

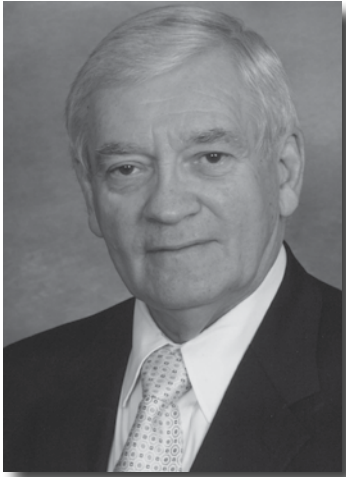


Florida Department of Health
Tobacco Free Florida Program



2011 Annual Report





State Surgeon General's Message

*H. Frank Farmer, Jr.
M.D., Ph.D., F.A.C.P.*

As State Surgeon General of Florida, and Chair of the Tobacco Education and Use Prevention Advisory Council, I am pleased to share the 2010 Tobacco Free Florida (TFF) Program Annual Report.

In November 2006, a majority of Florida voters approved a state constitutional amendment that called for reinstating a tobacco education and use prevention program. Today, that program, TFF, is saving lives and saving tax payers millions of dollars. The successes of the program and our work with state and community partners have put Florida back on the map as a national leader in tobacco prevention and cessation.

Comprehensive tobacco control programs like TFF are effective. From 2007 to 2010, the smoking rate for adults in Florida decreased significantly to show numbers below the national average, resulting in nearly half a million fewer adult smokers in the state.¹ This decrease in smokers saved Florida about \$4.2 billion in personal health care expenditures.² At a time when Florida businesses have been hit hard by the economic downturn, lower healthcare costs mean more funds available for important business investments.³ Florida is also one of only six states where lung cancer incidence among both men and women decreased from 1999 to 2010, resulting in additional long term health care cost savings and a healthier workforce. A healthier workforce means increased productivity in the form of fewer sick days,⁴ faster recovery time for employees, and fewer illnesses due to tobacco-related disease.

Support for the TFF program continues to be vital to the people of Florida. Across the state, local governments are voicing their support of the program through resolutions against candy-flavored tobacco products being advertised to children; as is the Florida Legislature in its support of legislation allowing school districts greater control over tobacco restrictions on school district property. Today, Floridians can continue to lend their support by encouraging tobacco users in their lives to seek out the free resources funded by this program and to quit tobacco for their health and for the health of their families. I am proud of the work of TFF and our local community partners, and I am confident that the program will continue its positive momentum, impacting the health and safety of all Floridians.

Sincerely,

H. Frank Farmer, Jr., M.D., Ph.D., F.A.C.P.
State Surgeon General

1 2009 Behavioral Risk Factor Surveillance System Florida State-Level Report http://www.doh.state.fl.us/disease_ctrl/epi/brfss/2009databook.pdf

2 RTI International. 2010 Independent Evaluation Report. January 2011. Web. 4 March 2011 <http://www.doh.state.fl.us/tobacco/TAC_pdfs/RTI_Overall_Evaluation2010.pdf>.

3 Centers for Disease Control and Prevention (CDC), Sustaining State Programs for Tobacco Control: Data Highlights 2006 [and underlying CDC data and estimates], http://www.cdc.gov/tobacco/data_statistics/state_data/data_highlights/2006/index.htm.

4 Lundborg, P, "Does smoking increase sick leave? Evidence using register data on Swedish workers," Tobacco Control 16:114-118, 2007.



Table of Contents

| | |
|----------------------------------------------------------|----|
| Executive Summary | 2 |
| Surveillance & Evaluation | 4 |
| Health Communication Interventions | 19 |
| State & Community Interventions | 25 |
| Cessation Interventions | 28 |
| Administration & Management | 32 |
| CDC Grant Activities | 32 |
| Looking to the Future – A Tobacco Free Florida | 33 |

Executive Summary

The Florida Department of Health's (DOH) Division of Health Access and Tobacco (DHAT), working in conjunction with the Tobacco Education and Use Prevention Advisory Council, support the comprehensive statewide tobacco education and use prevention program, known as Tobacco Free Florida (TFF). Authorized by Article X, Section 27, Florida Constitution, the Florida Legislature annually appropriates 15 percent of the total gross funds paid by tobacco companies to the state to fund this multi-faceted program. In Fiscal Year (FY) 2010-2011, DOH's TFF program operated with a budget of \$64,641,121 in funding allocated from two sources: Tobacco Settlement Trust Fund (\$62,274,015) and grants from the Centers for Disease Control and Prevention (CDC) (\$2,367,106).

As required by Section 381.84(7), F.S., the 2010 Annual Report showcases the program's effectiveness in reducing and preventing tobacco use, and surveillance and evaluation results with recommended improvements to enhance the program's effectiveness. The report also offers data, including a snapshot of youth attitudes and behavior towards tobacco use, as well as a description of the progress in reducing the prevalence of tobacco use among youth, adults, and pregnant women; reducing per capita tobacco consumption; and reducing exposure to environmental tobacco smoke. The information in this report details the activities conducted in the following program component areas during FY 2010-2011:



Surveillance and Evaluation

The third annual independent evaluation of program components has been completed. The evaluation is used to measure both the overall impact of the program and the ability of each program component to achieve its goals and objectives. 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 plan and improve the program interventions.

Health Communication Interventions

This year marked the fourth year of the TFF campaign. Evaluation results have shown that while overall brand awareness of the TFF campaign continued to be acceptable, it was lacking definition and awareness of the campaign's core messages. For the start of FY 2010-2011, TFF implemented key adjustments that allowed the campaign to address these shortfalls as well as maintain year-round exposure. The campaign also utilized public relations activities and social media channels to ensure that TFF is positioned with the media, stakeholders, and consumers as the trusted resource for tobacco-related information in the state.

State and Community Interventions

Policy and systems change are the focus of the state and community interventions program component. Community intervention grantees maintain tobacco free partnerships that work collaboratively to mobilize the community to develop policy, 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 that are used in contract management and program evaluation.

Cessation Interventions

TFF offers three free of charge cessation service options for Floridians interested in quitting tobacco use. The Florida Quitline is a telephone-based service available 7 days a week, 24 hours a day. The Web Coach is an internet-based cessation intervention, which began during FY 2010-2011. The Area Health Education Centers (AHEC) provide free face-to-face tobacco cessation counseling services to Floridians.

Administration and Management

TFF operates with a minimum number of employees with specific program area or contract management expertise. The staff consists of 21 full time equivalent (FTE) positions and four other personnel services (OPS) employees.

2010-2015 Strategic Goals and Objectives

During 2010, the TFF program continued to work towards meeting the challenges of the future, outlined in the Strategic Plan. Through the performance management system outlined by the Department of Health, the TFF program ensures accountability and continued work towards its performance measures. This includes the ongoing collection of data and strategies to address opportunities for improvement.



TFF presents the following update on its 2010-2015 Strategic Goals and Objectives:

Goal 1: Prevent Florida's youth and young adults from initiating tobacco use.

OBJECTIVE 1A: By June 30, 2015, increase the number of committed never smokers among Florida's youth, ages 11-17 by 10 percent from 62.6 percent to 68.9 percent.

2010 UPDATE: The number of committed never smokers among Florida's youth has increased by 2.7% from 62.6% in 2010 to 64.3% in 2011.

Goal 2: Promote quitting among Florida's youth and adults.

OBJECTIVE 2A: By June 30, 2015, reduce current smoking rates among Florida adults by 15 percent from 17.1 percent to 14.5 percent. (Florida Youth Tobacco Survey- FYTS)

2010 UPDATE: The current smoking rate among Florida's adults has remained unchanged from 2009 to 2010 at 17.1%. (Behavioral Risk Factor Surveillance System- BRFSS)

OBJECTIVE 2B: By June 30, 2015, reduce use of other tobacco products* among Florida adults by 15 percent, from 5.6 percent to 4.76 percent.

2010 UPDATE: There is no status change for this year.

*Other tobacco products include smokeless tobacco, snus, cigars, flavored cigars, bidis, kreteks, pipe tobacco, flavored tobacco, and hookah.

OBJECTIVE 2C: By June 30, 2015, reduce current cigarette use among Florida's youth, ages 11- 17 by 10 percent from 8.3 percent to 7.5 percent.

2010 UPDATE: Current cigarette use among Florida's youth has decreased by 15.7%, from 8.3% in 2010 to 7.0% in 2011. (FYTS)

OBJECTIVE 2D: By June 30, 2015, reduce the use of tobacco products other than cigarettes* by youth, ages 11-17 by 10 percent from 14.1 percent to 12.7 percent.

2010 UPDATE: Use of tobacco products other than cigarettes by youth has decreased by 5.0%, from 14.1% in 2010 to 13.4% in 2011. (FYTS)

*Other tobacco products include smokeless tobacco, snus, cigars, flavored cigars, bidis, kreteks, pipe tobacco, flavored tobacco, and hookah.

Goal 3: Eliminate Floridians' exposure to secondhand tobacco smoke.

OBJECTIVE 3B: By June 30, 2015, reduce the percent of Florida adults who were exposed to secondhand smoke at home during the past 7 days by 10 percent, from 8.6 percent to 7.7 percent.

2010 UPDATE: The percentage of Florida's adults who were exposed to secondhand smoke at home during the past 7 days decreased 6.7% from 10.4% in 2010 to 9.7% in 2011. (Florida Adult Tobacco Survey- FLATS)

OBJECTIVE 3B: By June 30, 2015, reduce the percent of Florida youth, ages 11-17 who were exposed to secondhand smoke in a room or car during the past 7 days by 10 percent from 50.3 percent to 45.3 percent.

2010 UPDATE: The percent of Florida's youth exposed to secondhand smoke in a room or car decreased 8.7% from 50.3% in 2010 to 45.9% in 2011. (FYTS)



Surveillance and Evaluation

The TFF program 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 Floridians' 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, and are used to monitor progress toward achieving long-term programmatic goals.

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:

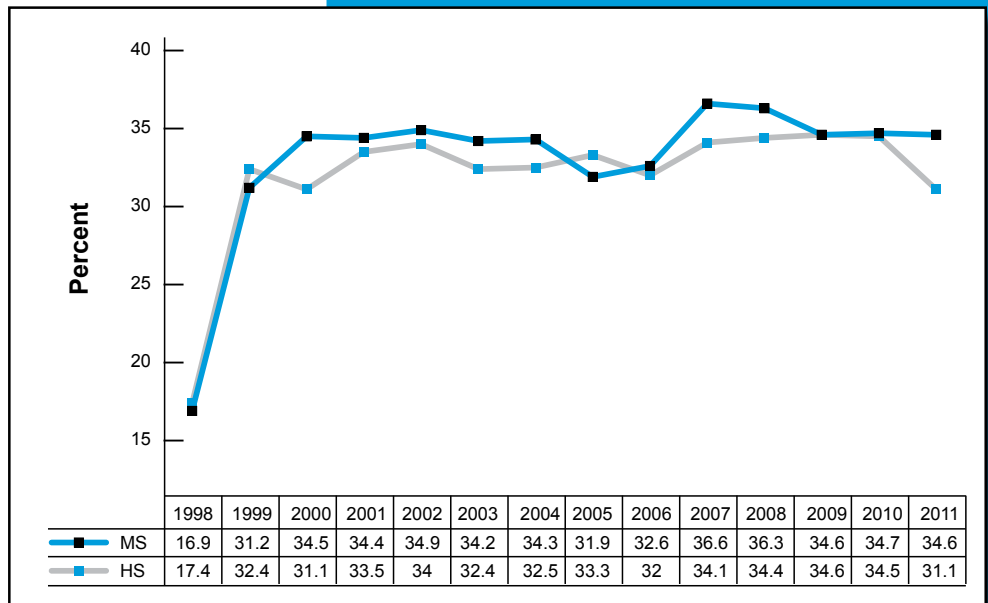
1. 2011 Florida Adult Tobacco Survey (FLATS);
2. 2011 Florida Youth Tobacco Survey (FYTS);
3. 2010 Behavioral Risk Factor Surveillance System (BRFSS);
4. 2009 Pregnancy Risk Assessment and Monitoring System (PRAMS);
5. Fiscal Year 2010-2011 Florida Department of Business and Profession Regulation cigarette sales data; and,
6. 2011 Florida Clean Indoor Air Act call data.

