

2010

Florida Department of Health Bureau of Tobacco Prevention Program

Annual Report

In 2009, there were approximately 497,306 fewer adult smokers in Florida than there were in 2006.*





omprehensive tobacco prevention and control efforts in Florida have reduced tobacco use and exposure to secondhand smoke. In 2006, the 21 percent current smoking prevalence among adults was higher than the national average of 20 percent and now at 17.1 percent, is below the national average of 17.9 percent. The number of youth who report living in a home where smoking is allowed indoors has decreased 17.7 percent from 17.2 percent in 2006 to 12.5 percent in 2009.

While we are making progress, these advances do not allow for complacency. In Florida, the tobacco industry spends approximately \$880 million annually marketing its deadly products. Florida spends about \$65 million annually on helping people quit and keeping Florida's youth from using tobacco. The industry meets increasingly restrictive regulations with new products and marketing strategies including innovative delivery systems, such as hookah pipes and flavored tobacco products. The efforts are proving effective; in 2010, 7.1 percent of middle school students and 21.1 percent of high school students reported ever having tried smoking flavored cigars (FYTS, 2010).

Even with the successes, tobacco use and exposure to secondhand smoke continues to negatively impact the health of Floridians. Florida's economic burden of tobacco use is staggering. Annual health care costs directly caused by smoking are \$6.32 billion and the portion paid by the state Medicaid program is \$1.2 billion.

One way to reduce the tobacco burden is through tobacco cessation. The comprehensive Florida Quitline operates 24 hours a day, 7 days a week. Since 2006, calls to the Florida Quitline have increased almost 1,000 percent. Since July 2010, Floridians age 11 and above are able to use the Florida Quitline and receive free tobacco cessation counseling over the Internet, through the telephone, or receive a referral for face-to-face counseling. Nicotine replacement therapy is free, when it is available and appropriate.

The Department meets quarterly with the Tobacco Education and Use Prevention Advisory Council to discuss activities and receive recommendations. Council members represent Florida's recognized experts in tobacco control and the Department is grateful for the passionate commitment to the effort.

We are pleased to outline the progress in this Fiscal Year 2009-2010 Annual Report and look forward to your continued support. We encourage anyone with an interest in tobacco use prevention to join our efforts.

A Message from the Deputy Secretary of the Florida Department of Health

Kimberly A. Berfield



Table of Contents

Executive Summary	4
Program Background and Goals	6
Surveillance & Evaluation	7
Health Communication Interventions	. 21
State & Community Interventions	26
Cessation Interventions	31
Administration & Management	36
CDC Grant Activities	. 37
Looking to the Future – A Tobacco Free Florida	39

^{*} Changes in Smoking-Attributable Mortality and the Ecomonic Burden of Smoking in Florida from 1999 to 2009. RTI International. September 2010.

he Comprehensive Statewide Tobacco Education and Use Prevention Program's annual report is based on the 2009-2010 Fiscal Year (FY 2009-2010), July 1, 2009 through June 30, 2010. This reporting change from calendar to fiscal year provides the reader with program information and financial data reflective of the Department of Health's fiscal year. With this initial report, there will be some information previously included in the 2009 Annual Report.

The comprehensive multi-faceted program is the Bureau of Tobacco Prevention Program (Bureau) in the Department of Health. The Bureau continues to expand and improve services to Floridians through Legislative appropriations (the Bureau does not use state general revenue funding) and a Centers for Disease Control and Prevention (CDC) cooperative agreement. Article X, Section 27, Florida Constitution, requires the Florida Legislature to annually appropriate 15 percent of the total gross funds paid by tobacco companies to Florida in 2005 to fund the comprehensive statewide tobacco education and use prevention program. The amendment further requires the tobacco prevention program to adhere to the CDC's Best Practices for Comprehensive Tobacco Control Programs.

Achievements in Statewide Tobacco Prevention and Control

- Current smoking prevalence among adults has decreased by 18.6% from 21.0% in 2006 to 17.1% in 2009 (Behavioral Risk Factor Surveillance System [BRFSS]).
- In 2006, the current smoking prevalence among adults
 was higher than the national average of 20% and is now
 below the national average of 17.9% (BRFSS). In the past
 four years, Florida has significantly decreased its state
 rate and dropped below the national average.
- The number of youth who report living in a home where smoking is allowed indoors has decreased 27.7% from 17.2% in 2006 to 12.5% in 2009 (Florida Youth Tobacco Survey [FYTS]).
- The number of youth exposed to secondhand smoke in a room or car one or more times during the past 7 days decreased 12.6% from 60.9% in 2006 to 53.2% in 2009 (FYTS).
- The number of adults exposed to secondhand smoke in the home decreased 27.1% from 11.8% in 2006 to 8.6% in 2009 (Florida Adult Tobacco Survey [FLATS]).

This report details the activities conducted in each program component area during FY 2009-2010.

Surveillance and Evaluation

Independent evaluations of all program components are completed for FY 2008-2009 and are now in progress for FY 2009-2010. The evaluation recommendations are used to continuously improve the program.

Health Communication Interventions

"Be Free" This year the campaign promoted the "Be Free" message statewide through various creative venues. The campaign's Facebook fan base has doubled since January 2010 and over 130,000 fans agree that we should live in a Tobacco Free Florida.



Executive Summary

Tobacco Free Florida is Good for Business

Since 2007 when the state's tobacco prevention program began receiving annual constitutional funding, the positive impact for Florida has been dramatic. Consider these facts:

- Annual personal health care expenditures related to smoking have declined \$1 billion or 11.3%.
- As much as \$4.2 billion in total personal health care expenditures have been saved as a result of the reduction in adult smoking prevalence (2007-09).
- Productivity losses because of mortality attributable to smoking have decreased by approximately \$583 million (6.2%).
- Annually there are approximately 300 fewer smoking related deaths among Floridians 35 and older.
- Expenditures by the Bureau of Tobacco Prevention created a total of 1,291 jobs in Florida generating \$37.5 million in total labor income and \$95.6 million in total expenditures impact (2009).

These statistics demonstrate a healthier Florida but beyond that, are a positive indicator for Florida businesses, now and in the future. Lower health care costs mean more dollars are available for investment in business assets and a healthier workforce means increased productivity. Businesses seeking relocation or expansion opportunities will weigh these factors positively in favor of the Sunshine State.

Florida's comprehensive statewide tobacco education and use prevention program has been annually funded through a constitutional mandate since 2007. This guaranteed funding and a structure based on components for effective tobacco prevention programs as outlined by the Centers for Disease Control and Prevention have made it possible for Florida's tobacco program to show the dramatic impact of decreasing tobacco use. Program features include:

- Marketing/media component broadcasting the prevention and cessation message statewide.
- Community based interventions in Florida counties.
- Statewide Florida Quitline and internet based cessation support, in-person counseling and health professional training by the Area Health Education Centers (AHEC), and cessation activities targeted to rural and acute care hospitals.

State and Community Interventions

The shift to policy and systems change continues in the state and community interventions program component. Community intervention grantees maintain tobacco free partnerships. They work collaboratively to mobilize the community to develop policies, environment, and systems change. These activities support long-term social norm change regarding tobacco use. A web-based data system collects community tobacco prevention and control data.

Cessation Interventions-Ouitline

The Florida Quitline is available 7 days a week, 24 hours a day. Since July 2010, Floridians age 11 and above can use the Florida Quitline and receive free tobacco cessation counseling over the Internet, through the telephone, or face-to-face with a referral. Nicotine replacement therapy is free, when it is available and appropriate.

Cessation Interventions-Area Health Education Centers (AHEC)

Through the extensive AHEC network, free face-to-face tobacco cessation counseling services are offered to Floridians. During FY 2009-2010, over 7,800 Floridians received cessation counseling through the AHEC network. In addition, health care professionals and students are trained on the U.S. Public Health Services' clinical practice guidelines for treating tobacco use and dependency.

