

# FLORIDA DEPARTMENT OF HEALTH BUREAU OF TOBACCO FREE FLORIDA



# 2011-2012 ANNUAL REPORT



# 2011-2012 Florida Department of Health Tobacco Free Florida Annual Report

## Letter from the Surgeon General

As Florida's State Surgeon General, I am pleased to provide the 2012 Tobacco Free Florida Annual Report, outlining the accomplishments and evaluation findings of the Bureau of Tobacco Free Florida. While we celebrate a decrease in reported smoking in middle and high school students, an increase in the use of smokeless tobacco among middle school youth emphasizes the need for continued cessation efforts.

The Tobacco Prevention and Education Advisory Council met quarterly as required by law, to guide the program direction and allocation of resources of the Department of Health's Bureau of Tobacco Free Florida and the Tobacco Free Florida campaign and related services. The Council and its subcommittees met to discuss and plan for activities that promote the program's three primary goals of: preventing tobacco use among youth, assisting in the cessation of the use of tobacco products, and eliminating secondhand exposure to tobacco smoke.

Reducing the personal and societal burden of tobacco-related deaths and illnesses is critical for the health and well-being of Floridians, and as such figures prominently in the goals and objectives of the 2012-2015 Florida State Health Improvement Plan, created for public health system partners and stakeholders to improve the health of Floridians.

Florida is proud to be a leader in public health, and to be among the leading states in achieving low levels of tobacco use among youth and adults. We look forward to another year of outstanding achievements for the people of Florida and contributing to the Department's vision of being the healthiest state in the nation.

Sincerely,

John H. Armstrong, MD, FACS  
Surgeon General & Secretary  
Florida Department of Health



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## Executive Summary

During FY 2011-2012, the Tobacco Free Florida program has conducted health communication interventions, state and community interventions, surveillance and evaluation, and cessation interventions as guided by the 1999 “CDC Best Practices for Comprehensive Tobacco Control Programs.” All program activities are designed to reduce the prevalence of tobacco use among youth, adults, and pregnant women; reduce per capita consumption; and reduce exposure to environmental tobacco smoke.

The Bureau of Tobacco Free Florida (BTFF), located in the Division of Community Health Promotion, is responsible for implementing Florida’s Comprehensive State-wide Tobacco Education and Use Prevention Program, as outlined in Florida Statutes 381.84.

Health communication interventions have been coordinated by the competitively procured and contracted vendor, AlmaDDB. The Bureau’s three main goals related to the marketing efforts of Tobacco Free Florida are to:

- Prevent Florida’s youth and young adults from initiating tobacco use.
- Promote quitting among Florida’s youth and adults who use tobacco.
- Protect Floridians from exposure to secondhand smoke.

At the beginning of the fiscal year, TobaccoFreeFlorida.com was the main tag and call-to-action for most media channels. As the year progressed, the Bureau made an effort to support each of the “3 Ways to Quit” and implemented a new tag, “Click. Call. Or Come In.” This new tag incorporated the Quitline (call), online Web Coach (click) and the Area Health Education Centers (AHEC) in-person cessation classes (come in) into the campaign.

State and community interventions have been conducted through competitively procured grants at the county level, with guidance and oversight by BTFF staff. Grantees are each required to establish a county tobacco free partnership; organize a Students Working Against Tobacco (SWAT) chapter, and work in the following policy areas:

- Restricting the Sale of Candy Flavored Tobacco Products not covered by the Food and Drug Administration (FDA).
- Prohibiting/Limiting Tobacco Industry Advertising in Retail Outlets (i.e. Indoor/Outdoor Advertisements)
- Implementing Comprehensive Tobacco Control Model Policies in K-12 Schools.
- Creating Smoke-Free Multi-Unit Housing (i.e. Condominiums, Apartments, etc.)

Surveillance is conducted to measure tobacco use behaviors and changing trends in tobacco use among Floridians. Surveillance data are presented from the following sources in this annual report: the 2012 Florida Adult Tobacco Survey (FLATS); the 2012 Florida Youth Tobacco Survey (FYTS); the 2011 Behavioral Risk Factor Surveillance System (BRFSS); the 2010 Pregnancy Risk Assessment and Monitoring System (PRAMS); the FY 2011-2012 Florida Department of Business and Profession Regulation cigarette sales data; and the 2012 Florida Clean Indoor Air Act call data.

