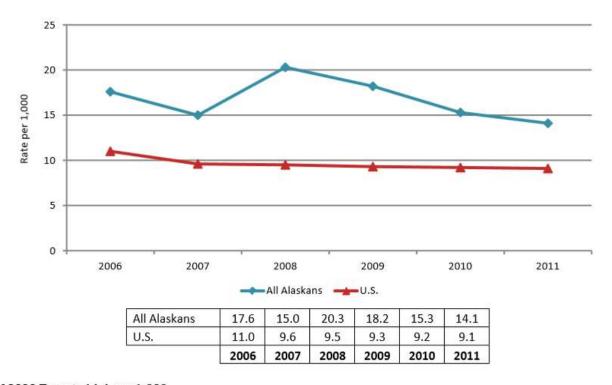
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools.

U.S. - Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

HA2020 11. Rate of unique substantiated child maltreatment victims per 1,000 children (aged 0-17 years) (Figure 42)



HA2020 Target: 14.4 per 1,000

Data Sources:

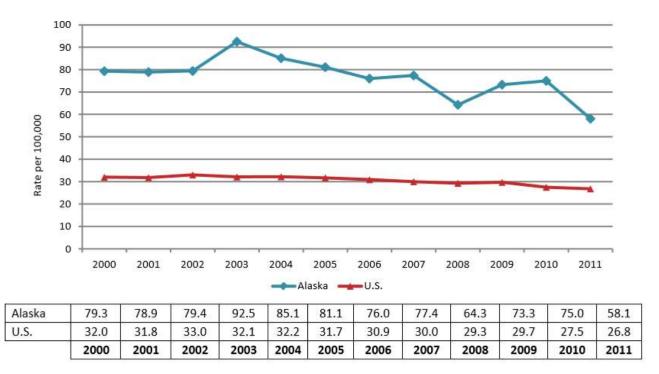
All Alaskans – Alaska Department of Health and Social Services, Office of Children's Services **U.S.** – U.S. Department of Health and Human Services, Administration for Children and Families

Note: Child abuse and neglect is defined as any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm.

Data caution: These data show substantiated reported cases rather than actual incidence.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 12. Rate of rape per 100,000 population (Figure 43)



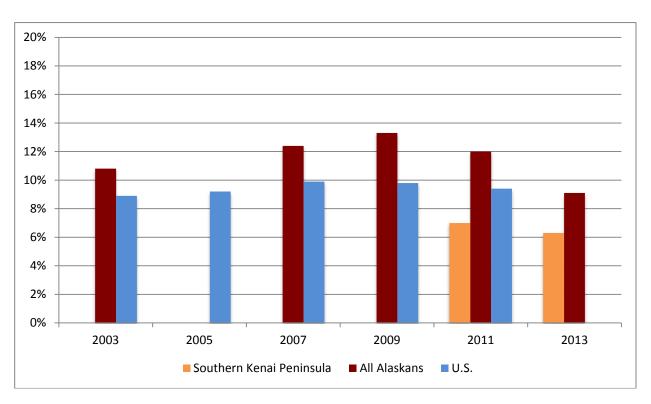
HA2020 Target: 67.5 per 1,000

Data Sources:

Alaska/U.S.: Federal Bureau of Investigation, Uniform Crime Reports (UCR) for "forcible rape" as prepared by the National Archive of Criminal Justice Data

Note: The UCR Program provides statistics based on data contributed by local, county, state, tribal, and federal law enforcement agencies. Caution should be used when comparing statistics from different jurisdictions, and consideration should be given to the various variables that affect crime and law enforcement's response in a given jurisdiction. In December 2011, the UCR Program changed its definition of rape; however, forcible rape statistics have been reported according to the historical definition (UCR Handbook 2004, Forcible Rape Definition: "The carnal knowledge of a female forcibly and against her will"). By definition, sexual attacks on males are excluded from the rape category and must be classified as assaults or other sex offenses depending on the nature of the crime and the extent of injury.

HA2020 13. Percentage of adolescents (high school students in grades 9-12) who were ever hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months (Figure 44)



	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula					7.0%	6.3%
All Alaskans	10.8%		12.4%	13.3%	12.0%	9.1%
U.S.	8.9%	9.2%	9.9%	9.8%	9.4%	

HA2020 Target: 11%

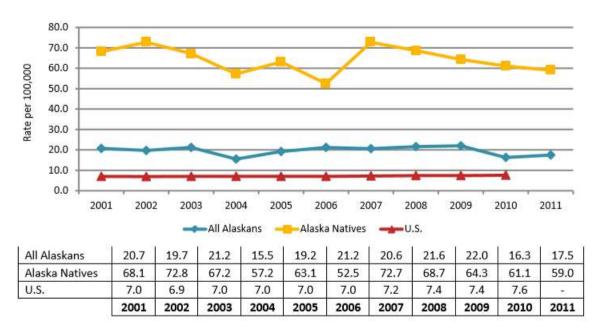
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed in 2011 include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools. Homer Flex not included in 2013 value.

U.S. – Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

HA2020 14. Alcohol induced mortality rate per 100,000 population (Figure 45)



HA2020 Target: 15.3 per 100,000

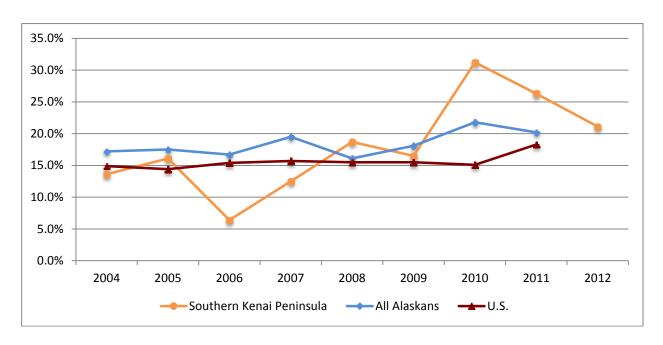
Data Sources:

All Alaskans/Alaska Natives – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics U.S. – Centers for Disease Control and Prevention, National Center for Health Statistics (NCHS). Underlying Cause of Death 1999-2010 (retrieved from CDC WONDER Online Database)

Note: Age-adjusted to the 2000 U.S. standard population. NCHS has defined selected causes of death groups for analysis of all ages mortality data including alcohol-induced causes. The group code values are not actual ICD codes published in the International Classification of Diseases, but are "recodes" defined to support analysis by the Selected Causes of Death groups. The list of codes for alcohol-induced causes was expanded in the 2003 data year to be more comprehensive.

Causes of death attributable to alcohol-induced mortality include ICD–10 codes E24.4, Alcohol-induced pseudo-Cushing's syndrome; F10, Mental and behavioral disorders due to alcohol use; G31.2, Degeneration of nervous system due to alcohol; G62.1, Alcoholic polyneuropathy; G72.1, Alcoholic myopathy; I42.6, Alcoholic cardiomyopathy; K29.2, Alcoholic gastritis; K70, Alcoholic liver disease; K86.0, Alcohol-induced chronic pancreatitis; R78.0, Finding of alcohol in blood; X45, Accidental poisoning by and exposure to alcohol; X65, Intentional self-poisoning by and exposure to alcohol; and Y15, Poisoning by and exposure to alcohol, undetermined intent. Alcohol-induced causes exclude accidents, homicides, and other causes indirectly related to alcohol use, as well as newborn deaths associated with maternal alcohol use. See CDC (2008). National Vital Statistics Reports, Volume 56, Number 10, p. 109. Available at http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56_10.pdf.

HA2020 15. Percentage of adults (aged 18 years and older) who report binge drinking in the past 30 days: 5 or more drinks for men; 4 or more drinks for women on one occasion (Figure 46)



	2004	2005	2006	2007	2008	2009	2010	2011	2012
Southern Kenai									
Peninsula	13.6%	16.1%	6.4%	12.5%	18.7%	16.5%	31.2%	26.3%	21.1%
All Alaskans	17.2%	17.5%	16.7%	19.5%	16.1%	18.1%	21.8%	20.2%	
U.S.	14.9%	14.4%	15.4%	15.7%	15.5%	15.5%	15.1%	18.3%	

HA2020 Target: 20%

Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System

U.S. - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

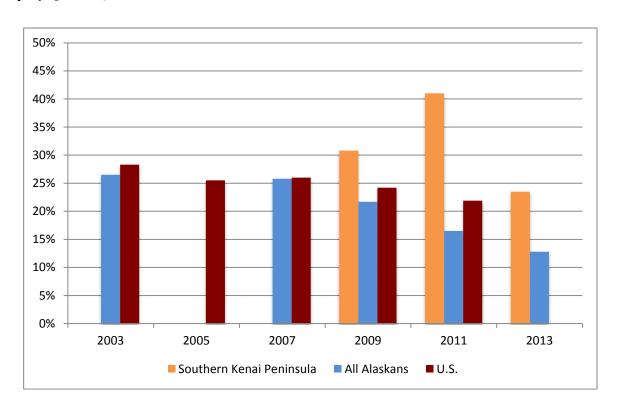
Note: Alaska data were obtained from the Standard AK BRFSS from 1991 through 2003, 2005 through 2007, and 2009 through 2010, and from the Standard and Supplemental AK BRFSS surveys combined in 2004 and 2008.

The Supplemental BRFSS survey is conducted using identical methodology as the Standard BRFSS and allows a doubling of the BRFSS sample size for those measures included on both surveys.

Post-stratification weights were used for Alaska data from 2000 through 2006; raking weights were used from 2007 through 2011. For more on this methodological change see:

http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx.

HA2020 15. Percentage of high school students who report binge drinking in the past 30 days (Figure 47)



	2003	2005	2007	2009	2011	2013
Southern Kenai Peninsula				30.8%	41.0%	23.5%
All Alaskans	26.5%		25.8%	21.7%	16.5%	12.8%
U.S.	28.3%	25.5%	26.0%	24.2%	21.9%	

HA2020 Target: 17%

Data Sources:

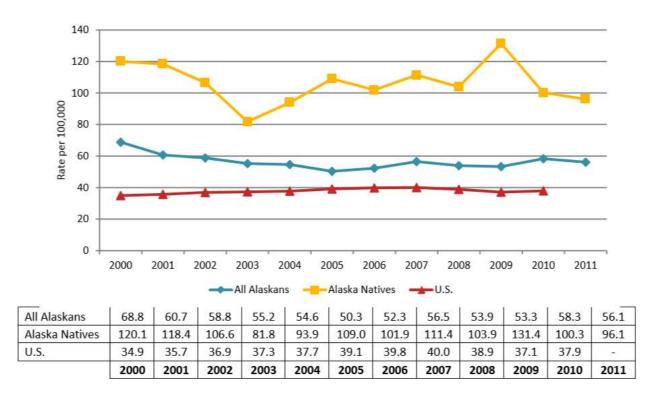
All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Youth Risk Behavior Survey. SKP schools surveyed in 2011 include Homer High, Homer Flex, Nanwalek, Ninilchik, Nikolaevsk, and Voznesenka Schools. Homer Flex not included in 2013 value.

U.S. - Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance System

Note: Weighted Alaska data for this indicator were obtained in 2003, 2007, 2009, 2011, and 2013. Figure does not reflect 95% confidence intervals.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 16. Unintentional injury mortality rate per 100,000 population (Figure 48)



HA2020 Target: 54.8 per 100,000

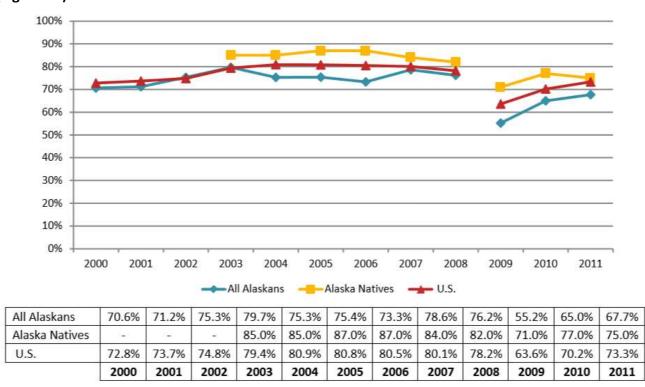
Data Sources:

All Alaskans/Alaska Natives – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics
U.S. – Centers for Disease Control and Prevention, National Center for Injury Prevention, Web-based Injury Statistics
Query and Reporting System (WISQARS)

Note: Rates are age-adjusted to the 2000 U.S. standard population.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 17. Percentage of children aged 19-35 months who do receive the ACIP (Advisory Committee on immunization Practices) recommended vaccination series (2013 ACIP recommendation 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella, 4 PC) (Figure 49)



HA2020 Target: 75%

Data Sources:

All Alaskans/U.S. – Centers for Disease Control and Prevention, National Immunization Survey Alaska Natives – Indian Health Service, Immunization Program

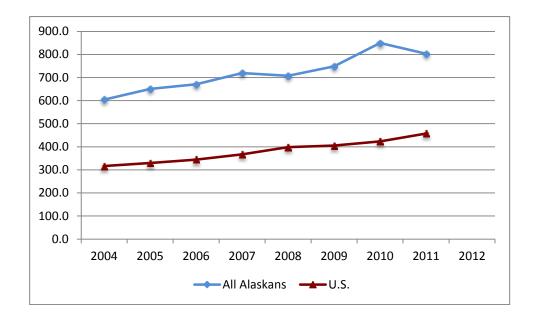
Note: Recommended vaccines changed over the time period shown above. Data reported for 2009-2011 are for the 4:3:1:3:3:1:4 series, which adds Varicella and PCV. **SKP Note:** Current Southern Kenai Peninsula immunization rates have fallen well below a level to confer "herd immunity," making our vulnerable populations (the very young, very old, and immune-compromised) more susceptible to vaccine-preventable communicable diseases. Herd immunity, according to the Centers for Disease Control and Prevention (CDC.gov) is "the resistance to an infectious agent of an entire group or community (and, in particular, protection of susceptible persons) as a result of a substantial proportion of the population being immune to the agent." While the statewide vaccination registry (VacTrAK) continues to be developed, local vaccination data is represented below from the **Homer Public Health Center**:

YEAR	TOTAL KIDS	# KIDS 431331	% KIDS 431331
FY09	77	50	65%
FY10	117	49	42%
FY11	61	37	61%
FY12	37	23	62%
FY13	24	19	79%

YEAR	TOTAL KIDS	# KIDS 4313314	% KIDS 4313314
FY09	77	N/A	N/A
FY10	117	47	40%
FY11	61	36	59%
FY12	37	19	51%
FY13	24	16	67%

HA2020 18. Incidence rate of Chlamydia trachomatis per 100,000 population (Figure 50)





	2004	2005	2006	2007	2008	2009	2010	2011	2012
All									
Alaskans	604.4	650.7	670.6	719.4	707.3	748.8	849.6	803.3	
U.S.	316.5	329.4	344.3	367.5	398.1	405.3	423.6	457.6	

HA2020 Target: 705.2 per 100,000

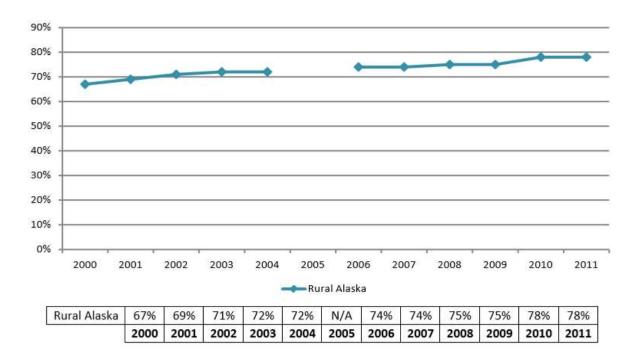
Data Sources:

All Alaskans – Alaska Department of Health and Social Services, Section of Epidemiology, STD Program **U.S.** – Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of STD Prevention, NCHHSTP Atlas

Notes: Rates are not age-adjusted.