Administration and Management

The Bureau operates with a minimum number of employees with specific program area or contract management expertise. The staff consists of 20 full time equivalent (FTE) positions and 2 other personnel system (OPS) employees. There is only one clerical support position for the Bureau.



n 2006, Florida voters amended the Florida Constitution. The voters approved a constitutional amendment requiring the Florida Legislature to appropriate 15 percent of the 2005 tobacco settlement payment (adjusted annually for inflation) to fund the comprehensive statewide tobacco education and use prevention program.

The 2007 Florida Legislature passed Section 381.84, Florida Statutes, implementing the constitutional amendment and directing the Department of Health to create a comprehensive statewide tobacco education and use prevention program consistent with the CDC Best Practices for Comprehensive Tobacco Control Programs. In addition, the statute established a Tobacco Education and Use Prevention Advisory Council to provide advice to the State Surgeon General on the direction and scope of the program. Membership of the council includes tobacco prevention experts ranging from state medical school deans to representatives of the American Cancer Society, American Heart Association, American Lung Association, the Campaign for Tobacco Free Kids, and other tobacco prevention and cessation advocates.

In FY 2009-2010, the Florida Department of Health's Comprehensive Statewide Tobacco Education and Use Prevention Program operated with a budget of \$65,320,805 in funding allocated from two sources: Tobacco Settlement Trust Fund (\$63,546,059) and a grant from the Centers for Disease Control and Prevention (\$1,774,746).

Program Goals

The Bureau works to reduce Florida's overwhelming burden related to tobacco use and exposure to secondhand smoke through these programmatic goals:

- Prevent the initiation of tobacco use among youth and young adults.
- Promote cessation of tobacco use.
- Eliminate secondhand smoke exposure.

The Florida Department of Health's Comprehensive Statewide Tobacco Education and Use Prevention Program presents the following report on its continued efforts to achieve the program goals. These efforts will continue to reduce the unacceptable financial and societal costs associated with tobacco-related deaths, diseases, and disabilities.

Program Background and Goals

Surveillance and Evaluation

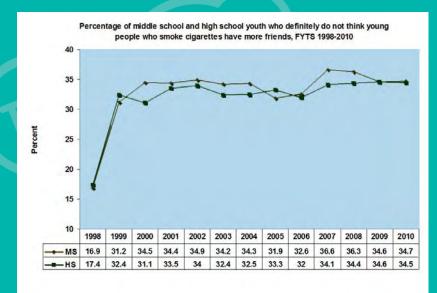
The Bureau established a surveillance and evaluation system to inform program and policy direction, monitor and document short, intermediate, and long term population outcomes, ensure accountability, and evaluate the effectiveness of the program in meeting its goals.

Surveillance

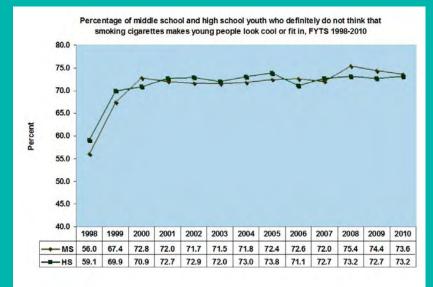
Surveillance is the process used to measure tobacco use behaviors and changing trends in tobacco use among Floridians. It is also used to measure their knowledge and attitudes about tobacco use and tobacco control policies. These population-level measurements occur at defined intervals of time, typically on an annual basis. The surveillance data are used to monitor progress toward achieving long-term programmatic goals.

Statewide surveillance includes the Florida Adult Tobacco Survey (FLATS), the Florida Youth Tobacco Survey (FYTS), the Behavioral Risk Factor Surveillance System (BRFSS), the Pregnancy Risk Assessment Monitoring Systems (PRAMS) and the Child Health Assessment and Monitoring Program (CHAMP). On the following pages, surveillance data are presented under the goal areas. The data presented are the most recent available and are from the following sources:

- 1) 2010 Florida Adult Tobacco Survey (FLATS);
- 2) 2010 Florida Youth Tobacco Survey (FYTS);
- 3) 2009 Behavioral Risk Factor Surveillance System (BRFSS);
- 4) 2008 Pregnancy Risk Assessment and Monitoring System (PRAMS);
- 5) Fiscal Year 2009-2010 Florida Department of Business and Professional Regulation cigarette sales data; and
- 6) 2010 Florida Clean Indoor Air Act call data.

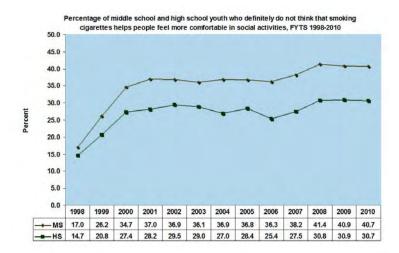


Among middle and high school students, the percentage who definitely did not think that young people who smoke cigarettes have more friends increased significantly from 1998 to 1999. From 1999 to 2010, the trend has remained relatively flat. In 2010, 34.7% of middle school and 34.5% high school students did not think that cigarette smokers have more friends.



From 1998 to 2010, the percentage of Florida students who definitely did not think that smoking cigarettes makes young people look "cool" or "fit in" increased by 31.3% among middle school students and by 22.3% among high school students. Middle school students had a slightly lower prevalence of believing that smoking cigarettes helps young people look cool or fit in.

Goal Area One:Prevent Initiation, Youth Attitudes

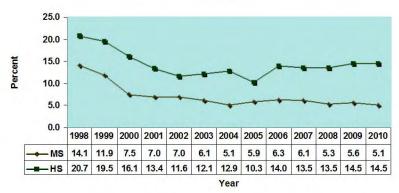


From 1998 to 2010, the percentage of Florida students who definitely did not think that smoking cigarettes helps people feel more comfortable in social activities increased by 139.6% among middle school students and by 109.1% among high school students. Middle school students have consistently had a lower prevalence of believing that smoking helps people feel more comfortable in social situations than high school students.

Goal Area One: Prevent Initiation, Youth Attitudes

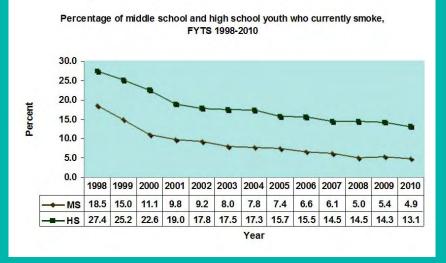
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Percentage of middle school and high school youth who currently smoke cigars, FYTS 1998-2010

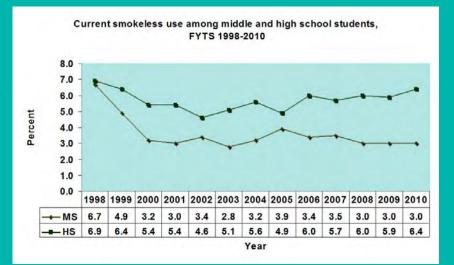


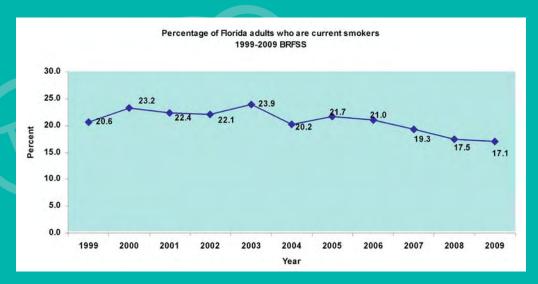
In 2010, 5.1% of middle school students and 14.5% of high school students smoked cigars at least once during the past 30 days. Since 1998, the prevalence of current cigar smoking has decreased by 63.8% among middle school students. From 1998 to 2002, the prevalence of this behavior decreased significantly among high school students, but from 2002 to 2010, this prevalence increased significantly by 25.0%.

In 2010, 4.9% of middle school students and 13.1% of high school students smoked at least once during the past 30 days. Since 1998, the prevalence of current smoking has decreased by 73.5% among middle school students and by 52.2% among high school students.