Surveillance Goal Area One: Prevent Initiation

Prevent Initiation Youth Attitudes

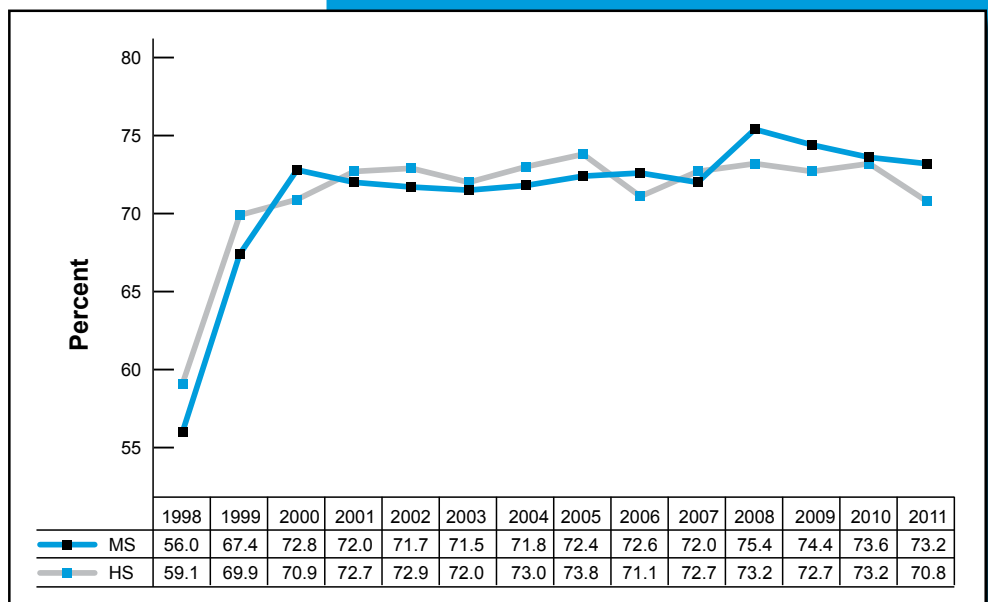
Percentage of middle school and high school youth who definitely do not think young people who smoke cigarettes have more friends, FYTS 1998-2011

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 by approximately 85%. From 1999 to 2011, the trend of this belief has remained relatively flat. In 2011, 34.6% of middle school and 31.1% of high school students did not think that cigarette smokers have more friends.



Percentage of middle school and high school youth who definitely do not think that smoking cigarettes makes young people look cool or fit in, FYTS 1998-2011

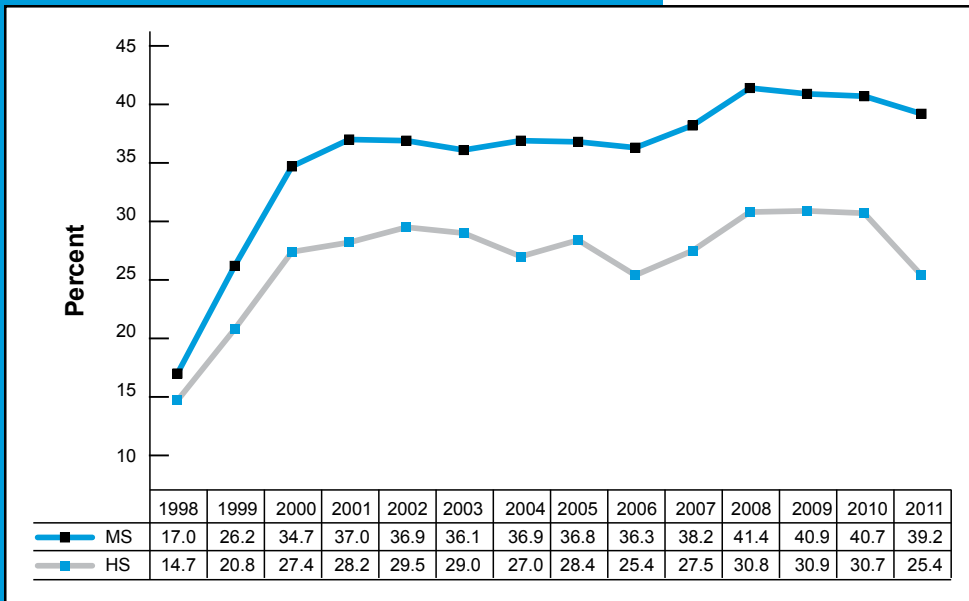
From 1998 to 2011, the percentage of Florida students who definitely did not think that smoking cigarettes makes young people look “cool” or “fit in” increased by 30.7% among middle school students and by 19.8% among high school students. In 2011, 73.2% of middle school and 70.8% of high school students did not think that smoking cigarettes makes young people look cool or fit in.



Surveillance

Goal Area One: Prevent Initiation

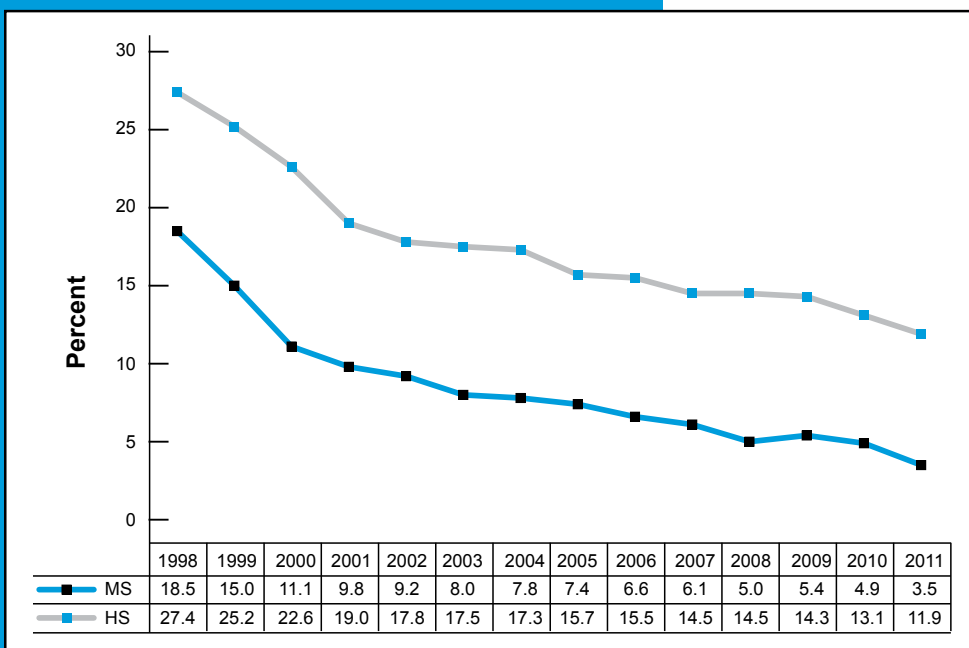
Percentage of middle school and high school youth who definitely do not think that smoking cigarettes helps people feel more comfortable in social activities, FYTS 1998-2011



From 1998 to 2011, the percentage of Florida students who definitely did not think that smoking cigarettes helps people feel more comfortable in social activities increased by 130.6% among middle school students and by 66.0% among high school students. Since 1999, middle school students have consistently had a significantly lower prevalence of believing that smoking helps people feel more comfortable in social situations than high school students.

Prevent Initiation Current Youth Smokers

Percentage of middle school and high school youth who currently smoke, FYTS 1998-2011



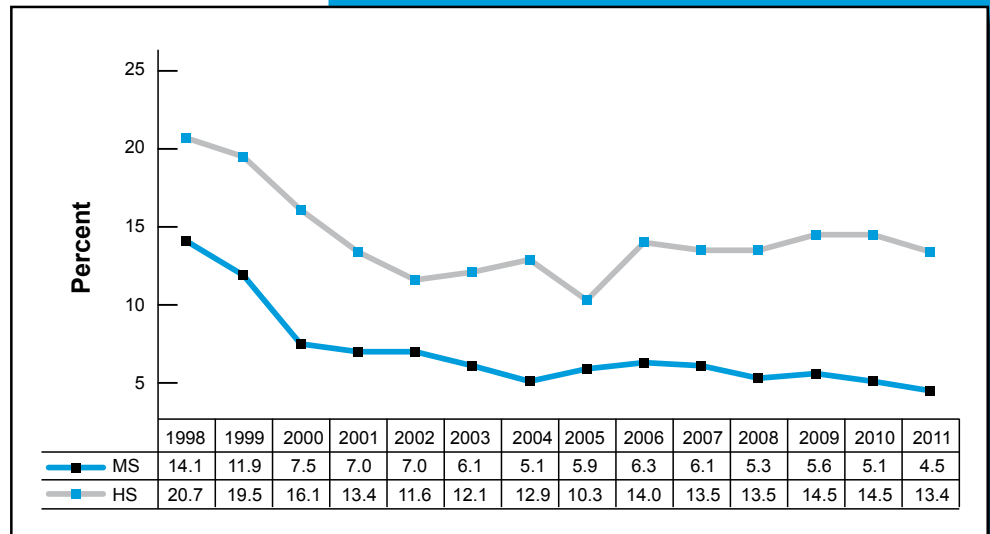
In 2011, 3.5% of middle school students and 11.9% of high school students smoked at least once during the past 30 days. Since 1998, the prevalence of current smoking has decreased by 81.1% among middle school students and by 56.6% among high school students.

Surveillance Goal Area One: Prevent Initiation

Current Youth Cigar Smokers

Percentage of middle school and high school youth who currently smoke cigars, FYTS 1998-2011

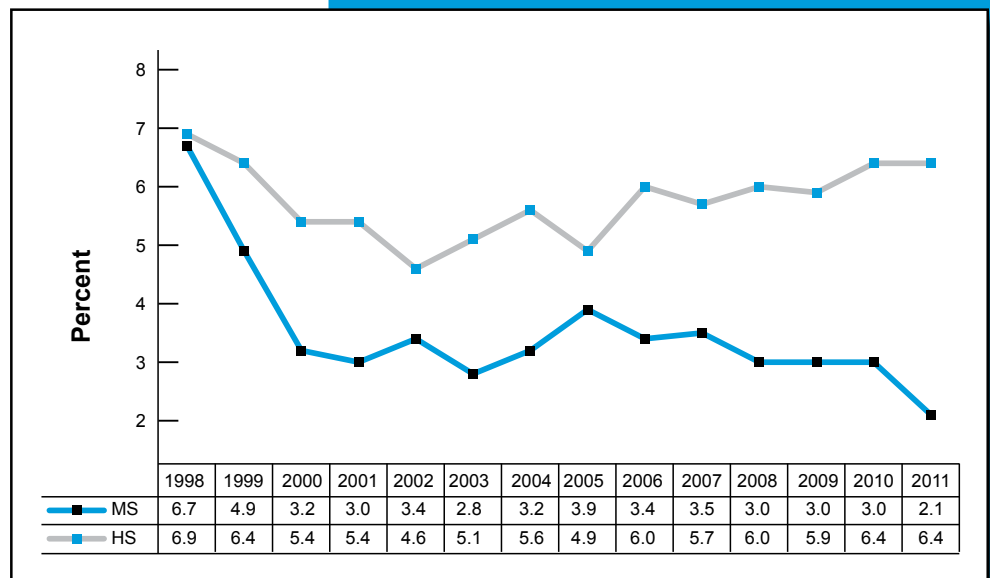
In 2011, 4.5% of middle school students and 13.4% of high school students smoked cigars at least once during the past 30 days. Since 1998, the prevalence of this behavior has decreased by 68.1% among middle school students. From 1998 to 2002, this prevalence decreased significantly among high school students by 35.3%, but from 2002 to 2011, this prevalence increased significantly by 15.5%.



Current Youth Smokeless Tobacco Use

Current smokeless use among middle and high school students, FYTS 1998-2011

In 2011, 2.1% 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 this behavior has decreased by 68.7% among middle school students. From 1998 to 2002, the prevalence of this behavior decreased significantly among high school students, but from 2002 to 2011, this prevalence has increased by 39.1%.

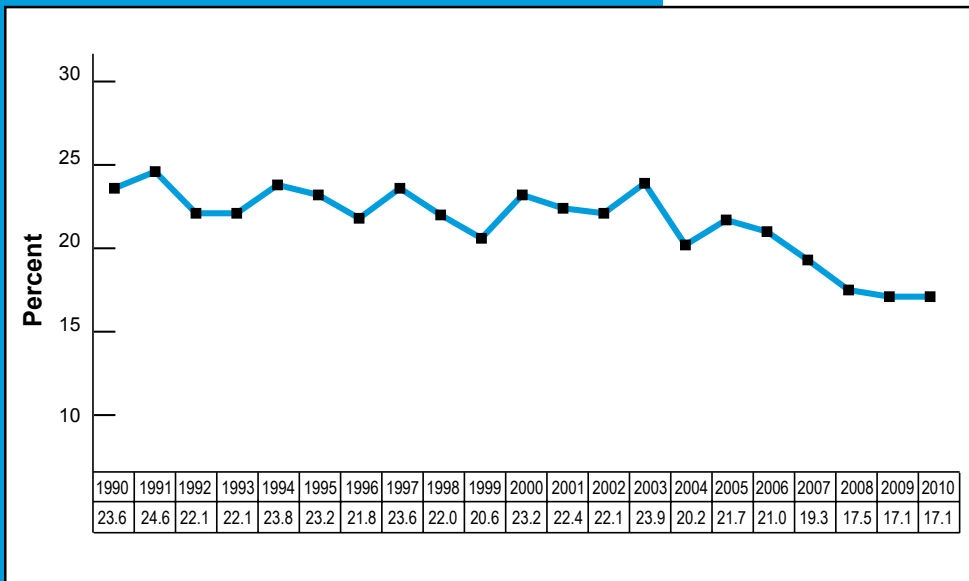


Surveillance

Goal Area Two: Promote Cessation

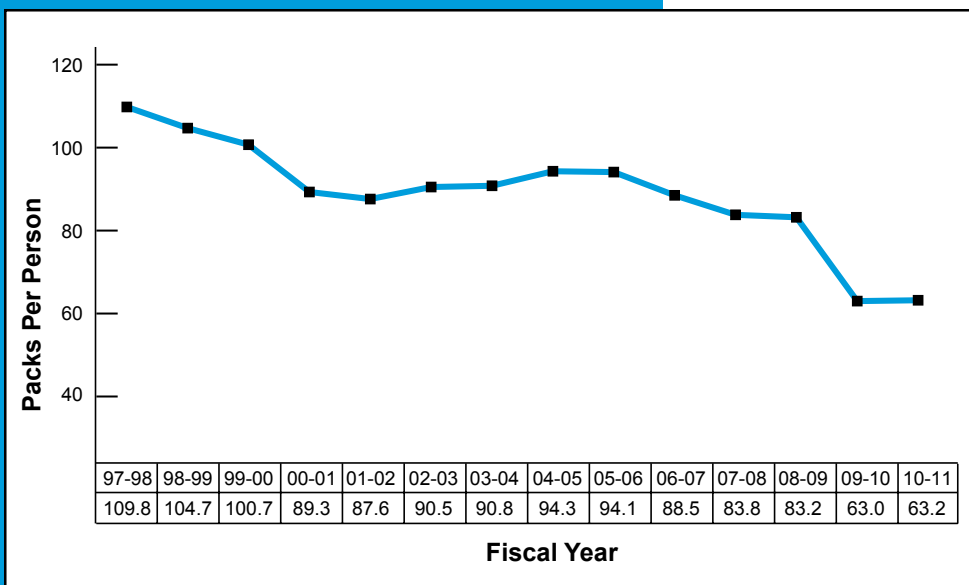
Prevent Initiation Current Adult Smokers

Percentage of Florida adults who are current smokers, 1999-2010 BRFSS



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 five years, Florida has significantly reduced its adult smoking prevalence from 21.0% in 2006 to 17.1% in 2010.