Alaska is consistently the #1 or #2 state for chlamydia incidence nationwide. Because Alaskans are a mobile population, regular screening for STD's is recommended for all sexually active individuals statewide.

HA2020 19. Percentage of rural community housing units with water and sewer services (Figure 51)



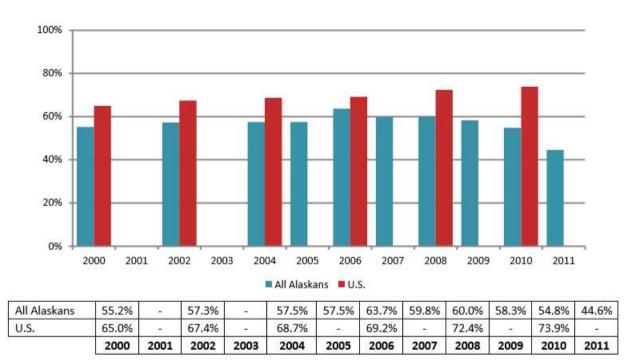
HA2020 Target: 87%

Data Source: Alaska Department of Environmental Conservation

Note: The above data are based on the following definitions: "Rural Community" is defined as an Alaska community with between 25 and 2,000 people that is not part of a metropolitan area and that is not connected to a highway system. "Housing Unit" is defined as a resident's primary home, used for most of the year. Seasonal homes, vacation homes, lodges, public structures and commercial buildings are not included in this definition. "Water and Sewer Service" is defined as the provision of running water and sewer service inside the home via community piped or covered haul system, individual well and septic systems, or some combination thereof.

Copied from HA2020 Baseline Data & Targets – as data unavailable for Southern Kenai Peninsula

HA2020 20. Percentage of the Alaskan population served by community water systems with optimally fluoridated water (Figure 52)



HA2020 Target: 58%

Data Sources:

All Alaskans - Alaska Department of Health and Social Services, Oral Health Program (2004-2011); Centers for Disease Control and Prevention, National Oral Health Surveillance System (2000/2002)

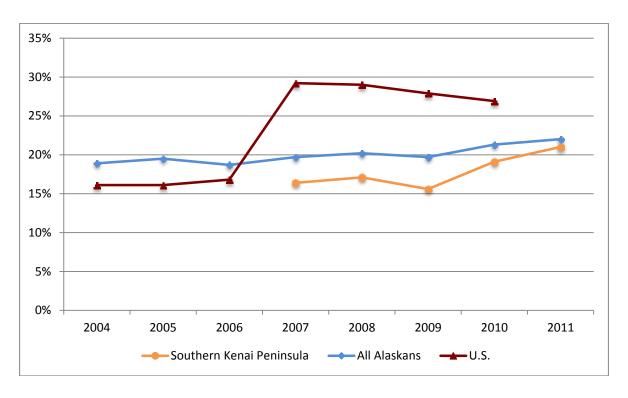
U.S. - Centers for Disease Control and Prevention, National Oral Health Surveillance System

Note: The 2004 Alaska percentage includes the Anchorage water system, which had an interruption for several months for replacement/repair of fluoridation equipment.

Newbrun E. Effectiveness of water fluoridation. J Public Health Dent 1989;49(5):279-289.

Brunelle JA, Carlos JP. Recent trends in dental caries in U.S. children and the effect of water fluoridation. J Dent Res 1990;69(Spec Iss):723-727.

HA2020 21. Percentage of women delivering live births who have not received prenatal care beginning in first trimester of pregnancy (Figure 53)



	2004	2005	2006	2007	2008	2009	2010	2011
Southern								
Kenai								
Peninsula				16.4%	17.1%	15.6%	19.1%	21.0%
All Alaskans	18.9%	19.5%	18.7%	19.7%	20.2%	19.7%	21.3%	22.0%
U.S.	16.1%	16.1%	16.8%	29.2%	29.0%	27.9%	26.9%	

HA2020 Target: 19%

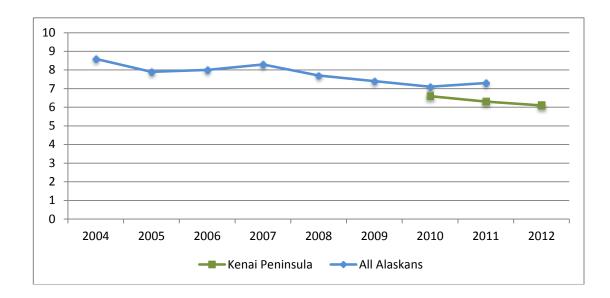
Data Sources:

All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Bureau of Vital Statistics

U.S. – Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

Note: Beginning in 2007, U.S. data are reported from the 2003 U.S. Standard Certificate of Live Birth. Data before and after 2007 are not directly comparable because of changes in the way that prenatal care initiation information was collected.

HA2020 22. 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) (Figure 54)

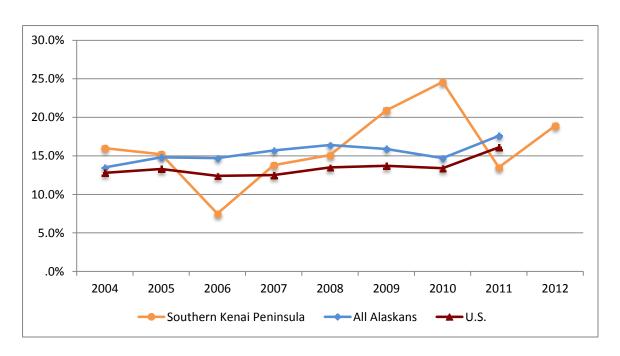


	2004	2005	2006	2007	2008	2009	2010	2011	2012
Kenai									
Peninsula							6.6	6.3	6.1
All Alaskans	8.6	7.9	8.0	8.3	7.7	7.4	7.1	7.3	

HA2020 Target: 6.7 per 1,000

Data Sources: Kenai Peninsula - Medicare/Dartmouth Institute 2010 (Co Health Rankings) All Alaskans- Alaska Hospital Discharge Data Set - Using the AHRQ/H-CUP Algorithm for the set of "prevention quality indicators" which counts as "preventable" the cases that are deemed to be unlikely to have required hospitalization if primary care and prevention services had been in place for those individuals. Note - "Potentially preventable hospitalizations" include selected acute conditions that meet the inclusion and exclusion rules for the numerator in any of the following Prevention Quality Indicators (PQIs): PQI #10 Dehydration Admission Rate; PQI #11 Bacterial Pneumonia Admission Rate; PQI #12 Urinary Tract Infection Admission Rate, and selected chronic conditions that meet the inclusion and exclusion rules for the numerator in any of the following PQIs: PQI #1 Diabetes Short-Term Complications Admission Rate; PQI #3 Diabetes Long-Term Complications Admission Rate; PQI #5 Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate; PQI #7 Hypertension Admission Rate; PQI #8 Heart Failure Admission Rate; PQI #13 Angina Without Procedure Admission Rate; PQI #14 Uncontrolled Diabetes Admission Rate; PQI #15 Asthma in Younger Adults Admission Rate; PQI #16 Lower-Extremity Amputation among Patients with Diabetes Rate. Discharges that meet the inclusion and exclusion rules for the numerator in more than one of the above PQIs are counted only once in the composite numerator. For more information on Hospital Discharge Data, see http://dhss.alaska.gov/dph/HealthPlanning/Pages/hospitaldischarge.aspx.

HA2020 23. Percentage of adults aged 18 or over reporting that they could not afford to see a doctor in the last 12 months (Figure 55)



	2004	2005	2006	2007	2008	2009	2010	2011
Southern								
Kenai								
Peninsula	16.8%	17.0%	3.6%	12.8%	14.5%	17.7%	19.3%	14.3%
All								
Alaskans	13.50%	14.80%	14.70%	15.70%	16.40%	15.90%	14.70%	17.60%
U.S.	12.80%	13.30%	12.40%	12.50%	13.50%	13.70%	13.40%	16.10%

HA2020 Target: 14%

Data Sources:

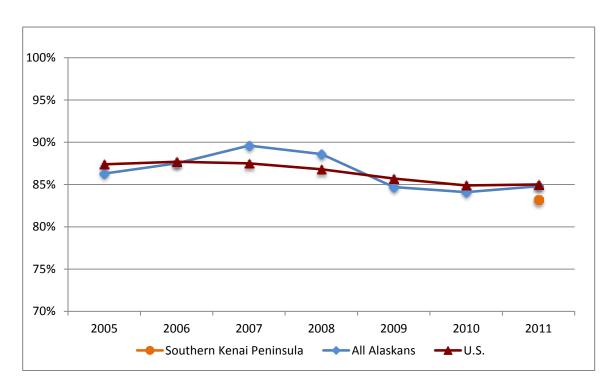
All Alaskans/Southern Kenai Peninsula – Alaska Department of Health and Social Services, Alaska Behavioral Risk Factor Surveillance System

U.S. – Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Note: Post-stratification weights were used for Alaska data from 2000 through 2006; raking weights were used from 2007 through 2011. For more on this methodological change see:

http://dhss.alaska.gov/dph/Chronic/Pages/brfss/method.aspx.

HA2020 24. Percentage of residents (all ages) living above the federal poverty level (as defined for Alaska) (Figure 56)



	2005	2006	2007	2008	2009	2010	2011
Southern Kenai							
Peninsula							83.2%
All Alaskans	86.3%	87.5%	89.6%	88.6%	84.7%	84.1%	84.8%
U.S.	87.4%	87.7%	87.5%	86.8%	85.7%	84.9%	85.0%

HA2020 Target: 90%

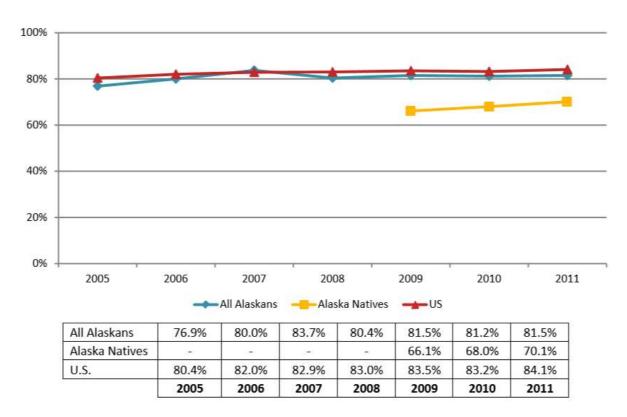
Data Source: U.S. Census Bureau, Current Population Survey Annual Social and Economic Supplement Southern Kenai Peninsula community 2011 values provided by Alice Rarig, State of Alaska Public Health

Note: Alaska estimates are based on income below 125% of the federal poverty level for the nation as per poverty guidelines. U.S estimates are based on income below 100% of the federal poverty level for the nation. The U.S. Census Bureau uses a set of income thresholds that vary by family size and composition to determine the "ratio of income to poverty threshold." The official poverty thresholds are updated for inflation using the Consumer Price Index, but they do not vary geographically except that the Department of Health and Human Services acknowledges high cost of living in Alaska and Hawaii with an adjustment called the "poverty guidelines" which are applied to programmatic eligibility criteria. The poverty definition uses money income before taxes and does not include capital gains, subsistence resources, or non-cash benefits (such as public housing, Medicaid, and food stamps). Historically, analyses of the monetary value of subsistence foods (documented when opportunity allowed by the Alaska Department of Fish and Game) has been found to be lower in poorer communities that in better-off communities, and not so substantial that it would alter the ranking of communities with regard to per capita "income" if it were taken into account.

Copied from HA2020 Baseline Data & Targets – as data collected in different timeframe for the Southern Kenai Peninsula

HA2020 25. Percentage of 18-24 year olds with high school diploma or equivalency (Figure 57)

The Southern Kenai Peninsula value is calculated from 2008-2012 five-year estimates, therefore cannot be directly compared to the one year surveys depicted below. The 2008-2012 estimate for Southern Kenai Peninsula 18-24 years olds with high school diploma or higher education is 85%



HA2020 Target: 86%

Data Source: U.S. Census Bureau, American Community Survey 1-Year Estimates

Note: Includes those 18-24 years old with a high school diploma (includes equivalency) or higher education (some college, associate's degree, bachelor's degree, graduate or professional degree). Alaska Native data is available for 5-year estimates and is shown for the last year of the 5-year period.