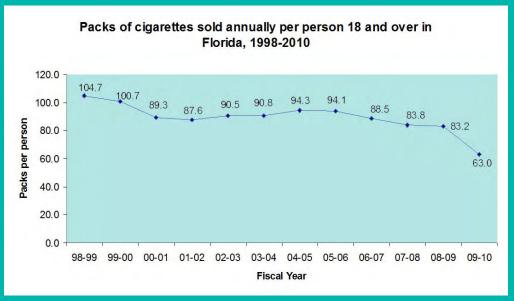


In 2010, 3.0% of middle school students and 6.4% of high school students used smokeless tobacco at least once during the past 30 days. Since 1998, the prevalence of current smokeless tobacco use has decreased by 55.8% among middle school students. From 1998 to 2002, the prevalence of this behavior decreased significantly among high school students, but from 2002 to 2010, this prevalence has increased by 39.1%.



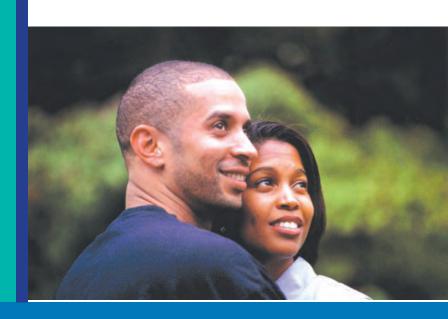


Adult smokers are defined as those who have smoked at least 100 cigarettes or more in their lifetime and who currently smoke some days or everyday. Data from the Behavioral Risk Factor Surveillance System (BRFSS) show that adult smoking prevalence in Florida remained relatively steady from 1999-2006. In the past four years, Florida has significantly reduced its adult smoking prevalence from 21.0% in 2006 to 17.1% in 2009.



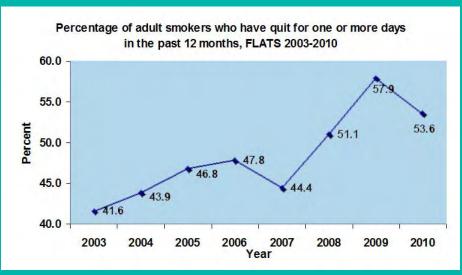
Florida has made progress in reducing annual per capita cigarette sales for adults 18 and over. In fiscal year 1998-1999, approximately 104.7 packs were sold per adult in Florida. In fiscal year 2009-2010, that number was approximately 63.0 packs. This represents more than a 39% decrease in packs sold annually per person 18 and over between 1998-1999 and 2009-2010.

Goal Area Two:Promote Cessation

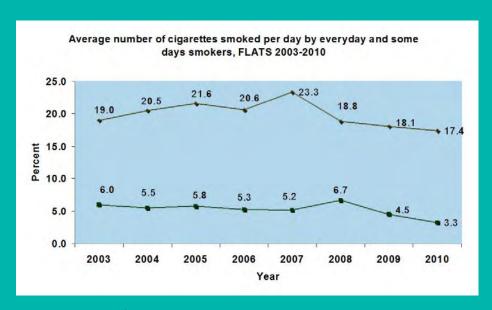


Goal Area Two: Promote Cessation

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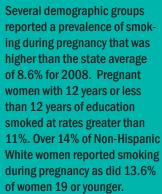


In 2010, 53.6% percent of adult smokers tried to quit smoking for one day or longer. This represents a decrease of 7.4% in quit attempts from 2009.



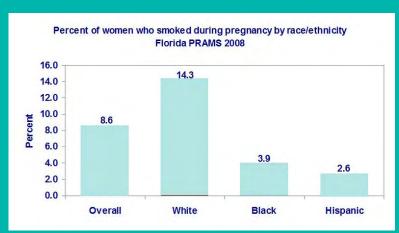
The average number of cigarettes smoked per day by everyday and some days smokers continues to decrease. In 2010, adults who smoke everyday reported consuming an average of 17.4 cigarettes per day in the past month. This is a decrease from an average of 18.1 per day reported in 2009. Adults that aren't everyday smokers reported consuming an average of 3.3 cigarettes per day in the past month. This is far fewer than everyday smokers and is a decrease from the 4.5 per day average reported by some days smokers in 2009.

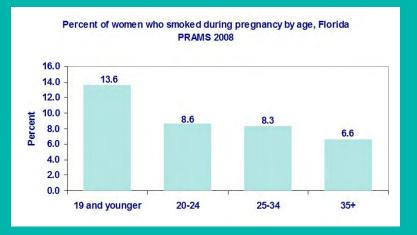


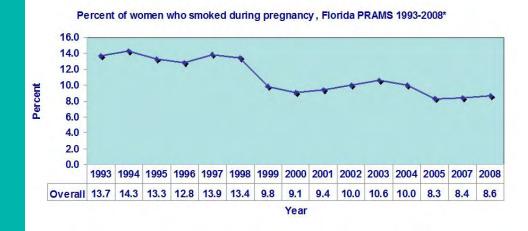




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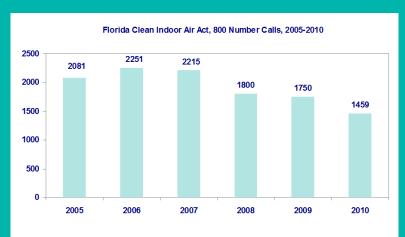


*note that 2006 data not collected

Results from the most recent Pregnancy Risk Assessment Monitoring System (PRAMS), conducted during 2008, show that approximately 1 in 12 Florida women smoked during pregnancy



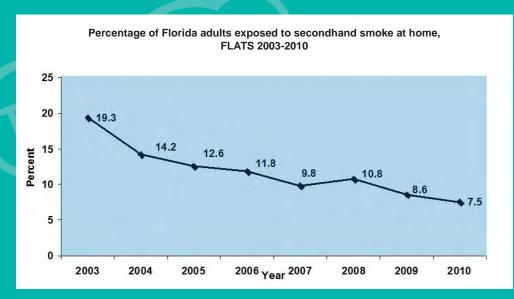
The Bureau of Tobacco Prevention Program is responsible for enforcement of the Florida Clean Indoor Air Act (Chapter 386, F.S.) at all facilities not regulated by the Department of Business & Professional Regulation. In 2010, the Bureau received over 1,450 toll-free calls, responded to 126 complaints for noncompliance, conducted 85 on-site investigations, and initiated 17 administrative proceedings resulting in \$6,750.00 in fines.



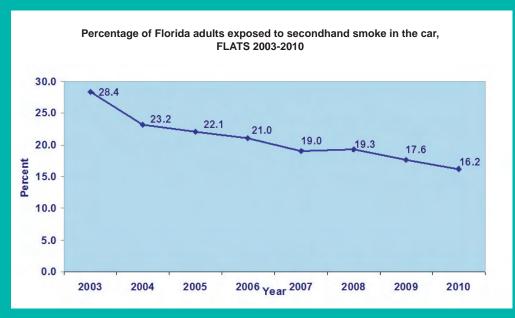








Since 2003, Floridian's exposure to secondhand smoke in the home has decreased by over 61%. In 2010, 7.5% of Floridians reported exposure to secondhand smoke in the home.

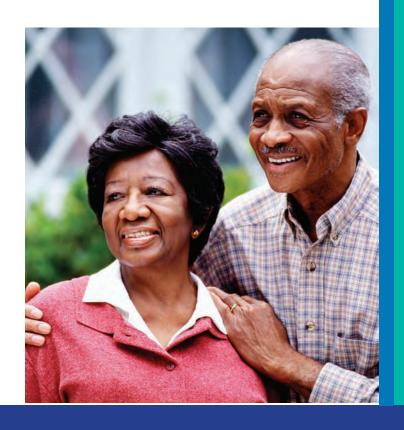


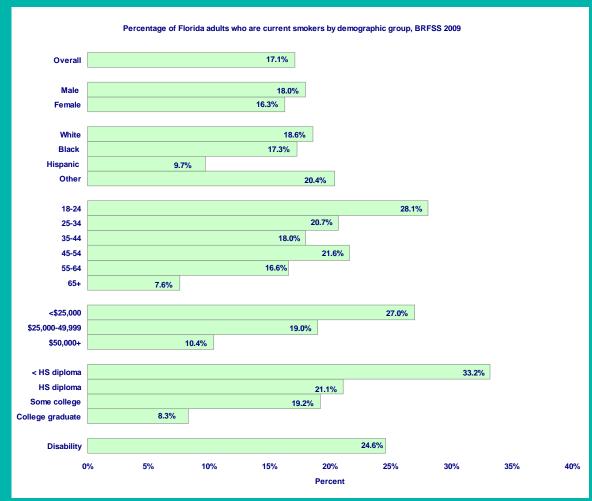
Since 2003, Floridian's exposure to second hand smoke in cars has decreased by almost 43%. In 2010, 16.2% of Floridians reported exposure to secondhand smoke in the car. While this number is decreasing with time, more Floridians are exposed to secondhand smoke in cars than in the home.