Packs of cigarettes sold annually per person 18 and over in Florida, 1999-2011



Florida has made progress in reducing annual per capita cigarette sales for adults 18 and over. In fiscal year 2006-2007, approximately 88.5 packs were sold per adult in Florida. In fiscal year 2010-2011, that number was approximately 63.2 packs. This represents more than a 28.6% decrease in packs sold annually per person 18 and over between 2006-2007 and 2010-2011.

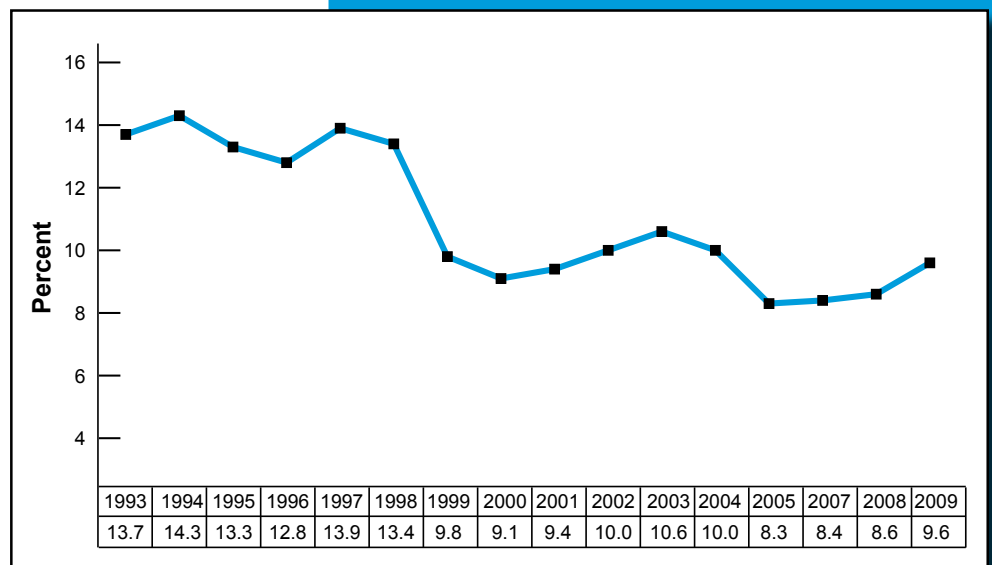
Surveillance Goal Area Two: Promote Cessation



Pregnant Smokers

Percent of women who smoked during pregnancy , Florida PRAMS 1993-2009*

Results from the most recent Pregnancy Risk Assessment Monitoring System (PRAMS), conducted during 2009, show that approximately 1 in 11 Florida women smoked during pregnancy.



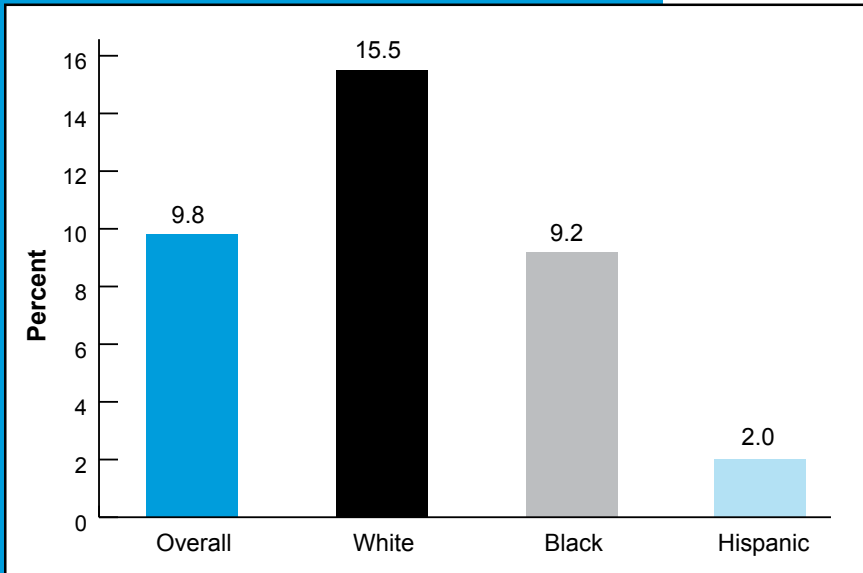
Surveillance

Goal Area Two: Promote Cessation

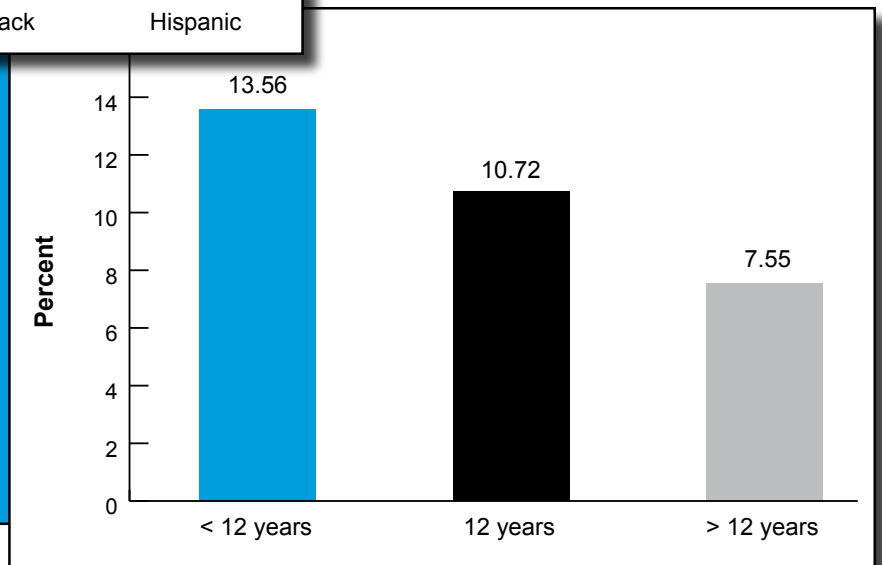
Pregnant Smokers

Several demographic groups reported a prevalence of smoking during pregnancy that was higher than the state average of 8.6% for 2008. Pregnant women with 12 years or less than 12 years of education smoked at rates greater than 11%. Over 14% of Non-Hispanic White women reported smoking during pregnancy as did 13.6% of women 19 or younger.

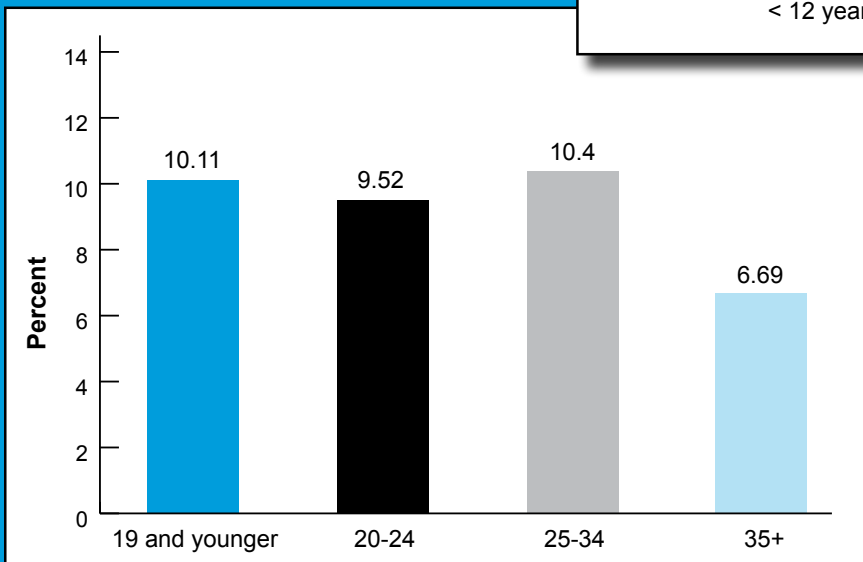
Percent of women who smoked during pregnancy by race/ethnicity, Florida PRAMS 2009



Percent of women who smoked during pregnancy by years of education Florida PRAMS 2009



Percent of women who smoked during pregnancy by age, Florida PRAMS 2009

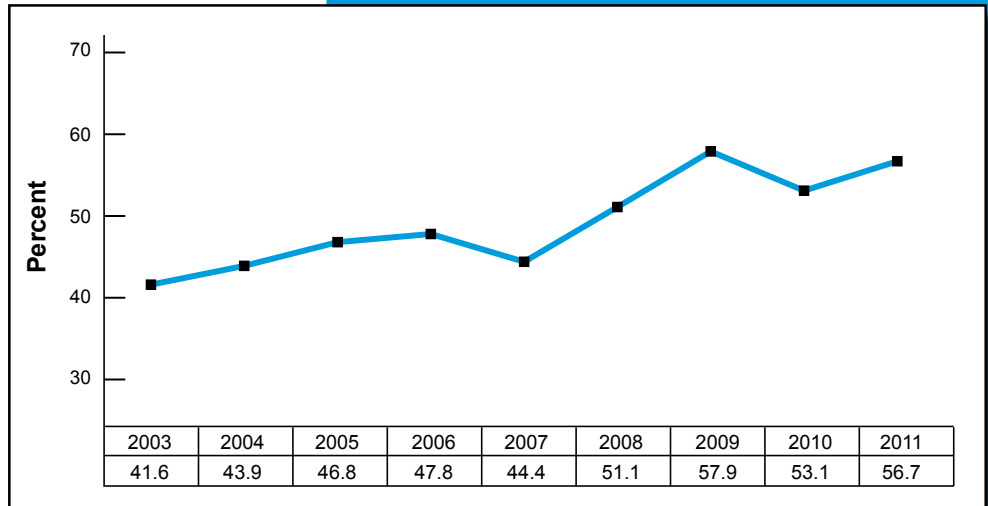


Surveillance Goal Area Two: Promote Cessation

Attempted Quitting

Percentage of adult smokers who have quit for one or more days in the past 12 months, FLATS 2003-2011

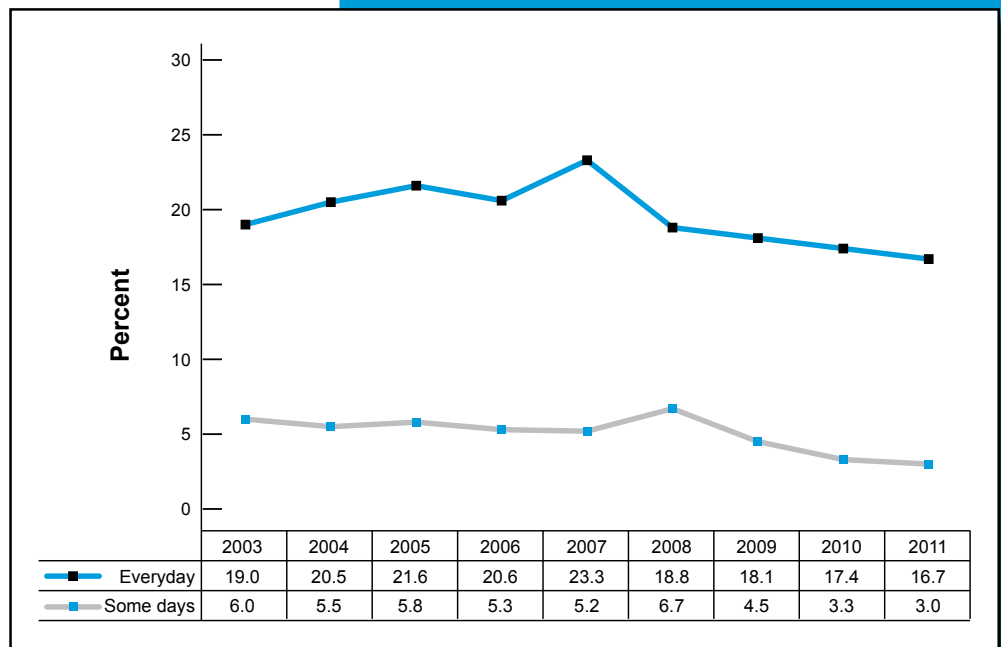
In 2011, 56.7% percent of adult smokers tried to quit smoking for one day or longer. This represents an increase of 6.7% in quit attempts from 2010 and a 36.3% increase from 2003.



