Nuiqsut Health Profile

This village health profile provides a brief summary of the results of the 2010 NSB Census. The intent of this profile is to provide individual communities with information on some basic health measures at the village-level to guide community health promotion and planning efforts.

Please refer to the 2010 Census NSB Health Profile section for further discussion of each health question and an overview of the census health module results for the NSB. Also, please refer to the NSB Baseline Community Health Analysis report for expanded discussions of each of the health topics addressed below as well as many more aspects of community health.

At the village-level, some of the small percentages are based on very small numbers of responses, making the estimates less reliable: cells based on fewer than five responses are not reported. NSB and Alaska estimates are provided for general reference only, and comparisons should be made with caution, as results are not adjusted for differences in the age composition of the populations. In addition, state and national survey methods may vary considerably from that used in the 2010 NSB Census.

Adults

Table A.27

<table>
<thead>
<tr>
<th></th>
<th>Nuiqsut Household Heads</th>
<th>NSB Household Heads</th>
<th>All Nuiqsut Adults*</th>
<th>All NSB Adults*</th>
<th>Alaska Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very good or excellent general health</td>
<td>40%</td>
<td>44%</td>
<td>39%</td>
<td>46%</td>
<td>56%</td>
</tr>
<tr>
<td>Fair to poor general health</td>
<td>25%</td>
<td>20%</td>
<td>22%</td>
<td>16%</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Chronic Health Problems</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thyroid problems</td>
<td>6%</td>
<td>6%</td>
<td>3%</td>
<td>4%</td>
<td>9% (U.S.)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>**</td>
<td>7%</td>
<td>2%</td>
<td>6%</td>
<td>6% (Alaska)1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9% (U.S.)</td>
</tr>
<tr>
<td>High blood pressure</td>
<td>30%</td>
<td>28%</td>
<td>17%</td>
<td>20%</td>
<td>25% (Alaska)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>24% (U.S.)</td>
</tr>
<tr>
<td>High cholesterol</td>
<td>16%</td>
<td>19%</td>
<td>12%</td>
<td>13%</td>
<td>38% (Alaska)</td>
</tr>
<tr>
<td>Heart disease</td>
<td>8%</td>
<td>7%</td>
<td>7%</td>
<td>5%</td>
<td>12% (U.S.)</td>
</tr>
<tr>
<td>In the past 12 months, experienced:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daily pain or arthritis that limits activities or requires prescription pain medicine</td>
<td>38%</td>
<td>29%</td>
<td>25%</td>
<td>21%</td>
<td>(see ref)</td>
</tr>
<tr>
<td>Frequent (three or more) or chronic ear infections</td>
<td>8%</td>
<td>5%</td>
<td>8%</td>
<td>4%</td>
<td>N/A</td>
</tr>
<tr>
<td>Chronic breathing problems (such as asthma, emphysema, or a cough that won’t go away)</td>
<td>8%</td>
<td>13%</td>
<td>7%</td>
<td>8%</td>
<td>(see ref)</td>
</tr>
<tr>
<td><strong>Health Insurance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have health insurance, including IHS eligibility</td>
<td>97%</td>
<td>97%</td>
<td>83%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have health insurance, other than IHS eligibility</td>
<td>42%</td>
<td>64%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table A.27, continued

<table>
<thead>
<tr>
<th></th>
<th>Nuiqsut Household Heads</th>
<th>NSB Household Heads</th>
<th>All Nuiqsut Adults*</th>
<th>All NSB Adults*</th>
<th>Alaska Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Smoking</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoke tobacco (in any form)</td>
<td>62%</td>
<td>50%</td>
<td>62%</td>
<td>49%</td>
<td>22%</td>
</tr>
<tr>
<td>Of those who smoke:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoke one or more packs per day</td>
<td>31%</td>
<td>25%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are interested in quitting</td>
<td>71%</td>
<td>71%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have tried to quit in the last 12 months</td>
<td>59%</td>
<td>62%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permit smoking in the house</td>
<td>35%</td>
<td>33%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support a tobacco tax to fund tobacco prevention or cessation programs</td>
<td>43%</td>
<td>53%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Overweight and Obesity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overweight (BMI 25–29.9 kg/m²)</td>
<td>38%</td>
<td>33%</td>
<td></td>
<td>37%</td>
<td></td>
</tr>
<tr>
<td>Obese (BMI 30 kg/m² or higher)</td>
<td>33%</td>
<td>39%</td>
<td></td>
<td>28%</td>
<td></td>
</tr>
<tr>
<td><strong>Physical Activity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never get 30 minutes of moderate exercise in a day</td>
<td>19%</td>
<td>16%</td>
<td></td>
<td>9%</td>
<td></td>
</tr>
<tr>
<td>Get at least 30 minutes of moderate exercise 5 days per week or more</td>
<td>44%</td>
<td>44%</td>
<td></td>
<td>47%</td>
<td></td>
</tr>
<tr>
<td><strong>Sugar-Sweetened Beverages (SSBs)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| On average, drink no soda or other SSBs per day | 14% | 26% | | 53% | 10%
| On average, drink two or more sodas or other SSBs per day | 58% | 45% | | 30% | 10%
| **Food Security**       |                         |                     |                     |                 |              |
| Times last year when household found it difficult to get the foods they needed to eat healthy meals | 38% | 35% | | | |
| If yes, because not able to get enough subsistence foods to eat healthy meals | 53% | 43% | | | |
| If yes, because not able to get enough store foods to eat healthy meals | 87% | 90% | | | |
| Percent with household members who at times did not have enough to eat | 25% | 19% | (4–11%) | |
| **Safety: Helmet Use**  |                         |                     |                     |                 |              |
| Wear a helmet when riding a snowmachine or four-wheeler (of household heads who ride on snowmachines or 4-wheelers) | 9% | 18% | (57%) | |
| **Drugs and Alcohol**   |                         |                     |                     |                 |              |
| In the past 12 months, felt a household member had been hurt by drugs or alcohol | 28% | 24% | | | |
| In the past 12 months, thought the health of their community had been hurt by drugs or alcohol | | | | | |
| Often                  | 54%                    | 57%                 |                     |                 |              |
| Sometimes              | 42%                    | 35%                 |                     |                 |              |