Goal Area Three: Eliminate Secondhand Smoke Exposure

continued

Goal Area Four:Reduce Tobacco Related Health Disparities





According to the 2009 BRFSS, 17.1% of Floridians are current smokers. Whites (18.6%) are more likely to smoke than those that identify their race/ethnicity as Hispanic (9.7%). Men are more likely to smoke than women (18.0%). Floridians with an income of less than \$25,000 smoke at a higher rate than those with an income of greater than \$50,000 (27.0% vs 10.4%), and Floridians with less than a high school diploma (33.2%), a high school diploma/GED (21.1%), or some college (19.2%) are more likely to smoke than those with a college degree (19.2%).

Evaluation

Evaluation is used to measure the overall impact of the program, as well as to measure the ability of each program component to achieve its goals and objectives. It is also used to monitor the level of exposure among Florida's target populations to different programmatic interventions through population specific evaluation. In concert with statewide surveillance, evaluation data and recommendations are used to document program effectiveness in achieving outcomes. These data and recommendations provide ongoing feedback and options for modifying interventions to continuously improve the program.

During FY 2009-2010, competitively selected independent professional evaluators conducted surveillance and evaluation of the program components with Bureau staff providing guidance. The evaluators document gaps and assess strengths and weaknesses of the component they are reviewing. Where appropriate, the evaluators also measure short-term, intermediate, and long-term outcomes. All evaluators use the evaluation results to submit recommendations for improvement based on the evaluation results. The Bureau reviews all evaluation recommendations and makes programmatic changes when appropriate.

Vendor (FY 2009-2010)	Program Component Evaluated
Research Triangle Institute, Inc.	Annual independent evaluation of the overall program
Research Triangle Institute, Inc.	Evaluation of Area Health Education Centers (AHEC) Network Tobacco Training Program
Professional Data Analysts, Inc.	Florida Quitline and Quitline media
Professional Data Analysts, Inc.	AHEC cessation interventions
University of Miami	Health communication interventions
Robertson Consulting Group, Inc.	Community based interventions

Overall Independent Evaluation

The goal of the overall independent evaluation of the program is to ensure that state resources are effectively and efficiently utilized to maximize program outcomes. The program components are focused on reducing tobacco initiation, decreasing second-hand smoke exposure, and increasing tobacco cessation.

Surveillance and Evaluation

continued

Surveillance and Evaluation

continued

Florida Quitline Evaluation

The Florida Quitline evaluation is designed to assess the functioning and outcomes of the Quitline and the extent to which the Quitline media campaign is successful in driving smokers to call the Quitline. The evaluation results are used by the Bureau to make mid-course and yearly corrections to Quitline operations, the Quitline media campaign, and to identify and recognize areas of success.

AHEC Evaluation

The major goals of the AHEC cessation interventions evaluation are to provide the Bureau with detailed information to assess the impact of the AHEC cessation interventions on target audiences. The evaluation also provides the Bureau and the AHEC with feedback which may be used in the targeting and improvement of cessation interventions. This evaluation began during FY 2009-2010, and the evaluators provided preliminary recommendations.

Health Communication Interventions Evaluation

The health communication evaluation's major goals are to provide detailed information to assess the impact of the Tobacco Free Florida campaign on target audiences. The evaluation also provides substantive feedback that may be used to both make midcourse changes in the campaign and to develop future targeted marketing campaigns.

Community-Based Interventions Evaluation

The goal of the community-based interventions process evaluation during FY 2009-2010 was to determine if the community intervention grantees implemented their work plans, strengthened their partnerships, and made progress on short-term and intermediate outcomes.

For more information, please visit http://www.flquitline.com/Rpts-Pubs.html

Evaluation Highlights 2009-2010

The independent, external evaluators made recommendations at the end of FY 2008-2009, to assist with program planning for FY 2009-2010. At this time, recommendations from the evaluation have been or are in the process of being implemented.

Health Communications Interventions

Evaluation Findings	Bureau of Tobacco Prevention Program's Response
Increase broadcast television media saturation year-round.	Shifted funding from print, outdoor and online media budgets, increasing broadcast media resources to sustain longer media flights. Reduced volume of broadcast sponsorships in favor of longer, more traditional media flights.
Carefully consider the use of tobacco products in advertising to avoid the negative effect of "triggers."	Crafted messages that only show triggers when paired with visually hard- hitting images which illustrate the effects of tobacco use.
Overall targeted rating points (TRPs) are low. Consider narrowing the focus of the campaign for television advertising.	Narrowed the focus broadcast efforts to include cessation, secondhand smoke, and prevention target audiences. Other audiences were reached via non-broadcast elements.
Strategically select advertisements with proven effectiveness from the CDC Resource Center.	Utilized already existing media from the CDC Media Resource Center to save money on production costs for smokeless creative television and radio spots. These spots featured Rick Bender, "The Man with Half a Face" and aired in markets with the highest smokeless prevalence rates in Florida. Plan to utilize already existing creative materials during the FY 2010-2011 campaign year.
Develop media campaigns to more explicitly support statewide and local community action.	Developed multiple materials to help the community intervention grantees align with the Tobacco Free Florida campaign.

Surveillance and Evaluation

continued



Surveillance and Evaluation

continued

Cessation Interventions

Evaluation Findings	Bureau of Tobacco Prevention Program's Response	
Avoid spiking Florida Quitline call vol- ume to unmanageable levels to ensure quality service and adequate resource management.	Employed population-based media strategy to equally cluster statewide designated market areas into two buy groups and included free nicotine replacement therapy (NRT) messages via broadcast radio by market clusters	
Increase funding for the Florida Quitline.	The Florida Quitline contract amount was increased and included counseling services and NRT for over 30,000 tobacco users during FY 2009-2010.	
Consider supplementing the Florida Quitline with interventions such as Internet-based counseling.	The Bureau applied for and received American Recovery and Reinvestment Act of 2009 (ARRA) stimulus funds. A portion of these funds were used to develop an Internet-based cessation counseling service for Floridians. The web-based service began in July, 2010.	
Develop and adopt a standardized NRT policy regarding distribution of free NRT for AHEC cessation program participants.	 The Bureau is addressing NRT funding and access issues. The AHEC Network is in the process of modifying Network NRT guidelines. 	
Standardize Quit Smoking Now (QSN) facilitator training across the AHEC network.	 The Bureau will clarify expectations for the AHEC cessation programs. AHEC is beginning to address standardization of QSN facilitator training. 	

Community-Based Interventions

Evaluation Findings	Bureau of Tobacco Prevention Program's Response
Prioritize community interventions with strongest evidence for success.	FY 2009-2010 work plan was revised to focus on evidence-based, policy interventions.
Provide direction on program goals and on effective methods for youth engagement.	Community intervention grantees were trained in policy implementation and youth engagement.
Include measures for partnership development to guide community intervention grantees.	A partnership resource toolkit and manual were developed.
Implement additional communica- tion tools for community intervention grantees.	Communication via the Automated Tobacco Activity Collection System (ATACS) was implemented. The complex program's SharePoint site was updated and resources are frequently posted to the site.
Provide a core set of trainings on targeted areas.	Regional Tobacco Prevention Coordinators provide technical assistance to counties within their regions.
Measure short-term and intermediate outcomes.	Ability to measure outcomes incorporated into FY 2009-2010 work plan in ATACS.

he purpose of the health communication intervention component is to:

- educate Floridians on the negative health effects of tobacco,
- decrease the number of Floridians using tobacco through efforts aimed at both prevention and cessation audiences,
- reduce exposure to secondhand smoke, and to
- shape social norms related to tobacco use.