Average Cigarettes Smoked Per Day

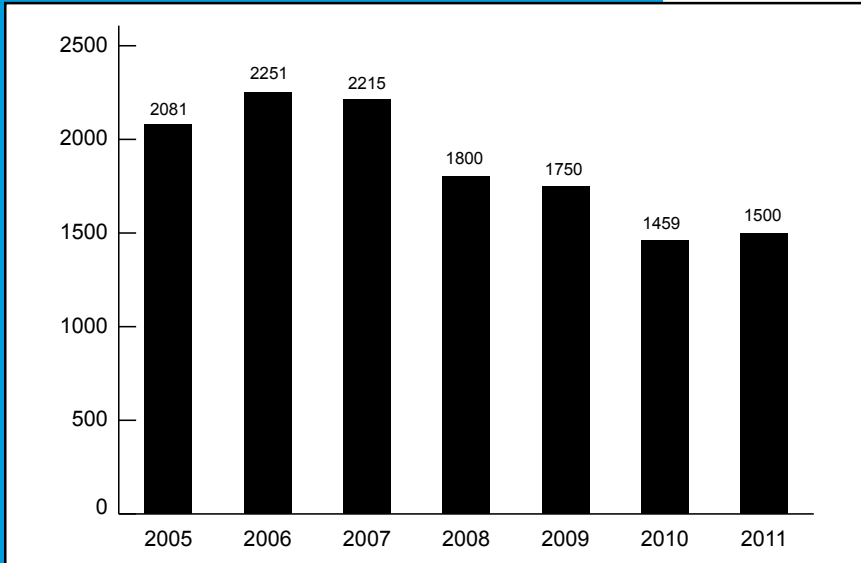
Average number of cigarettes smoked per day by everyday and some days smokers, FLATS 2003-2011

The average number of cigarettes smoked per day by everyday and some days smokers continues to decrease. In 2011, adults who smoke everyday reported consuming an average of 16.7 cigarettes per day in the past month. This is a decrease from an average of 17.4 per day reported in 2010. Adults that aren't everyday smokers reported consuming an average of 3.0 cigarettes per day in the past month. This is far fewer than everyday smokers and is a decrease from the 3.3 per day average reported by some days smokers in 2010.

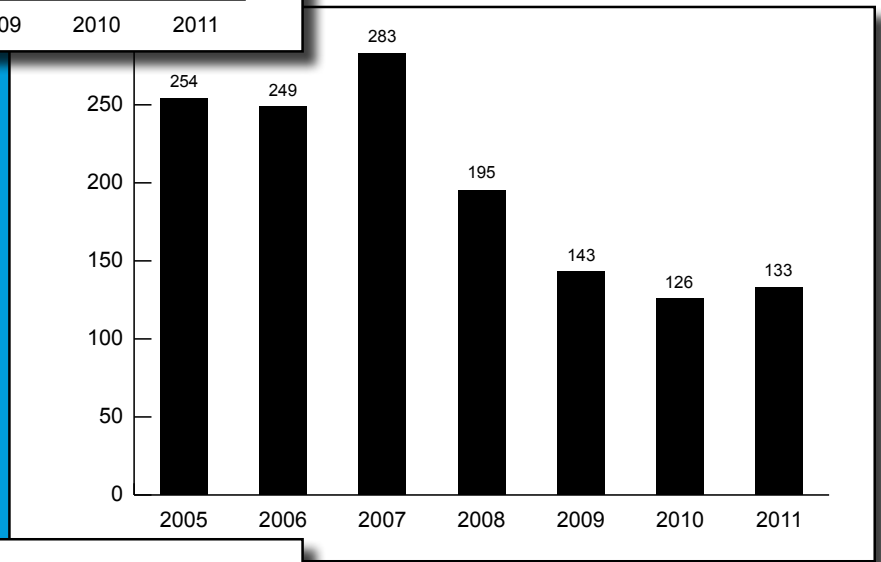


Surveillance

Goal Area Three: Eliminate Second Hand Smoke Exposure



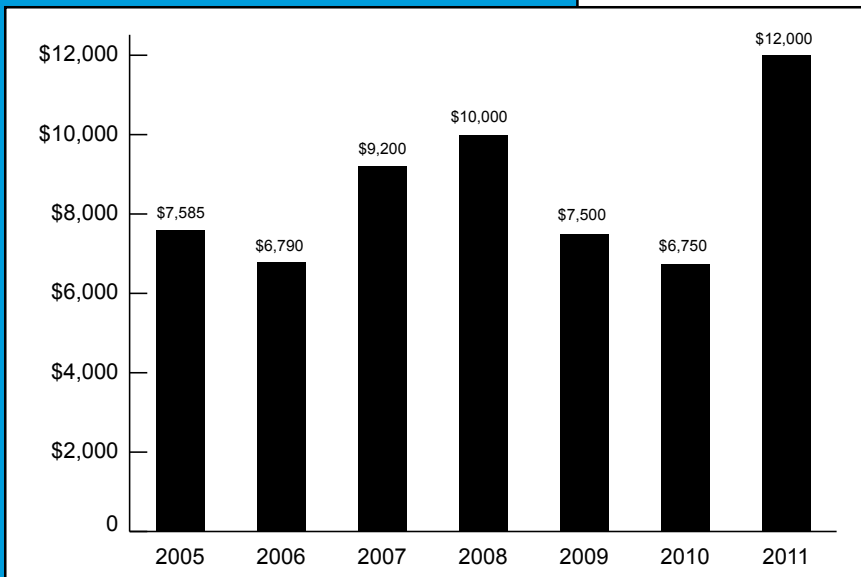
**Florida Clean Indoor Air Act,
Complaints Received 2005-2010**



Florida Clean Indoor Air Act

The Tobacco Free Florida 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 2011, the program received over 1,500 toll-free calls, responded to 133 complaints for noncompliance, conducted 89 on-site investigations, and initiated 32 administrative proceedings resulting in \$12,000.00 in fines.

**Florida Clean Indoor Air Act,
800 Number Calls, 2005-2010**



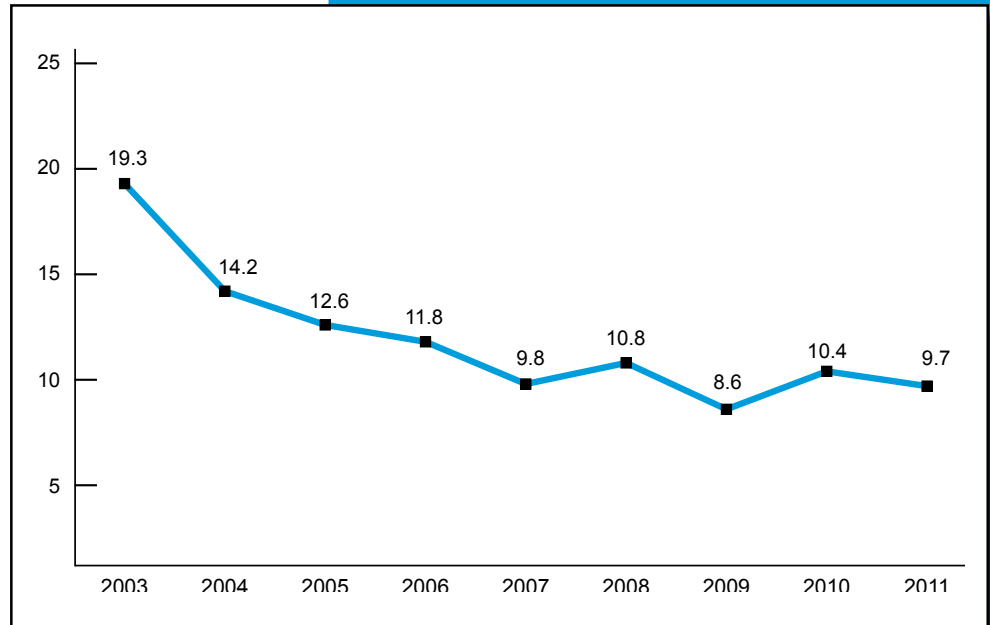
**Florida Clean Indoor Air Act,
Administrative Fines, 2005-2010**

Surveillance Goal Area Three: Eliminate Second Hand Smoke Exposure

Second Hand Smoke Exposure

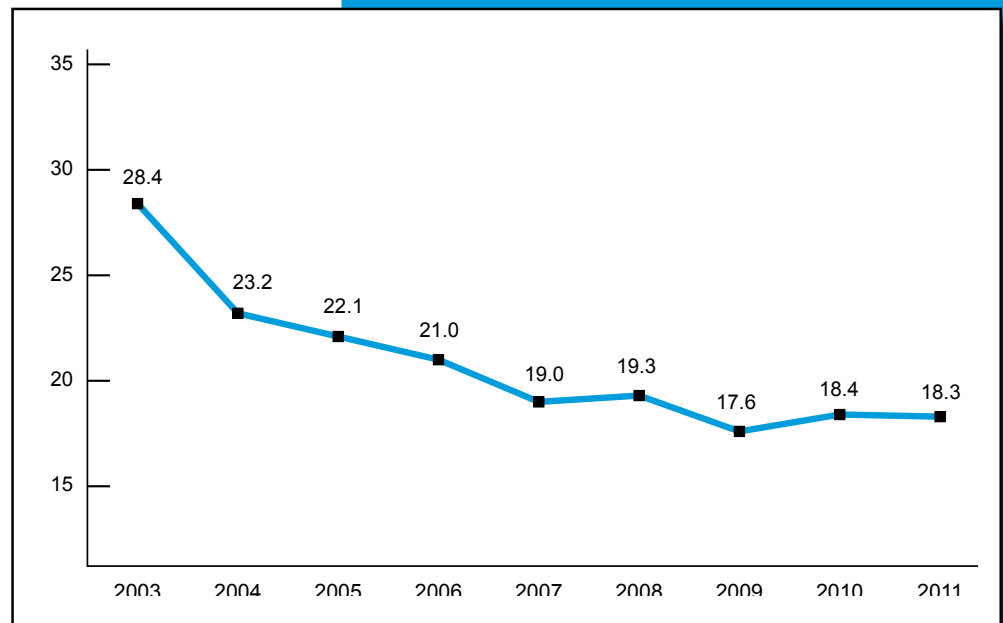
Percentage of Florida adults exposed to second hand smoke at home, FLATS 2003-2011

Since 2003, Floridian's exposure to second hand smoke in the home has decreased by almost 50%. In 2011, 9.7% of Floridians reported exposure to second hand smoke in the home.



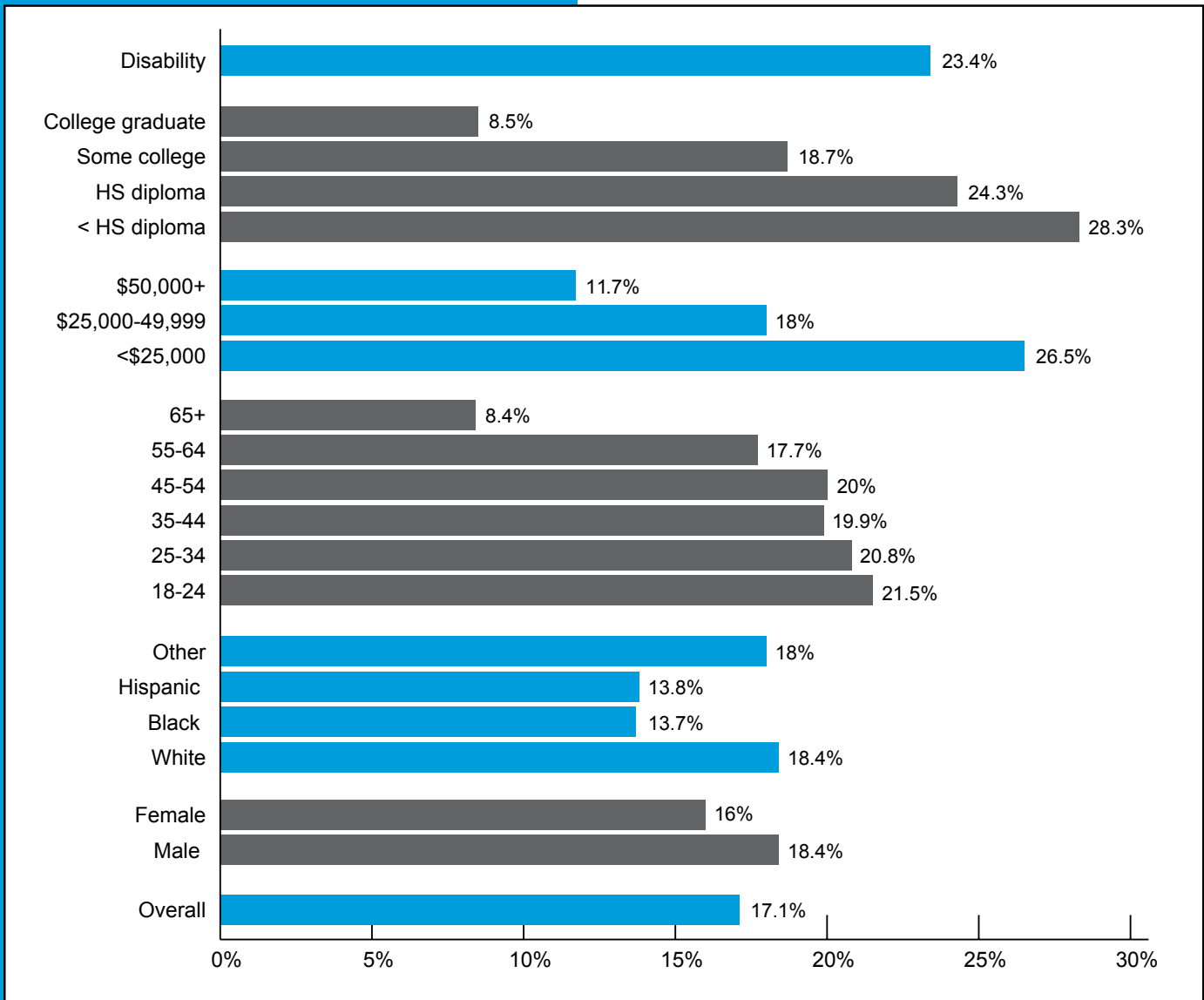
Percentage of Florida adults exposed to second hand smoke in the car, FLATS 2003-2011

