## A Tobacco Free Florida









### Florida Department of Health Bureau of Tobacco Prevention Program

2007 Annual Report



## Executive Summary

### A Message from the Florida State Surgeon General, Ana Viamonte-Ros, MD, MPH

Dear Floridians:
Tobacco use remains the leading cause of preventable death and disease in the United States. Smoking carries serious health risks, harming nearly every organ in the body and decreasing life expectancy and quality of life. Each year in Florida, tobacco use is responsible for



upwards of 29,000 deaths and billions of dollars in health care expenditures and lost productivity.

In November of 2006, you voted in favor of a constitutional amendment that recognizes tobacco as a serious public health issue. The Florida Department of Health, along with its partners, is working to reduce the health hazards associated with tobacco use and exposure among all Floridians, especially among youth and young adults. We are developing a comprehensive tobacco prevention program aligned with the 1999 Centers for Disease Control and Prevention's Best Practices for Tobacco Control Programs, as revised, that employ proven strategies to prevent and reduce tobacco use.

The Florida Tobacco Prevention and Control Program will provide free cessation services, including free nicotine replacement, a statewide tobacco prevention media campaign, youth and chronic disease programs, and evaluation services. Additionally, the Area Health Education Centers are working collaboratively with the Department of Health, county health departments, medical schools, and other organizations to deliver cessation and health professional training services. We are guided by a 23- person Tobacco Advisory Council who provide expert advice and recommendations about the best means of confronting tobacco prevention and control in our state.

With the restoration of funding to the Tobacco Prevention and Control Program, Florida once again aspires to lead the nation in reducing the number of youth who smoke, increasing the number of adults who quit, and minimizing secondhand exposure among all Floridians.

Ana M. Viamonte Ros, M.D., M.P.H. State Surgeon General

Tobacco is the leading cause of premature death and disability in Florida. Florida State Constitution, s. 27, Art. X., requires that the Florida Legislature annually fund a comprehensive, statewide tobacco education and control program using tobacco settlement money. Florida Statute 381.84 further requires that the tobacco program adhere to the Centers for Disease Control and Prevention's 1999 Best Practices for Comprehensive Tobacco Control Programs, as revised, in order to implement effective population-based interventions and strategies.

Nearly one out of every five adults smokes, totaling approximately 3.8 million adults in Florida. This figure has not changed in over ten years. Two out of every five adults attempted to quit using tobacco for one day or longer in the past year. Secondhand smoke exposure among adults has declined by half since 2003, coinciding with the expansion of the Florida Clean Indoor Air Act to include enclosed, indoor workplaces. Smoking among pregnant women has reached its lowest point since 1993.

Since the tobacco program first began in 1998, fewer middle and high school students smoke cigarettes, however, these declines have slowed in recent years. Other forms of tobacco use, in particular cigar and flavored cigarette smoking, have increased recently among public high school students. Youth attitudes towards smoking have not changed appreciably since 1999 for both public middle and high school students.





## Program Background

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"The evidence is conclusive that state tobacco prevention and cessation programs work to reduce smoking, save lives and save money by reducing tobacco-caused health care costs."

from A Broken Promise to Our Children: the 1998 State Tobacco Settlement Nine Years Later



Florida's involvement in tobacco prevention efforts dates back to 1989 when the Department of Health and Rehabilitative Services began receiving federal funding to implement tobacco prevention and control activities. In 1997, Florida successfully settled with the tobacco industry for \$11.3 billion to recoup Medicaid costs incurred by smokers. As part of the settlement agreement, Florida launched the Tobacco Pilot Program targeting tobacco use among underage youth. Five years later, the funding for the tobacco program was cut to \$1 million. This required the program to discontinue several key components of its youth tobacco program such as school-based tobacco education, youth development, and counter-marketing efforts, otherwise known as the "truth" campaign.

As the result of a 2006 ballot initiative, Florida voters passed a constitutional amendment that allocates 15% of tobacco trust fund interest payments to fund a comprehensive, statewide tobacco education and prevention program, with one-third of total annual funding being used for educational and counter-marketing mass media. Florida State Constitution s. 27, Art. X, requires that the tobacco program conform to the 1999 Centers for Disease Control and Prevention's (CDC) Best Practices for Comprehensive Tobacco Control Programs, aas revised, to protect people, especially youth, from the health hazards of tobacco.