In 2007 through competitive solicitation, The Zimmerman Agency, Inc. was awarded a three-year contract to conduct a statewide social marketing, media, and a public relations campaign. As a result, the Tobacco Free Florida brand was developed as the program's health communication interventions component.

Campaign Overview

The multi-faceted Tobacco Free Florida campaign was launched in February 2008. In July 2009, The Zimmerman Agency, Inc. began its third fiscal year of promoting the Tobacco Free Florida campaign. The campaign includes marketing, design, production, public relations and online media for cessation, prevention, secondhand, and smokeless tobacco messages.

Tobacco Free Florida's "Be Free" campaign message is aimed at empowering tobacco users to break the chain of addiction and encouraging youth to build self-confidence and identity without tobacco use. "Be Free" is the prominent tagline in media targeting all segments of the campaign.

Statewide television, radio, newspaper, promotions, sponsorships, social marketing, and online media ran in both English and Spanish markets through the end of June 2010.

Brand Platform

The Tobacco Free Florida creative platform was developed using the following brand building blocks:

- Functional benefits include healthy living, acceptance, concern for others, hygiene, responsibility and intelligence.
- Emotional benefits include confidence, pride, ownership, freedom, true identity, and self-respect.
- Functional and emotional benefits build to the core brand message of selfempowerment, which ultimately shapes the brand's personality and promise to customers.
- The brand personality is competent, courageous, and compassionate.
- The brand promise is Don't let tobacco define you. Define yourself.

Consumer insights were relied upon while developing the brand message and platform. Among the chief insights used to inform the brand message is that audiences respond more favorably to the voice of their peers than they do to the voice of authority.

Health Communication Interventions

Health Communication Interventions

continued

Campaign Elements

Broadcast television was the primary medium utilized to push the Tobacco Free Florida campaign messages to various target audiences. Radio was a support medium utilized for a high frequency impact for the adult cessation audience. To ensure full audience reach, specific sponsorships were negotiated on a variety of station formats to reach the Hispanic, African American and Haitian (Creole) audiences.

Based on evaluator recommendations, radio was not utilized to reach the youth prevention audience. Television was the primary medium used to reach this audience. Magazine efforts were implemented to offer statewide efforts targeting adults, youth, Florida's business sector, African American, and Hispanic audiences.

Online media was utilized to generate awareness that complemented offline efforts. All efforts were geo-targeted to online users in Florida. A mix of display ads, sponsorships, and social media across a variety of websites were used to drive users to the campaign's website.

Adult Cessation Creative Tactics

Both adult and young adult cessation audiences were targeted with the message to "Be Free" from their addiction via broadcast television, radio and print executions.

Adult/Young Adult Cessation Creative Executions			
Creative Execution	Media Type	Launch Month	Audience
"Real Life"	:30 Television	February 2010	Young Adults 18-24
"I'm Sorry"	:30 Television	March 2010	Adults 25-54
"Lo Siento"	:30 Television	March 2010	Adults 25-54
"Home Safety"	:30 Television	March 2010	Adults 25-54
"I'm Sorry"	:60 and :30 Radio	March 2010	Adults 25-54
"Lo Siento"	60 and :30 Radio	March 2010	Adults 25-54





Youth Prevention Creative Tactics

Youth prevention audiences were targeted with the message to "Be Free" from Big Tobacco's manipulative tactics. The "Infiltration" campaign message was communicated via broadcast television. "Be Free" youth prevention billboards were posted statewide for three months.

Youth Prevention Creative Executions			
Creative Execution	Media Type	Launch Month	Audience
"Vampire Moon"	:30 Television	February 2010	Youth age 11-17
"Vampire Moon"	:15 Cinema	February 2010	Youth age 11-17
"SWAT PSA"	2 minute PSA	March 2010	Students for SWAT recruitment
"Be Free"	Billboards	February 2010	Youth age 11-17

Health Communication Interventions

continued





In order to assist county SWAT chapters with recruiting new members, a 2-minute public service announcement (PSA) was developed. The SWAT PSA features real SWAT youth advocates communicating SWAT's mission and why SWAT is such an important student organization.

Smokeless Cessation Creative Tactics

Adult audiences were targeted with the message to "Be Free" from smokeless tobacco. This message was communicated in broadcast television and radio executions that were run in rural markets statewide.

Following evaluator recommendations, the Bureau utilized already existing media from the CDC Media Resource Center to save money on production costs for smokeless creative television and radio spots. "The Man with Half a Face" spots with Rick Bender were aired in markets with the highest smokeless prevalence rates in Florida.

Smokeless Cessation Creative Executions			
Creative Execution	Media Type	Launch Month	Audience
"Surgery"	:30 Television	April 2010	Adults 25-54
"Safe Alternative"	:30 Television	April 2010	Adults 25-54
"Just a Pinch"	:30 Radio	April 2010	Adults 25-54
"Lucky Rick"	:30 Radio	April 2010	Adults 25-54





Health Communication Interventions

continued

Sports Marketing

The Tobacco Free Florida message was co-branded with multiple sports teams throughout the state to reach adult cessation and youth prevention audiences. The campaign partnered with the University of Florida, Florida State University, Miami Heat, Orlando Magic, Tampa Bay Rays, Tampa Bay Lightning, Florida Marlins, and Florida Panthers. Co-branded partnership elements included:

- :15 professional and collegiate campaign endorsements for replay on television and in-stadium,
- :15 endorsement radio spots,
- in-stadium signage,
- digital displays, and
- customized co-branded promotional items.

The campaign expanded its sports efforts by purchasing signage for the University of Central Florida, University of South Florida, and University of Miami. Tobacco Free Florida sponsored the Florida Classic football game between Florida A&M University and Bethune-Cookman University on November 21, 2009.





Healthcare Provider Creative Tactics

Tobacco Free Florida placed targeted print ads and online advertisements encouraging healthcare providers to talk to their patients about tobacco use. The "Don't Be Silent About Smoking" ads encouraged healthcare professionals to get the conversation started with the "2As and 1R" method ("Ask. Advise. Refer").







Following evaluator recommendations, Bureau utilized already existing creative advertisements from the New York State Department of Health.

Online Tactics

Tobacco Free Florida's websites received enhancements and upgrades throughout the year. The campaign's main website, www.tobaccofreeflorida.com was updated to feature a new introduction video, a content slider, a blog, connections to social media elements, and a "get involved" tab. All updates and enhancements were developed to help users quickly find the content they are seeking.

Tobacco Free Florida continued to encourage Floridians to join the movement by becoming a fan of the campaign on Facebook. The campaign's Facebook page has grown into a community of over 130,000 fans that communicate with the brand and other fans on a daily basis. Fans share photos, comment on posts and provide support to fans trying to quit. Tobacco Free Florida's Facebook fan base has doubled in size since January 2010.



Public Relations

The public relations component of the Tobacco Free Florida campaign included a multi-pronged push to generate buzz, press coverage, and consumer awareness. Tactics consisted of traditional press outreach, strategic partnerships, event sponsorships, and community events/promotions to reach targeted Floridians.

Tobacco Free Florida's presence at community events was the largest activity of the public relations component. The Street Team and Smokifier Van continued to travel the state visiting large and small scale events reaching specific demographics. Examples of some of the events are:

- NASCAR races,
- tobacco observance events,
- rodeos,
- monster truck events,
- concerts, and
- festivals.

Health Communication Interventions



This year, the Street Team traveled to over 150 events across the state reaching nearly 2,000,000 Floridians and directly interacting with over 200,000 individuals. Community intervention grantees partnered with the Street Team to reinforce the Tobacco Free Florida message at numerous events statewide.

Tobacco Free Florida was featured in the DRIVE4COPD 300 nationwide race at the Daytona International Speedway on February 13, 2010. The campaign had a branded car, driver, pit crew, and signage in the race which was the highest-rated nationwide race on cable television.





