

Tennessee Tobacco Settlement Program, Year 1 (2014)

Three program topics, 95 counties through many partnerships move forward. \$5 million allocated to 95 counties. Plan-Do-Check-Act cycles of learning completed for 303 projects.

Reduce pregnancy smoking
Outcome: reduced excess costs of low birth weight births (estimate \$72,000 savings per birth)
3 year State goal: 9% reduction, 935 fewer women smoking during pregnancy



Year 1: \$1,765,000 invested in 79 projects

- 1,244 pregnant women enrolled Baby and Me Tobacco Free (BMTF) and 2,167 pregnant women served in other projects
- 1.5% of deliveries in BMTF were low birth weight babies compared to 9.1% state average
- Health department and private sector providers trained in counseling methods. Quit rates being tracked.

Reduce second hand smoke exposure for children to age 5
Outcome: reduced emergency department use by children for tobacco-induced asthma (average \$1,724 savings per visit)
3 year state goal: 11% reduction, 291 fewer ER visits

- Year 1: \$1,154,000 invested in 54 projects**
- Promote new smoke free spaces: 11 new housing facilities, 144 public parks, athletic and school grounds, 78 new child care facilities
 - 43 medical practices adopt new protocols
 - New media/billboard campaign against smoking in cars with children passengers



Reduce number of eighth graders reporting smoking
Outcome: reduced excess lifetime medical costs (estimated \$127,600 savings per non-smoker)
3 Year goal: 20% reduction, 1,738 fewer children choose to use tobacco



Year 1: \$1,393,000 invested in 123 projects

- Anti-tobacco content integrated into curricula conducted for 47,000 students in 22 counties schools
- Student led peer-to-peer events in 34 counties reaching 26,500 students
- 61,015 students engaged other in-school or after-school tobacco anti-smoking activities

Pregnancy Smoking Strategies

Baby and Me Tobacco Free



67 counties participating
\$635,000 Year 1 Tobacco Settlement investment

Goals for change

- Motivate pregnant women to stop smoking and continue to be smoke-free following pregnancy
- Support other family members to quit smoking or not smoke around pregnant women
- Institutionalize new county health department practice changes for providing directed health education messaging, setting patient quit dates, linking with media messaging, and staff training
- Establish county health departments as location and referral sources for pregnancy smoking services
- Counties report few smoking cessation programs other than the 1-800-QUIT-NOW. This makes it a challenge for women not to start smoking again after delivery.*

By the numbers

- 1,244 pregnant women enrolled
- 145 women completed all four prenatal counselling sessions
- 363 Women dropped from program enrollment *
- 137 total deliveries
- 2 Low birth weight babies (1.5% compared to state 9.1% average)
- 85 women receiving monthly vouchers for diapers for remaining smoke-free
- 74% of enrolled women were established patients of LHD. Program enrolled 252 new patients of whom 59 were referrals from other community providers.
- 1,152 women referred for smoking cessation services.
- *Major reasons for 28% drop outs: lack of family support, other household smokers, stress, apathy/lack of motivation, transportation problems, early delivery.*

From the field

*Our very first participant to complete the program was a 3 year smoker with no children prior to this pregnancy. Although her occupation as a waitress did make it hard on her commitment to quit smoking, after two sessions she was able to blow "smoke free" and embrace the fact that she had quit smoking. During the process of quitting, her boyfriend also decided to join in offering a great support system, and quit smoking as well. On December 30, 2014, she gave birth to a healthy, 9lb. 3 oz. baby boy. She is remaining smoke free and does not feel the need to start smoking again. She found the program very informative and very worth every bit of her time. **Robertson County***

*One participant has been to health department for 3 visits. In September when she started, her first CO level was 18; reduced to 4 at second visit, and 3 at third visit. It has been an exciting, encouraging thing to see her motivation. She also initiated contact with our nutritionist, rather than health department having to contact her. **Hamblen County***

*One county woman reported she is thrilled that her diapers now only cost her about \$3.00 each month. **Carroll County***

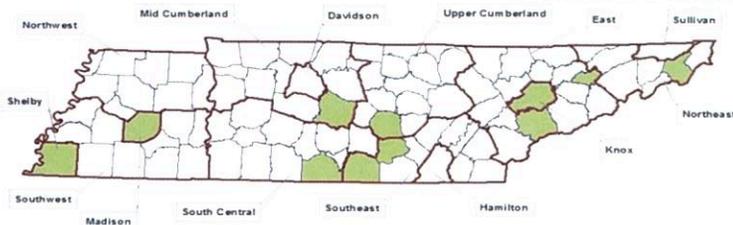
Improvements Identified by Plan-Do-Check-Act Cycles of Learning