The Florida Department of Health's Tobacco Prevention and Control Program currently operates with a total of \$57.7 million in funding allocated from two sources: state funds (\$57 million) and the Centers for Disease Control and Prevention (\$705,000). Ten million of the \$57 million have been allocated to the Area Health Network Centers (AHECs) to expand smoking cessation initiatives to every county in the state.

The 2007 Florida Legislature passed legislation to implement the constitutional amendment. Section 381.84, Florida Statutes, authorizes the Department to create a statewide comprehensive tobacco prevention and control program consistent with the Centers for Disease Control and Prevention's Best Practices for Comprehensive Tobacco Control Programs. In addition, the statute requires the Department to work with a 23-member advisory council to advise the State Surgeon General as to the direction and the scope of the Tobacco Program; adopt rules for the program; award funding to AHECs for cessation and training; and provide an annual report that evaluates the program effectiveness in reducing and preventing tobacco use and recommends improvements to enhance the program's effectiveness.

## Program Highlights

### **Significant Progress**

With the passage of the tobacco constitutional amendment in 2006, tobacco prevention programs have been expanded to include: advocacy organizations of middle, high school and college students; cessation programs for youth and adults that includes a toll-free telephone quit line; partnerships with local communities; interventions designed to reduce disparities in tobacco use among different population groups; and awareness campaigns to inform the public of the Florida Clean Indoor Air Act.

#### **Advances**

The Florida State Surgeon General has convened two meetings of the Tobacco Education and Use Prevention Advisory Council

• The responsibilities of the council include providing advice on program priorities, reviewing media broadcast materials and participating in periodic program evaluation.



- The Zimmerman Agency, Inc. has been awarded a \$17.1 million media contract and is in the process of finalizing advertising materials and public relations events.
- Additional staff have been hired on the local level to address tobacco prevention

### More Floridians are protected from the dangers of secondhand smoke in the workplace

- The Florida Clean Indoor Air Act was enacted in 1985 to protect people from the hazards of secondhand tobacco smoke
- The Florida Clean Indoor Air Act was expanded in 2003 to include all indoor workplaces

### By calling the Florida Quit-for-Life line, Floridians now receive free nicotine replacement therapies (NRT)

• Since December 2007, 181 callers to the Quit-for-Life line have received free nicotine replacement therapy

#### Fewer women smoke during pregnancy

• Over the past ten years, 60% fewer women smoked during their pregnancies 8









## Program Challenges

### Smoking prevalence among adults has not changed in ten years<sup>4</sup>

• Nearly one out of every five adults in Florida smokes

### Tobacco companies spend more on advertising in Florida than in any other state<sup>2</sup>

• In 2005, the tobacco companies spent approximately \$930.4 million in Florida alone to market their products

#### Cigar use among high school students has increased

• In 2007, high school students reported smoking nearly as many cigars as they did cigarettes <sup>7</sup>

### Tobacco companies continue to market candy flavored cigarettes, cigars and smokeless tobacco to children <sup>2</sup>

• Flavors in tobacco products include chocolate chip cookie dough, cotton candy, bubble gum and grape-olicious

### Young adults (18 to 24) smoke at higher levels than any other age group <sup>4</sup>

• Relative to other age groups, young adults also are the least likely to quit successfully







### **Meeting Challenges**

Tobacco prevention programs are designed to reduce negative health consequences and to improve the quality of life among all persons through public health interventions at the state and local levels.

The Tobacco Prevention and Control
Program incorporates the Centers for
Disease Control and Prevention Best
Practices for Comprehensive Tobacco
Control Programs, Healthy People 2010
objectives, and the Guide to Community
Preventive Services: Tobacco Use
Prevention and Control Services, to design
effective interventions and strategies.

## Comprehensive Tobacco Control Programs

The Tobacco Prevention and Control Program will focus on reducing tobacco-related disease, disability and death through four programmatic goals:

- Prevent the initiation of tobacco use among youth and young adults;
- Promote cessation from tobacco use;
- Eliminate secondhand smoke exposure; and,
- Reduce tobacco-related health disparities.

To achieve these goals, the Tobacco Prevention and Control Program will seek to implement population-based interventions backed by strong scientific evidence, and aligned with CDC's Best Practices for Comprehensive Tobacco Control Programs.