Governor Crist proclaimed March 21 - 28, 2010 as the second annual Tobacco Free Florida Week. "Be Free For Me" was the theme and Floridians were encouraged to refer friends and loved ones to the Florida Quitline and local cessation resources. The week's objectives were

to increase cessation rates and to raise awareness of the negative impact of secondhand smoke. Over 91,000 consumers were reached at school-based and community-based events and over 80 news stories about the week reached nearly six million Floridians.

Community Intervention Grantees

Tobacco Free Florida developed multiple campaign materials to help community intervention grantees align with the Tobacco Free Florida campaign. A SWAT tool kit and county-specific Tobacco Free Florida logos were developed to synergize the statewide campaign and local initiatives. Many grantees requested customized marketing materials to help promote their local efforts. These resources optimized the impact and recognition of Florida's tobacco prevention and cessation initiatives.

Health Communication Interventions

continued

A Major Shift to Policy Change

According to the CDC *Best Practices for Comprehensive Tobacco Programs, October* 2007, "Evidence indicates that implementing policies that promote a change in social norms appear to be the most effective approach for sustained behavior change." Florida shifted to an evidence-based strategy by promoting social, policy, environmental and systems change at the state and local levels. The goals, timelines, and methods required for success are different from Florida's previous tobacco prevention efforts.

Policy change interventions began in early 2009 with several planning sessions to redesign the work plans for community intervention grantees. The focus on policy and social norm change and the work plan redesign were based on evaluation feedback.

Centers for Disease Control's – Key Outcome Indicators for Educating Comprehensive Control Programs is the guiding document for identifying tobacco prevention policies. Because the Bureau shifted to a policy, environmental and systems change approach, large populations will be impacted and long term sustainability will be attained. Tobacco Free Partnerships are the voice of the community to educate stakeholders and build momentum to achieve policy change. Each grantee is required to organize and maintain a tobacco free partnership and a Students Working Against Tobacco (SWAT) Chapter within their community.

Locally, community intervention grantees are addressing policy and systems interventions recommended by the Bureau based upon the CDC's *Best Practices for Comprehensive Tobacco Control Programs*. The interventions the grantees addressed during FY 2009-2010 are displayed in the charts within this section. Local policy change can be in the form of an ordinance, resolution, proclamation, or a voluntary policy to address tobacco use or avoidance. To be successful there should be an assessment and prioritization of the tobacco issues and engagement of key partners and stakeholders. Most importantly, the community partnerships provide ongoing support. This process is not immediate and requires the support of all key stakeholders.

During the monthly conference calls to grantees, updates on the program components and additional training and education information are provided. In addition, the four Regional Tobacco Prevention Coordinators host scheduled regional calls and technical assistance meetings. The coordinators help counties in work plan and policy development. They assess local tobacco partnerships and SWAT Chapters and provide recommendations to strengthen the organizations.

Grantee work plan progress is reported through the Automated Tobacco Activity Collection System (ATACS). These documents are instrumental in reviewing the counties progress towards policy development.

State and Community Interventions



State and Community Interventions

continued

During FY 2009-2010, grantees were successful in achieving the following policies:

Policy Number of police	ies adopted
Increased restriction on Minors' Access to Tobacco	Total: 44
Policy requiring retailer assisted tobacco sales	22
Policy to restrict/prohibit free sampling or distribution	11
Policy to control the location, number, and density of retail outlets	0
Policy to increase the number of compliance checks by enforcement agencies	11

Policy Success Story

Indian River

The Tobacco Free Partnership of Indian River County collaborated with the Sheriff's Department to increase compliance checks of local retail stores. The number of compliance checks increased from four per year to one a month for the current year. Stores who sell tobacco to minors are being issued a notice to appear in court, and local law enforcement officers are now consistently writing citations to minors with tobacco products.

er of policies adopted
Total: 31
2
2
3
0
3
21

Policy Success Story

Palm Beach

The Palm Beach County Health Department learned the tobacco industry approached the organizers of SunFest, an event with attendance of up to 300,000 people, to become a paid sponsor. In exchange for this sponsorship, the tobacco company would be allowed to distribute free samples. Although SunFest is normally tobacco-free, due to the difficulty of obtaining sponsors in the current economy, the organizers were seriously considering the offer. The Palm Beach County Health Department educated the organizers on tobacco industry tactics that lead to youth initiation of tobacco use. As a result SunFest informed the tobacco company it was not interested in accepting the sponsorship.

Policy	umber of policies adopted
Eliminate Secondhand Smoke Exposure	Total: 119
Policy to create smoke free cars.	2
Policy to create tobacco free college campuses.	12
Policy to create tobacco free grounds for healthcare facilities.	34
Policy to create tobacco free grounds for businesses.	40
Policy to create tobacco free grounds for schools.	7
Policy to create tobacco free non-profit organizations	
(i.e., bingo/fraternal organizations).	2
Policy to create tobacco free parks.	10
Policy to create tobacco free beaches.	4
Policy to create tobacco free fairs and other outdoor events.	2

Policy Success Stories

Miami-Dade

The Miami-Dade County Health Department worked closely with Florida International University (FIU) as a member of the Smoke-Free University Committee/Task Force to create and present a Tobacco Free campus policy to the University's Board of Trustees. The policy was passed and will be effective during FY 2010-2011.

Hendry and Glades

Hendry County Health Department and Drug Free Charlotte County collaborated with a local residential property management firm to implement a smoke free multi-unit housing policy. The management firm agreed to make all of its properties in Hendry and Glades counties smoke free.

Lee

The Tobacco Free Lee Coalition collaborated with the Board of Lee County Commissions on tobacco free policies. The Board of Lee County Commissions moved to change its administrative code to have a tobacco free workplace while staff is on county property.

The Tobacco Free Lee Coalition also collaborated with HUD owners/agents and established a subcommittee to promote tobacco free multi-unit housing policies. The Covington Meadows, a HUD multi-unit dwelling, adopted a tobacco free policy during FY 2010-2011. It is anticipated during FY 2010-2011, ten or more tobacco free policies will be implemented at HUD multi-unit dwellings.

Glades

The Glades County Tobacco Free Partnership attended Moore Haven City Council meetings to pursue a tobacco free parks ordinance. As a result the council passed a resolution making Tom Perry Memorial Park (the main city park and playground which houses community festivals) tobacco free.

State and Community Interventions

continued



State and Community Interventions

Pasco

The Pasco County Health Department collaborated with hospital stakeholders to implement tobacco free policies at all Pasco County hospitals. This policy has had a positive ripple effect and several clinics, substance abuse treatment facilities, and a veterans' nursing home plan to implement tobacco free policies.

Indian River

Smoke-free or tobacco-free policies were created with several large employers including the City of Sebastian and Piper Aircraft. Policies were also implemented in retirement communities and cessation classes were offered to the residents. In addition, the school district is in the process of upgrading their current smoke free policy inside school buildings to a comprehensive tobacco free policy.

Hernando

Tobacco Free Hernando Partnership collaborated with the Hernando County Board of County Commissioners to approve a policy that will prohibit the use of tobacco products on all Health Department campuses, the policy, not only employees, but also clients and visitors to the sites. This policy will be in effect during FY 2010-2011.

Policy	Number of policies adopted	
Cessation	Total: 358	
Proportion of health care providers and heath systems		
that have fully implemented the Public Health Services' guidelines	358	

Policy Success Stories

Palm Beach County

A tobacco cessation referral procedure was implemented at the six Federally Qualified Health Centers. Approximately 106 health services providers who come in contact with clients (including WIC nutritionists) were trained and are required to implement the 2As and 1R for tobacco cessation at all patient visits. Patients are asked about their tobacco use and are informed of the dangers of tobacco use and secondhand exposure. Individuals expressing a desire to quit are referred to either the Florida Quitline or to a local cessation class provided by Everglades Area Health Education Center.

Okeechobee

The Okeechobee County Health Department implemented a policy at the County Health Department referring patients who use tobacco to tobacco cessation services, including the Florida Quitline. As a result, the number of referrals to the Quitline from Okeechobee County has increased.

FY 2009-2010 Youth Prevention Programs

Youth prevention is part of a comprehensive program. The community intervention grantees establish and support Students Working Against Tobacco (SWAT) chapters. SWAT is the local youth anti-tobacco advocacy organization. SWAT members collaborate with local tobacco free partnerships to promote policies making tobacco use less desirable, acceptable, and accessible.