Since 2003, Floridian's exposure to second hand smoke in cars has decreased by over 35%. In 2011, 18.3% of Floridians reported exposure to second hand smoke in the car. While this number is decreasing with time, more Floridians are exposed to second hand smoke in cars than in the home.



Surveillance

Goal Area Four: Reduce Tobacco Related Health Disparities



Percentage of Florida adults who are current smokers by demographic group, BRFSS 2010

According to the 2010 BRFSS, 17.1% of Floridians are current smokers. Whites (18.4%) are more likely to smoke than those that identify their race/ethnicity as Hispanic (13.8%). Men are more likely to smoke than women (18.4% vs. 16.0%). Floridians with an income of less than \$25,000 smoke at a higher rate than those with an income of greater than \$50,000 (26.5% vs 10.3%), and Floridians with less than a high school diploma (28.3%), a high school diploma/GED (24.3%), or some college (18.7%) are more likely to smoke than those with a college degree (8.5%).



Evaluation

Evaluation is used to measure the overall impact of the TFF 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 2010-2011, competitively selected independent professional evaluators conducted surveillance and evaluation of the program components with TFF 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. TFF reviews all evaluation recommendations and implements programmatic changes when appropriate.



| Vendor (FY 2010-2011) | Program Component Evaluated |
|-----------------------------------|-----------------------------------------------------------------------|
| RESEARCH TRIANGLE INSTITUTE, INC. | Annual Independent Evaluation of the Overall Program |
| RESEARCH TRIANGLE INSTITUTE, INC. | Area Health Education Centers (AHEC) Network Tobacco Training program |
| RESEARCH TRIANGLE INSTITUTE, INC. | Health Communication Interventions |
| PROFESSIONAL DATA ANALYSTS, INC. | Florida Quitline and Quitline Media |
| PROFESSIONAL DATA ANALYSTS, INC. | AHEC Cessation Interventions |



Overall Independent Evaluation

The goal of the overall independent evaluation of the TFF 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 secondhand smoke exposure, and increasing tobacco cessation.

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 TFF 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 TFF with detailed information to assess the impact of the AHEC cessation interventions on target audiences. The evaluation also provides TFF and the AHEC with feedback which may be used in the targeting and improvement of cessation interventions.

Health Communication Interventions Evaluation

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

Evaluation Highlights 2010-2011

The independent, external evaluators made recommendations at the end of FY 2009-2010, to assist with program planning for FY 2010-2011. At this time, the following recommendations from evaluations have been or are in the process of being implemented.



Health Communication Interventions

| Evaluation Findings | Tobacco Free Florida's Response |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Because targeted rating points (TRPs) are likely low for some target audiences, narrow the focus of the campaign. Consider reducing the breadth of target audiences and topics (cessation, secondhand smoke, youth prevention) for television advertising.</p> | <ul style="list-style-type: none"> Narrowed the focus of broadcast efforts to include cessation, secondhand smoke, and prevention target audiences. Other audiences were reached via non-broadcast elements. Shifted media allocation for target audiences, with 30 percent of the budget allocated for prevention-specific media and 70 percent allocated for cessation media efforts. The cessation media buy was leveraged to reach and impact prevention audiences in order to maximize the overall effectiveness of the campaign. Reduced volume of broadcast sponsorships in favor of longer, more traditional media flights.. |
| <p>Because sustained advertising over six months is necessary to establish awareness and set the stage for attitudinal and behavioral change, increase the reach and frequency of television TRPs for a narrow set of topics and selected audiences over a sustained period of time.</p> | <ul style="list-style-type: none"> Cost savings achieved from utilizing already existing creative materials was a crucial component in reaching the goal of sustaining advertising over six months. To ensure maximum reach, a comprehensive strategy was developed to reach each of the target audiences through a mix of broadcast (TV/radio), digital, print, and out of home. Leveraged significant media relationships to secure a 3:1 bonus match for broadcast media. This bonus weight allowed the campaign to reach recommended levels and also maintain year-round exposure. |
| <p>Consider increasing television advertising that targets the largest groups of smokers (young adults aged 18 to 24 or a general audience), and rely on more nimble and less costly channels (e.g., radio, print, online) to target pregnant smokers, smokeless tobacco users, and other small populations.</p> | <ul style="list-style-type: none"> Narrowed the focus of broadcast efforts to include cessation, secondhand smoke, and prevention target audiences. Other audiences were reached via non-broadcast elements.. |
| <p>Consider selecting a mixture of ads to be aired. Consider relying on previously developed, evidence-based campaigns and advertisements for some target audiences.</p> | <ul style="list-style-type: none"> Utilized already existing media from the CDC Media Resource Center to save money on production costs. Utilizing pre-existing tobacco control and prevention advertising and marketing materials, Tobacco Free Florida selected effective ads with high sensation value. Focus groups and online panels helped guide the campaign in determining which ads would be most effective for the target audience. |
| <p>Develop media campaigns to more explicitly support statewide and local community action.</p> | <ul style="list-style-type: none"> Developed multiple materials to help the community intervention grantees align with the Tobacco Free Florida campaign. Supported smoke-free housing policy initiatives by airing "Apartment" TV spot and developed supporting materials for smoke-free housing. Developed candy-flavored tobacco materials to support grantees locally. |



State and Community Interventions

| Evaluation Findings | Tobacco Free Florida's Response |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Structure Students Working Against Tobacco (SWAT) to ensure the most efficient use of resources to recruit, train, and support youth for their role in achieving TFF's short-term and intermediate outcomes.</p> | <ul style="list-style-type: none"> Each community-based grantee is required to establish and maintain one SWAT Chapter. Members of the SWAT Chapter are also required to be represented on the local tobacco free partnership so that the activities of SWAT support the objectives of TFF and the local grantee. |
| <p>Provide standardized training for the SWAT Adult Sponsors. They are the primary contacts to SWAT youth and must be able to effectively communicate TFF's goals, objectives, and strategies, while engaging youth.</p> | <ul style="list-style-type: none"> Hosted statewide webinars for county SWAT Coordinators and school/community-based SWAT Advisors to train them in the role of youth engagement in tobacco prevention policy change. Standardized tools for local SWAT Advisor training and sample SWAT Advisor Scope of Work templates were provided to communicate clear expectations of this role. |
| <p>Define the role of SWAT youth group members (e.g., peer educators, youth advocates, or both) so that SWAT Adult Sponsors can be strategic in their recruitment and training of youth based on their interests and experience.</p> | <ul style="list-style-type: none"> Communicated SWAT role to community-based grantee staff and SWAT members as an integrated element in policy specific training and capacity building training offered by TFF. Provided detailed recommendations and technical assistance to the community-based grantees to improve strategies for capitalizing on members' strengths and interests, including youth. |
| <p>Formalize and standardize training and technical assistance to build the capacity of SWAT youth members who commit to be youth advocates.</p> | <ul style="list-style-type: none"> Two regional trainings were held during FY 2010-2011. A new SWAT Chapter Manual was published and distributed to each grantee, which provides an overview of the role of SWAT, its mission, how to establish and maintain SWAT Chapters, work with the local tobacco free partnerships and understand tobacco prevention and control policy. |

Cessation Interventions

| Evaluation Findings | Tobacco Free Florida's Response |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Continue to work with the Quitline vendor to increase the number of calls that participants complete. | <ul style="list-style-type: none"> TFF will conduct a review of the five call protocol in the current Quitline contract to determine effective ways to increase the number of completed calls. |
| Continue to work with the media vendor to achieve steady, year-round call volume levels while working to maximize the number of callers served within the budgetary limits. | <ul style="list-style-type: none"> Media flights are scheduled to ensure steady, year-round call volume levels. During the New Year's holiday, a traditionally busy time for tobacco cessation, TFF worked with the Quitline vendor to ensure additional capacity is available to handle the increased activity. |
| Certain demographic groups are under-utilizing nicotine replacement therapy (NRT) provided by the Quitline. The Quitline vendor should review existing protocols and counselor training to ensure that these groups are receiving appropriate medication decision support. | <ul style="list-style-type: none"> Most of the differences in NRT use by demographic caller groups have been eliminated or reduced by FY 2011. |
| Provide additional NRT to the AHECs to increase reach and establish guidelines to ensure equitable access to NRT. | <ul style="list-style-type: none"> The AHEC Network is in the process of modifying Network NRT guidelines. TFF is addressing NRT funding and access issues. |
| Improve coordination between the AHEC Network and other statewide tobacco initiatives to capitalize on the network's relationships with community partners and avoid duplication of services. | <ul style="list-style-type: none"> TFF is addressing coordination between the AHEC Network and other programs within Tobacco Free Florida. New contract requirements will be included in the FY 2011-2012 contracts between TFF and the AHEC Program Offices. |

Health Communication Interventions

The purpose of the health communication interventions program 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
- Shape social norms related to tobacco use.

The TFF brand was developed as the Bureau of Tobacco Prevention Program's health communication interventions component and officially launched in February 2008. Through competitive solicitation, AlmaDDB was awarded a three-year contract to conduct the statewide social marketing, media, and public relations campaign starting in FY 2010-2011. As the lead agency responsible for advertising and marketing, AlmaDDB leads a team of partner agencies

on the TFF campaign that includes OMD, the media buying agency and sister agency to AlmaDDB, and GolinHarris, a public relations agency with considerable expertise in tobacco control.

Campaign Objectives

TFF's mission is to create a healthy, sustainable, tobacco-free environment for all Floridians and guests of the state. The vision of the program is: A Tobacco Free Florida. TFF has three main goals related to the marketing efforts of Tobacco Free Florida:

- Prevent Florida's youth and young adults from initiating tobacco use;
- Promote quitting among Florida's youth and adults; and
- Eliminate Floridians' exposure to secondhand smoke.

The TFF campaign delivers messages that reinforce and advance these goals.



Key Adjustments

Based on evaluation results and recommendations, the TFF campaign implemented key adjustments to the campaign for the start of FY 2010-2011. To maximize available resources and avoid production costs, TFF utilized previously created and proven-effective advertising from the CDC Media Campaign Resource Center (MCRC). This cost savings also allowed the campaign to be “on air” more consistently throughout the fiscal year. The campaign shifted the creative strategy to include hard-hitting advertising messages with high emotional or graphic elements to ensure brand awareness and impact. And finally, the media allocation for target audiences was shifted with an emphasis on cessation. These adjustments are noted throughout this section.

Target Audiences

Since tobacco use is an issue that affects everyone, the comprehensive objectives of this campaign call for a strategy designed to reach as many people throughout the state as possible.

The campaign was divided into prevention and cessation targets, with 30 percent of the budget allocated for prevention-specific media and 70 percent allocated toward cessation media efforts. However, there is an added value, as the cessation media buy is leveraged to reach and impact prevention audiences. Specifically, target audiences included:

- Prevention: youth 11-17
- Prevention: young adults 18-24
- Cessation: young adults 18-24
- Cessation: adults 18-55
- Secondhand Smoke: general market

Creative Strategy

Based on recommendations from the Tobacco Advisory Council and results of the FY 2009-2010 evaluation, the TFF program, along with AlmaDDB decided to strengthen TFF’s advertising creative by using ads with high sensation value. Utilizing pre-existing tobacco control and prevention advertising and marketing materials, TFF selected effective ads with high sensation value. Focus groups and online panels helped guide the campaign in which ads would be most effective for the target audience.