Q4. What are the statuses of the issues of most importance to the community?

The top six community issues, Economics / Affordability, Substance Abuse, Mental Health, Transportation, Family Issues, and Teens Resources / Activities, were prioritized from community and key informant survey responses (qualitative, primary data – see Themes and Strengths Assessment for more details) and available SKP community-level data is presented here:

Q4a. Economics / Affordability

Table 15. Available regional and/or Southern Kenai Peninsula community-level data for Economic **Characteristics**

Measure / Indicator	Source (s)	Figure / Value
Institute of Economic Research Report ¹⁰		
Population above poverty line	ACS 5-year est.	Figure 60
Relative cost of living	McDowell Report	Figure 61
Unemployment rate	ACS 5-year estimates	Figure 62
American Community Survey 2007-2011, 5-yr estimates ¹¹		
Average median SKP household income	ACS 5-year est.	\$48,787
Average mean SKP household income	ACS 5-year est.	\$59,799
SKP household income and benefits	ACS 5-year est.	Figure 63 & 64
SKP population that is civilian employed	ACS 5-year est.	42.3%
SKP class of worker	ACS 5-year est.	Figure 65
SKP Industries	ACS 5-year est.	Figure 66
% SKP population enrolled in school	ACS 5-year est.	22.4%
# of SKP housing units with a mortgage	ACS 5-year est.	2,259
Median monthly cost of housing units with a mortgage	ACS 5-year est.	\$1176
Monthly owner cost as % of household income	ACS 5-year est.	Figure 67
Average median SKP house value	ACS 5-year est.	\$186,692
# of SKP occupied housing units paying rent	ACS 5-year est.	1,374
% of household income that goes towards rent	ACS 5-year est.	Figure 68
Median monthly SKP gross rent	ACS 5-year est.	\$594

 $^{^{10}}$ see Appendix C for complete Institute of Social and Economic Research report for MAPP of the Southern Kenai Peninsula 11 see Appendix B for complete American Community 2007-2011, 5-year estimate Economic Characteristics comparisons between Southern Kenai Peninsula, Kenai Peninsula, Alaska, and United States MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

SKP monthly rent	ACS 5-year est.	Figure 69
% of houses occupied	ACS 5-year est.	69.4%
% of houses used for seasonal recreation, or occasional use	ACS 5-year est.	21.9%
% of civilian labor force that is unemployed	ACS 5-year est.	8.3%
% of SKP population in poverty	ACS 5-year est.	12%
% of SKP population in poverty (125% federal poverty level)		16.8%
% of SKP families with children under 18 in poverty	ACS 5-year est.	12.5%
% of SKP female households with no husband present and children under 18 yrs old in poverty	ACS 5-year est.	33.2%
% of SKP population that is 65+ years old in poverty	ACS 5-year est.	7.2%
% of SKP households that are single-parent households	ACS 5-year est.	27.7%
Type of fuel used by SKP residents	ACS 5-year est.	Figure 70
Other Regional and/or Community-level Data		
% SKP respondents who could not afford doctor visit	BRFSS	Figure 56
SKP homeless student count	KPBSD	Figure 71
% of SKP students who qualify for free and reduced lunch in 2012	KPBSD	50%
SKP WIC enrollment	WIC	Figure 72
SKP cases for public assistance	State of AK Public Assistance	Figure 73
SKP cases for childcare assistance	State of AK Public Assistance	Figure 74
SKP cases for heating assistance	State of AK Public Assistance	Figure 75
SKP cases for medicaid	State of AK Public Assistance	Figure 76
SKP cases for senior benefits	State of AK Public Assistance	Figure 77
SKP cases for Food Stamps / SNAP	State of AK Public Assistance	Figure 78
SKP cases for temporary assistance	State of AK Public Assistance	Figure 79

Table 16. Organizational-level data available for Economic Characteristics

Measure / Indicator	Source (s)
Homer average weekly food costs for family of 4	AK Cooperative
	Extension
Average annual Homer gasoline price (per gallon)	AK Cooperative
	Extension
Average annual Homer propane price (per gallon)	AK Cooperative
	Extension
Average annual Homer heating oil price (per gallon)	AK Cooperative
	Extension
Homer average monthly electricity costs (1000 Kwh)	AK Cooperative
	Extension
Average monthly residential electricity costs (630 Kwh)	Homer Electric Assoc.
Homer annual median home sales price	AK Multiple Listing
	System
Homer tax revenues: sales tax	City of Homer
Homer tax revenues: property tax	City of Homer
% of users who are under 100% of federal poverty level	Kachemak Bay Family
	Planning Clinic, SVT
% of patients at 101% or more poverty level receiving	SVT
sliding fee discount	
% of patients with Medicare	HMC, SVT, SPH
% of patients with Medicaid	HMC, SVT, SPH
% of patients with no insurance	HMC, SVT, SPH
% of patients with private insurance	HMC, SVT, SPH
# of individuals served by the Homer Community Food	Homer Community Food
Pantry	Pantry
# of Homer Chamber of Commerce walk ins	Homer Chamber of
	Commerce
# of Islands & Ocean Visitor center visitors	AK Maritime National
	Wildlife Refuge

HMC=Homer Medical Clinic, SVT=Seldovia Village Tribe Health Center, SPH=South Peninsula Hospital

Excerpt from Institute of Social and Economic Research report for MAPP of the SKP (see Appendix C for full report):

"The Southern Kenai Peninsula supports a diverse economy where approximately 88% of residents live above the poverty line (2011 American Community Survey 5-Year Estimate, see Figure 60). An estimated 8.4% percent of residents are unemployed, consistent with state and regional rates (2011).

American Community Survey 5-Year Estimate, see Figure 62). The Kenai Peninsula Borough is approximately equivalent to Anchorage in terms of cost of living, despite higher costs for transportation, clothing, and food, and lower housing costs (McDowell, 2009, see Figure 61). However, further data would be required to examine geographic, racial, socioeconomic, gender, and age differences within the Southern Kenai Peninsula.

Industries in Homer and Miller's Landing

Homer and Miller's Landing support a diversity of employment opportunities. The largest employer is local government, followed by the leisure and hospitality industries, and education and health services work. Figure 59 was generated by Alyssa Shanks of the Department of Labor. Further research would be required to determine if a similar chart could be generated for the Southern Kenai Peninsula. The majority (88%) of Southern Kenai Peninsula residents¹² are estimated to live above the poverty line, similar to the percentage living above the poverty line in Alaska and the Kenai Peninsula Borough. Figure 60 was generated from the 2007-2011 American Community Survey 5-Year Estimate and could serve as a potential method to compare state, regional, and Southern Kenai Peninsula rates.

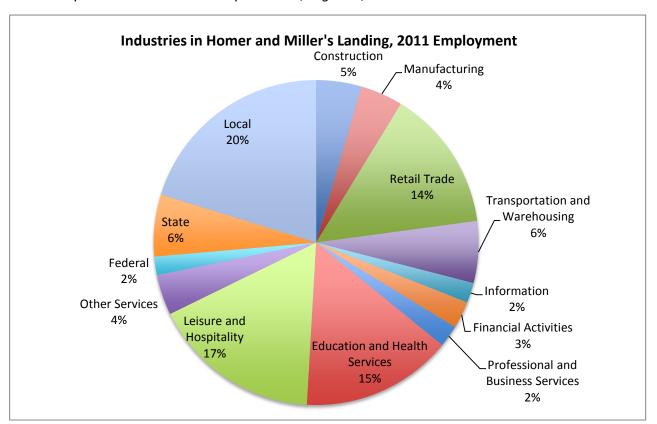


Figure 58. Industries in Homer and Miller's Landing, 2011 Employment (Alyssa Shanks, Dept of Labor)

Only data available from the American Community Survey were used to generate this rate, and it is consequently limited to the following communities: Anchor Point, Diamond Ridge, Fox River, Fritz Creek, Happy Valley, Homer City, Kachemak City, Nanwalek, Nikoleavsk, Ninilchik, Port Graham, Seldovia City, and Seldovia Village

MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

Disparities in poverty status exist between communities in the Southern Kenai Peninsula. SKP MAPP has collected information about the percentage of students enrolled in schools in the Southern Kenai Peninsula¹³ receiving free and reduced lunch. In 2012, this rate varied from 26% to 100% of the student population in a given school. Approximately 41% of students enrolled in schools in Homer and Seldovia received free and reduced lunch in 2012, while 72% of students enrolled in schools outside of Homer and Seldovia received free and reduced lunch.

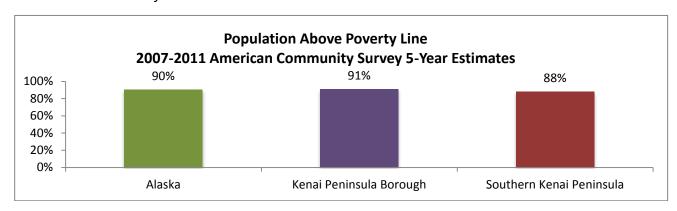


Figure 59. Population above 100% federal poverty line (ACS)

Cost of Living

The cost of living in the Kenai Peninsula Borough and Homer were approximately equal to the cost of living in Anchorage in 2008 (McDowell, 2009). This source was shared with ISER by SKP MAPP, which used a telephone survey of over 2,600 households in Alaska, including 26 in Homer. The McDowell Group's methods may serve as a possible way to determine and interpret the relative cost of living of the Southern Kenai Peninsula. Further research would be required to determine if comparable data is available for the Southern Kenai Peninsula region.

In Figure 61, 1.0 is the Anchorage cost of living, and is the height of each green bar. Homer and the Kenai Peninsula were found to have lower costs than Anchorage for housing. However, Homer and the Kenai Peninsula were found to have higher costs for transportation, food, and clothing. All three regions had similar costs for medical and other expenses. Further research would be needed to see if these 2008 comparisons are similar to 2013 rates, and to determine the relative cost of living in the Southern Kenai Peninsula.

85

Homer Flex, Fireweed Academy K-2 and Fireweed Academy 3-6

¹³ Data available for the following schools: Ninilchik, SB English, Homer High, Homer Middle, Chapman, Paul Banks, Nanwalek, Nikolaevsk, Port Graham, McNeil Canyon, Razdolna, West Homer Elementary, Voznesenka, Kachemak Selo,

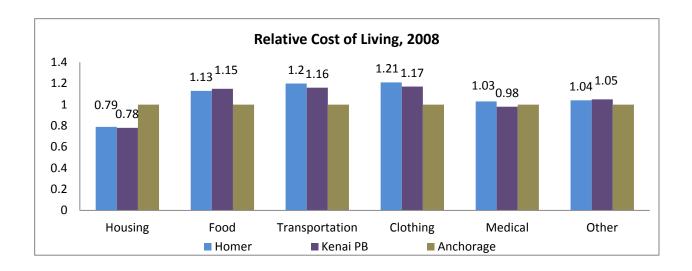


Figure 60. Relative cost of living, 2008 (McDowell Report)

Unemployment Rate

Comparisons of the unemployment rate for Alaska, the Kenai Peninsula Borough, and the Southern Kenai Peninsula show consistency between regions. This rate was generated from the 2007-2011 American Community Survey 5-Year Average¹⁴, and could be used as a potential method to compare state, regional, and Southern Kenai Peninsula rates. There may be significant variation among the communities of the Southern Kenai Peninsula, further research would be needed to determine accurate unemployment rates for each community in the Southern Kenai Peninsula and trends over time."

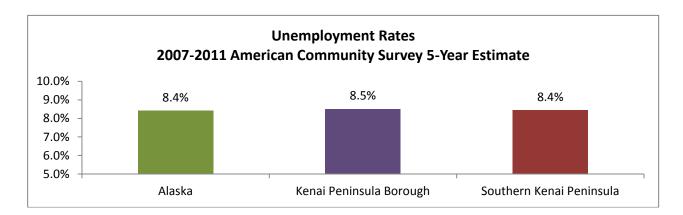


Figure 61. Unemployment rates for Southern Kenai Peninsula, Kenai Peninsula Borough, and Alaska (ACS)

Only data available from the American Community Survey were used to generate this rate, and it is consequently limited to the following communities: Anchor Point, Diamond Ridge, Fox River, Fritz Creek, Happy Valley, Homer City, Kachemak City, Nanwalek, Nikoleavsk, Ninilchik, Port Graham, Seldovia City, and Seldovia Village

MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

Southern Kenai Peninsula Economic Characteristics from American Community Survey 2007-2011, 5-year estimates (see Appendix B for more details and comparisons to Kenai Peninsula, AK, and US)

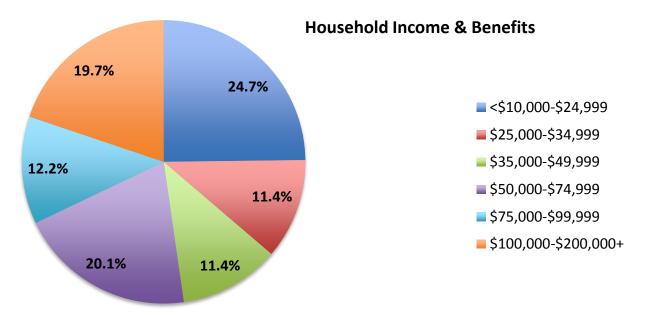


Figure 62. Southern Kenai Peninsula household income and benefits (ACS 2007-2011, 5 year estimates)

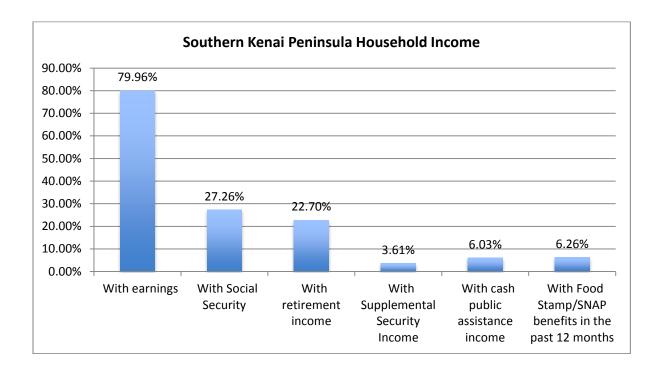


Figure 63. Southern Kenai Peninsula % household income by type (ACS 2007-2011, 5 year estimates)

