

Point Lay 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.31

	Point Lay Household Heads	NSB Household Heads	All Point Lay Adults*	All NSB Adults*	Alaska Adults
General Health					
Very good or excellent general health	48%	44%	52%	46%	56% ¹
Fair to poor general health	12%	20%	10%	16%	13% ¹³
Chronic Health Problems					
Ever told by a health professional have:					
Thyroid problems	**	6%	**	4%	9% (U.S.) ³
Diabetes	**	7%	**	6%	6% (Alaska) ¹ 9% (U.S.) ⁴
High blood pressure	16%	28%	12%	20%	25% (Alaska) ⁵ 24% (U.S.) ⁴
High cholesterol	**	19%	6%	13%	38% (Alaska) ⁵
Heart disease	**	7%	6%	5%	12% (U.S.) ⁴
In the past 12 months, experienced:					
Daily pain or arthritis that limits activities or requires prescription pain medicine	22%	29%	16%	21%	(see ref) ⁶
Frequent (three or more) or chronic ear infections	12%	5%	8%	4%	N/A
Chronic breathing problems (such as asthma, emphysema, or a cough that won't go away)	10%	13%	8%	8%	(see ref) ⁷
Health Insurance					
Have health insurance, including IHS eligibility	100%	97%			83% ¹
Have health insurance, other than IHS eligibility	45%	64%			
Smoking					
Smoke tobacco (in any form)	58%	50%	60%	49%	22% ¹
Of those who smoke:					
Smoke one or more packs per day	25%	25%			
Are interested in quitting	82%	71%			
Have tried to quit in the last 12 months	67%	62%			
Permit smoking in the house	35%	33%			
Support a tobacco tax to fund tobacco prevention or cessation programs	34%	53%			

Table A.31

	Point Lay Household Heads	NSB Household Heads	All Point Lay Adults*	All NSB Adults*	Alaska Adults
Overweight and Obesity					
Overweight (BMI 25–29.9 kg/m ²)	17%	33%			37% ¹
Obese (BMI 30 kg/m ² or higher)	46%	39%			28% ¹
Physical Activity					
Never get 30 minutes of moderate exercise in a day	8%	16%			9% ⁵
Get at least 30 minutes of moderate exercise 5 days per week or more	59%	44%			47% ⁵
Sugar-Sweetened Beverages (SSBs)					
On average, drink no soda or other SSBs per day	25%	26%			53% ¹⁰
On average, drink two or more sodas or other SSBs per day	53%	45%			30% ¹⁰
Food Security					
Times last year when household found it difficult to get the foods they needed to eat healthy meals	51%	35%			
If yes, because not able to get enough subsistence foods to eat healthy meals	48%	43%			
If yes, because not able to get enough store foods to eat healthy meals	96%	90%			
Percent with household members who at times did not have enough to eat	22%	19%			(4–11%) ¹²
Safety: Helmet Use					
Wear a helmet when riding a snowmachine or four-wheeler (of household heads who ride on snowmachines or 4-wheelers)	**	18%			(57%) ¹¹
Drugs and Alcohol					
In the past 12 months, felt a household member had been hurt by drugs or alcohol	13%	24%			
In the past 12 months, thought the health of their community had been hurt by drugs or alcohol					
Often	44%	57%			
Sometimes	48%	35%			

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

**Cell count less than five.

- Of Point Lay adults, 90% reported or were reported to be in at least good general health. General reported health status among Point Lay adults was the highest among North Slope communities with the exception of Barrow. The difference in health status among Point lay adults and that of adults in other North Slope communities overall was not statistically significant, however.
- The prevalence of reported chronic health problems was relatively low in Point Lay, although estimates are based on a very small number of respondents because of the small size of the village, making the estimates less reliable.
- Adults in Point Lay were significantly less likely than adults in other North Slope communities overall to report or be reported to have high blood pressure but more likely to have frequent or chronic ear infections.
- Smoking rates were high in Point Lay. Looking at all adults and at Iñupiat adults only, those living in Point Lay were significantly more likely to smoke than were their counterparts in the other North Slope communities overall. More than four of five smokers were interested in quitting.
- Obesity was common among Point Lay household heads, similar to other North Slope villages, but higher than statewide estimates.

- Point Lay household heads were fairly physically active as a group. Almost 60% of Point Lay household heads reported getting 30 minutes of moderate physical activity at least five days per week on average, and fewer than one in ten reported no days with 30 minutes of moderate physical activity.
- Consumption of sodas and other sugared beverages was high among Point Lay household heads, similar to other North Slope communities, but higher than statewide estimates.
- Food insecurity was not uncommon in Point Lay, similar to other North Slope communities. Half of Point Lay household heads reported difficulty, at times, getting the food needed for healthy meals. Of these, half reported not being able to get enough subsistence foods and almost all reported difficulty getting enough store foods. One in five household heads reported that at times in the last year, a household member did not have enough to eat.
- Helmet use was very low in Point Lay, similar to other North Slope villages.
- A large majority of Point Lay household heads did not believe that alcohol or drugs had hurt a member of their own household in the last year. More than 90% thought that the health of their community had been hurt by alcohol or drugs in the past year, however.

Children (0–17 years)

Table A.32

	Point Lay Children	NSB Children	Alaska Children
General Health			
Very good or excellent general health	70%	63%	89% ²
Chronic Health Problems			
In the past 12 months, experienced:			
Frequent (three or more) or chronic ear infections	15%	19%	5% ²
Chronic breathing problems (such as asthma, emphysema, or a cough that won't go away)	**	5%	6% (current asthma) ²
Teen Tobacco Smoking (ages 14–18 years)*			
Smoke tobacco (in any form)	15%	16%	Not comparable

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, and it is not comparable to anonymous self-administered surveys used to estimate teen smoking rates statewide and nationally.

**Cell count less than five.

- Almost all children in Point Lay were reported to be in at least good general health. The percentage of children reported to have very good to excellent health was similar to other North Slope communities overall but still lower than the statewide estimate.
- The reported prevalence of breathing problems such as asthma or chronic cough was very low among Point Lay children.
- Reported teen smoking prevalence in Point Lay was similar to that in the NSB overall.