Efforts to change tobacco norms are more successful with a youth voice. In St. Lucie County, youth researched tobacco use at family events such as spring training baseball games. They used this research, along with previous studies on smoke-free environments, to advocate for a smoke-free stadium. Through education and discussions with decision makers, St. Lucie County families now enjoy a smoke-free environment when attending baseball games.

Over 300 SWAT chapters with about 6, 000 members operate statewide in Florida. SWAT plays a critical role in exposing the tobacco industry's predatory marketing tactics. SWAT members are trained in a variety of tobacco issues. The training and direct community involvement enhances member's leadership, civic, public speaking, and media skills.

During the statewide SWAT meeting, youth provided critical input to the program's youth prevention component. The youth elected the FY 2009-2010 SWAT Youth Advocacy Board comprised of 12 SWAT youth. The board helps coordinate local SWAT efforts toward common objectives, plans activities for tobacco observances, and provides input to the statewide youth prevention media campaign.

The SWAT Youth Advocacy Board developed a plan linking the statewide media campaign with local community efforts. The Board held statewide conference calls and WebEx trainings to share this plan. Board members highlighted the plan on a national youth advocate tobacco prevention call. The youth discussed the importance of unified messaging when educating community members. They were able to educate their peers and showcase Florida's SWAT organization.

The Youth Advocacy Board assisted local SWAT chapters with member recruitment and retention. The Board and media vendor collaborated on developing a recruitment toolkit. SWAT youth were featured in the SWAT recruitment PSA which is now available to local SWAT chapters.



State and Community Interventions

continue

Cessation Interventions



obacco use is the leading preventable cause of death in the United States. Tobacco users who quit can increase their life-span and reduce their health care costs. To help tobacco users quit, the Centers for Disease Control and Prevention recommends states provide population-based counseling programs, such as quitlines, eliminate barriers to treatment, and make health care system changes. To help Floridians quit using tobacco, the Bureau administered several cessation interventions during FY 2009-2010:

- The Florida Quitline counseling and nicotine replacement therapy (NRT) program,
- Cessation programs in rural and acute care hospitals,
- NRT provided through county health departments,
- Face-to face counseling provided by the Area Health Education Centers (AHEC), and
- Health care provider and student training on tobacco use by AHEC.

The Florida Quitline

The Florida Quitline is a free telephone based counseling service offered to all Florida residents over 11 years of age. The Quitline contract provided over \$3 million in free NRT with the balance of the contract amount for counseling services.

In November 2009, the American Cancer Society assigned its contract for the Florida Quitline activities to Free & Clear, Inc. Free & Clear, Inc. is an industry leader in tobacco cessation with over 25 years of experience. Free & Clear, Inc. uses evidence-based protocols, helping more than 1,500 people daily and working with over 400 clients including 28 states quitlines.

During FY 2009-2010, Floridians accessed the Florida Quitline programs through three access points: an inbound call to the Quitline directly from the participant, a participant through their provider, or an outbound call from the Quitline. These enrollment methods are beneficial to the success of this program by providing multifaceted enrollment options. During enrollment, Floridians are provided the options of receiving telephone-based cessation counseling or face-to-face counseling through AHEC.

The contract with Free & Clear includes counseling for up to 60,975 clients. The counseling services include up to five free cessation sessions (ten for pregnant women) by highly trained quit coaches. During the counseling sessions, the client makes a plan to quit, selects a quit date, receives tips on how to overcome the urge to use tobacco and free NRT when available and appropriate. Evaluators follow-up with tobacco users after seven months to see if they successfully stayed tobacco free or to provide additional information on making another quit attempt.

Florida Quitline Highlights- FY 2009-2010

- The Quitline served over 44,295 callers in fiscal year 2009-2010.
- Nearly all callers who complete Quitline registration (over 90%) are tobacco users calling for help with quitting tobacco.
- At the time of caller intake, 97% of tobacco users elected to enroll in counseling. This surpasses the CDC benchmark of 75% of callers accepting telephone cessation counseling services.
- NRT was provided to over 29,000 tobacco users.
- The Quitline is successfully reaching some high-risk and high tobacco use prevalence groups, including individuals from low socioeconomic groups and uninsured tobacco users.
- Males and tobacco users over the age of 65 are underutilizing the Quitline.
- The quit rate for Quitline callers is 37.2%. This rate is considered to be strong. The North American Quitline Consortium has proposed that quitlines achieve an overall quit rate of at least 30% by 2015, and Florida has exceeded this goal.
- Callers reported being very satisfied with all aspects of the Quitline. Overall, 92% of callers were satisfied with the service received from the Quitline, 91% would recommend the Quitline to a friend and 70% report that they have already done so.

Rural and Acute Care Hospital Cessation Program

The 2009 Florida Legislature increased funding for cessation and appropriated \$2 million for nicotine replacement therapy (NRT). The Bureau reviewed the tobacco use data, including smokeless tobacco, and decided the best use of the funds would be to provide rural and acute care hospitals with the ability to become cessation centers. As a result, the Bureau, awarded \$2,070,700 in tobacco cessation/prevention program grants to 13 rural and acute care hospitals throughout Florida. The grants were awarded through a competitive process and require the hospitals to:

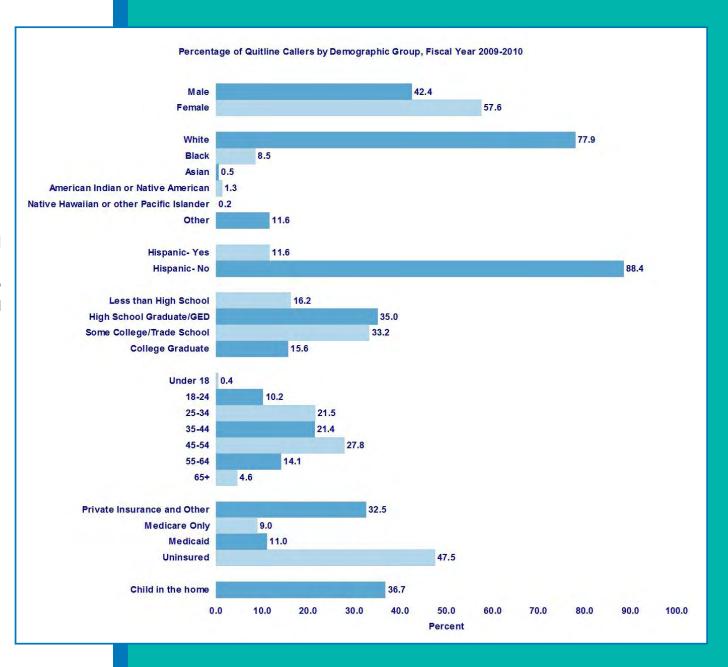
- maintain tobacco-free campuses,
- develop tobacco cessation counseling,
- conduct cessation classes on the hospital site,
- add tobacco use information as part of employee orientation, and
- sustain activities past the grant award.

All of the grants were renewed for FY 2010-11.

Cessation Interventions

continued

Cessation Interventions continued



Rural and Acute Care Hospital Highlights-FY 2009-2010

- Provided a total of 191 cessation classes to rural communities.
- Provided more than 1,600 Floridians with cessation counseling.
- Distributed NRT to 910 cessation program participants.

County Health Department NRT Program

Floridians who meet the medical protocol and are attending cessation classes or who are referred by a physician are able to access free NRT through some Florida county health departments.

Area Health Education Centers Cessation Counseling and Provider Training Program

The Florida Area Health Education Centers (AHEC) Network includes five AHEC Programs at the Colleges of Medicine(Florida State University, Nova Southeastern University, University of Florida, University of South Florida, and University of Miami) and ten affiliated not-for-profit AHEC Centers serving all of Florida's 67 counties. During the 2009 session, the Florida legislature appropriated \$ 10 million to the Florida AHEC Network. The AHEC received \$6 million designated to provide tobacco prevention and cessation training to current and future health professionals and \$4 million to provide cessation services within Florida's 67 counties.