Highlights include:

- Among middle school students, the percentage who definitely did not think that young people who smoke cigarettes have more friends decreased slightly, from 34.9% in 2011 to 33.7% in 2012. High school students reporting this belief decreased from 31.1% in 2011 to 30.5% in 2012.



## Background

- The percentage of middle school students who report smoking a cigarette at least once in the past 30 days decreased 11.4% from 3.5% in 2011 to 3.1% in 2012. Among high school students this behavior decreased by 15.1% from 11.9% in 2011 to 10.1% in 2012. (FYTS)
- The packs of cigarettes sold annually per person 18 and over in Florida decreased by 6.7% from approximately 62.4 packs per person during fiscal year 2010-2011 to 58.2 during fiscal year 2011-2012 (DBPR)
- The percentage of women who reported smoking during pregnancy decreased from 9.6% in 2009 to 8.1% in 2010. (PRAMS)
- The percentage of adults exposed to secondhand smoke in the home during the past week decreased from 9.7% in 2011 to 9.0% in 2012. (FLATS)

Cessation interventions are provided by the Florida Quitline, the online WebCoach and the Area Health Education Centers. This fiscal year, the Florida Quitline and the online WebCoach served the highest number of people ever, with a budget less than that of the previous fiscal year. The Florida Quitline quit rate is 31.1 percent, remains strong, and meets the 2015 North American Quitline Consortium goal.

Activities in the next fiscal year will include working to modify program direction and services based on evaluation data from independent evaluators, reviewing and possibly revising the 2010-2015 Florida Comprehensive Statewide Tobacco Education and Use Prevention Strategic Plan, and working to ensure that services mandated by the Affordable Care Act and employee wellness programs offer a full range of cessation counseling and treatment options.

Title XXIX, Chapter 381.84 establishes the Comprehensive Statewide Tobacco Education and Use Prevention Program, with the primary goals of reducing the prevalence of tobacco use among youth, adults and pregnant women; reducing per capita consumption and reducing exposure to environmental tobacco smoke.

In 2005, Floridians passed an amendment to the state constitution (Section 27) mandating that a portion of the tobacco settlement funds be used to fund a comprehensive statewide tobacco education and prevention program consistent with recommendations of the U.S. Centers for Disease Control and Prevention (CDC) 1999 Best Practices for Comprehensive Tobacco Control Programs. The amendment states that the program will be supported by an amount equal to fifteen percent of state tobacco settlement funds, adjusted annually for inflation.

In 2008, the Comprehensive Statewide Tobacco Education and Use Prevention Program launched a multi-faceted Tobacco Free Florida (TFF) campaign. TFF is now housed in the Division of Community Health Promotion, Bureau of Tobacco Free Florida. The Bureau, and this annual report, is organized by the major components outlined in the 1999 Best Practices for Comprehensive Tobacco Control Programs (updated in 2007).

## Health Communication Interventions

The Bureau's competitively procured and contracted vendor, AlmaDDB, is the lead agency responsible for the Tobacco Free Florida campaign. AlmaDDB's sister agency OMD conducts media buying and GolinHarris, a subcontractor to AlmaDDB, conducts public relations.

The Bureau 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 who use tobacco.
- Protect Floridians from exposure to second hand smoke.

### Creative and Media Buying Strategy

This year, Tobacco Free Florida continued promoting cessation and prevention messaging throughout Florida while maintaining a consistent presence through an integrated approach. Statewide television, radio, newspaper, promotions, sponsorships, social media, and online media ran continually in both English and Spanish markets. The overall creative strategy consisted of an educational approach related to the chemicals and the powers of tobacco industry marketing for the prevention audience and graphic, hard-hitting messages combined with "how to quit" messages for the cessation audience.

Tobacco Free Florida made an important shift in creative decision by promoting all cessation services under one umbrella, **Three Ways to Quit**. At the beginning of the fiscal year, TobaccoFreeFlorida.com was the main tag and call-to-action for most media channels. As the year progressed, the Bureau made an effort to support each of the "Three Ways to Quit" and implemented a new tag, "Click. Call. Or Come In." This new tag incorporated the Quitline (call), online Web Coach (click) and the Area Health Education Centers (AHEC) in-person cessation classes (come in)

## 3 EASY & FREE WAYS TO QUIT



Talk to a Quit Coach® who can help you quit tobacco.