#### **Health Communication Interventions**

The bureau has awarded The Zimmerman Agency, Inc., a \$17 million contract to conduct a statewide marketing/advertising campaign to promote tobacco cessation, educate about the dangers of secondhand smoke exposure and counter tobacco company media messages. These campaigns will target adults, youth and pregnant women.

#### **State and Community Interventions**

A total of sixty-three county health departments and non-profit organizations have been awarded contracts to develop community based programs addressing youth and chronic disease tobacco prevention programs. The CDC recommends a strong community program focus for success in comprehensive tobacco prevention and control.

#### **Cessation Interventions**

Florida's toll free telephone cessation service (877-822-6669) is available to assist smokers in quitting smoking by providing counseling to help them remain tobacco free. Callers will be offered free nicotine replacement therapy, such as patches, gum, or lozenges, to help stop the addiction.

#### **Area Health Education Centers Network**

The Area Health Education Centers (AHEC) serve rural and urban underserved populations through the AHEC network. They are specifically designated in s. 381.84, Florida Statutes, to provide training and tobacco cessation efforts to these populations. Their training efforts are focused on health profession students.

#### **Surveillance and Evaluation**

The Tobacco Prevention and Control Program regularly collects and analyzes information on tobacco use among adults and youth in Florida. The surveillance and evaluation component will assist the program with monitoring and documenting both long and short term intervention outcomes. The effort is essential to develop program policies and ensure accountability.

#### **Adminstration and Management**

Internal capacity within the Florida Tobacco Prevention and Control Program is essential for program sustainability, efficacy, and efficiency.

## Smoking & Youth



## Stopping tobacco addiction begins with Florida's Youth

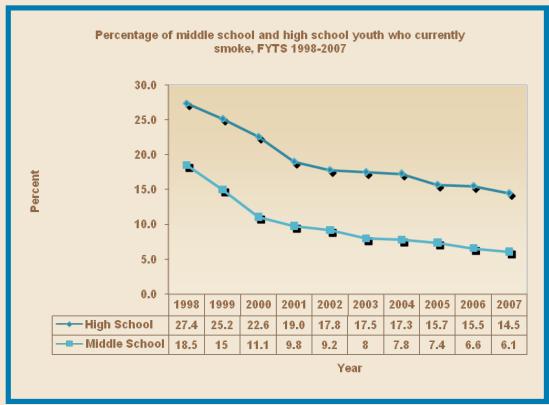
The introduction to tobacco use begins with experimentation, usually during the adolescent years, that can progress into a regular habit in as few as seven cigarettes per month.<sup>6</sup> The progression into regular cigarette use among youth often develops without an adequate understanding of the risks associated with smoking, or strength of the addiction over them.<sup>10</sup> According to the CDC's Best Practices, young adults (ages 18-24) and youth are particularly vulnerable to tobacco industry efforts, resulting in more favorable attitudes towards smoking and increasing the intention to smoke.

"Nearly every adult who smokes (almost 90 percent) took his or her first puff at or before the age of 18."

from the Campaign for Tobacco-Free Kids

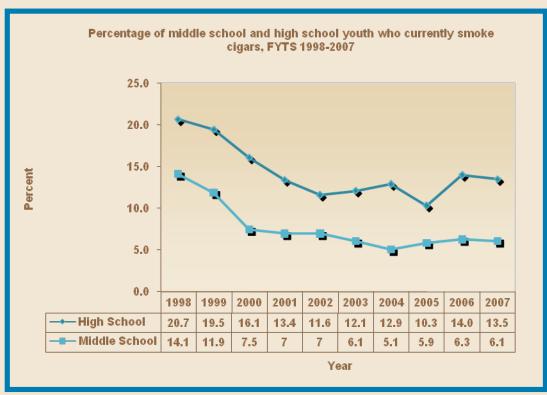
#### **Current smoking**

According to the Florida **Youth Tobacco Survey** (FYTS), youth smoking declined dramatically between 1998 and 2001, but reductions in middle and high school smoking have slowed in recent years. Florida is still producing modest declines in youth cigarette smoking. In 2007, 14.7% of high school students and 6.1% of middle school students reported they had smoked cigarettes once in the past 30 days.11