Cessation ads with high emotional or graphic elements were selected to clearly communicate the health consequences and emotional impact of tobacco use. Cessation TV ads included “Reverse the Damage – Heart Attack”, “Reverse the Damage – Lung Cancer”, “Rick Stoddard – 46 Years Old”, “Rick Stoddard – Emergency Room”, “Artery”, “Sponge” and “Separation.”

The prevention strategy focused on selecting ads that were relevant to young smokers and others at risk of smoking initiation. Given the research that high sensation, or graphic ads test better among young audiences, TFF selected a series of ads that met these needs. It was also identified that there was a need for a less graphic and emotive ad in circulation for cinema, family programming and the younger age range of the prevention audiences. Prevention ads included “What If Boy”, “What If Girl”, and “Vampire Moon.”

Secondhand smoke advertisements aimed to effectively communicate the pervasiveness of secondhand smoke in multiple settings and also supported the TFF’s policy area of multi-unit smoke free housing. Secondhand smoke ads included “Victim Wife”, “Apartment”, and “Baby Seat.”



Media Strategy

Adequate exposure to messages over long enough periods of time is crucial to success, and it was the campaign's goal to consistently air media throughout the year. Cost savings achieved from utilizing already existing creative materials was an important component in reaching this goal. To ensure maximum reach, a comprehensive strategy was developed to reach each of the target audiences through a mix of broadcast (TV/radio), digital, print, and out of home. Minimum media level goals [reach and targeted rating points (TRPs)] were set by CDC Best Practices.

The media team leveraged significant media relationships to secure a 3:1 bonus match for broadcast media. This bonus weight was a second key component that allowed the campaign to reach recommended levels and also maintain year-round exposure. Throughout the fiscal year, TFF's media buy (paid and bonus) included 158,059 radio spots, 92,136 TV spots and 1,045,392,092 total media impressions.

The media strategy identified high-profile placements in prominent prime programming with high rating levels across channels and audience segments. A sampling of prime programming is shown here:



The traditional media strategy was complemented by an innovative digital placement strategy reaching key online channels.

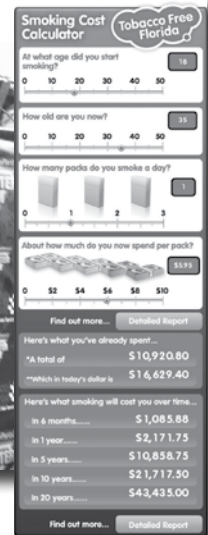
Out of home placements were focused primarily in rural environments. Out of home elements included cinema, gas pump toppers and billboards.



Public Relations Strategy

TFF's public relations component was designed to complement the advertising strategy, enhance existing social media, and tell the story of tobacco's impact on Florida. Story angles were timed to align with the creative elements of the campaign and dovetail with tobacco-related observations, as well as other points in time that cause people to reflect on their lifestyles and health. An overarching goal of these efforts was to ensure that TFF is positioned with the media, stakeholders, and consumers as the trusted resource for tobacco-related information in the state.

The social media strategy was created so that it aligned with the calendar-based public relations plan (editorial calendar) and the campaign's creative rotations. The campaign's social media networks – Facebook, Twitter, and YouTube – were repositioned to not only reach a more targeted audience, but to also engage the audience and advance the campaign's issues using dynamic, multi-dimensional online conversations that are unattainable with traditional media.



TFF’s content delivery on social media was designed to provide more Floridians with support on tobacco cessation, guidance on youth tobacco prevention, and information on protection against secondhand smoke. Messaging on social media not only informed the campaign’s followers and fans but also equipped these audiences with information with which they would inform their followers and fans.

The communications plan was complemented by a grassroots event strategy. The vision of supporting public relations outreach utilizing sponsorship and participation in events was driven by the understanding that one-on-one interaction with people seeking help to quit is the best way to provide them with the personal encouragement needed to help them reach their goal. Events were selected so the campaign could reach a diverse audience, with a significant focus on reaching a rural male audience. For this reason, several rodeo, air show, NASCAR and Monster Jam events were selected across the state. TFF introduced a new event initiative called, “Champions,” which was designed to break through the negative message of how difficult it is to quit by spotlighting everyday people who have been successful. Working with local grantees and AHEC programs, local individuals who quit were identified for certain events that lent themselves to providing VIP access and a large-scale introduction of the Champion. The Champion was announced on stage by the event announcer, using a pre-written script, and received a hearty round of applause from event participants.

Tobacco Free Florida Week

Throughout the year, TFF participates in traditional tobacco observances including Kick Butts Day, The Great American Smokeout, Through With Chew Week, and World No Tobacco Day. For the past three years, TFF has also held a hallmark event known as Tobacco Free Florida

Week. TFF Week is a statewide observance that provides an opportunity to educate, empower, and inspire Floridians through a week-long agenda that promotes the campaign’s progress. The week also allows the campaign to create a call to action for tobacco users to seek out the program’s resources and for non-users to understand the importance — to their health and wallets — of creating a Tobacco Free Florida.

Results from 2010 research on the campaign indicated that, since the inception of the TFF program in 2008, adult smoking prevalence has decreased, resulting in 497,306 fewer adult smokers in Florida. Down to 17.1 percent, adult smoking prevalence in the Sunshine State has dropped to its lowest level ever, generating a cost-savings of as much as \$4.2 billion in personal healthcare expenditures.

This information was used to create the theme for the 2011 TFF Week as “Saving Lives, Saving Money” in order to showcase the campaign’s progress. The benefit of having an established local observance is that it provides a platform to tell such success stories while also allowing the campaign to continue to drive tobacco users to its valuable and life-saving resources.

Governor Rick Scott proclaimed March 28 – April 2, 2011 as the third annual Tobacco Free Florida Week. The week resulted in an estimated overall audience reach of 2,882,600 media impressions, and 942,539 impressions from TFF’s Facebook page fans and non-fans.

Comprehensive Program Elements

SWAT plays a critical role in the overall success of the campaign, including prevention activities. The media team continuously worked to identify opportunities for SWAT involvement throughout the planning and implementation

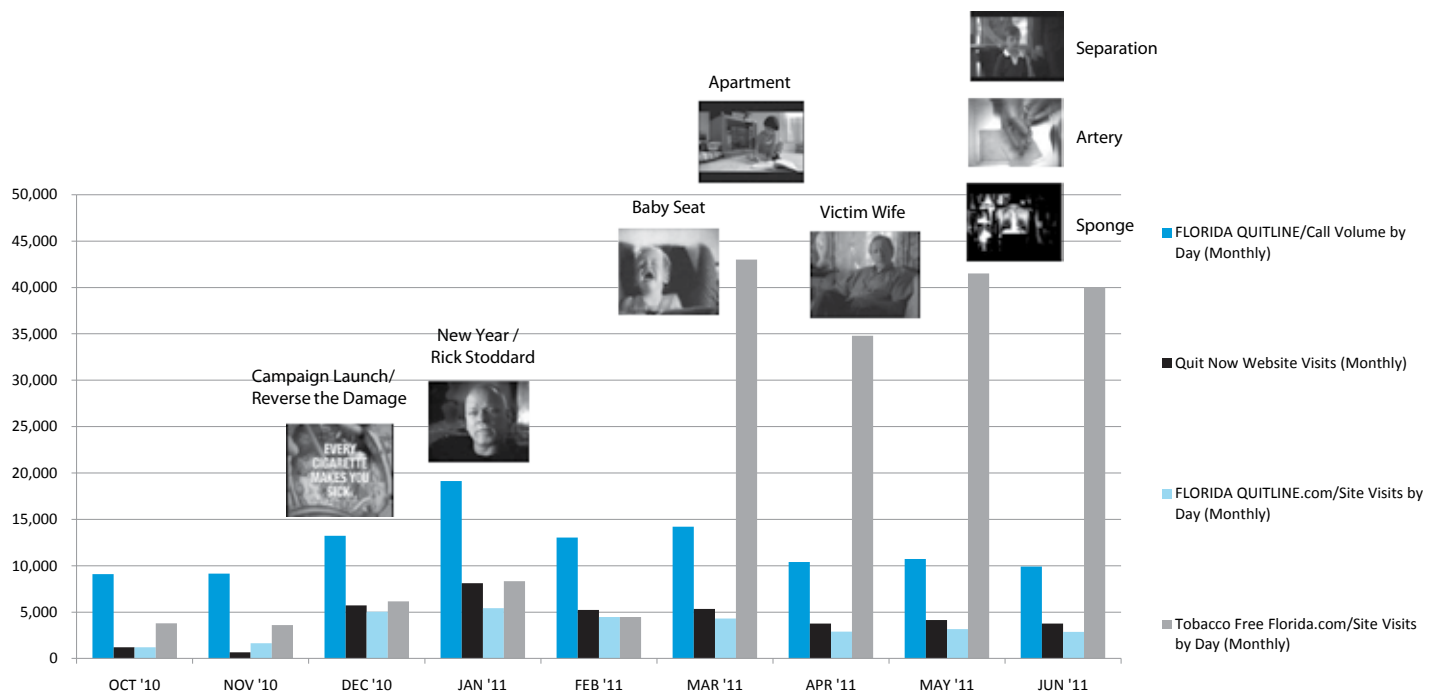


phases of the campaign. In fact, the media team attended the SWAT Youth Advocacy Board (YAB) meeting in December to discuss initial prevention creative and SWAT website enhancements. These youth insights were included in the youth prevention portions of the TFF campaign. The media team also conducted a specialized media training session for the YAB in early March.

In conjunction with statewide advertising and media coverage, TFF also worked to ensure that campaign materials were available to grantees to use on a local level. Throughout the fiscal year, four ad templates and 11 e-card templates were made available to grantees. In addition, 35 customization requests were completed. The TFF Media Hub continued to serve as the online tool to increase communication, provide campaign materials, and coordinate campaign initiatives with grantees and other stakeholders.

Key Successes

The overall strategic decisions related to advertising creative, media placement, and public relations demonstrated results in early January. As one would imagine, every January—as people contemplate their vices, addictions, and bad habits in order to start anew each year—quitting tobacco use is a popular resolution. This year, as TFF aired ads from the Rick Stoddard series, which delivers a high emotional message, the TFF program’s Quitline vendor reported a “record number” of calls, supported by the evaluation team’s reports of call volume: 19,132 people called the Quitline in January 2011, as compared to 9,941 in January 2010 (92.46 percent increase). January’s call volume was also a 108 percent increase compared to the campaign’s pre-launch volume in November 2010. Total



TFF campaign highlights as measured from prior to the launch of the current strategy in October 2010 to the end of the fiscal year in June 2011 include the following:

- 47.16 percent increase in TobaccoFreeFlorida.com site visits.
- 92.46 percent increase in calls to the Florida Quitline.
- 53.8 percent increase in registrations to the Florida Quitline.
- 3:1 bonus match totaling 81,771 free radio spots and 130,423 free TV spots.
- 25 percent bonus match for out-of-home advertising.
- 174 million paid advertising impressions in the first six months of the campaign.
- 33 events reaching more than 2 million people and 3,300 quit conversations.
- The cessation media buy generated an additional 58 million impressions against prevention audience.
- The prevention media buy generated an additional 70 million impressions against cessation 18-54 audience.
- Earned media generated 8,653,567 (Nov. 1, 2010-July 1, 2011) impressions with a conservative media value of \$1,785,297.
- Number of Facebook fans increased 11.4 percent (October 31-June 30) while Facebook Fan Feedback increased by 251 percent compared to the previous fiscal year.
- Twitter users increased from 263 followers to 769 followers, a 292.4 percent increase.



Florida Quitline registrations for January 2011 were 8,293, as compared to 3,828 in January 2010.

The media team's bonus negotiations provided an additional **92,136 radio spots** and **158,059 TV spots**. Tobacco Free Florida's media buy provided 1,045,392,092 total media impressions, including bonus units.

Social media activity allowed Floridians to connect social media properties with the overall campaign. This reinforced key messages on a platform that the audience not only frequents often, but also with which it has a personal connection. By the end of June 2011, TFF's Facebook page had 141,928 fans, an increase of 11.4 percent compared to end of October 2010, when the media team resumed the campaign's social media efforts. November 2010 accounted for 23.5 percent of these new likes, which demonstrated the success of the new Facebook strategy that launched that month.

The third annual TFF Week proved to be a successful initiative. New elements such as innovative multi-media platforms, web videos, and infographics were introduced. TFF Week results included:

- 2,882,600 impressions
- \$273,928 total ad value.
- An invitation from the CDC to present TFF Week as a successful case history.

State & Community Interventions

According to CDC's 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." Based on evaluation feedback, Florida shifted during FY 2008-2009 to an evidence-based strategy by promoting social, policy, environmental and systems change at the state and local levels. By using a policy and systems change approach, large populations will be impacted and long term sustainability will be attained, however this process is not immediate and requires the support of all key stakeholders.

During FY 2010-2011, 64 county grantees addressed local policy and systems interventions recommended by TFF based on the CDC's Best Practices for Comprehensive Tobacco Control Programs. Local policy changes are in the form of resolutions, proclamations, or voluntary policies to address tobacco use or avoidance. Each grantee is required to organize and maintain a sustainable tobacco free partnership of local stakeholders who become the voice of the community to educate and build momentum to achieve policy change. The grantee also must organize and maintain a Students Working Against Tobacco (SWAT) Chapter within their community, the voice of the youth in prevention and policy change.