**1-877-U-CAN-NOW**

1-877-822-6669



Online help quitting tobacco is only a few clicks away.

**[www.quitnow.net/florida](http://www.quitnow.net/florida)**



Looking for local face-to-face help? Find a center near you.

**[www.ahectobacco.com](http://www.ahectobacco.com)**

During fiscal year 2011-2012, Tobacco Free Florida media buys generated an estimated total of 1,049,465,829 paid media impressions.

- In January 2012, Tobacco Free Florida unveiled a new and improved main website, [www.TobaccoFreeFlorida.com](http://www.TobaccoFreeFlorida.com), in English and en Español, specifically designed as an all-encompassing resource to get people started on their quit plan, educate about tobacco-related issues in the state, and serve as a valuable resource for media. Visits to the site from December to January jumped from nearly 50,000 to more than 100,000. Since the launch, the visits have consistently remained above 75,000 per month.
- The campaign's Facebook page has grown to a community of more than 195,000 fans that communicate with the brand and other fans on a daily basis.
- This year, earned media coverage generated 34.5 million impressions across all "traditional formats" including broadcast, print and online newspapers.

- The public relations portion of the campaign complements the advertising strategy, supports community grantee efforts, enhances the existing social media properties, promotes the state's cessation resources through community events and tells the story of tobacco's impact on Florida.
- The fourth annual **Tobacco Free Florida Week** ran from March 26 through April 1, 2012. Themed "Fresh Air for All," the week's events and messaging highlighted the progress made in protecting Floridians from the harmful effects of second hand smoke (SHS) and looked ahead to the challenges, as SHS continues to impact the health of Floridians.



## Campaign Success and National Recognition



Tobacco Free Florida has been contacted by a variety of national and state public health entities to highlight and share the campaign's innovative approach and materials.

Highlights of these successes include:

- In May 2012, the Tobacco Free Florida was invited to share a campaign overview at the American Cancer Society (ACS) board meeting.
- Tobacco Free Florida submitted two abstracts for the 2012 National Conference on Tobacco or Health (NCOTH) and both were accepted and presented at the conference in August 2012.
- Multiple state tobacco control program regularly reaching out for input on social media and other initiatives
- Creative award for out-of-home campaign featuring cost message.
- Submitting campaign materials for the new CDC Counter-marketing Campaign manual.
- A Tobacco Free Florida print ad was selected for the cover of the July 2012 issue of Tobacco Control.

## State and Community Interventions

According to the Centers for Disease Control and Prevention (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.” The Bureau implements this evidence-based strategy by promoting social, policy, environmental and systems change at the state and local levels. The Bureau, through a competitive procurement process, has contracted with 66 counties to establish or maintain tobacco-related activities. These “grantees” are located in community-based organizations or county health departments.

During FY 2011-2012, county grantees addressed local policy and systems interventions recommended by the Bureau based upon 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 county 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.
- Organize and maintain a Students Working Against Tobacco (SWAT) Chapter within their community. Middle and high school youth are recruited and engaged into each step of the policy process including data collection, community mobilization, media advocacy and presenting to decision makers.
- Work in conjunction with their county tobacco free partnership and SWAT chapters on the following policies:
  - Policy to Restrict the Sale of Candy-Flavored Tobacco Products not covered by the Food and Drug Administration (FDA).

- Policy Prohibiting/Limiting Tobacco Industry Advertising in Retail Outlets (i.e. Indoor/Outdoor Advertisements)
- Policy to Implement Comprehensive Tobacco Control Model Policies in K-12 Schools.
- Policy to Create Smoke-Free Multi-Unit Housing (i.e. Condominiums, Apartments, etc.)



## 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 Floridian's 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 presented are the most recent available and are from the following sources:

1. 2012 Florida Adult Tobacco Survey (FLATS);
2. 2012 Florida Youth Tobacco Survey (FYTS);
3. 2011 Behavioral Risk Factor Surveillance System (BRFSS);
4. 2010 Pregnancy Risk Assessment and Monitoring System (PRAMS);
5. Fiscal Year 2011-2012 Florida Department of Business and Profession Regulation cigarette sales data;
6. 2012 Florida Clean Indoor Air Act call data.