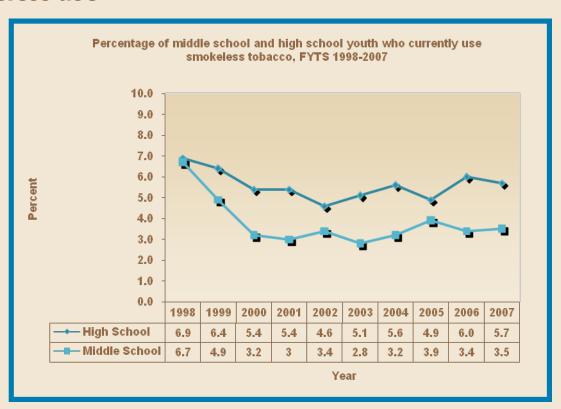
### Current cigar use

Unlike cigarette smoking, cigar smoking among high school students has increased from 10.5% in 2005 to 13.5% in 2007.7 Cigar smoke contains the same toxic substances as cigarette smoke and carries many of the same risks as cigarettes.<sup>11</sup>



#### Current smokeless use

Smokeless tobacco use among high school students has nearly rebounded to 1998 levels, although middle school use remains relatively stable.<sup>7</sup> Although touted as having fewer risks than cigarette smoking, smokeless tobacco is not a safe alternative to smoking cigarettes. Adolescents who use smokeless tobacco are more likely to start smoking cigarettes.16



## Smoking & Youth Attitudes

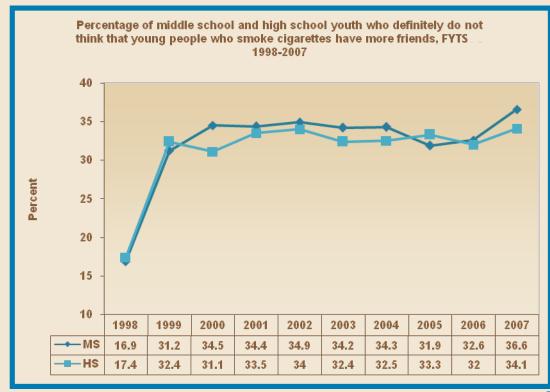


"Statewide programs [such as Florida's] that have featured a variety of interventions, including paid media campaigns, have had the most success in slowing initiation among youth, reducing tobacco use among adults and protecting the public from the harmful effects of secondhand smoke exposure. In just one year, a comprehensive prevention program financed by state settlement dollars and anchored by an aggressive mass media campaign produced significant declines in tobacco use among Florida middle and high school students."

from the CDC's Best Practices for Comprehensive Tobacco Control Programs

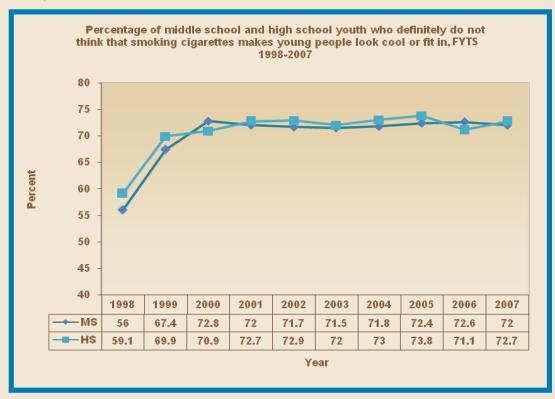
#### Do young people who smoke have more friends?

According to the Florida Youth Tobacco Survey (FYTS), the percentage of students who definitely did not think that young people who smoke cigarettes have more friends increased significantly from 1998 to 1999 among both middle and high school students. However, from 1999 to the present, there was no increase.7



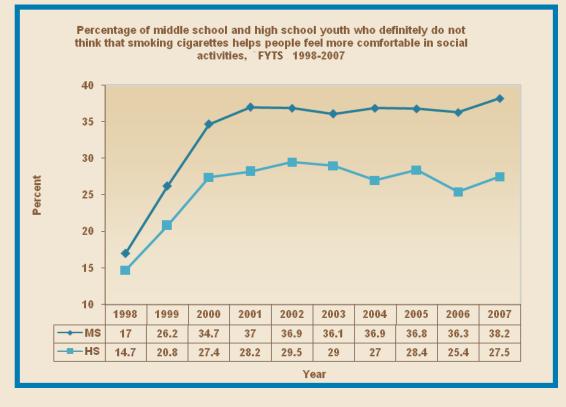
#### Does smoking make young people look cool or fit in?