TFF narrowed the focus of its policy areas during FY 2010-2011. This decision was based on several factors: 1) evaluation recommendations; 2) the Family Smoking Prevention and Tobacco Control Act in 2009, which provides the U.S. Food and Drug Administration (FDA) with the authority to regulate some of the policy areas TFF has been targeting; and 3) the need to increase the cohesive-

ness and focus of policy efforts statewide. Narrowing the policy focus allowed for greater collaboration among counties and enhanced TFF's ability to provide focused technical support and assistance to the counties. TFF's 64 fully funded counties are working in conjunction with their county tobacco free partnership and SWAT chapters to adopt the following policies:

- Restrict the sale of candy-flavored tobacco products not covered by FDA
- Prohibiting/limiting tobacco industry advertising in retail outlets (i.e. indoor/outdoor advertisements)
- Implement comprehensive tobacco control model policies in K-12 schools
- Create smoke-free multi-unit dwellings (i.e. condominiums, apartments, etc.)

To ensure policy adoption, TFF staff conducted regional meetings with the community grantees to address successes and challenges with local policies, and statewide webinar trainings. A grantee task force for each of the policy areas was developed to provide statewide guidance and strategic direction to TFF and community grantees as they move forward with their policy work. Task forces also identify the need for policy related materials as they work locally on policy change. For example, the smoke-free multi-unit housing taskforce identified the need for standardized materials for the policy. The task force worked closely with TFF's media vendor to develop a website and brochure focused on the smoke-free multi-unit housing policy area.





Tobacco Free Partnerships

Tobacco free partnerships are an integral part of the local tobacco prevention program and impact local policymakers and stakeholders working towards policy change. Partnerships work as independent advocates and are a critical factor in a grantee's success. To ensure that partnerships are viable, TFF staff conducted tobacco free partnership meeting observations using a standard observation tool to assess the effectiveness of the partnerships. Through the task forces and TFF staff, partnerships are also offered technical assistance and education.

Youth Prevention Programs

SWAT is TFF's youth advocacy organization and is open to students in Florida's middle and high schools. Its members participate in activities and events that support the vision of a Tobacco Free Florida. Youth are recruited and engaged into each step of the policy process including data collection, community mobilization, media advocacy and presenting to decision makers. SWAT youth have educated community members about policy issues and met with local commissioners to pass policies.

SWAT charters and clubs are required to work closely with each local tobacco free partnership. 25 percent of each county's partnership members must comprise youth and SWAT members to represent the youth voice in communities.

TFF is committed to developing leadership skills in youth through training in tobacco issues, media literacy, community mobilization, the policy process, presentation skills, evaluation skills, etc. By empowering the youth of SWAT through training, mentoring and providing leadership opportunities on the state and local levels, the statewide program will assist in building the capacity of its advocates to enable environmental and policy change.

Policy Success Stories

TFF met monthly via conference call with county grantees to discuss best practices and share successes and problem solving methodologies. During the course of the year, all grantees met or exceeded goals outlined in their work plans, but a few counties had success stories that were important to their communities and towards achieving statewide goals. The following counties represent both rural and urban areas that overcame specific challenges to pass resolutions or work towards social norm changes.

Gadsden County: Policy to Implement Comprehensive Tobacco Control Model Policies in K-12 Schools

As one of its first policy initiatives, Gadsden County SWAT and the Tobacco Free Partnership sought to implement comprehensive tobacco free campus policy at their K-12 schools. Over a two year period, SWAT and the Partnership educated community members and decision makers about the policy and became a trusted source of tobacco information and support throughout the county. In the fall of 2010, SWAT members met with principals at their schools and received letters of support for the policy. By the spring of 2011, the School Board of Gadsden County voted to update its tobacco free campus policy to meet model standards accepted across the United States. The Gadsden County Tobacco Free Partnership and SWAT continue to be a source of support for the school district as they work to communicate the new policy and promote cessation services offered through the Florida Quitline.

Miami-Dade County: Policy to Restrict the Sale of Candy-Flavored Tobacco Products not covered by FDA

The Tobacco Free Partnership and SWAT have been working diligently to educate commissioners, elected officials, advocacy groups and the public at-large throughout Miami-Dade County on the importance of establishing resolutions to ban the sale of candy flavored tobacco products not covered by the FDA. Resolutions were successfully passed in the City of Miami Beach and the City of South Miami banning candy flavored tobacco products not covered by the FDA. SWAT youth were also invited by the Mayor of South Miami to meet and present at the League of Cities in hopes of encouraging more cities to pass similar resolutions.

Collier County: Policy to Restrict the Sale of Candy Flavored Tobacco Products not covered by FDA

The Tobacco Free Collier Partnership and SWAT youth spent the last summer meeting with city council decision makers from the Cities of Naples, Marco Island, and Everglades. During these educational meetings SWAT youth provided decision makers with data showing the number of stores that sell candy-flavored tobacco products as well as talking points informing them how the flavored tobacco products are “starter products” for 90 percent of youth that try tobacco for the first time.

SWAT youth from Golden Gate High School educated the City of Naples Council on the statewide goal to pass resolutions urging retailers to restrict the sale of candy-flavored tobacco products and the resolution was passed 6-1. This resolution officially had support from Mayor Bill Barnett who has been a long time supporter of the Collier County Tobacco Free Partnership and SWAT initiatives. Mayor Barnett plans to contact his “sister cities” and encourage them to pass similar resolutions.

Polk County: Policy to Restrict the Sale of Candy-Flavored Tobacco Products not covered by FDA

The Tobacco Free Partnership of Polk County along with youth from Students Working Against Tobacco successfully obtained two resolutions that urge retailers in Polk County to restrict the sale of flavored tobacco products, with a strong emphasis on stores with a high rate of underage customers. The Board of County Commissioners, who all individually met with volunteers of SWAT and the Tobacco Free Partnership, as well as the City of Lakeland were all in strong favor of such a measure, particularly when they were able to view locally-collected data that studied the prevalence of flavored tobacco products and how they are marketed in the community. These resolutions highlight Polk County’s commitment to local policy change in the area of restricting the sale of flavored tobacco.

Monroe County: Policy to Restrict the Sale of Candy-Flavored Tobacco Products not covered by FDA

Monroe County SWAT in partnership with Tobacco Free Florida Keys collaborated with the Key West City Council to pass a resolution restricting the sale of candy-flavored tobacco by retailers and asking residents and visitors to refrain from purchasing these items.

Monroe County: Policy to Create Smoke-Free Multi-Unit Dwellings

Tobacco Free Florida Keys collaborated with AIDS Help to implement a smoke-free housing policy at their new property, Poinciana Royale. Poinciana Royale was built to provide housing to those who are homeless and are HIV positive or have AIDS or other disabilities, typically populations with above average smoking rates. In the beginning AIDS Help debated whether or not to make this new property completely smoke-free for the health and well-being of the residents but had decided not to do it as they did not want to intrude on their private space. However, once Tobacco Free Florida Keys met with them and advised them on the benefits and tools available they designated 100 percent of the units and all common areas inside and outside smoke-free.

Bay County: Policy to Create Smoke-Free Multi-Unit Dwellings

The Bay County Tobacco staff and the Tobacco Program Consultant for Smoke Free Multi-Unit Housing met with the executive officers of Royal American Management in Panama City to discuss the benefits of implementing smoke-free policies at some of the 146 properties that the company manages throughout the state. As a result of this meeting and continued follow-up by the Bay County Tobacco staff, Royal American has implemented smoke-free policies at two apartment communities in Tampa and plans to open two newly developed properties as smoke-free communities. In addition, grantees around the state are working with Royal American to explore the possibility of implementing smoke-free policies at communities managed by the company in other counties throughout Florida.



Florida Quitline Highlights FY 2010-2011

- The Quitline, through the telephone and Internet, served more than 62,689 individuals in FY 2010-2011, more than a 40 percent increase from FY 2009-2010.
- More than 9,100 Floridians chose to receive services through the Internet.
- Nearly all callers who complete Quitline registration (more than 90 percent) are tobacco users calling for help with quitting tobacco.
- The Quitline telephone service reaches a greater proportion of tobacco users in some priority populations, particularly African American tobacco users and those with lower education levels.
- The Quitline through the Internet is effectively reaching younger tobacco users who are less likely to use the traditional Quitline telephone services. The Internet also serves a group of tobacco users who tend to be more highly educated, female, and white.
- At the time of caller intake, 97 percent of tobacco users elected to enroll in counseling. This surpasses the CDC benchmark of 75 percent of callers accepting telephone cessation counseling services.
- NRT was provided to more than 50,359 tobacco users.
- Males and tobacco users over the age of 65 are underutilizing the Quitline.
- The quit rate for Quitline callers is 30.5 percent. 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 percent by 2015, and Florida has exceeded this goal.
- Callers reported being very satisfied with all aspects of the Quitline. Overall, 93 percent of callers were satisfied with the service received from the Quitline and 95 percent would recommend the Quitline to a friend..



Cessation Interventions

Tobacco 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, TFF administered several cessation interventions during FY 2010-2011:

- The Florida Quitline, accessed through the Internet or telephone, provides free behavioral cessation counseling and nicotine replacement therapy (NRT),
- Cessation programs in rural and acute care hospitals,
- Face-to face counseling provided by AHEC, and
- Health care provider and student training on tobacco prevention and cessation by AHEC.

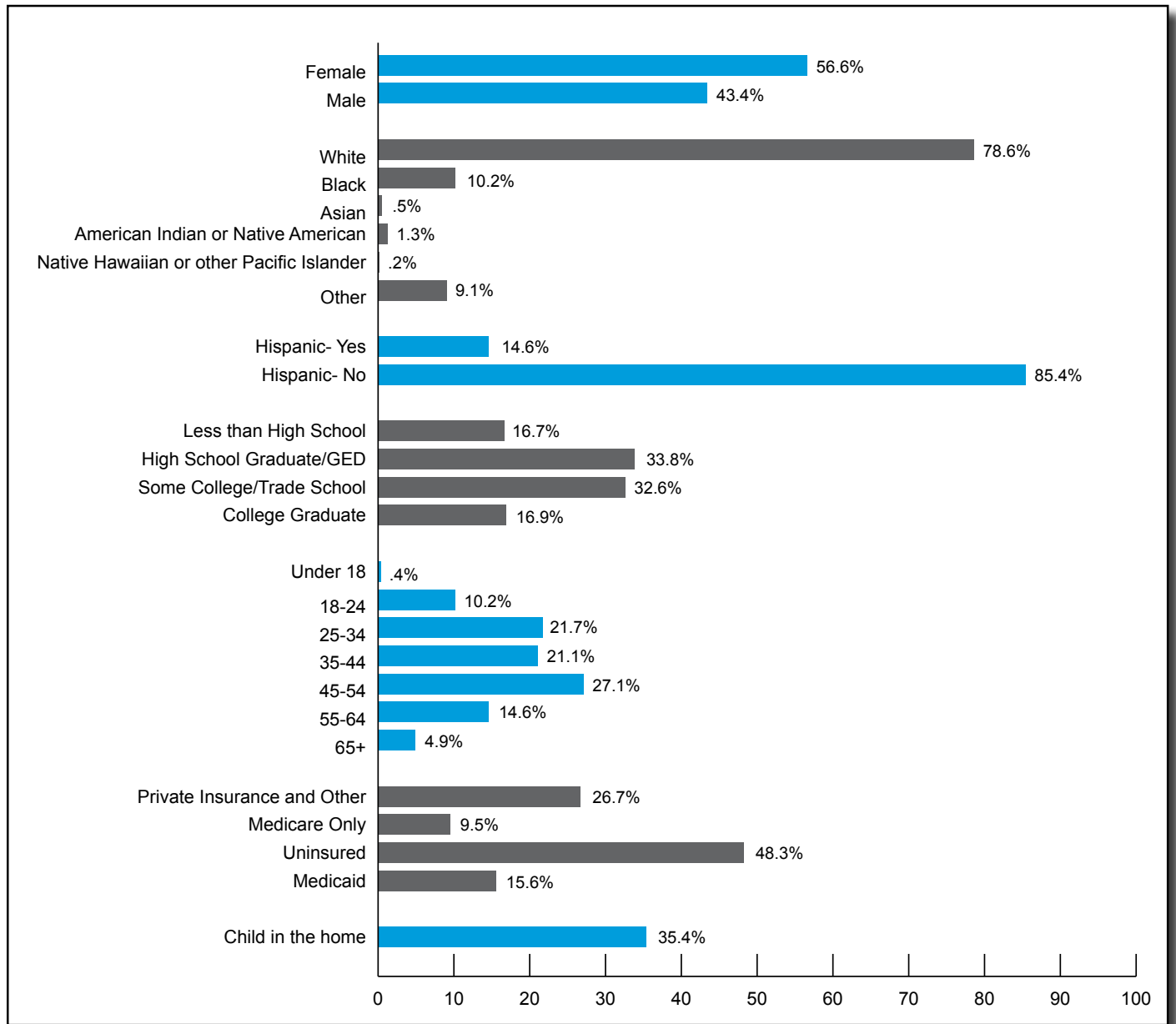
The Florida Quitline

The Florida Quitline offers free telephone and web coaching, an internet-based tobacco cessation counseling services to all Florida residents over 11 years of age. In FY 2010-2011, the Quitline contract with Alere Wellbeing, Inc. provided more than \$3.1 million in free NRT with the balance of the contract amount for behavioral counseling services for 67,713 clients.