### Youth Attitudes about Tobacco Use

- Among middle school students, the percentage who definitely did not think that young people who smoke cigarettes have more friends decreased slightly, from 34.9% in 2011 to 33.7% in 2012. High school students reporting this belief decreased from 31.1% in 2011 to 30.5% in 2012.
- Among middle school students, the percentage who definitely did not think that smoking cigarettes makes young people "look cool" or "fit in" increased slightly, from 73.2% in 2011 to 73.7% in 2012. High school students reporting this belief increased from 70.8% in 2011 to 71.7% in 2012.
- Among middle school students, the percentage who definitely did not think that smoking cigarettes helps people feel more comfortable in social activities decreased slightly, from 39.2% in 2011 to 38.8% in 2012. High school students reporting this belief increased from 25.4% in 2011 to 26.9% in 2012.

### Current Youth Tobacco Use

- The percentage of middle school students who report smoking a cigarette at least once in the past 30 days decreased 11.4% from 3.5% in 2011 to 3.1% in 2012. Among high school students this behavior decreased by 15.1% from 11.9% in 2011 to 10.1% in 2012. (FYTS)
- The percentage of middle school students who report smoking a cigar at least once in the past 30 days decreased 13.3% from 4.5% in 2011 to 3.9% in 2012. Among high school students this behavior decreased by 14.9% from 13.4% in 2011 to 11.4% in 2012. (FYTS)
- The percentage of middle school students using smokeless tobacco at least once in the past 30 days increased 9.5% from 2.1% in 2011 to 2.3% in 2012. Among high school students this behavior decreased by 12.5% from 6.4% in 2011 to 5.6% in 2012. (FYTS)

### Current Adult Tobacco Use

- Current smoking among adults is 19.3% (2011 BRFSS). Current smoking from the BRFSS can no longer be compared to prior years due to significant changes in the weighting of data and the inclusion of cell phones. The change in methodology and the inclusion of cell phones results in a more representative sample of the population of Florida. From 2011 forward, BRFSS data may be compared for trend analysis.
- According to the 2011 BRFSS, 19.3% of Floridians are current smokers. Whites (21.2%) are more likely to smoke than those that identify their race/ethnicity as Hispanic (15.1%). Men are more likely to smoke than women (21.8% vs. 16.9%). Floridians with an income of less



than \$25,000 smoke at a higher rate than those with an income of greater than \$50,000 (25.0% vs 14.7%), and Floridians with less than a high school diploma (28.6%), a high school diploma/GED (22.3%), or some college (19.0%) are more likely to smoke than those with a college degree (10.2%).

- The packs of cigarettes sold annually per person 18 and over in Florida decreased by 6.7% from approximately 62.4 packs per person during fiscal year 2010-2011 to 58.2 during fiscal year 2011-2012 (DBPR)
- The percentage of women who reported smoking during pregnancy decreased from 9.6% in 2009 to 8.1% in 2010. (PRAMS)
- Among adult smokers in Florida, the average number of cigarettes smoked per day by everyday smokers in 2012 was 16.3. This number is slightly less than the average of 16.7 in 2011. Among adults that aren't everyday smokers, average consumption increased from an average of 3 cigarettes per day in the last month during 2011 to 5 per day in 2012. (FLATS)

In 2012, 54.2% of adult smokers tried to quit smoking for one day or longer. This represents no significant change from the 2011 rate of 54.9%. (FLATS)

## Secondhand Smoke Exposure

- The percentage of adults exposed to secondhand smoke in the home during the past week decreased from 9.7% in 2011 to 9.0% in 2012. (FLATS)
- The percentage of adults exposed to secondhand smoke in the car during the past week decreased from 18.3% in 2011 to 11.5% in 2012. (FLATS)
- In 2012, 41.3% of middle school students and 47.6% of high school students were exposed to secondhand smoke in a room or car during the past week. Since 2010, the prevalence of this behavior has decreased by 12.1% among middle school students and by 11.9% among high school students. (FYTS)
- BTFF 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 2012, the Bureau received over 1,200 toll-free calls, responded to 85 complaints for noncompliance, conducted 55 on-site investigations, and initiated 10 administrative proceedings resulting in \$6,500.00 in fines. (These are estimated numbers. Final numbers will be available in January 2013.)