The percentage of middle school students who definitely did not think that smoking cigarettes makes young people look cool or fit in increased significantly from 1998 to 2000, but did not change thereafter. Similarly, high school students who thought cigarettes make young people look cool or fit in increased dramatically between 1998 and 1999, but did not change appreciably after 1999.7



### Does smoking help people feel more comfortable in social situations?

Between 1998 and 2000, there was a significant increase in the percentage of middle and high school students who reported that they definitely did not think that smoking cigarettes helps people feel more comfortable in social activities. This percentage has not changed greatly since 2000 for either middle or high school students. 7



## Smoking & Pregnancy



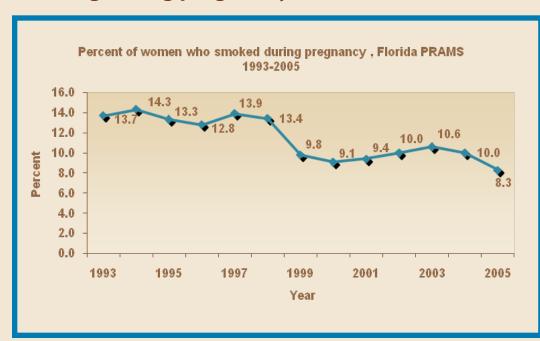
**Smoking affects roughly** 18,700 births in Florida each year. 1 Complications due to smoking during pregnancy include:

- Pre-term births;
- Respiratory infections;
- Low birth weight; and
- Sudden infant death syndrome  $(SIDS)^3$

**Healthcare costs in Florida** associated with smoking during pregnancy total \$31.8 million per year.1

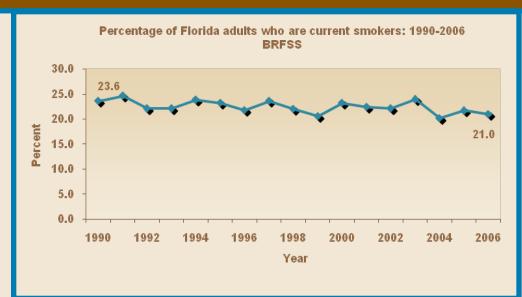


#### Smoking during pregnancy- the numbers



- According to the **Pregnancy Risk Assessment Monitoring** System (PRAMS), in 2005, roughly one out of every twelve Florida women smoked during their pregnancies.8 • 53.6% of women who smoked before they became pregnant quit
- while pregnant.<sup>3</sup> • 35.2% of women who
- abstained from smoking during their pregnancies resumed smoking after delivery.3

## Smoking Cessation



Data from the Behavioral Risk Factor Surveillance System (BRFSS) show that adult smoking prevalence in Florida has remained relatively steady for over ten years.<sup>4</sup>

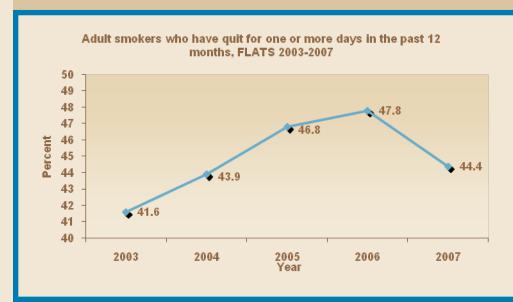
Adult smokers are defined as those who have smoked at least 100 cigarettes or more in their lifetimes and who smoke currently on some days or every day. 4

According to the Partnership for Prevention, the top three most beneficial and cost-effective preventive health services include:

- Daily aspirin use among adults at risk of cardiovascular disease;
- Immunizing children; and
- Intervening with smokers to help them quit

Screening adults for smoking, providing brief smoking cessation counseling, and offering therapies and referrals to help them quit are some of the most important and cost-effective preventive services available, yet less than 65% of adults receive these services. If these services were offered to all adults, presuming reasonable success rates, it could save \$3 billion in medical costs annually. <sup>12</sup>





Adults who made a quit attempt increased slightly from 2003 to 2007. About two out of every five smokers tried to quit smoking for a day or longer in the past year. <sup>9</sup>

# Eliminating Exposure to Secondhand Smoke

Involuntary exposure to secondhand tobacco smoke causes premature death and disease among nonsmokers. Nevertheless, nonsmokers continue to be exposed to secondhand smoke in public spaces and private residences.