During FY 2010-2011, Floridians accessed the Florida Quitline programs through the Internet or telephone. These enrollment methods are beneficial to the success of this program by providing multi-faceted enrollment options. During enrollment, Floridians are provided the options of receiving cessation services through the Internet, telephone-based cessation counseling, or face-to-face counseling through AHEC.

The Quitline's counseling services include free behavioral cessation sessions with 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 medically appropriate. TFF's contracted independent evaluators follow up with tobacco users after seven months to see if they successfully remained tobacco free or to provide additional information on making another quit attempt.

Percentage of Quitline Callers by Demographic Group, Fiscal Year 2010-2011



Rural and Acute Care Hospital Cessation Program

The 2009 Florida Legislature increased funding for cessation and appropriated \$2 million for NRT. TFF 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. Tobacco Free Florida awarded \$2,070,700.83 in tobacco cessation/prevention program grants to 13 rural and acute care hospitals throughout Florida. The grants

were awarded through a competitive process and renewed for FY 2010-2011 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.

Rural and Acute Care Hospital Highlights-2010-2011

- Provided a total of 250 cessation classes to rural communities.
- Provided more than 1,600 Floridians with cessation counseling.
- Distributed NRT to 850 cessation program participants.

AHEC Highlights FY 2010-2011

- Provided AHEC tobacco prevention, use, and cessation training to over 5,400 health professionals representing 37 distinct health professions.
- More than 9,700 health profession students enrolled in 52 colleges, universities, and technical schools located throughout Florida were trained on tobacco prevention, use, and cessation. These students represented 27 distinct health professions.
- More than 10,000 Floridians received individual and group cessation counseling in the over 1,332 courses held during the fiscal year.
- “Tools to Quit” (a new cessation course format) condenses the six week “Quit Smoking Now” into a single 90-minute experience. Of the 1,332 courses held, “Tools to Quit” accounted for 7.5 percent.
- Ninety-two percent of the AHEC participants identified English as their primary language. In Miami-Dade County, Spanish speakers accounted for approximately 44 percent of the county’s participants.
- A breakdown of participants by age group revealed that 58 percent were between the ages of 45 and 65.
- 23 percent of participants indicated they had tried to quit three times previously.
- The most frequently used location to hold AHEC cessation classes were healthcare facilities such as hospitals and community clinics.



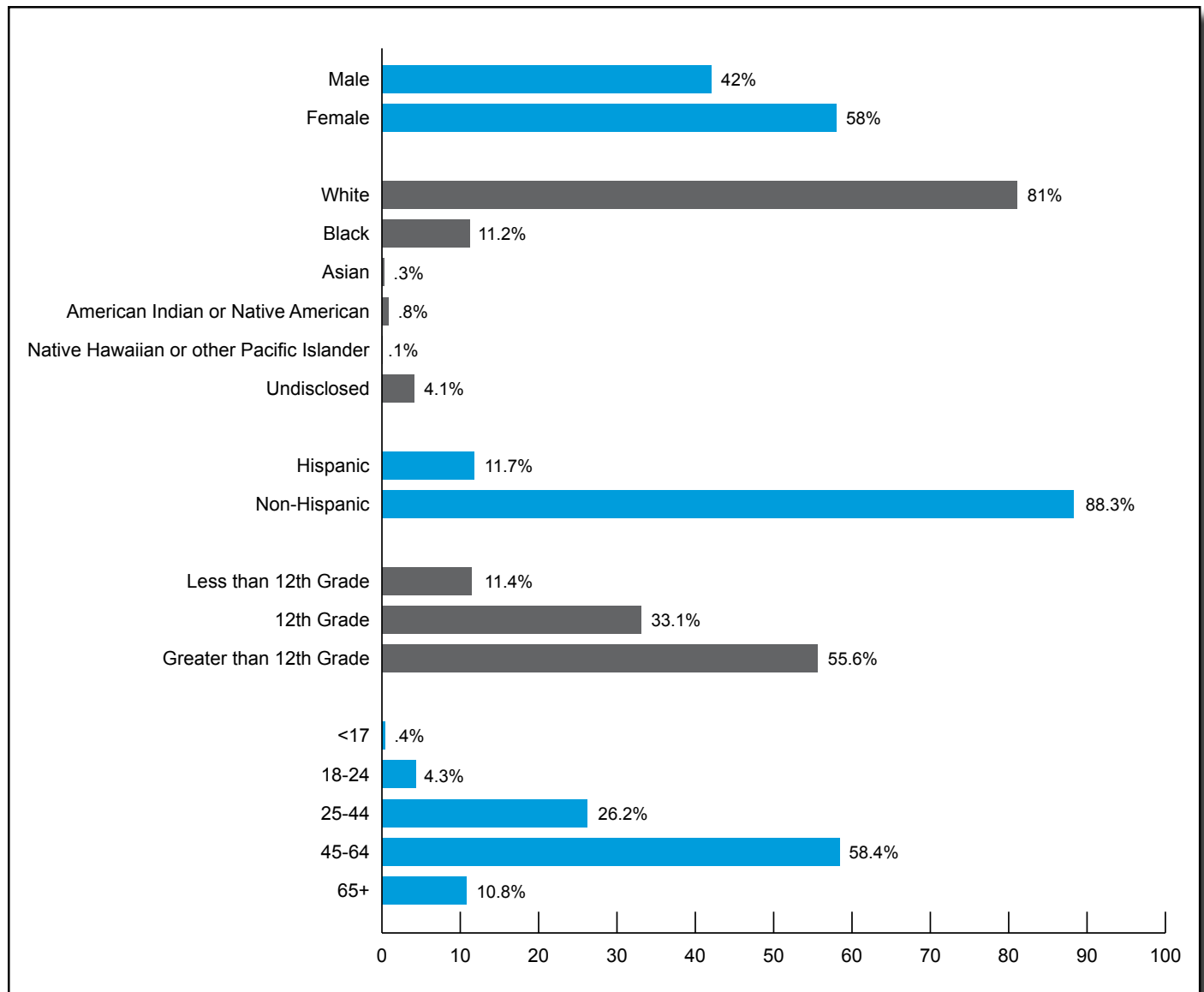
Area Health Education Centers Cessation Counseling and Provider Training Program

The Florida 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 2010 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.

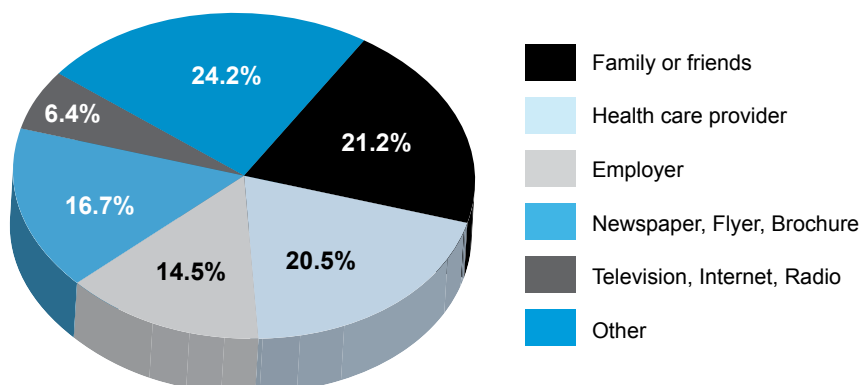
An AHEC goal is to strengthen the capacity of Florida's health care system to deliver effective tobacco use prevention and cessation services. AHECs train current and future healthcare workforce on evidence-based approaches and provide tobacco cessation services in all Florida counties. AHEC cessation counseling and the Florida 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 free tobacco cessation counseling through the Internet or telephone, based on their preference.



Percentage of AHEC Network Tobacco Cessation Participation by Demographic Group, FY 2010-2011



AHEC Tobacco Cessation Referrals by Source, FY 2010-2011



Women are more likely (58%) to seek AHEC cessation services than men (42%). The AHEC program is predominantly serving adults ages 25-64, with most participants in the 45-64 age range. During FY 2010-2011, the majority of AHEC participants were white, non-Hispanic individuals, and 44.5% of AHEC participants reported a high school education or less.

Administration & Management

TFF operates with a minimum number of employees with specific program area or contract management expertise. The staff consists of 21 full time equivalent (FTE) positions and four other personnel services (OPS) employees. No general revenue funding is used by Tobacco Free Florida. The program receives funding from the Tobacco Settlement Trust Fund for program activities. 81 percent of the positions 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 DOH 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 was developed with the assumption that it is a statewide plan and not solely to guide the efforts of TFF. This strategic plan was designed with flexibility to meet and counter the ever-changing landscape of tobacco prevention and control.

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

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, meets quarterly, 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.¹

Youth Programs Subcommittee:

The 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.

CDC Grant Activities

Centers for Disease Control and Prevention Activities

In 2008, TFF was awarded a five year CDC Tobacco Prevention and Control Cooperative Agreement Grant. The CDC grant, \$1,873,658 annually, provides funding for 85 percent of TFF staff salaries. 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 status (SES) groups, some racial and ethnic groups, and in young adults, ages

18-24. During FY 2010-2011, TFF staff focused on the following initiatives to reduce tobacco-related disparities in the African American, and rural, populations with low SES status.

Historically Black Colleges and Universities (HBCU) Student Wellness Plan

Historically Black Colleges and Universities are uniquely positioned to influence the health behaviors of many African Americans and turn the tide on health disparities. In 2008, DOH staff from the Bureau of Tobacco Prevention Program, the Bureau of Chronic Disease Prevention, and the Bureau of Epidemiology began working with Florida's four HBCUs, (Florida A&M University, Bethune Cookman University, Florida Memorial University, and Edward Waters College) to develop and implement student wellness plans. Each HBCU developed a plan to meet specific needs that

¹ Subcommittee minutes are posted on the DOH website under the Florida Tobacco Education and Use Prevention Advisory Council (<http://www.doh.state.fl.us/Tobacco/TAC.html>)

were identified via student surveys and environmental scans. The plans address tobacco use, physical activity and nutrition and include evidence-based interventions from the CDC *Best Practices for Comprehensive Tobacco Control Programs*, *Treating Tobacco Use and Dependence Clinical Practice Guideline* and *The Guide to Community Preventive Services*.

During FY 2010-2011, the HBCUs began implementation of the student wellness plans. By the end of the grant period, each school is required to complete the following tobacco control evidence-based strategies:

- Establish breathe easy zones or tobacco free campuses;
- Assess and document smoking behavior of students who receive services at the health care centers on the college/university campus and refer as appropriate to smoking cessation services;
- Develop and implement a tracking system for cessation and report the number of referrals to the Quitline and face-to-face cessation classes; and
- Educate students and faculty on the tobacco company marketing targeted at African-Americans.

Faith-Based Organizations

Faith-based organizations (FBO) are increasingly recognized as important partners in public health initiatives. FBOs are in a position to promote healthy habits within their congregations and in entire communities. During FY 2010-2011, TFF began a project with the Madison and Jefferson county health departments targeting rural and low-income African American populations. Both county health departments are working with local faith-based organizations to provide tobacco-use education and access to cessation services to these populations which are often underserved by tobacco control programs and cessation campaigns. The long-term goal of this project is to create sustainable health ministries within the FBOs that are capable of providing tobacco-use education and cessation interventions to both their congregations and their communities.

During this project period, each county health department conducted a needs assessment of the FBOs in their counties and based on the results, selected ten FBOs to include in the project. The county health departments are identifying tobacco users within the congregations and referring them to the Quitline or the AHECs for cessation services. They are also educating the congregations on tobacco-use and tobacco industry targeting of African Americans.



Looking to the Future

During FY 2010-2011, the Tobacco Free Florida program focused on continuous accountability, customer service and improvement. Making significant gains in reducing the prevalence of tobacco use and seeing an increase in the numbers of youth who have never tried tobacco is a testament to the work of those dedicated to changing social norms of tobacco use. The continued work with our local and state partners has increased the local governments with tobacco protection resolutions and interest in protecting the health of Florida's citizens and guests.

These accomplishments are significant, but additional efforts must be implemented if the program is to meet its long term goals and truly impact the high costs of tobacco use in the state. Looking towards the future, TFF plans to increase the continued accountability in the program through new strategic planning priorities, process mapping and performance measures. Utilizing the evaluation results and recommendations from the Tobacco Advisory Council, the TFF program will work locally on grass roots policy changes that will marry with statewide tobacco prevention and use advocacy and education.

Tobacco use is the number one cause of preventable death and takes its toll on families, the health care system and communities in Florida. The future for the TFF program includes a targeted focus on each element of the program with renewed dedication that each dollar spent has a greater return on investment in health savings, personal impact and added value; and that each policy decision, locally and statewide, has meaning and yields a stronger passion for changing tobacco social norms with a vested interest in empowering the leaders of today and tomorrow to take action towards change.



**Tobacco Free Florida Program
Florida Department of Health**

4025 Esplanade Way, Suite 340
Tallahassee, FL 32399
Ph: 850-245-4144
Fax: 850-414-7497
www.doh.state.fl.us/tobacco