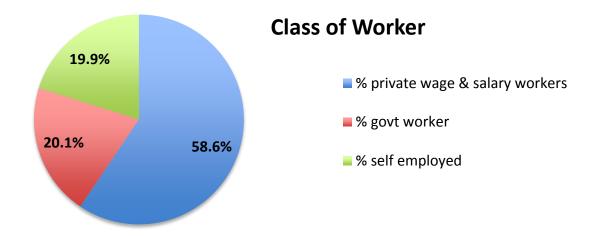


Figure 64. Southern Kenai Peninsula class of worker (ACS 2007-2011, 5 year estimates)

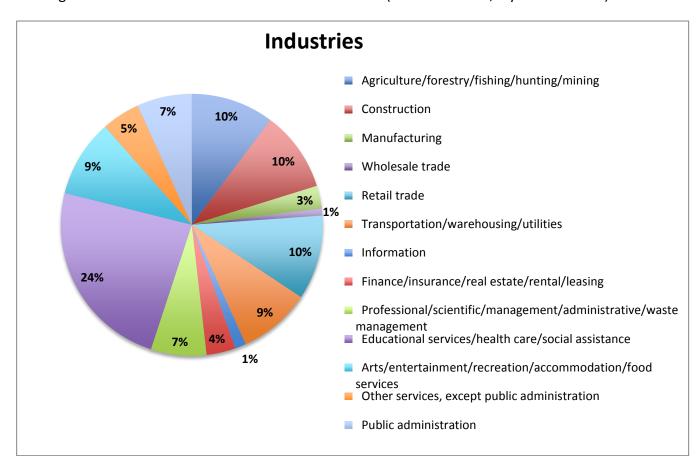


Figure 65. Percentage of Southern Kenai Peninsula industries (ACS 2007-2011, 5 year estimates)

There are **2259** Southern Kenai Peninsula housing units with a mortage. The median monthly cost of housing units with a mortage is **\$1176**.

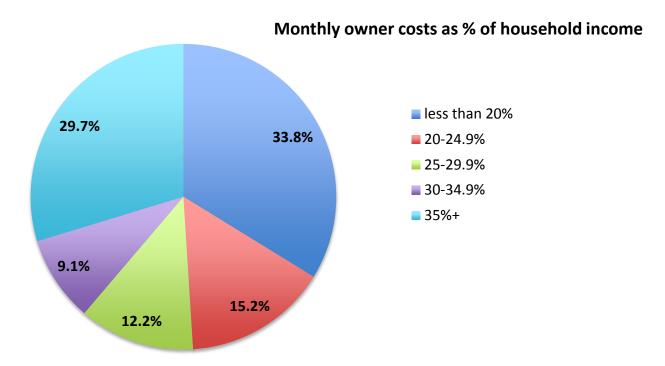


Figure 66. SKP monthly owner costs as % of household income (ACS 2007-2011, 5 year estimates)

NOTE: The generally accepted definition of affordability is for a household to pay no more than 30% of its annual income on housing. Families who pay more than 30% of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation and medical care. Affordable monthly housing expenses for Kenai Peninsula Borough residents are further defined as \$1,515 or below to be considered affordable for a family of four (based on households whose annual income is 80% or less of the median income range for the borough in which the property is located.

There are 1374 Southern Kenai Peninsula occupied housing units paying rent

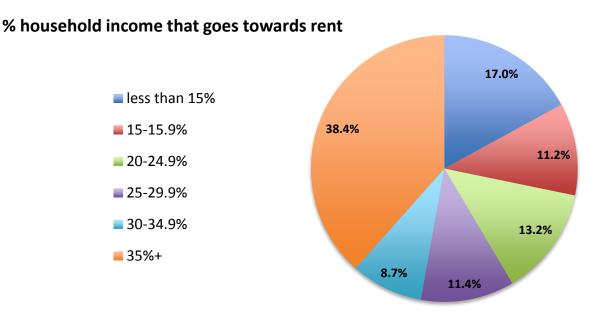


Figure 67. SKP household income that goes towards rent (ACS 2007-2011, 5 year estimates)

The median monthly Southern Kenai Peninsula gross rent is \$594.

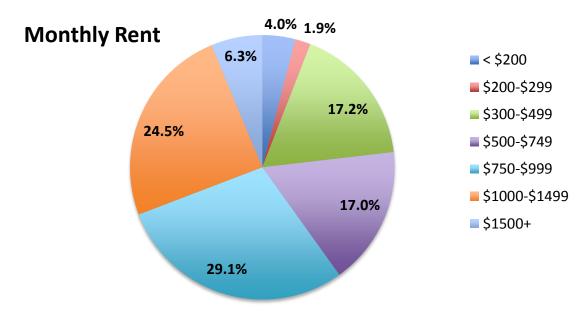


Figure 68. SKP monthly rent (ACS 2007-2011, 5 year estimates)

Type of fuel used by Southern Kenai Peninsula residents

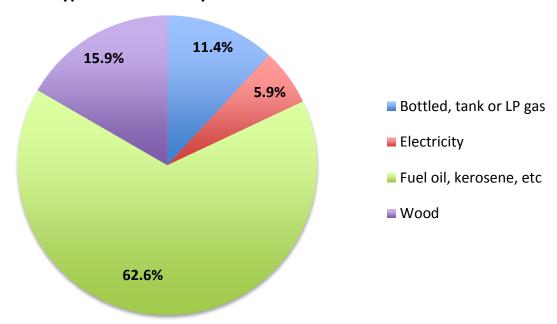


Figure 69. SKP resident % type of fuel used (ACS 2007-2011, 5 year estimates)

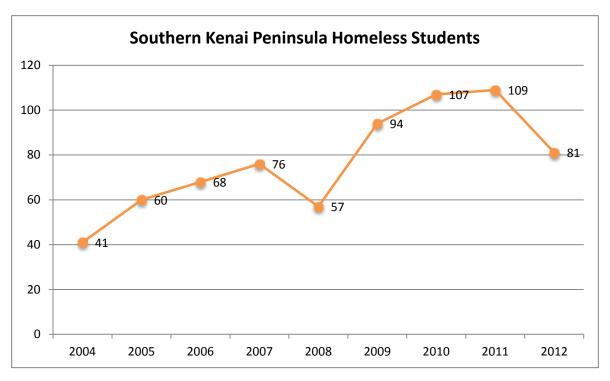


Figure 70. Southern Kenai Peninsula students who are homeless – does not include individuals who have not yet entered school or are not enrolled (KPBSD)

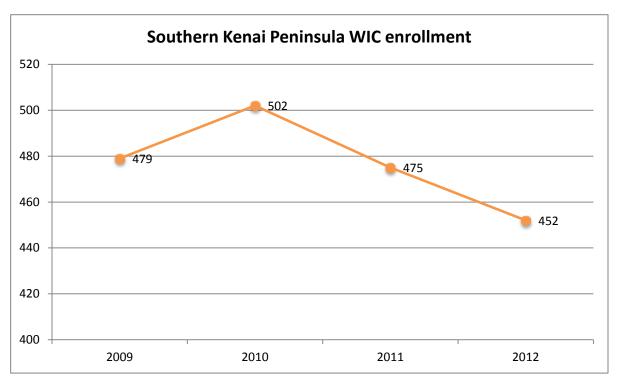


Figure 71. Southern Kenai Peninsula women enrolled in Women Infant Child assistance program (Homer WIC office)

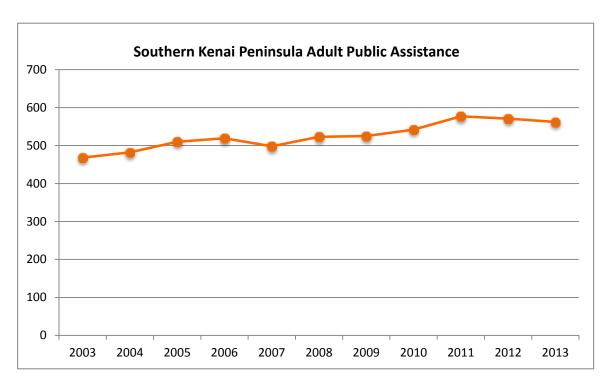


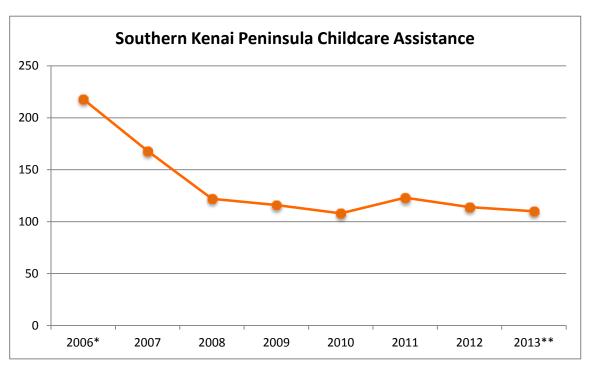
Figure 72. Annual Number of Combined Monthly Open Cases for Public Assistance

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 10 years of monthly Adult Public Assistance individual client files were compiled using SPSS for the time interval between 2003 and 2013 (the latest complete year of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an unweighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 230,107 individuals receiving Adult Public Assistance, and of those, 5,777 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: Adult Public Assistance numbers above reflect annual totals of de-duplicated individual monthly caseloads.

Additional Info (taken from http://dhss.alaska.gov/dpa/Pages/apa/default.aspx): Alaska's Adult Public Assistance (APA) program provides cash assistance to needy aged, blind, and disabled Alaskans to help them remain independent. The APA program gives cash to Supplemental Security Income (SSI) recipients and others who have income and resources within APA income and resource limits. APA recipients are also eligible for Medicaid benefits.



^{*} Does not include January, 2006

Figure 73. Annual Number of Combined Monthly Open Cases for Childcare Assistance

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: Approximately 7 years of monthly Child Care individual client files were compiled using SPSS for the time interval between February 2006 (the first available month of data) and November 2013 (the latest complete month of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an un-weighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 79,649 individual children receiving Child Care assistance, and of those, 1,079 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: Childcare Assistance numbers above reflect annual totals of de-duplicated individual monthly caseloads.

Additional Info (taken from http://dhss.alaska.gov/dpa/Pages/ccare/parents.aspx):

The Child Care Assistance Program provides assistance with child care expenses for eligible families who are working or participating in an education or training program.

Child Care Assistance in Alaska is known as "Parents Achieving Self Sufficiency" (PASS) and is divided into three categories; PASS I, PASS II, and PASS III.

^{**} Does not include December, 2013

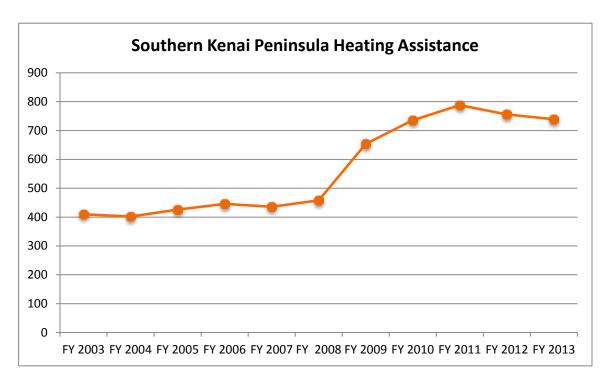


Figure 74. Number of Annual Open Cases for Heating Assistance

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 10 years of fiscal year Heating Assistance files were compiled using SPSS for the time interval between Fiscal Years 2003 and 2013 (the latest complete fiscal year of data). Cases were sorted by year and residence city to produce an un-weighted total of household cases by year and residence city. The descriptives procedure was used to derive a total of 234,475 households receiving Heating Assistance, and of those, 6,251 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, the file was split by year and residence city to produce a table using the descriptives procedure to list un-weighted household counts.

Note: Heating Assistance numbers above reflect annual totals (by fiscal year) of de-duplicated household fiscal year caseloads.

Additional Info (taken from http://dhss.alaska.gov/dpa/Pages/hap/default.aspx):

Heating Assistance helps households pay a portion of home heating expenses. The program runs from October 1 through April 30. Households with elderly or disabled members may apply from September 1 through April 30. All other households may apply beginning October 1st. The first benefit checks will be processed on November 1, 2012.

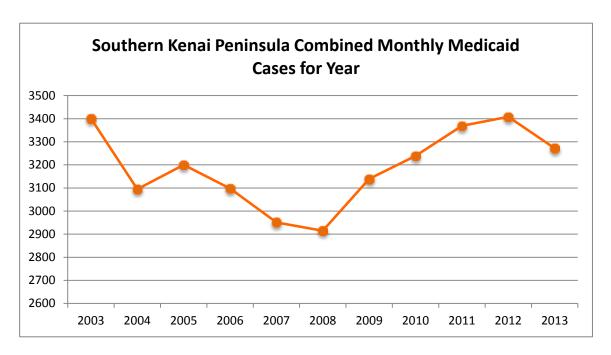


Figure 75. Annual Number of Combined Monthly Open Medicaid Cases

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer,

Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 10 years of monthly Medicaid individual client files were compiled using SPSS for the time interval between 2003 and 2013 (the latest complete year of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an un-weighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 1,606,036 individuals receiving Medicaid, and of those, 35,087 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: Medicaid numbers above reflect annual totals of de-duplicated individual monthly caseloads.