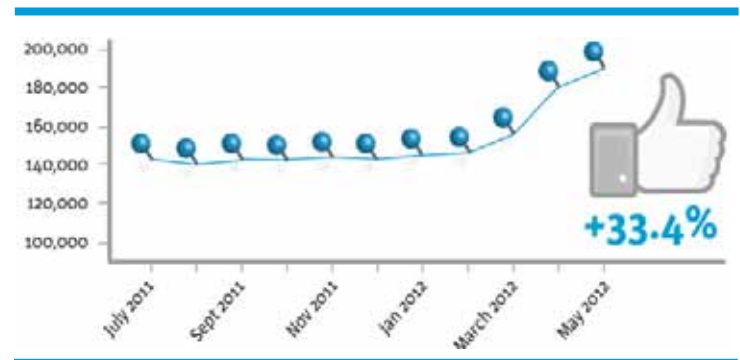
## Evaluation Highlights 2011-2012

Competitively selected independent professional evaluators conduct evaluation of the BTFF program components with Bureau staff providing guidance. The evaluators document gaps and assess strengths and weaknesses of the component they are reviewing. The independent, external evaluators made recommendations at the end of FY 2010-2011, to assist with program planning for FY 2011-2012.

Recommendations from evaluations, all of which have been incorporated into program planning, include:

- Aim for the media buy to reach 800 target rating points (TRPs) per target audience per quarter as recommended by CDC for maintenance periods of the campaign.
- Consider narrowing the focus of advertising for young adults in Florida from the current combined approach of both prevention and cessation media purchases to cessation media purchases only in FY 2012.
- Use mass media strategies to better inform the public about the dangers of new tobacco products.
- Survey community opinion leaders (including elected officials at the municipal and county levels) to assess the importance of the proposed policy changes and current support for tobacco control policy.
- Improve the implementation of the Partnership Self-Assessment Tool (PSAT) to address the identified limitations with the current methodology.
- The overall reach of the Quitline should increase and reduce the variability of callers by geographic region.
- The Quitline should increase the number of contacts per caller and improve the rate of follow-up calls.

- The Area Health Education Center (AHEC) Network, in collaboration with Florida Department of Health, should continue to expand the network of health care organizations that they are assisting in the implementation of tobacco user identification and treatment systems (provider reminder systems).
- The Bureau should consider a targeted or mass media campaign for health professionals.



## Cessation Interventions

During FY 2011-2012, a record number of Floridians received cessation services from Tobacco Free Florida.

- The Florida Quitline and the online option WebCoach served 81,556 people; the highest number ever served with a budget less than that of the previous fiscal year.
- The Florida Quitline quit rate is 31.1percent, remains strong, and meets the 2015 North American Quitline Consortium goal.
- The Area Health Education Centers served 10,104 people; the highest number ever served and held 1,624 tobacco cessation courses.
- The Area Health Education Centers quit rate is 35.4 percent.

Tobacco Free Florida's main cessation focus is the three, free of charge, cessation service options for Floridians interested in quitting tobacco use. Floridians can access cessation resources by calling 1-877-U-CAN-NOW (1-877-822-6669), by clicking online at [tobaccofreeflorida.com](http://tobaccofreeflorida.com), or by coming in to an Area Health Education Center cessation course.

**Three Ways to Quit** is the name used to describe the cessation service options which are described below:

The Florida Quitline is available by telephone at 1-877-U-CAN-NOW (1-877-822-6669).

The Florida Quitline provides tobacco cessation counseling, based on social cognitive theory, free to Floridians ages 11 and over who use tobacco products. In addition to cessation counseling, Floridians ages 18 and over are provided a free two-week nicotine replacement therapy starter kit when it is medically appropriate. The Florida Quitline services are available in all languages as well as TDD for the hearing impaired. Services are provided 24 hours a day, seven days a week, all year with the exception of New Year's Day, Independence Day (July 4th), Thanksgiving, and Christmas. Floridians are eligible to use these free services once every six months.

The online option, or WebCoach, is available through [tobaccofreeflorida.com](http://tobaccofreeflorida.com) and provides several free cessation resources to Floridians ages 13 and older interested in quitting tobacco.