- Promote the program throughout the region
- Find ways to involve more families to support tobacco cessation
- Increase incentives for mothers and support from family
- Train all health department staffs in tobacco cessation support roles
- Protocols for active follow-up with participants to ensure success



Pregnancy Smoking Strategies

Other effective practices: TIPS (Tennessee Intervention for Pregnant Smokers), SMART Moms, Colorado Counseling Model, Nurturing Parents, Public CO Screenings and Education



* Other projects include: TIPS (Tennessee Intervention for Pregnant Smokers), SMART Moms, Colorado Counseling Model, Nurturing Parents, and Public CO Screenings and Education

12 Counties
\$246,000 Year 1 Tobacco Settlement invested

Goals for change

Participating women create personal quit plans with assistance of tool kits for practical healthy activities to fight cravings including incentives

Introduce use of Behavioral Health Consultant for individual counseling sessions at county health department

Test different models for engaging county health departments with other community practices to promote reduction in pregnancy smoking

By the numbers

2,167 pregnant women receiving services (varies by project)
 484 defined as program completers
 370 women referred for cessation

80% pregnant women follow-through with counseling, 22% quit smoking

Higher success rate for participants who with counseling and use of self-help guide than those with guide but without counseling.

38 healthcare providers trained in the 5 A's based approach

From the field

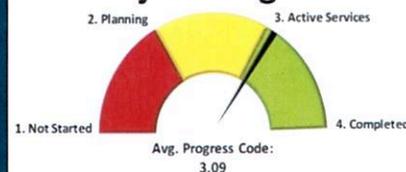
*One participant started the program at 29 weeks pregnant with one child already and smoking cigarettes, cigars, e-cigarettes, and hookah. She has been a smoker for almost 9 years and is under 30 years old. After an informative session where she asked many great questions, she left with the handbook (workbook-type pages and lots of informative sheets) and knowledge to reduce before the next session. She came in for session 2 and had reduced her usage, which is considered a large improvement knowing the long list of tobacco products she used before the first session. **Knox County***

*We had a grandmother who attended the nurturing parenting program. She was a smoker for over 30+ years in her home and car. Her 2 year old asthmatic grandson currently lives in her home. She stopped smoking with our program and made her car and home smoke free. With the program we were able to purchase an air purifier for her home and she has been smoke free now for almost 10 weeks. She also stated blowing a 2 on the CO2 monitor and not a 32 really gave her the "want to" to stop for her health not just her grandson. **Warren County***

Improvements found through Plan-Do-Check-Act Cycles of Learning

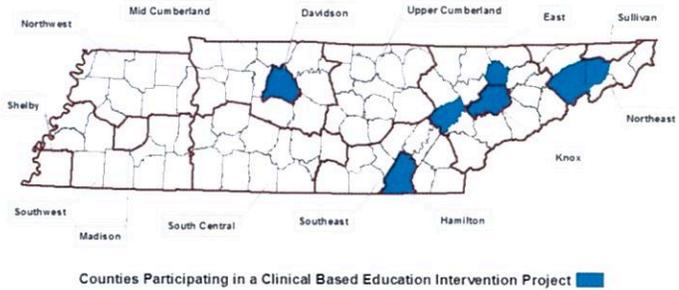
- Start projects sooner in program year
- Do recognition ceremonies for patients who complete the program
- Promote more awareness of projects in the community
- Schedule follow-up phone calls and visits to hospitals to identify patients

Project Progress



Clinical Practice-Based Educational Intervention Projects

Effective practices: CEASE (Clinical Effort Against Secondhand Smoke Exposure), 5As and 2 A+R, "Smoking: Your Choice, Not Mine"



7 counties
\$94,000 Year 1 Tobacco Settlement investment

Goals for change

County health departments partner and engage with community pediatric practices to reduce second hand smoke exposures and pregnancy smoking.

Community pediatric practices adopt new smoking cessation support education protocols.

Parents adopt smoke-free locations (cars, kitchens, porches) around their children.

By the numbers

43 practices involved
 279 practitioners trained
 6,692 children served by pediatric practices

45% of children in practices estimated to be exposed to second hand smoke

New partnerships created with community practices: Birth and Women's Center, UT Medical Center, East Tennessee Children's Hospital, Matthew Walker Community Health Center, Meharry Pediatrics

From the field ...