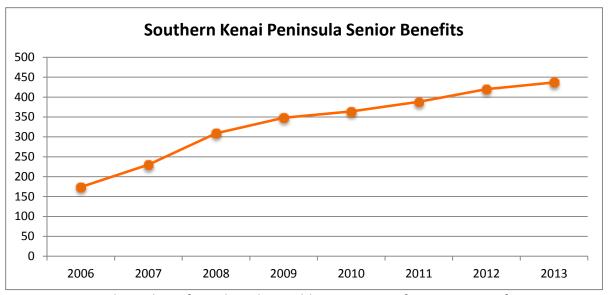


Figure 76. Annual Number of Combined Monthly Open Cases for Senior Benefits

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 7 years of monthly Senior Benefits individual client files were compiled using SPSS for the time interval between 2006 (the earliest year of data) and 2013 (the latest complete year of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an un-weighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 89,968 individuals receiving Adult Public Assistance, and of those, 2,670 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: Senior Benefits numbers above reflect annual totals of de-duplicated individual monthly caseloads.

Additional Info (taken from http://dhss.alaska.gov/dpa/Pages/seniorbenefits/default.aspx): The Senior Benefits Program was established on August 1, 2007. It pays cash benefits to Alaskan seniors who are age 65 or older and have low to moderate income. Cash payments are \$125, \$175, or \$250 each month depending on income. The income limits for each payment level are tied to the Alaska Federal Poverty Guidelines and change each year as the poverty level changes.

TO BE ELIGIBLE YOU MUST:

Age: Be age 65 or older

Alaska Residency:

- Live in Alaska voluntarily and intend to make Alaska your home
- Not be in Alaska for a temporary purpose such as a vacation or business trip

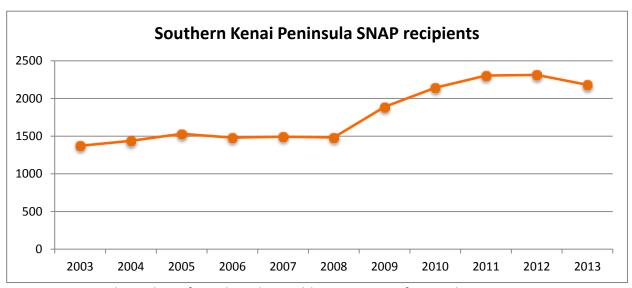


Figure 77. Annual Number of Combined Monthly Open Cases for Food Stamps

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer,

Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 10 years of monthly SNAP individual client files were compiled using SPSS for the time interval between 2003 and 2013 (the latest complete year of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an un-weighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 1,253,247 individuals receiving SNAP, and of those, 19,630 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: SNAP (Supplemental Nutrition Assistance Program) numbers above reflect annual totals of deduplicated individual monthly caseloads.

Additional Information (taken from http://dhss.alaska.gov/dpa/Pages/fstamps/default.aspx): The Division of Public Assistance issues Food Stamp benefits via the Alaska Quest card. The amount a household receives each month depends on the household's countable income and size of the household. Eligible households use the Food Stamp benefits to buy food products from authorized stores statewide.

Eligible applicants must pass income and assets tests. The gross monthly income test is based on 130% of the current Alaska poverty standard.

To receive Food Stamp benefits, most able-bodied people between 16 and 59 years old must register for work, participate in the Employment & Training Program if offered, accept offers of employment, and cannot quit a job. Alaska has special rules that allow for higher Food Stamp benefits in rural areas, and the use of benefits to purchase certain hunting and fishing subsistence supplies.

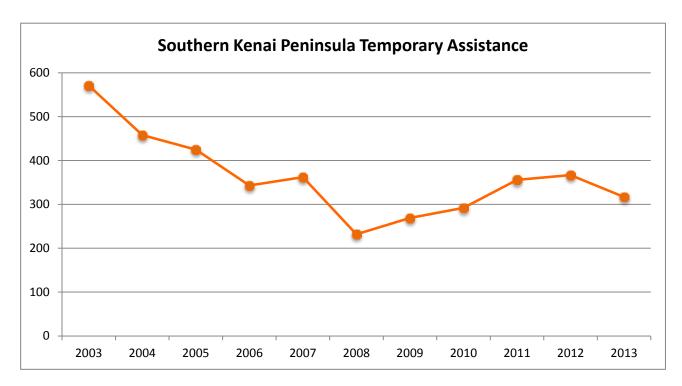


Figure 78. Annual Number of Combined Monthly Open Cases for Temporary Assistance

Population: Includes Southern Kenai Peninsula communities of Anchor Point, Fritz Creek, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia.

Methodology: 10 years of monthly Temporary Assistance individual client files were compiled using SPSS for the time interval between 2003 and 2013 (the latest complete year of data). A variable denoting calendar year was extracted from the Report Month variable, and cases were then sorted and de-duplicated using the aggregate command by year, residence city, and client ID to produce an unweighted count of individual cases by year and residence city. The descriptives procedure was used to derive a total of 241,322 individuals receiving Temporary Assistance, and of those, 3,992 were selected on the basis of self-reported residence city of either Anchor Point, Fritz Creek, Halibut Cove, Homer, Nanwalek, Nikolaevsk, Ninilchik, Port Graham, and Seldovia (the lowest level of location data available). Finally, crosstabulations were performed on residence city by year to produce yearly totals by city and year. Yearly totals combining all cities are displayed in the graph above.

Note: Temporary assistance numbers above reflect annual totals of de-duplicated individual monthly caseloads.

Additional Info (taken from http://dhss.alaska.gov/dpa/Pages/atap/default.aspx):

The Alaska Temporary Assistance Program (ATAP) provides cash assistance and work services to low-income families with children to help them with basic needs while they work toward becoming self-sufficient. This program is provided under the federal Temporary Assistance for Needy Families (TANF) block grant.

ATAP changed the traditional focus of the state's public assistance program for needy families to an employment-focused program from an entitlement under the Aid to Families with Dependent Children (AFDC) program. Temporary Assistance stresses family self-sufficiency through employment.

Interpretation from AK Public Assistance on program trends:

1. <u>ATAP</u>: The economic uptick is the general answer for the reduction in ATAP cases in the past year. The division's implementation of the Families First Program for ATAP recipients is also starting to show positive results, which should lead to a decline in the caseload too. Susan Lacey (907-283-2919) is a supervisor for the Kenai region work services team and might be able to help answer with more specifics on any economic/application trends for the Kenai area.

The PASS childcare program is affiliated with ATAP, but operated by the Child Care Program Office (CCPO). PASS I/II childcare are exclusively for ATAP recipients (PASS II is available for a year for "post-TA" recipients), but PASS III is available to anyone and is operated by different subcontractors throughout the state. The LeeShore Center (907-283-4707) is the provider for the Kenai region and they be able to provide more information.

- 2. Childcare Program Office: Information before 2006 is not available since the Integrated Child Care Information System was implemented in 2006 and this system is how the Child Care Program Office collects data. The economy in Southern Kenai decreased during 2006-2010, therefore childcare was not in as much demand during this timeframe as well. An increase to the State's Child Care Assistance Rate's and the Child Care Assistance Family Income and Contribution Schedule did have an impact that showed a modest increase of participating children in 2010. Since 2010 the number of participating children has leveled.
- 3. <u>Heating Assistance Program</u>: Looking at the charts, one can see that heating assistance numbers were fairly consistent (in the 400-450 household range) through FY 2008. In FY 2009 the numbers began to rise because we introduced the Alaska Affordable Heating Program (AKAHP) in 2009. With that we increased outreach and advertising and saw the numbers, in all communities, increase. Advertising was cut back in FY 2012 because of program funding cuts. The household count decreased from a high of 788 down to 739. At the end of FY 2012 Clay Butcher commented that the decrease might have been a result of the cut back in advertising.

Another reason for a drop in the numbers could be related to a change in procedures related to people living in subsidized housing. In order to qualify for assistance they need to have \$200 in out-of-pocket costs. Subsidy worksheets need to be analyzed to determine the amount of utility subsidy they are already receiving with their housing subsidy, look at their actual heating bills, and determine that what they actually paid, out of their own pockets (not the utility subsidy) to see if they qualify. So, for example, if a person lives in subsidized housing and receives a monthly utility allowance of \$300 a month (\$3,600 a year). If their total heating costs for the year are \$3,400, they would not qualify because they wouldn't have any out-of-pocket costs. In order for them to qualify, their annual heating costs would have to be at least \$3,800 for the year. It was discovered in FY 2012 that some of our eligibility techs were not calculating this using the correct data from the agency subsidizing the housing/utilities. When we started following the correct procedures, some subsidized housing residents who previously qualified no longer did.

- 4. <u>Medicaid</u>: Overall in the past year (Jan 2013 December 2013) total Medicaid enrollment is down 4%. There are several factors that contribute to the decline.
 - a. In June 2012 we implemented an "opt out" question for Medicaid on our multi benefit application and recertification. If the applicant did not check the box to "opt out" then we processed their application for Medicaid even if they were not part of a Medicaid eligibility group. This caused higher enrollment numbers in 2012 and 2013 since we have implemented the "opt out" process. Those numbers have decreased over the year. The new multi benefit application, approved by CMS, does not have an opt out question. The applicant must indicate that they wish to apply for Medicaid.
 - b. Alaska economy is strengthening, Alaska's job growth was 0.5 percent in 2013, and the state is expected to add jobs at a rate of 0.4 percent this year, <u>Alaska Economic Forecast for 2014</u>.
 - c. From October 1st to date our eligibility staff have been processing Medicaid applications under MAGI rules and pre MAGI rules. This process is not seamless and there have been a few delays in benefit determinations. We have implemented a mandatory overtime requirement for eligibility staff to ensure that we manage the work load and manage any backlog in registration of applications.
- 5. <u>SNAP</u>: The national average has decreased over the last few years, but the state average has increased. I believe it is completely based on the economy. The cost of living in Alaska is higher than most, if not all, states, therefore our income limits differ. With the economic decline the increase in assistance was necessary. In order to have a national average there have to be highs and lows, ours just happens to be the high end.

Q4. What are the statuses of the issues of most importance to the community?

Q4b. Substance Abuse

Table 17. Available regional and/or Southern Kenai Peninsula community-level data for substance abuse

Measure / Indicator	Source (s)	Figure / Value
% of SKP adolescents who currently do not smoke cigarettes or cigars or used chewing tobacco, snuff, or dip	YRBS	Figure 29
% of SKP adults who do not smoke	BRFSS	Figure 30
% of SKP adults who report binge drinking in the past 30	BRFSS	Figure 47
days		
% of SKP youth who report binge drinking in the past 30 days	YRBS	Figure 48
Reported Southern Kenai Peninsula 2007-2011 alcohol	AK Vital	35
induced death and rates	Stats	
Continuum of Care: Addictive Medicine Treatment Criteria	American	Figure 80
	Society of	
	Addictive	
	Medicine	

A consistent message captured in the Community Themes and Strengths Assessment was feedback that our Southern Kenai Peninsula community lacks substance abuse treatment services. Shown in the following continuum of care figure, the only direct substance abuse treatment services available are outpatient services (provided by Cook Inlet Council on Alcohol and Drug Abuse and South Peninsula Behavioral Health Services). Thus, there is a wide spectrum of services that are not available in the Southern Kenai Peninsula geographic region.

Figure 79. American Society of Addictive Medicine Continuum of Care for Substance Abuse Services. Yellow box below demonstrates the only available services within the SKP.

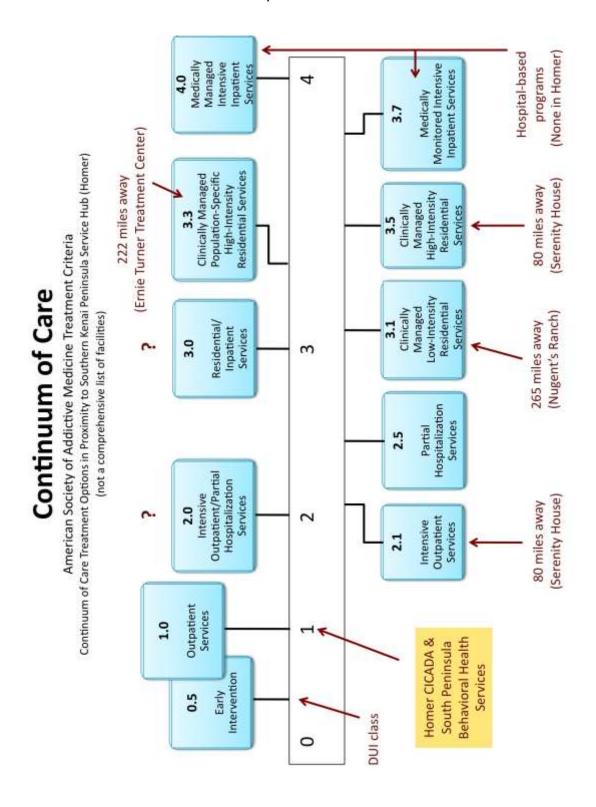


Table 18. Available organizational-level data for substance abuse

Measure / Indicator	Source (s)
% of patients over 13 years old who are current smokers	HMC, SVT, SPH
% of patients with alcohol and other substances (non-tobacco) diagnosis)	HMC, SVT
# of clients in substance abuse treatment and	Cook Inlet Council on
referral type	Alcohol and Drug Abuse
Age and sex demographics of CICADA clients	Cook Inlet Council on
	Alcohol and Drug Abuse
Inpatients with alcohol disorders	SPH
ER visits for substance abuse	SPH
# of incidents involving alcohol	Homer Police
# of adult DUI arrests in Homer	Homer Police
Homer # of drug crimes	AK Courts
Homer drug arrests	AK Court
Case reports involving alcohol	AK State Troopers

HMC=Homer Medical Clinic, SVT=Seldovia Village Tribe Health Center, SPH=South Peninsula Hospital

Q4. What quantitative data do we have on the qualitative issues raised by community members?