*Includes both household head (survey respondent) and all other household members, as reported by the household head.

**Cell count less than five.

- Three-quarters of Nuiqsut household heads reported their health to be at least good, with one in four reporting fair to poor health, not significantly different from the other North Slope communities combined. The percentage of Nuiqsut adults reported to have very good to excellent health was lower than adults statewide, but similar to Alaska Native adults statewide (42%).
The prevalence of chronic pain and/or arthritis in Nuiqsut household heads was higher than in the other North Slope communities as a whole, and the prevalence of chronic ear infections among adults (Iñupiat only and all adults) was higher in Nuiqsut than in the other North Slope communities overall.

Reported adult tobacco smoking was high, significantly higher than in the rest of the North Slope communities combined and almost three times the statewide adult smoking rate.

Nuiqsut household heads were less likely than household heads in the other North Slope communities overall to support a tobacco tax to fund tobacco prevention programs.

Reported soda and sugared beverage consumption among Nuiqsut household heads was high compared with statewide estimates and significantly higher than among household heads in the other North Slope communities combined.

One in four Nuiqsut household heads reported household members who, at times last year, did not have enough to eat. This rate was similar to the rate among Iñupiat households slope-wide.

Helmet use was very low, similar to other North Slope villages.

Slightly more than one in four Nuiqsut household heads reported feeling that a household member had been hurt by alcohol or drugs in the past year, but most believed that alcohol or drugs had hurt the health of the community. These percentages did not differ significantly from those in other North Slope communities overall, looking at either all household heads or Iñupiat household heads only.

### Children (0–17 years)

<table>
<thead>
<tr>
<th>Table A.28</th>
<th>Nuiqsut Children</th>
<th>NSB Children</th>
<th>Alaska Children</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General Health</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very good or excellent general health</td>
<td>55%</td>
<td>63%</td>
<td>89%2</td>
</tr>
<tr>
<td><strong>Chronic Health Problems</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In the past 12 months, experienced:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequent (three or more) or chronic ear infections</td>
<td>18%</td>
<td>19%</td>
<td>5%2</td>
</tr>
<tr>
<td>Chronic breathing problems (such as asthma, emphysema, or a cough that won't go away)</td>
<td>8%</td>
<td>5%</td>
<td>6% (current asthma)2</td>
</tr>
<tr>
<td><strong>Teen Tobacco Smoking (ages 14–18 years)</strong> **</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoke tobacco (in any form)</td>
<td>43%</td>
<td>16%</td>
<td>Not comparable</td>
</tr>
</tbody>
</table>

As reported by the household head. All the other chronic health problems had a prevalence of less than 1% among children in the NSB and were not analyzed or reported by individual village.

**Based on other NSB surveys, this value likely significantly underestimates the prevalence of smoking among children and teens as it is not comparable to anonymous self-administered surveys used to estimate teen smoking rates statewide and nationally. According to the 2005 YRBS survey, NSB high school students were about twice as likely to smoke as Alaskan high school students overall.

### Children (0–17 years)

- Reported general health status among Nuiqsut children was significantly worse than among children in the other North Slope communities overall, and this difference persisted when looking only at Iñupiat children. The percentage of Nuiqsut children with very good to excellent reported general health was considerably lower than the statewide estimate.

- Rates of chronic ear infections and breathing problems among Nuiqsut children were not significantly different from children in the other NSB communities combined.

- Tobacco smoking among teens (as reported by the household head) was notably and significantly more common in Nuiqsut than in the rest of the North Slope communities overall, and this difference remained when looking at Iñupiat teens only.