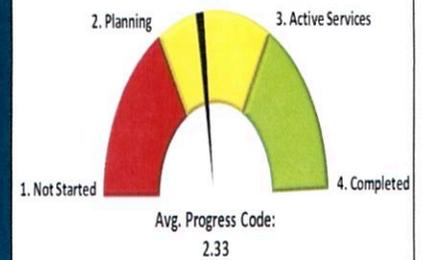
Prior to this project, Lisa Ross Birth and Women's Center representatives served on a pregnancy prevention coalition but did not have an existing partnership with tobacco-related activities. Because of the Power to Quit program participant celebration (baby shower) and the program as a whole, representatives started coming to Smoke Free Knoxville Coalition meetings, welcomed us to provide 5As Training, and expressed interest in other tobacco-related activities. With Hope Resource Center, the opportunity to serve women with the Power to Quit (CO) program and ability to receive the 5As Training started the partnership since no prior partnership existed.

Knox County

Improvements Identified by Plan-Do-Check-Act Cycles of Learning

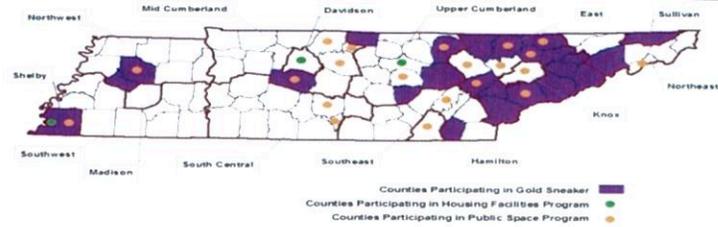
- Offer additional training for partners and develop evaluative research questions for different project models
- Conduct pre- and post-surveys at presentations to assess participant's knowledge about tobacco exposure
- Offer additional participation incentives for practices that guarantee follow-up with patients
- Create different project PowerPoints that describe different behavior change intervention approaches

Project Progress



Promoting Smoke-Free Environments Strategy

Effective practices for housing facilities, child care facilities and public spaces



46 counties

\$193,000 Year 1 Tobacco Settlement Investments

Housing Facilities

Goals for change

Housing facilities adopt smoke-free policies including enforcement to reduce second hand smoke exposure for children under age 5.

Study economic evidence for positive cost-benefit analysis of marketing advantages versus losing tenants

Report resident attitudes about second and third hand smoke.

By the numbers

- 3 counties conduct projects
- 11 housing facilities adopted policies
- 967 units covered through policies including 1100 residents
- Estimate 10% of participating housing unit residents are children under age 5.
- Grandparents in senior housing units frequently care for little children who become exposed to second hand smoke

Child Care Facilities: The Gold Sneaker

Goals for change

Child care facilities adopt smoke free policies to reduce second and third hand smoke exposure

Reduce worker sick days and child absenteeism and general health

Strengthen parental attitudes of the value of smoke free policies in child care facilities

By the numbers

- 24 counties conduct projects
- 54 new child care facilities enrolled in program and received training, incentives and certification as tobacco free facilities. These facilities serve 8,868 preschool children.
- Over half of facilities that adopted were privately owned.
- Less than 20% of child care facilities contacted have enrolled in Gold Sneaker program.

Public Spaces

Goals for change

Support public attitudes against smoking in public spaces that expose general public and children to second hand smoke

Gain acknowledgment that parks and recreation facilities are sources of second hand smoke exposure

Support local policy makers to approve legal changes

Understand public concern about e-cigarettes

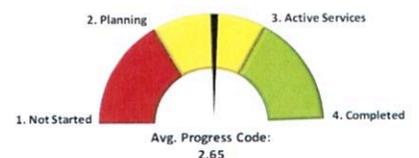
By the numbers

- 19 counties conduct projects
- 212 new smoke-free indoor and outdoor public spaces approved: parks, greenways, athletic fields, recreation facilities, schools, outdoor events, public buildings, libraries.
- 55,415 children affected
- New creative signage created and installed by counties
- Counting cigarette in butts in parks as creative evaluation

Improvements Identified by Plan-Do-Check-Act Cycles of Learning

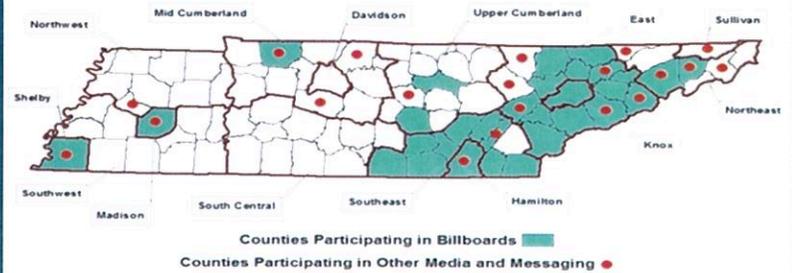
- Identify the "winning arguments" and share across counties
- Contact more private owners to become smoke free complexes.
- Promote understanding of the dangers of second hand smoke for little children including the most common spaces of exposures