Q4c. Mental Health

Table 19. Available regional and/or Southern Kenai Peninsula community-level data for mental health

Measure / Indicator	Source (s)	Figure
Institute of Economic Research Report ¹⁵		
% of adolescents who felt so sad or hopeless every day for 2	YRBS	Figure
wks or more in a row that they stopped doing some usual		81
activities during the past 12 months		
Average Mentally Unhealthy Days in Last Month for Adults	CDC, BRFSS	Figure
in the U.S., Alaska, and Southern Kenai Peninsula		41

^{*}See Homer Prevention Project Needs Assessment for additional data on alcohol abuse.

see Appendix C for complete Institute of Social and Economic Research report for MAPP of the Southern Kenai Peninsula

MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

Table 20. Available organizational-level data for mental health

Measure / Indicator	Source (s)
# of mental health emergency services provided	SPBHS
# of youth with severely emotionally disturbed illness	SPBHS
# of patients diagnosed with depression & mood	HMC, SVT, SPH
disorders	
# of patients with anxiety	SVT, SPH
# of adults with severely mentally disturbed illness	SPBHS

HMC=Homer Medical Clinic, SVT=Seldovia Village Tribe Health Center, SPH=South Peninsula Hospital, SPBHS=South Peninsula Behavioral Health Services

Excerpt from Institute of Social and Economic Research report for MAPP of the SKP (see Appendix C for full report):

Youth Mental/Emotional Health

High school students who took part in the Youth Risk Behavioral Survey (YRBS) responded to the question: "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?" The percentage of youth who responded "yes" was approximately 28.5% nationally (with a confidence interval of 27.2%-29.7%), approximately 25.9% in Alaska (confidence interval 23.2% to 28.9%), and estimated at 27.0% for the Southern Kenai Peninsula (Centers for Disease Control; SKP MAPP). The state and national rates were extracted by ISER staff from the CDC website, and their confidence intervals are indicated by squares above and below the top of each column. If a confidence interval for one region or population overlaps with another, they are considered not statistically significantly different from one another. It's unclear what the confidence intervals are for the SKP MAPP collected Southern Kenai Peninsula rate, however, the 2011 percentage is within the confidence interval for the state percentage, and close to the national rate. Further research would be needed to determine trends over time.

The Youth Risk Behavioral Survey (YRBS) is taken only by students enrolled and attending school.

However, youth not enrolled in school are more likely to engage in health-risk behaviors (CDC, 1994). In addition, local parental permission procedures apply to YRBS, resulting in inconsistent data, however, a CDC study found that parental permission procedures did not impact estimates (Eaton, 2004).

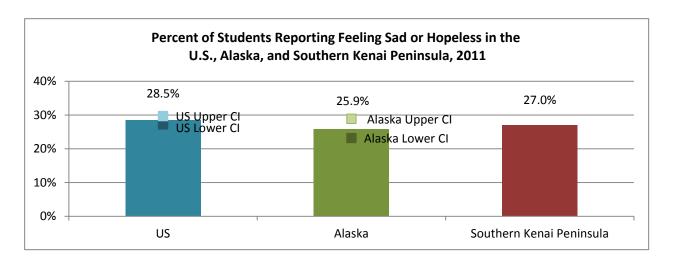


Figure 80. Percentage students reporting feeling sad or hopeless in the US, Alaska, and Southern Kenai Peninsula (BRFSS, 2011).

Adult Mental/Emotional Health

Adults who participated in the Behavioral Risk Factor Surveillance System (BRFSS) responded to the question "Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?" Public data is available for 2004-2010 from the Centers for Disease Control website (CDC, BRFSS, Health-Related Quality of Life). SKP specific data is shared on the SKP MAPP website from 2004-2011. Consequently, Figure 41 shows averages from 2004-2011 for Alaska and the US, and averages from 2004-2012 for the Southern Kenai Peninsula. Due to decreasing sample sizes, confidence intervals increase between the US rate and the Alaska rate, and the confidence interval for the SKP rate could be much larger. The average number of unhealthy days in the last month reported by residents of the Southern Kenai Peninsula appears to vary widely from year to year, however this may be a result of the small sampling size, and further research would be needed to determine the confidence intervals for the SKP rates, which would indicate whether the SKP rates were statistically significantly different from either the Alaska or US rates."

Q4. What are the statuses of the issues of most importance to the community?

Q4d. Transportation

Table 21. Available regional and/or Southern Kenai Peninsula community-level data for transportation

Measure / Indicator	Source (s)	Figure / Value
% Vehicles available for occupied housing units	ACS	Figure 82
Workers 16 years and over commuting to work	ACS	Figure 83
SKP residents' mean travel time to work	ACS	18.6 min

Table 22. Available organizational-level data for transportation

Measure / Indicator	Source (s)
Transportation assistance	South Peninsula Behavioral Health Services
Annual average daily traffic on Pioneer	Department of Transportation
	Transportation assistance

Transportation continues to be a priority service need in the community. In both Community Health Assessments, it has been one of the top five services that respondents find lacking in our community. This is a priority issue that would benefit from additional data to inform an understanding of its status or to help identify possible solutions. The Independent Living Center, South Peninsula Hospital, South Peninsula Behavioral Health Services, Haven House, the Senior Center, and other service organizations provide transportation vouchers or assistance to their clients. Working with the Central Area Rural Transit System, these groups have worked together to think 'Outside the Bus', bringing one creative solution to the community's transportation needs. See this <u>August 7th</u>, 2013 Homer News story for more information.

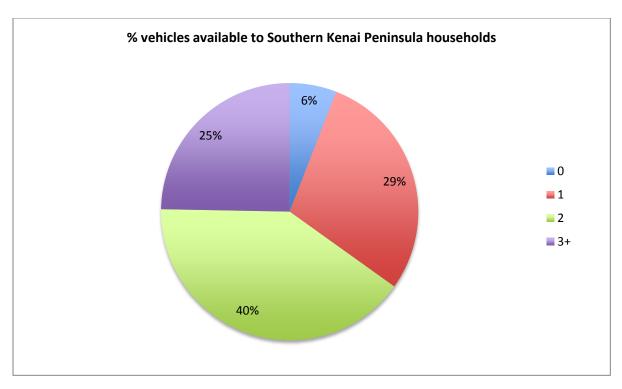


Figure 81. Percentage of vehicles available to Southern Kenai Peninsula occupied housing units (ACS, 2007-2011 5-yr estimates)

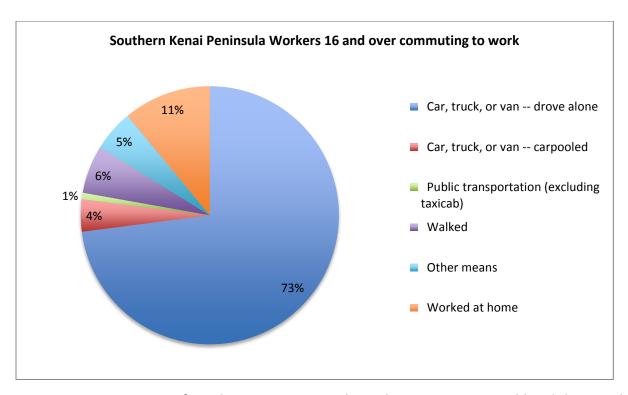


Figure 82. Percentage of Southern Kenai Peninsula workers over 16 years old and their mode of transport to work (ACS, 2007-2011 5-yr estimates)

Q4. What quantitative data do we have on the qualitative issues raised by community members? Q4e. Family Issues / Adverse Childhood Experiences

Family issues can be broad, varied in scope, and therefore difficult to define. Through recent workgroup efforts of the Homer Prevention Project¹⁶, Adverse Childhood Experiences were selected as a root cause to the family cycle of alcohol abuse (amongst other coping mechanisms to toxic stress). This project has brought increased dialogue and understanding about Adverse Childhood Experiences (ACEs) to the community and has given language and a context for discussions surrounding 'Family Issues'. Additionally, the Alaska Health Care Commission 2013 core strategies for health care transformation include a focus on prevention and providers screening for Adverse Childhood events. Thus, here we will focus on ACEs as the way in which to define 'Family Issues'.

Adverse Childhood Experiences

Research¹⁷ has shown the strong correlation between an individual experiencing risk factors mentioned above (obesity, diabetes, smoking, alcohol abuse, depression, etc) and also having been exposed to childhood emotional, physical, or sexual abuse, and household dysfunction (Adverse Childhood Experiences (ACEs)). According to one of the co-principal investigators on the original ACEs study, Dr. Robert Anda, addressing ACEs is, "the most important opportunity for the prevention of health and social problems and disease and disability that has ever been seen." Since this original study in 1998, researchers have understood that frequent and 'toxic' stress on young children who lack adequate protective factors and support from adults is strongly associated with increases in lifelong health risks and social problems.

The original ACEs questionnaire evaluated seven categories of adverse childhood experiences: psychological, physical, or sexual abuse; violence against mother; or living with household members who were substance abusers, mentally ill or suicidal, or even imprisoned. The number of categories of these adverse childhood experiences was then compared to measures of adult risk behavior, health status, and disease. Results from this study showed that the number of adverse childhood experience

¹⁶ The Homer Prevention Project is a collaborative effort focused on reducing the cycle of adult heavy and binge drinking, the Adverse Childhood Experiences (ACEs) that result from adult heavy and binge drinking, and underage drinking in the Homer and Anchor Point area.

¹⁷ Felitti , VJ, RF Anda, et al. (1998) Relationship of childhood abuse and houshold dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) study. *American Journal of Preventative Medicine* 14(4): 245-258.

¹⁸ David Bornstein, "Protecting Children From Toxic Stress," New York Times, Oct 30, 2013. MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

categories reflected a graded relationship to the presence of adult diseases including ischemic (or reduced blood supply) heart disease, cancer, chronic lung disease, skeletal fractures, and liver disease. The seven categories of ACEs were strongly interrelated and individuals with multiple categories of childhood exposure were likely to have multiple health risk factors in adulthood. Results also showed that ACEs were more common than they had expected – about 40% of the 8,056 research participants (a predominantly Caucasian, middle class population) reported two or more ACEs, and 25% reported three or more.

In addition to local-level attention to ACEs, the state of Alaska Behavioral Risk Surveillance System (BRFSS) asks ACEs-related questions that will support local understanding of community-level changes. Family Issues / Adverse Childhood Experiences measures include:

Table 23. Available regional and/or Southern Kenai Peninsula community-level data for family issues

Measure / Indicator	Source (s)	Figure / Values
HA2020: % of Southern Kenai Peninsula students who meet criteria overweight or obesity	YRBS, KPBSD	Figures 32-35
HA2020: % of adolescents 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	YRBS	Figure 40
Statistically significant different responses to ACE questions between US and Alaska	Nat'l Survey of Children's Health	Figure 84
As a child, witnessed parent be physically hurt	BRFSS	Figure 85
Ever physically hurt by partner in lifetime	BRFSS	Figure 86
Ever physically hurt by partner in last 5 years	BRFSS	Figure 87
Made to participate in sexual act against will	BRFSS	Figure 88
Victimization study: Kenai Peninsula results	CDVSA	Figures 89, 90
Southern Kenai Peninsula WIC enrollment	WIC	Figure 72
HA2020: % of women delivering live births who have not received prenatal care beginning in first trimester of pregnancy	ABVS	Figure 53
Live births for which prenatal care began after 1 st trimester, Southern Kenai Peninsula 2007-2011	ABVS	Table 24
% of preterm births within Southern Kenai Peninsula delivery area	AK Vital Stats	Table 25
% of SKP single parent homes	ACS	27.7%

Ace Question	U.S.	Alaska	Statistically Significant
Family's income hard to cover the basics like food or housing? Very often or Somewhat often.	25.7%	25.7% 25.0%	N O N
Did child ever live with a parent or guardian who got divorced or separated after he or she was born?	20.1%	23.8%	Yes
Did the child ever live with a parent or guardian who died?	3.1%	3.1%	N O
Did ever live with a parent or guardian who served time in jail or prison after he/she was born?	%6.9	9.6%	Yes
Did the child ever see or hear any parents, guardians, or any other adults in his/her home slap, hit, kick, punch, or beat each other up?	7.3%	8.6%	No
Was the child ever the victim of violence or witness any violence in his/her neighborhood?	8.6%	10.5%	No
Did the child ever live with anyone who was mentally ill or suicidal, or severely depressed for more than a couple of weeks?	8.6%	11.0%	No
Did the child ever live with anyone who had a problem with alcohol or drugs?	10.7%	10.7% 14.5%	Yes
Was the child ever treated or judged unfairly because of his/her race or ethnic group? 4.1% 4.9%	4.1%	4.9%	No

Figure 83. ACE question responses compared between the US and Alaska (National Survey of Children's Health 2011/2012 – Child and Adolescent Health Measurement Initiative

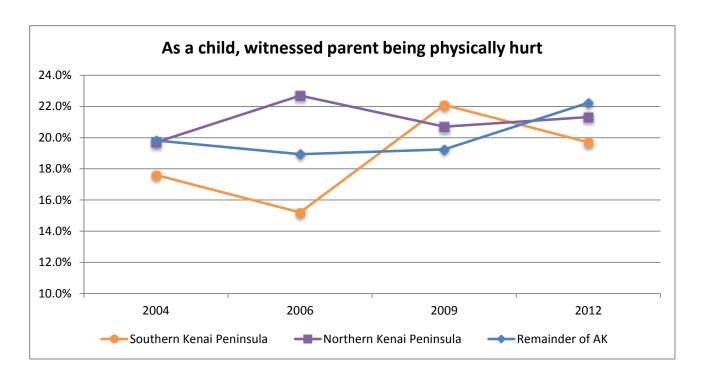


Figure 84. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report as a child having witnessed their parent or guardian being physically hurt (BRFSS). Figure does not reflect 95% confidence intervals for each region.

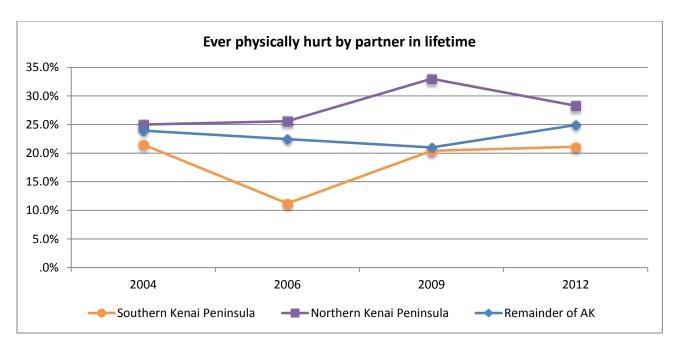


Figure 85. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report being physically hurt by their partner in their lifetime (BRFSS). Figure does not reflect 95% confidence intervals for each region.