An AHEC goal is to strengthen the capacity of Florida's health care system to deliver effective tobacco use prevention and cessation services. AHECs train current and future healthcare workforce on evidence-based approaches and provide tobacco cessation services in all Florida counties. AHEC cessation counseling and the Quitline offer complementary cessation services. Floridians who want to end their addiction to tobacco have the option of utilizing free face-to-face classes or telephone-based counseling sessions based on their preference.

AHEC Highlights - FY 2009-2010:

- Provided AHEC tobacco training to over 5,500 health professionals and 11,200 health professional students, representing more than 37 distinct health professions.
- Fifty-four colleges, universities, and technical schools located throughout the state and representing twenty-four health professions participated in AHEC anti-tobacco training programs for health professions students.
- Provided more than 7,200 Floridians with individual and group cessation counseling.
- Over 14,000 tobacco users were referred to the Florida Quitline.

Cessation Interventions

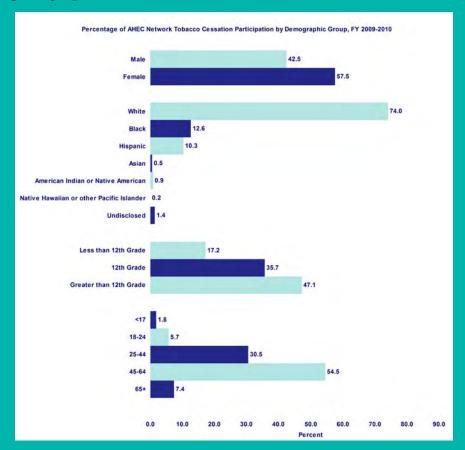


AHEC Tobacco Cessation Referrals by Source, FY 2009-2010



During FY 2009-2010, the AHEC network provided community-based cessation services in 66 of Florida's 67 counties. The majority of clients attended its Quit Smoking Now (QSN) Program. This program is a four to eight week group cessation class. The network also provides one-on-one cessation services for clients who are unable or prefer not to attend group counseling.

The QSN program was strongly attended in FY 2009-2010. Over half of program participants attended 75% or more of their scheduled classes. One in eight (12%) of attendees went through the program more than once.



Cessation Interventions continued

Women are more likely (57.5%) to seek AHEC cessation services than men (42.5%). The AHEC program is predominantly serving adults ages 25-64, with most participants in the 45-64 age range. During FY 2009-2010, the majority of AHEC participants were white, non-Hispanic individuals, and 53% of AHEC participants reported a high school education or less.

he Bureau operates with a minimum number of employees with specific program area or contract management expertise. The Bureau staff consists of 20 full time equivalent (FTE) positions and 2 other personnel system (OPS) employees. There is only one clerical support position within the Bureau. No general revenue funding is used in the Bureau. The Bureau receives funding from the Tobacco Settlement Trust Fund for program activities. Eighty-five percent of the positions within the Bureau are funded with federal grant funds, not state funding.

A unique aspect of the program is the independent professional evaluation of each program component and the overall program for quality improvement and analysis of the program's effectiveness. This is the only program within the Department of Health with independent professional evaluators, selected through a competitive process, determining a program's effectiveness.

The 2010-2015 Florida Comprehensive Statewide Tobacco Education and Use Prevention Strategic Plan is completed. The strategic plan was developed with the assumption it is a statewide plan and not solely to guide the efforts of the Bureau of Tobacco Prevention Program. This strategic plan was designed with flexibility to meet and counter the everchanging landscape of tobacco prevention and control. The strategic plan will be monitored and implementation will be reported through future Annual Reports.

Tobacco Education and Use Prevention Advisory Council

The Tobacco Education and Use Prevention Advisory Council, created by Section 381.84 (4), Florida Statutes, has 21 members and provides advice on the direction and scope of tobacco prevention and control activities to the State Surgeon General. The Council works through three subcommittees that concentrate on identified issues and makes recommendations to the Council.

Youth Programs Subcommittee:

This subcommittee provides advice and makes recommendations on the youth prevention component of the community-based intervention.

Health Communications Subcommittee:

This subcommittee provides advice and makes recommendations on the Health Communications tobacco program component.

Surveillance and Evaluation Subcommittee:

This subcommittee provides advice and recommendations on surveillance and evaluation activities.

Note: Advisory Council and Subcommittee minutes are posted at http://www.doh.state. fl.us/Tobacco/TAC.html.

Administration and Management



Centers for Disease Control Grant Activities

enters for Disease Control and Prevention (CDC) Tobacco Prevention and Control Grant - The Bureau successfully competed for a five-year CDC Tobacco Prevention and Control Cooperative Agreement Grant in 2008. The CDC grant is \$1,873,658 annually and provides funding for 85 percent of the Bureau staff salaries. CDC funding for tobacco prevention began over 10 years ago. Beginning in 2008, there was a significant funding increase of over \$1.2 million annually. This increase allowed 85 percent of the positions within the Bureau to be paid with federal grant funds, not state funding. Over this grant period (2008-2013), Florida is required to focus on: 1) developing an overall strategic plan, 2) developing and implementing policy and systems changes which support tobacco prevention and cessation, 3) providing staff training, and 4) reducing tobacco related disparities.

Disparities Projects

Tobacco-related disparities are gaps between populations in tobacco use prevalence, tobacco-related health problems, and tobacco-related health risks. These gaps are often seen in low socioeconomic groups, some racial and ethnic groups, and in young adults, ages 18-24. The Bureau staff focused on reducing tobacco-related disparities in the African American, Hispanic American, and Native American populations.

• Historically Black Colleges and Universities (HBCU)

The Bureau is currently working with Florida's HBCUs to gather data regarding tobacco use and the interventions that could be used to prevent and/or reduce tobacco use in this population. During FY 2008-2009, the project focused on collecting data on the college population's health behaviors and social norms. Data collection continued in FY 2009-2010. Based on the data, the Bureau will expand and establish student health councils to execute the best evidence-based interventions to change the social norms of this population.

• African American Tobacco Network

The African American Tobacco Network will promote and support tobacco-related policy and system changes to impact tobacco-related social norms. The Network will also provide community intervention grantees with technical assistance, resources, and support their efforts to increase capacity to address policy development as it relates to specific populations and the community. This Network will maintain a visible and sustainable presence with the African American population, Bureau staff, community intervention grantees, and health associations such as the American Cancer Society. The Network will also support population-specific health and advocacy organizations to include tobacco prevention in their health agendas and services. The Network will participate in the Tobacco Free Florida Campaign, promote the Florida Quitline, promote tobacco prevention health observance, and assist with the implementation of the strategic plan.

Hispanic/Latino Network

The Hispanic/Latino Network will promote and support policy and system changes which impact tobacco-related social norms and provide technical assistance and resources to

community intervention grantees. This Network will maintain a visible and sustainable presence with the Hispanic/Latino population, Bureau staff, community intervention grantees, and health associations such as the American Cancer Society. The Network will support community intervention grantees in their efforts to increase capacity to address policy development as it relates to specific populations and the community. The Network will also support population-specific health and advocacy organizations to include tobacco prevention in their health agendas and services. The Network will support and participate in the Tobacco Free Florida Campaign, promote the Florida Quitline, promote tobacco prevention health observances and assist with the implementation of the strategic plan.

Centers for Disease Control Grant Activities

Looking to the FutureA Tobacco Free Florida

Te are making progress! Floridians are deciding not to start using tobacco or to quit! Each time a person makes this decision, Florida's significant economic burden related to tobacco use decreases. Meanwhile, the Tobacco Industry is developing new products and innovative tobacco delivery systems.

In 2006, Floridians overwhelming voted for a constitutional amendment requiring part of the state's Tobacco Settlement to be used for a comprehensive tobacco prevention and control program. Florida's citizens and elected officials can proudly claim this program as a win for all Floridians. Changing tobacco-related social norms is not easy. Dedicated people working together are making a difference in the fight for a Tobacco Free Florida.

If you would like to know more, please contact the Florida Department of Health, Bureau of Tobacco Prevention Program at 850-245-4144. Thank you for your support in making Florida Tobacco Free.





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