Project Progress



Media and Messaging Strategies

Addressing pregnancy smoking, secondhand smoke and helping children to not begin to use tobacco



38 counties
\$372,000 Year 1 Tobacco Settlement invested

Goals for change

- Link smoking behavior to risk of secondhand smoke for others
- Increase awareness of dangers of secondhand smoke on the health of children
- Reinforce health protection messages for health department patients.
- Learn more about marketing and use of media like billboards on public awareness
- Promote use of cessation 1-800-QUIT-NOW
- Improve community awareness of statistics about tobacco use and its health impacts
- Move smokers to contemplative “stage of change”

By the numbers

36 different graphics and/or products created and submitted by counties for statewide sharing

New graphics developed by counties to distribute messages using multiple channels (newspaper ads, TV PSAs, internal school messaging, posters, signs, movie trailers, branded giveaway products and internet blogs)

62 roadside billboards created by counties placed for 5,460 days

2,557,038 people weekly estimated to view billboards in twelve counties

Half of local health department patients had seen second hand smoke roadside billboards, two-thirds of health council members reported seeing billboards



Left: Washington County PSA urging against smokeless tobacco

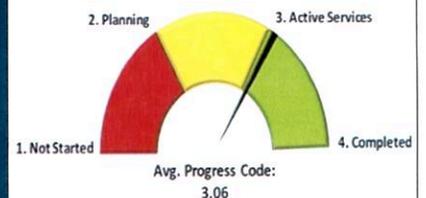
Center: Most popular billboard across the state

Right: Snapshot of CDC ad about low birth-weight babies ran on local TV stations in Montgomery County

Improvements Identified by Plan-Do-Check-Act Cycles of Learning

- Continue to involve county health councils and community partners in development of messages and selection of media
- Collect more data on the overall reach of messages
- Understand types of messages most effective with specific populations
- Continue to use same messages with multiple media for reinforcement

Project Progress



Helping Children to Not Begin to Use Tobacco

Michigan Model using a school-based curricular strategy



28 counties participated
\$286,000 Year 1 Tobacco Settlement invested

Goals for change

- Enable new counties to be involved in using anti-tobacco curriculum (Cumberland, McMinn, Perry, Wilson, Williamson)
- Expand grades for which curriculum offered (Blount, Hamilton, Hickman, Lawrence, Morgan, Putnam, Roane)
- Provide partnership financing for supplies
- Integrate other effective practice interventions in schools: Project TNT, Kick Butts, TATU, Great American Smokeout, Teen Safe Night, Teen Health boards, Healthy Horizons event, etc.

By the numbers

- 65% of health departments provide services in schools
- 100% serve on each other's advisory/policy boards (health councils)
- 100% cooperate in community health improvement projects (PPI projects)
- Project personnel presented to smoking message to key stakeholders:
 - Presentations to school board: 40%
 - Principals/Administrators: 86%
 - Elected Officials: 62%
 - Teachers (as a group): 43%
 - PTA: 18%
- 35,272 students participated (47% grades 1-6, 25% grades 7-8, 27% grades 9-12)

From the field

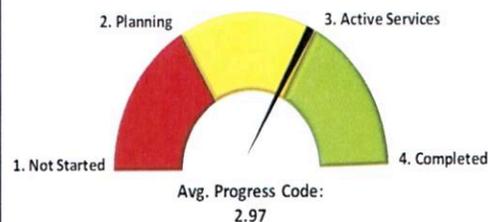
*The relationship between the Health Department and CSH has improved vastly within the last six months with new health department and school personnel involved. Frequent communication is now a part of daily business. **Wayne County***

*The local Brownie troop presented facts to the school board on how secondhand smoke was a danger to students at the local elementary and intermediate schools. As a result, a policy change of tobacco free campuses were adopted by the school board. **Hickman County***

Improvements found through Plan-Do-Check-Act Cycles of Learning

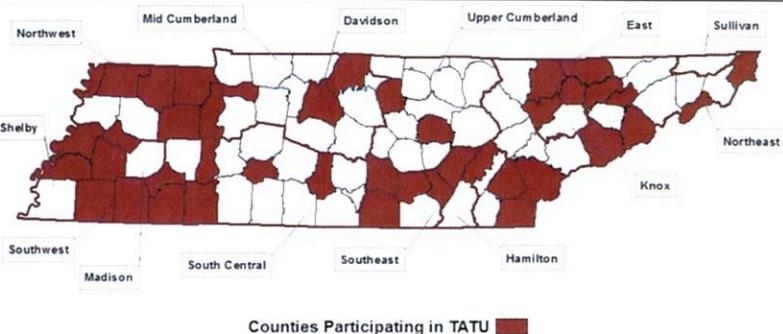
- Make time for more planning and teaching
- Purchase additional instructional materials and media for the curriculum
- Educate all participating parties in teen tobacco statistics
- Facilitate more collaboration with health department and schools
- Create a set schedule or objectives to be agreed upon by school officials and teachers