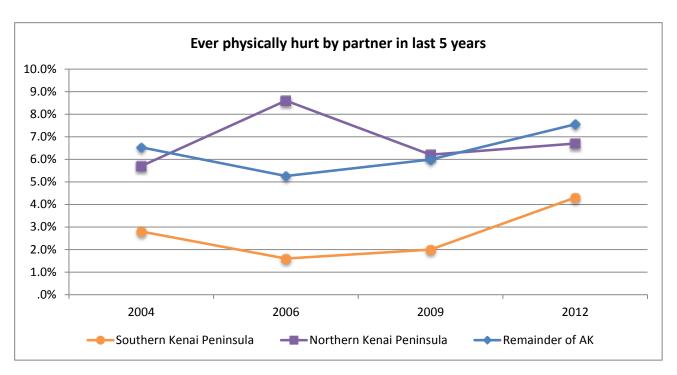


Figure 86. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report being physically hurt by their partner in the last five years (BRFSS). Figure does not reflect 95% confidence intervals for each region.

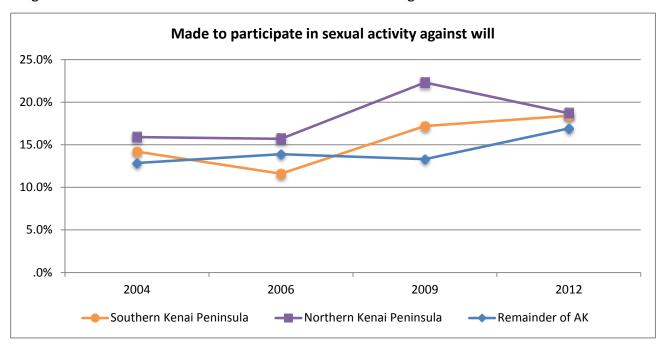


Figure 87. Percentage of Southern Kenai Peninsula, Northern Kenai Peninsula, and Remainder of Alaska respondents who report being made to participate in a sexual activity when they did not want to (BRFSS). Figure does not reflect 95% confidence intervals for each region.

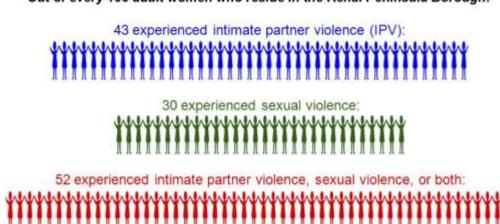


Intimate Partner Violence and Sexual Violence in the Kenai Peninsula Borough

Key Results from the 2013 Alaska Victimization Survey







These lifetime estimates come from a 2013 survey of adult women in the Kenai Peninsula Borough. Source: UAA Justice Center, Alaska Victimization Survey, http://justice.uaa.alaska.edu/avs.

Purpose of the Survey

Every human being has the right to be safe and free from violence in their own homes, in their relationships, and in their community. Intimate partner violence and sexual violence are endemic problems. Up until now, regional data were not available to guide planning and policy development or to evaluate the impact of prevention and intervention services. This study provides the first definitive measures of intimate partner violence and sexual violence for the Kenai Peninsula Borough. The survey was designed to establish a baseline for the Kenai Peninsula Borough. Results can be used to support prevention and intervention efforts that reduce violence against women.

Methodology

A total of 987 adult women in the Kenai Peninsula Borough participated in the survey. Respondents were randomly selected by phone (using both land lines and cell phones) from April to July 2013. Respondents were asked behaviorally specific questions about intimate partner violence (both threats and physical violence). Intimate partners included romantic and sexual partners. Respondents were also asked about sexual violence (both alcohol or drug involved sexual assault and forcible sexual assault). These questions were not limited to intimate partners. Procedures were designed to maximize the safety and confidentiality of all respondents. The survey was approved by multiple institutional review boards and was supported by the LeeShore Center.

Acknowledgments

We sincerely thank the 987 adult women in the Kenai Peninsula Borough who invested time and effort to participate in the Alaska victimization survey. They re-lived horrendous experiences, experiences that no one should be subjected to, to help the rest of us understand the extent of intimate partner and sexual violence in the Kenai Peninsula Borough. We also thank the LeeShore Center. Funding for this project was provided by the Alaska Council on Domestic Violence and Sexual Assault. The survey was administered by RTI International. Data were analyzed by the UAA Justice Center.

Figure 88. Summary results for the Kenai Peninsula from the 2013 Alaska Victimization Survey

Intimate Partner Violence and Sexual Violence in the Kenai Peninsula Borough: Key Results from the 2013 Alaska Victimization Survey

Key Estimates

The following table shows the percentage and number of adult women in the Kenai Peninsula Borough who experienced each form of violence. All estimates were weighted to control for selection, non-response, and coverage. Estimates show that 52.0% of adult women in the Kenai Peninsula Borough (or 10,353) experienced sexual violence, intimate partner violence, or both, in their lifetime; and 5.5% (or 1,095) experienced these forms of violence in the past year.

Measures of Violence	Lifetime		Past Year	
measures of Violence	%	N	%	N
Intimate partner violence (composite)	43.0%	8,561	4.0%	796
Threats of physical violence	26.3%	5,236	1.5%	299
Physical violence	41.6%	8,283	3.5%	697
Sexual violence (composite)	30.1%	5,993	2.2%	438
Alcohol or drug involved sexual assault	18.8%	3,743	1.4%	279
Forcible sexual assault	22.8%	4,539	1.4%	279
Any Violence (composite)	52.0%	10,353	5.5%	1,095

Intimate Partner Violence Estimates:

The intimate partner violence composite includes both threats of physical violence and physical violence.

- 43.0% of adult women (or 8,561) experienced intimate partner violence in their lifetime, with:
 - 26.3% (or 5,236) experiencing threats of physical violence, and
 - 41.6% (or 8,283) experiencing physical violence.
- 4.0% of adult women (or 796) experienced intimate partner violence in the past year, with:
 - 1.5% (or 299) experiencing threats of physical violence, and
 - 3.5% (or 697) experiencing physical violence.

Sexual Violence Estimates:

The sexual violence composite includes both alcohol or drug involved sexual assault and forcible sexual assault.

- 30.1% of adult women (or 5,993) experienced sexual violence in their lifetime, with:
 - 18.8% (or 3,743) experiencing at least one alcohol or drug involved sexual assault, and
 - 22.8% (or 4,539) experiencing at least one forcible sexual assault.
- 2.2% of adult women (or 438) experienced sexual violence in the past year, with:
 - 1.4% (or 279) experiencing at least one alcohol or drug involved sexual assault, and
 - 1.4% (or 279) experiencing at least one forcible sexual assault.

Important Limitations

The survey excluded non-English speaking women, women without phone access, and women not living in a residence. Estimates may be higher among women excluded from the survey. Estimates may also be conservative because of the continuing stigma of reporting victimization. This survey measured the number of *victims*, not the number of *victimizations*. In addition, not all forms of intimate partner violence or sexual violence were measured. All of these limitations may vary across regions. As a result, the validity of regional comparisons remains unknown.

For additional information on the Alaska Victimization Survey, please visit http://justice.uaa.alaska.edu/avs, or contact André Rosay with the UAA Justice Center (907-786-1821) or Lauree Morton with the Council on Domestic Violence and Sexual Assault (907-465-5503). The LeeShore Center promotes healthy families and a violence free community while providing a safe haven for women and children who are victims of domestic violence/sexual assault. Their 24-hour crisis line is 907-283-7257.

Figure 89. Summary results for the Kenai Peninsula from the Alaska Victimization Survey

Table 24. Live births for which prenatal care began after 1st trimester, Southern Kenai Peninsula, 2007-2001¹⁹

Year of birth	Total Births	No Prenatal Care - 1st Trimester	No PNC - %
2007	159	26	16.35
2008	169	29	17.16
2009	141	22	15.6
2010	167	32	19.16
2011	152	32	21.05
2012	164	31	18.9

Table 25. Low birth weight and preterm births, Southern Kenai Peninsula

	Total Births	Low Birth Weight Births	Low Birth Weight - %	Preterm Births	Preterm - %
2003-2005	481	26	5.41	54	11.23
2004-2006	479	24	5.01	55	11.48
2005-2007	479	21	4.38	51	10.65
2006-2008	490	16	3.27	44	8.98
2007-2009	469	16	3.41	35	7.46
2008-2010	477	24	5.03	38	7.97
2009-2011	460	29	6.3	44	9.57
2010-2012	483	26	5.38	43	8.9

¹⁹ Southern Kenai Peninsula (SKP) defined as: Anchor Point (M04); Fox River (M21); Fritz Creek (M44); Halibut Creek (M09); Happy Valley (M27); Homer (M01); Kachemak City, Kachemak Selo, Kachemak Selo Village, Kachemak Silo, Kachemak Selo Vill (M25); Nanwelak (M08); Nikolaevsk, Nikolaevsk Village, Nikoleausk (M22); Ninilchik (M12); Port Graham (M14); Seldovia (M03); Razdolna, Razdolna Village, Voznesenka, Voznesenka Village, Aleneva, Aleneva Village, Skilak Lake, Kustatan. SKP defined differently in previous HA2020 figure, thus values are somewhat different.

Table 26. Available organizational-level data for family issues

Measure / Indicator	Source (s)
# of services provided to individuals ages 13-18	Haven House
# of nights teens (13-18) sheltered with family	Haven House
# of nights children (0-13) sheltered	Haven House
# of emergency child care services	Haven House
# of youth with severely emotionally disturbed illness	SPBHS
Southern Kenai Peninsula homeless student count	KPBSD
# of children enrolled in Infant Learning Program	Sprout
# of children enrolled in Parents as Teachers	Sprout
# of children enrolled in ASQ screening program	Sprout
# of children enrolled in Imagination Library	Sprout
# of reported sexual abuse & assault of a minor offenses	Homer Police
Homer out of home placements	OCS
Homer child protective services reports	OCS
# of protective custody incidents	Homer Police
# of reported child abuse and neglect offenses	Homer Police

Q4. What quantitative data do we have on the qualitative issues raised by community members? Q4f. Teen Resources / Activities

The following list of Teen Resources / Youth Activities was compiled by the Kachemak Bay Family Planning Clinic's REC Room's coordinator, Anna Meredith. This list is not all-inclusive, but as of November 2013, provides a great start to capturing the opportunities and resources available to teens. This list helps to demonstrate that there are other issues or barriers at play rather than mere number of resources / activities that disconnect youth, particularly teens, from the available opportunities in the community.

R.E.C. Room visits/week estimate based on data log: 2-16 youth/night

- ♦ PHAT participants: approx. 60 students per year, not counting community presentations and events
- ♦ YOR AK: on average 10 students/class X 9 months (minus summer months) once a week classes
- ♦ FORK Club Cooking Classes: 4 classes x 15-22 students/class= approx. 55 students
- ♦ Computer Refurbishing classes: 2-6 students/week, every week
- ♦ Brave New Alaskan Voices (BNAV): Spoken word poets visiting from Anchorage Nov 21-23. Workshops for youth will happen from 3-6pm on Nov. 21 and 22nd, followed by Bunnell supported collaborative event at Kbay Café on Nov. 23rd.
- ♦ Youth Resource Guide (YRG): In collaboration with Homer Prevention Project (HPP) and Haven House, a team of social service professionals are guiding a group of 7 Flex students (resource rangers) to conduct in-person interviews with businesses and organizations in the community. The end goal is to create a youth relevant resource guide composed by teens, for teens, and in teen language.
- ♦ Teen Suicide Prevention and Awareness Short Film project: collaboration between the Center, Haven House and R.E.C. Room; youth led, adult supervised. A group of 14 teenagers volunteered to create the script, write the script, and work with locally hired videographers to compile the final product.

Additional programming offered community wide:

- ♦Greenfield Global University offers tutoring, homework help, career & college planning and test preparation. Our organization is geared towards the academic needs of traditional and non-traditional students on the Southern Peninsula.
- ♦ Homer 4-H: In addition to the established 4-H equestrian group here in Homer, there is a group of adults interested in forming and supporting a 4-H group locally. The initiative has been postponed temporarily due to lack of involvement/interest among families and adult volunteers. Contact Debbie

Anderson; paragondeb@gmail.com

- ◆Teens are always welcome to the monthly contra dances; 16 and under are free. Mary Griswold mgrt@xyz.net is the contact
- ♦The Kachemak Pony Club and the Phantom Riders 4-H club are both great clubs for the teens of Homer to get involved in. If some one is interested in Kachemak Pony club they may contact Melon Purcell at 907-299-2519 and Lindsey Blaine can be contacted at 907-394-2851 for more information on the Phantom Riders 4-H club.
- ♦Homer Public Library currently offers programs for teens during the summer program, Summer@HPL (late May-August), and occasional programs/events during the rest of the year. They provide a safe place for teens throughout the year in the form of the general library space and our small group rooms.
- ♦Big Brother/Big Sister:
- Teens can enroll as a Teen Bro/Sis and get a Big Bro or Sis to do fun things with
- Teens (9th -12th) can volunteer to be Big Bro/Sis in the schools
- Teens can volunteer in our office or at events
- **♦**Best Beginnings Homer
- teens can volunteer at our events, help on projects that support early education
- ◆Kachemak Bay Campus of Kenai Peninsula College offers teens:

Youth Job Training program with opportunities for Job Club, job training, job-seeking assistance, career exploration

GED classes/testing

Public films, presentations

Wide variety of many classes (welding, art, etc.) with reduced tuition for high school seniors Leadership development opportunities

- ◆ Drama, Debate, and Forensics Team (DDF) meets every Mon and Wed to practice for competitions statewide.
- ♦ Homer Youth Strings Orchestra Club provides kids ages 6-18 with the opportunity to play music with their peers under the instruction of a wonderful conductor and teacher, Lisa Schallock. Almost all the kids involved take private lessons also, but we do not require that. They meet weekly and perform several times throughout the year around Homer. The group performed just yesterday with the Kenai Peninsula Orchestra at the Mariner Theater as part of the Carnegie Hall Link Up program. They also meet socially throughout the year to play and celebrate the great friendships that have formed due to our shared passion for music. Contact Kara Clemens, Program Administrator
- ♦the City of Homer Community Recreation program offers:

MAPP of the Southern Kenai Peninsula – Health Status Assessment –2.14

Soccer, basketball (evening/mornings), weight room, climbing, fencing, ping pong, pickle ball, climbing, contra dancing, dodgeball, wrestling, karate, volleyball

They have many teens already participating in these activities as these activities are available jr. high ages to adults. Intergenerational activities contribute towards creating quality social equity.