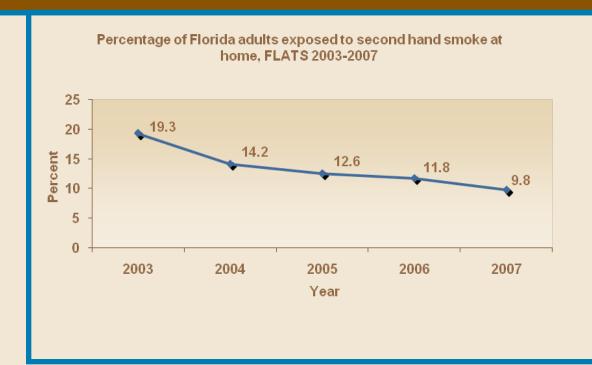
"The scientific evidence on the health risks associated with exposure to secondhand smoke is clear, convincing and overwhelming"

from the Campaign for Tobacco Free Kids- Health Harms from Secondhand Smoke



## The 2006 U.S. Surgeon General's Report <sup>13</sup> on the adverse health consequences of involuntary exposure to secondhand smoke established:

- A causal link between secondhand smoke exposure and coronary heart disease, lung cancer, sudden infant death syndrome, and respiratory problems in children;
- Only 100% smoke-free environments effectively protect nonsmokers from secondhand smoke exposure in enclosed, indoor areas;
- Millions of Americans continue to be exposed to secondhand smoke in their homes and workplaces; and
- There is no safe level of secondhand smoke exposure.



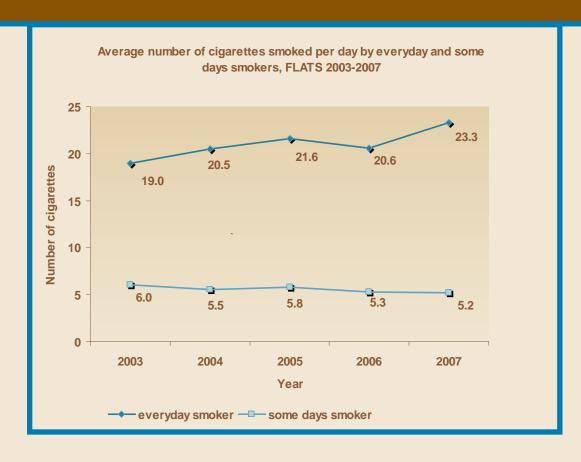
An estimated 692,000 of Florida's children are exposed to secondhand smoke in the home. thereby increasing their risk of acute respiratory problems, ear infections, and severe asthma. 1,13,14 Secondhand smoke exposure in homes in Florida has dropped in half since 2003.9

#### Florida Clean Indoor Air Act

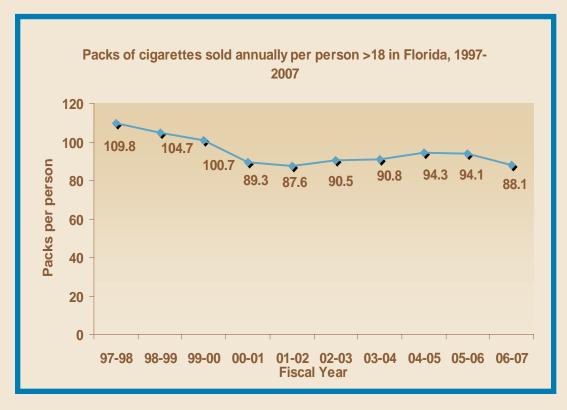
The Department of Health has enforcement responsibilities for the Florida Clean Indoor Air Act (FCIAA). Smoking became prohibited in enclosed indoor workplaces on July 1, 2003, with specific exceptions. The smoking prohibition was a result of the passage of Amendment 6 to the Florida Constitution in November 2002. The purpose of the Florida Clean Indoor Air Act is to protect people from the health hazards of secondhand tobacco smoke and to implement Amendment 6 (Section 20, Article X). The Department of Business and Professional Regulation (DBPR) is the agency responsible for enforcing the FCIAA in restaurants, stand-alone bars, bowling centers, billiard halls, and any civic/fraternal organization that holds a beverage license with DBPR.