Project Progress



Helping Children to Not Begin to Use Tobacco

Empowering teens through peer-to-peer education - Teens Against Tobacco Use (TATU)



45 counties participated
\$306,000 Year 1 Tobacco Settlement invested

Goals for change

Partner with community agencies to financially support youth groups to attend training.

LHD provide support in student team projects: financial support for materials, judge contests

Integrate anti-tobacco messages through student organizations such as HOSA, SADD, student health councils and after-school clubs

Student engagement and leadership in presenting anti-tobacco messages in and after school activities

By the numbers

112 adults and 411 high school students trained in delivering anti-tobacco education

23,285 students served (56% grades 1-6, 27% grades 7-8, 17% grades 9-12)

67% of student teams given permission to conduct school hours activities, 80% gained permission for after-school hours

Clear support for student teams: 79% school faculty, 42% school boards, 9% Parent Teach Organizations, 51% local government and 37% of teams received local media coverage

New and continuing community partners: teen advisory boards, Boys and Girls clubs, school districts, drug prevention coalitions, coordinated school health programs, AHEC, churches, UT Extension, and private physician practices

16 uploads of locally produced teen team materials

From the field

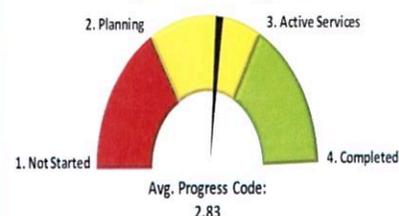
*By empowering the students through the Teen Health Councils and getting students more involved with each other through peer-to-peer education, school officials report more of the at-risk students becoming involved and requesting active roles in school activities and education addressing health risks. **Carroll County***

*The program has helped teen facilitators to become more vocal in their anti-tobacco decision. Program success can be attributed to community and school buy-in and teen counselor participation. **Marshall County***

Improvements Identified by Plan-Do-Check-Act Cycles of Learning

- Improve logistics and quality of student and adult training
- Create additional statewide evaluation measures
- Advertise/promote student-led events before implementation
- Designate the TATU facilitator within schools
- Involve students in planning and promoting

Project Progress



Helping Children to Not Begin to Use Tobacco

Other Effective Projects



40 counties participated
\$226,000 Year 1 Tobacco Settlement invested

Goals for change

Identify and conduct effective practices that engage students in anti-tobacco activities

- Kick Butts
- Health Rocks
- Kidsville Publications
- Great American Smokeout
- Knock Tobacco Out of the Park
- Other locally developed projects

Establish new partnerships through projects: health councils, coordinated school health, ACTION Coalitions, UT and TSU Extension, faith-based entities, local businesses, Boys and Girls clubs, anti-drug coalitions, medical schools, TENNderCare, TNCEPT program, United Healthcare

By the numbers

61,015 student participants

80% of programs gained school permission for this activity during school hours or after school hours (35%)
 80% of programs were supported by faculty/school staff

Examples of changes in student attitudes about starting to use tobacco:

77% of students participating in the LifeMaze (McMinn) indicated attendance helped them make the decision not to use tobacco.

20% of Johnson County students changed their awareness of not considering chewing tobacco (smokeless) to be a safe alternative to cigarettes
 2,077 elementary school students, 164 junior high and 272 staff signed pledge to be Tobacco Free during Red Ribbon Week in Macon County as part of Project TNT

From the field

Students are inquisitive and interested in the TNT tobacco curriculum. The activities offer self-esteem, decision-making and life skills building that can be applied not only in tobacco use, but other risky behavior, as well.

Hardin County

Tobacco use is decreasing in our county at this time. If we keep educating young children and adults, the numbers will keep dropping. The goal is for less and less people to be affected by tobacco and hopefully the numbers will keep going down. **Lincoln County**

Improvements found through Plan-Do-Check-Act Cycles of Learning

- Involve staff, students and community stakeholders in the planning process
- Work with schools to designate a specified time to deliver the full curriculum
- Develop more take-away materials and additional media approaches to reach students
- Improve targeted data-collecting techniques

Project Progress