This service appeals to people who prefer to quit on their own, but would like a bit more help and guidance. Through the free online program a personalized, web-based quit plan can be created and discussion forums are available. Motivational and educational e-mails are sent throughout the quit plan. Floridians ages 18 and over are provided a free two-week nicotine replacement therapy starter kit when it is medically appropriate. Floridians are eligible to use these free services once every six months.

The AHECs provide free in-person cessation counseling services in a group format through the six, one-hour "Quit Smoking Now" course or the two-hour "Tools to Quit" course.

Most of the Floridians using the AHEC services are ages 18 and older. Tobacco cessation courses are held in various locations throughout Florida including: hospitals, community clinics, worksites, community centers, and libraries. The AHECs provide free NRT to participants when it is medically appropriate. Floridians may use these free services more frequently than once every six months.

Health care providers and students training to become health care providers are provided training on tobacco use, in accordance with the US Public Health Service's Treating Tobacco Use and Dependence Clinical Practice Guidelines, by the AHECs.

## CDC Grant Information

The Bureau is awarded \$1.8M annually through a five-year cooperative agreement with CDC to address tobacco prevention in the state. Currently in year four of the award, the funding is awarded for capacity building to manage and implement activities and special projects for a comprehensive tobacco prevention program. The activities and special projects enhance and supplement the reach and breadth of tobacco prevention and use activities supported by the tobacco settlement funds in Florida.

The Bureau also received a \$1.3M supplemental award from CDC to extend the reach of the Quitline. Those funds were applied to media to increase the awareness of the Quitline and the availability of services statewide to help smokers quit.

## Administration and Management

The Bureau operates with a minimum number of employees with specific program area or contract management experience and consists of 21 full-time equivalent positions, and three other personal services (OPS) employees. Eighty-one percent of the positions are funded with federal grant funds, not state funding.

**HOW DOES TOBACCO AFFECT MY HEALTH?**

**SMOKING CAUSES CORONARY HEART DISEASE,** the leading cause of death in the U.S.

**SMOKING CAUSES LUNG CANCER AND LUNG DISEASES** including COPD, emphysema, bronchitis, and chronic airway obstruction.

**SMOKING ALSO CAUSES THE FOLLOWING CANCERS:**

- STOMACH CANCER
- CANCER OF THE ORAL CAVITY (MOUTH)
- LUNG CANCER
- ACUTE MYELOID LEUKEMIA
- CANCER OF THE PHARYNX (THROAT)
- KIDNEY CANCER
- CANCER OF THE UTERUS
- CANCER OF THE LARYNX (VOICE BOX)
- CANCER OF THE ESOPHAGUS
- BLADDER CANCER
- CANCER OF THE CERVIX

**SMOKELESS TOBACCO PRODUCTS,** such as spitting tobacco, dip, chew, snuff and snus, are also harmful to your health and aren't a safe alternative to smoking.

**SMOKELESS TOBACCO USE CAN CAUSE THE FOLLOWING CANCERS:**

- STOMACH CANCER
- PANCREAS CANCER
- CANCER OF THE ESOPHAGUS
- CANCER OF THE LARYNX (VOICE BOX)
- CANCER OF THE PHARYNX (THROAT)

**COMPARED TO NON-SMOKERS, SMOKING IS ESTIMATED TO INCREASE THE RISK OF:**

- MEN DEVELOPING LUNG CANCER BY **23x**
- WOMEN DEVELOPING LUNG CANCER BY **13x**
- STROKE BY **2 TO 4x**
- CORONARY HEART DISEASE BY **2 TO 4x**
- CHRONIC OBSTRUCTIVE LUNG DISEASE such as bronchitis and emphysema is **12 TO 13x MORE LIKELY FOR SMOKERS.**

On average, smokers die **13 TO 14 YEARS EARLIER** than non-smokers.

**SPIT TOBACCO CAUSES LEUKOPLAKIA,** a disease of the mouth characterized by white patches and oral lesions on the cheeks, gums, and/or tongue. Leukoplakia occurs in more than half of all users in the first three years of use.