♦ Additional organizations which offer programming to youth are: HoWL, CACS, Pratt Museum, Mid Town Café, FFA, Islands and Oceans, KBAY, Movie Theater, Kate Kuhns Pool, Kevin Bell Ice Arena, HCOA, Bunnell St. Arts Center



Q5. What data are available to track the 'healthy vision' defined by the community in 2010?

One outcome of the first Community Health Assessment's facilitated community analysis and prioritization process was the creation of a Community Vision and nine Community Goals. These goals have become another way in which we can categorize our quantitative community data and track our progress towards meeting these goals. Tables 27-35 reflect additional available local / organizational community health data that was not already included in the above assessment. All of these local organizational graphs can be found in Appendix A (some measures are captured in more than one table as they relate to multiple community goals).



Table 27. Healthy and safe individuals and families

	Source (s)
Healthy and safe individuals and families	
SOUTHERN KENAI PENINSULA DATA	
% of SKP adults who meet criteria for overweight or obesity	BRFSS
% of SKP students who meet criteria overweight or obesity	YRBS, KPBSD
# of coronary heart disease and other heart-related deaths within the	AK Vital Stats
Kenai Peninsula	
% of Southern Kenai Peninsula adults who report having cardiovascular	BRFSS
disease (heart attack o angina)	
% of SKP adults who were told they had high cholesterol	BRFSS
% of SKP adults who were told they had high blood pressure	BRFSS
% of SKP adults who report having non-gestational diabetes	BRFSS
Kenai Peninsula cancer mortality rate	AK Vital Stats
% of Southern Kenai Peninsula adolescents who were ever hit, slapped,	YRBS
or physically hurt on purpose by their boyfriend or girlfriend	
Mean # of days Southern Kenai Peninsula adults report being mentally	BRFSS
unhealthy	
% of adolescents who felt so sad or hopeless every day for 2 weeks or	YRBS
more in a row that they stopped doing some usual activities	
Kenai Peninsula unintentional injury death rate	AK Vital Stats
% of Southern Kenai Peninsula adults who are told they have arthritis	BRFSS
Southern Kenai Peninsula homeless student count	KPBSD
Southern Kenai Peninsula service delivery area births to AK resident	AK Vital Stats
mothers	
HA2020: % of SKP women delivering live births who have not received	AK Vital Stats
prenatal care beginning in first trimester of pregnancy	
% of preterm births within Southern Kenai Peninsula delivery area	AK Vital Stats
LOCAL ORGANIZATIONAL DATA (in Appendix A)	
% of patients over 13 years old who are current smokers	НМС
% of patients over 13 years old who use tobacco product of any kind	SVT, SPH
% of patients over 18 years old who are overweight or obese	SVT, SPH
Homer Public Health Center Patient BMI % breakdowns	HPHC
% of patients diagnosed with heart disease	HMC, SVT, SPH
% of patients over 18 years old currently diagnosed with hypertension	HMC, SVT, SPH
% of patients over 18 years old currently diagnosed with diabetes	HMC, SVT, SPH
% of patients with abnormal mammograms	KBPFC
% of patients with abnormal breast findings	KBPFC
% of patients diagnosed with chronic bronchitis	HMC, SVT, SPH
% of patients diagnosed with asthma	HMC, SVT, SPH
% of Homer Public Health Center patients with a primary doctor	НРНС
# of reckless driving crimes in Homer	AK Courts

# of incidents involving alcohol	Homer Police
Homer # of DUIs	AK Courts
# of adult DUI arrests in Homer	Homer Police
Case reports involving alcohol (AK State Troopers)	AST
#of clients in substance abuse treatment, referral type, age and sex of	CICADA
clients, discharge notes (Cook Inlet Council on Alcohol & Drug Abuse)	
ER visits for substance abuse & inpatients w alcohol disorders	SPH
Homer # of drug crimes	AK Courts
Homer # of person crimes	AK Courts
Homer # of property crimes	AK Courts
Homer court criminal cases	AK Courts
# of Homer Volunteer Fire Department calls	HVFD
Homer reported domestic violence related incidents	Homer Police
Southern Kenai Peninsula reported domestic violence offenses outside of	AST
Homer (AK State Troopers)	
# of reported child abuse and neglect offenses	Homer Police
ER visits for domestic violence	SPH
# of crisis line calls	Haven House
# of night stays in shelter	Haven House
# of Sexual Assault Response Team hospital visits	Haven House
# of services provided to individuals 55+	Haven House
# of night individuals aged 55+ sheltered	Haven House
# of services provided to individuals ages 13-18	Haven House
# of nights teens (13-18) sheltered with family	Haven House
# of nights children (0-13) sheltered	Haven House
# of emergency child care services	Haven House
Homer child protective services reports	ocs
# of protective custody incidents	Homer Police
# of reported sexual abuse & assault of a minor offenses	Homer Police
# of mental health emergency services provided	SPBHS
# of youth with severely emotionally disturbed illness	SPBHS
# of adults with severely mentally disturbed illness	SPBHS
# of children enrolled in Imagination Library	Sprout
# of children enrolled in ASQ screening program	Sprout
# of children enrolled in Parents as Teachers	Sprout
# of Homer motor vehicle accident fatalities	Homer Police
Primary care ER visits	SPH
Annual ER visits	SPH
# of medical equipment loans	Hospice of Homer
# of end of life clients	Hospice of Homer
Annual ER visits for chronic pain	SPH
% of patients diagnosed with depression & mood disorders	HMC, SVT, SPH
70 or patients diagnosed with depression & mood disorders	111110, 5 4 1, 51 11

Table 28. Community-wide support for diverse healthy behavior choices

Measure / Indicator	Source (s)
Community-wide support for diverse healthy behavior choices	
SOUTHERN KENAI PENINSULA DATA	
% of SKP adolescents who currently do not smoke cigarettes or cigars or	YRBS
used chewing tobacco, snuff, or dip	
% of SKP adults who are current smokers	BRFSS
% of SKP adults who meet criteria for overweight or obesity	BRFSS
% of SKP students who meet criteria overweight or obesity	YRBS & KPBSD
% of SKP youth who report binge drinking in the past 30 days	YRBS
% of SKP adults who report binge drinking in the past 30 days	BRFSS
% of SKP adults who meet CDC's physical activity guidelines for Americans	BRFSS
% of SKP adolescents who meet CDC's physical activity guidelines for	YRBS
Americans	
% of SKP adults who report no leisure time physical activity in past 30 days	BRFSS
% of SKP adults who report having 5 servings of fruits and vegetables per	BRFSS
day	
% of SKP adolescents with 3 or more adults who they feel comfortable	YRBS
seeking help from	
% of SKP adolescents who were ever hit, slapped, or physically hurt on	YRBS
purpose by their boyfriend or girlfriend during the past 12 months	
Reported Kenai Peninsula alcohol induced death and rates	AK Vital Stats
Reported chronic liver disease & cirrhosis death & rates across Kenai	AK Vital Stats
Peninsula	
LOCAL ORGANIZATIONAL DATA (in Appendix A)	
% of patients over 13 years old who are current smokers	HMC, SVT, SPH
#of clients in substance abuse treatment, referral type, age and sex of	CICADA
clients, discharge notes (Cook Inlet Council on Alcohol & Drug Abuse)	
Inpatients with alcohol disorders	SPH
ER visits for substance abuse	SPH
# of incidents involving alcohol	Homer Police
Case reports involving alcohol	AK State
	Troopers
# of adult DUI arrests in Homer	Homer Police
Homer # of DUIs	AK Courts
Homer # of drug crimes	AK Courts
Homer drug arrests	AK Court
Homer # of person crimes	AK Courts
Homer # of property crimes	AK Courts
Homer # of reckless driving crimes	AK Courts

Table 29. Local, sustainable, equitable economy

Measure / Indicator	Source (s)
Local, sustainable, equitable economy	
SOUTHERN KENAI PENINSULA DATA	
% of SKP residents living 100% above the federal poverty level	ACS
% of SKP residents living 125% above the federal poverty level	Alice Rarig
% of SKP individuals in poverty	ACS
% of SKP families in poverty	ACS
% of SKP population that is 65+ years old in poverty	ACS
% of SKP female households with no husband present with children under 18 years old in poverty	ACS
% of SKP population that is unemployed	ACS
Average SKP median household income	ACS
Average SKP mean household income	ACS
% of SKP respondents over 18 that have any form of health care coverage	BRFSS
% of SKP patients who could not afford doctor visit	BRFSS
SKP WIC enrollment	WIC
LOCAL ORGANIZATIONAL DATA (in Appendix A)	
# of individuals served by the Homer Community Food Pantry	HCFP
Average annual Homer gasoline price (per gal)	AK Coop Ext
Average monthly residential electricity costs (630KwH)	AK Coop Ext
Average annual Homer heating oil price (per gal)	AK Coop Ext
Average annual Homer propane price (per gal)	AK Coop Ext
Average weekly food costs for family of 4	AK Coop Ext
Homer annual median home sales price	AK MLS
Homer tax revenues: property tax	City of Homer
Homer tax revenues: sales tax	City of Homer
% of patients with Medicare	HMC, SVT, SPH
% of patients with Medicaid	HMC, SVT, SPH
AK seniors with & without Medicare coverage	AK Dept of Labor
% of patients with no insurance	HMC, SPH
% of patients with private insurance	HMC, SPH
% of users who are under 100% of federal poverty level	KBFPC
# of students who qualify for free and reduced lunch	KPBSD
# of Islands & Ocean Visitor Center visitors	AKMNWR
# of Homer Chamber of Commerce walk-in visitors	Homer Chamber of Commerce

Table 30. Collaborative, accessible, prevention and intervention focused holistic health network

Measure / Indicator	Source (s)
Collaborative, accessible, prevention and intervention focused	
holistic health network	
SOUTHERN KENAI PENINSULA DATA	
% of SKP patients with primary doctor or health care provider	BRFSS
% of SKP patients who could not afford doctor visit	BRFSS
AK seniors with & without Medicare coverage	AK Dept of Labor
LOCAL ORGANIZATIONAL DATA (in Appendix A)	
% of patients with Medicare	HMC, SVTHC, SPH
% of patients with Medicaid	HMC, SVTHC, SPH
% of patients with no insurance	HMC, SPH
% of patients with private insurance	HMC, SPH
% of users who are under 100% of federal poverty level	KBFPC
Primary care ER visits	SPH
ER visits for substance abuse	SPH
ER visits for domestic violence	SPH
% of patients with abnormal clinical breast exams	KBPFC
% of patients with abnormal mammograms	KBPFC
# of hospice volunteers	Hospice of Homer
# of volunteer visitor program clients	Hospice of Homer
# of medical equipment loans	Hospice of Homer
# of end of life clients	Hospice of Homer
Annual average daily attendance	Homer Boys &
	Girls Club
% members from single parent households	Homer Boys &
	Girls Club

Table 31. Resilient, biodiverse, functioning ecosystems

	Measure / Indicator	Source (s)
	Resilient, biodiverse, functioning ecosystems	
1	# of Homer frost-free summer days	Ed Berg
2	Global climate change salmon stream indicators Anchor River # of days	Cook Inletkeeper
	above 15C	
3	Water usage in millions of gallons	City of Homer
4	Recycled electronic waste in pounds	Cook Inletkeeper
5	# of harbor pollution incidents	City of Homer
6	Personal use subsistence set gillnet salmon catches	ADF&G

Table 32. Local, affordable, safe, sustainable, diverse food, energy and water systems

Measure / Indicator	Source (s)
Local, affordable, safe, sustainable, diverse food, energy and water	
systems	
Average weekly food costs for family of 4	AK Coop Ext
Average annual Homer gasoline price (per gal)	AK Coop Ext
Average annual Homer propane price (per gal)	AK Coop Ext
Average annual Homer heating oil price (per gal)	AK Coop Ext
Average monthly residential electricity costs (630KwH)	HEA
Water usage in millions of gallons	City of Homer
Personal use subsistence set gillnet salmon catches	AK Dept of Fish
	& Game
# of high tunnels awarded to SKP residents	USDA
# of full season vendors at the Homer Farmer's Market	Farmer's Mrkt
# of space available vendors at the Homer Farmer's Market	Farmer's Mrkt
# of membership only vendors at the Homer Farmer's Market	Farmer's Mrkt

Table 33. Premiere, cultural, educational, artistic opportunities and systems

Measure / Indicator	Source (s)
Premiere, cultural, educational, artistic opportunities and systems	
SOUTHERN KENAI PENINSULA DATA	
% of 18-24 year olds with high school diploma	ACS
LOCAL ORGANIZATIONAL DATA (in Appendix A)	
Kachemak Bay Campus enrollment	KBC
Kachemak Bay Campus annual student credit hours	KBC
# of students enrolled in GED and ESL	KBC
# of students who completed GED	KBC

Table 34. Affordable, sustainable, accessible transportation system

Measure / Indicator	Source (s)
Affordable, sustainable, accessible transportation system	
Transportation assistance	SPBHS
Annual average daily traffic Pioneer Ave Jct with Lake St, Homer	DOT

Table 35. Multi-use, intergenerational, accessible community opportunities and resources

Measure / Indicator	Source (s)
Multi-use, intergenerational, accessible community opportunities	
and resources	
Annual # of community recreation programs	City of Homer
Number of Adult and Youth Attendees to Homer Council on the	Homer Council
Arts Events	on the Arts