- In November 2002, 71% of Floridians voted in favor of a ballot initiative to ban smoking from all enclosed, indoor workplaces with some specific exceptions.
- According to the 2007 Florida Adult Tobacco Survey (FLATS), 83.5% of adults favor the FCIAA.
- Evidence from the FLATS and the Florida Youth Tobacco Survey (FYTS) suggests that since the passage of the FCIAA, smoking in the home has declined, and the rules about smoking in the home have become stricter.
- Smoke-free homes help protect children from exposure to secondhand smoke.
- Clean indoor air laws help to establish anti-smoking norms that may discourage smoking by underage youth.
- A University of Florida economic study showed that smoke-free workplaces did not negatively impact restaurants, bars or hotels in Florida.<sup>5</sup>
- Retail sales in restaurants, lunchrooms, and catering services were found to have risen significantly in the first year after the FCIAA's enactment.<sup>5</sup>

## Adult Smoking



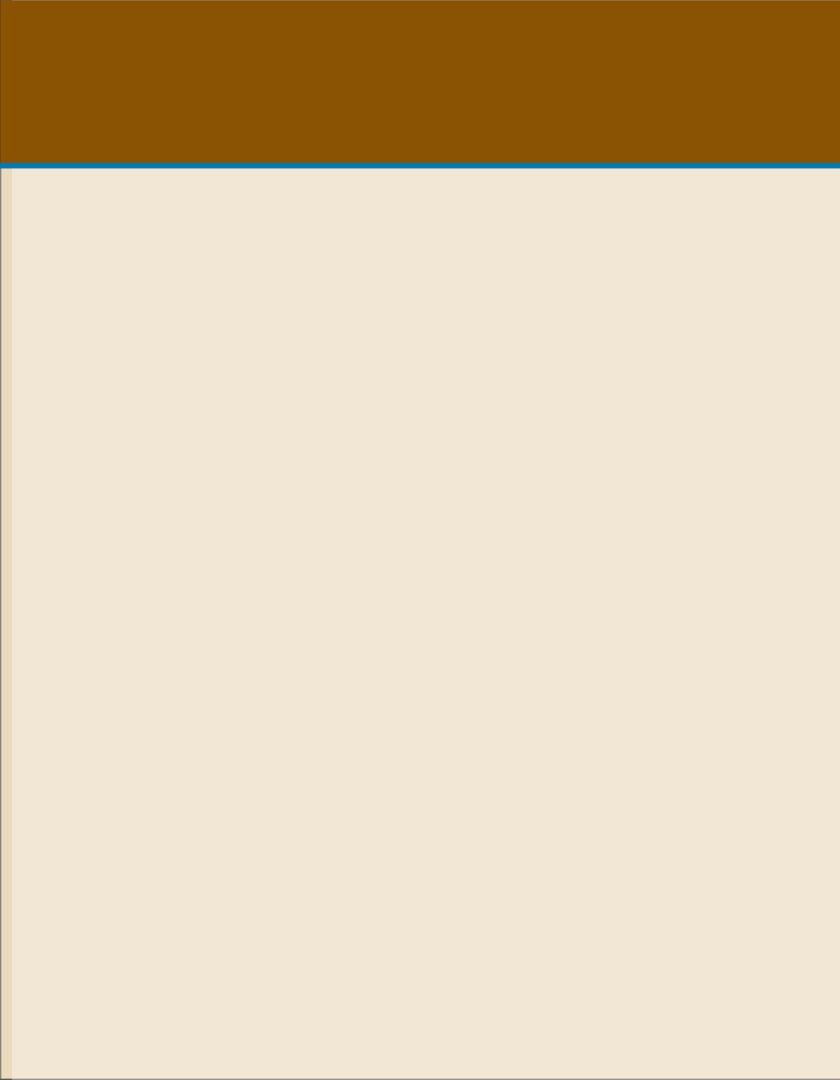
In 2007, adults who smoke every day reported consuming an average of 23.3 cigarettes per day in the past month. Those who smoke on some days reported consuming far fewer cigarettes in the past 30 days - approximately 5.2 cigarettes per day in the past month. **Cigarette consumption** among both groups of smokers has remained relatively flat for the past five years.9



Over the past decade, Florida has made some progress in reducing the annual per adult sales of cigarettes sold from 109.8 packs sold per adult in 1997-98 to 88.1 packs sold per adult in 2006-07. 9 (Cigarette sales data available from the Florida Department of Business and Professional Regulation)

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http://www.doh.state.fl.us/Tobacco/tobacco\_home.html