**STUDIES HAVE FOUND THAT 60%-78%** of smokeless tobacco users have oral lesions.

**SMOKELESS TOBACCO USERS HAVE:**

- 80% HIGHER RISK OF ORAL CANCER**
- 60% HIGHER RISK OF PANCREATIC CANCER**

## A Look Ahead

During FY 2012-2013, the Bureau, the Tobacco Advisory Council, grantees, partners and stakeholders will:

- Continue to support local systems and policy change.
- Explore the ramifications of e-cigarette use and recommend policy and legislative language modifications.
- Continue to modify program direction and services based on evaluation data from independent evaluators contracted by the Bureau.
- Review and possibly revise the 2010-2015 Florida Comprehensive Statewide Tobacco Education and Use Prevention Strategic Plan.
- Continue and refine the work of the three subcommittees of the Tobacco Education and Use Prevention Advisory Council (Youth Programs; Health Communications; and Surveillance and Evaluation).

- Work with cessation providers to refine and increase reach of services.
- Seek collaboration opportunities with other Division of Community Health Promotion bureaus, the Office of Minority Health, and other DOH entities.
- Work to ensure that services mandated by the Affordable Care Act and employee wellness programs offer a full range of cessation counseling and treatment options.

Tobacco use is the number one cause of preventable death, taking a substantial toll on families, the health care system and communities in Florida. The Tobacco Free Florida campaign will continue to include a targeted focus on each element of the program and a renewed dedication to achieving a greater return on investment in health savings, personal impact and added value for the people of Florida.





## Appendix A: 2010-2015 Strategic Goals and Objectives



The Bureau continues to work towards meeting the challenges of the future. Through the performance management system outlined by the Department of Health, and in partnership with the Tobacco Advisory Council, the Bureau will revisit its strategic plan, updating it to ensure continued performance measures and accountability. This includes the ongoing collection of data and an ability to address opportunities for improvement.

Tobacco Free Florida presents the following update on its **2010-2015 Strategic Goals and Objectives:**

<b>Goal 1: Prevent Florida's youth and young adults from initiating tobacco use.</b>	
<p><b>Objective 1a:</b> 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.</p>	<p>The number of committed never smokers among Florida's youth has increased by 2.2% from 64.3% in 2011 to 65.7% in 2012.</p>
<b>Goal 2: Promote quitting among Florida's youth and adults.</b>	
<p><b>Objective 2a:</b> By June 30, 2015, reduce current smoking rates among Florida adults by 15 percent from 17.1 percent to 14.5 percent. (Behavioral Risk Factor Surveillance System- BRFSS)</p>	<p>The current smoking rate among Florida's adults is 19.3%. Current smoking from the BRFSS can no longer be compared to prior years due to significant changes in the weighting of data and the inclusion of cell phones. The inclusion of cell phones results in a more representative sample of the population of Florida. From 2011 forward, BRFSS data may be compared for trend analysis.</p>
<p><b>Objective 2b:</b> By June 30, 2015, reduce use of *other tobacco products among Florida adults by 15 percent, from 5.6 percent to 4.76 percent. *Other tobacco products include smokeless tobacco, snus, and cigars.</p>	<p>The number of adults who report using other tobacco products decreased 41.1% from 5.6% in 2010 to 3.3% in 2012 (Florida Adult Tobacco Survey- FLATS)</p>

<p><b>Objective 2c:</b> 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.</p>	<p>Current cigarette use among Florida's youth has decreased by 12.9%, from 7.0% in 2011 to 6.1% in 2012. (FYTS)</p>
<p><b>Objective 2d:</b> 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.</p> <p><i>*Other tobacco products include smokeless tobacco, snus, cigars, flavored cigars, bidis, kreteks, pipe tobacco, flavored tobacco, and hookah.</i></p>	<p>Use of tobacco products other than cigarettes by youth has decreased by 10.4%, from 13.4% in 2011 to 12.0% in 2012. (FYTS)</p>

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

<p><b>Objective 3a:</b> 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.</p>	<p>The percentage of Florida's adults who were exposed to secondhand smoke at home during the past 7 days decreased 7.2% from 9.7% in 2011 to 9.0% in 2012. (Florida Adult Tobacco Survey-FLATS)</p>
<p><b>Objective 3b:</b> 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.</p>	<p>The percent of Florida's youth exposed to secondhand smoke in a room or car decreased 3.9% from 45.9% in 2011 to 44.1% in 2012. (FYTS)</p>



**FLORIDA DEPARTMENT OF HEALTH  
BUREAU OF TOBACCO FREE FLORIDA**



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