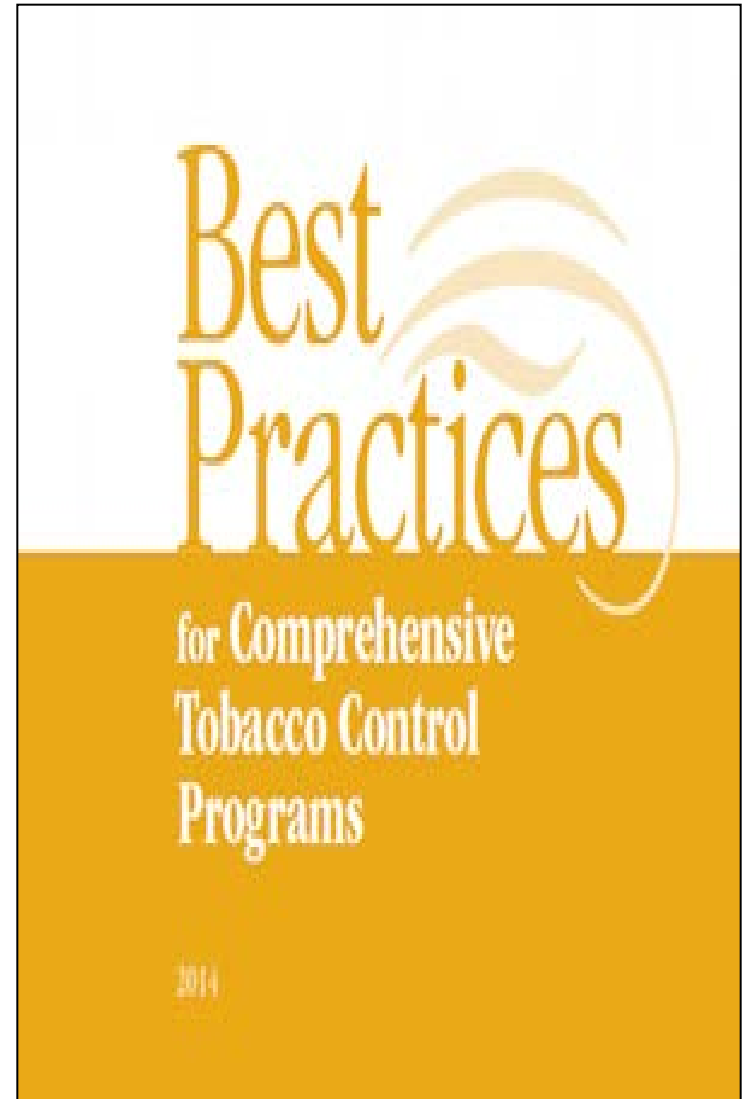


# Comprehensive Tobacco in Texas

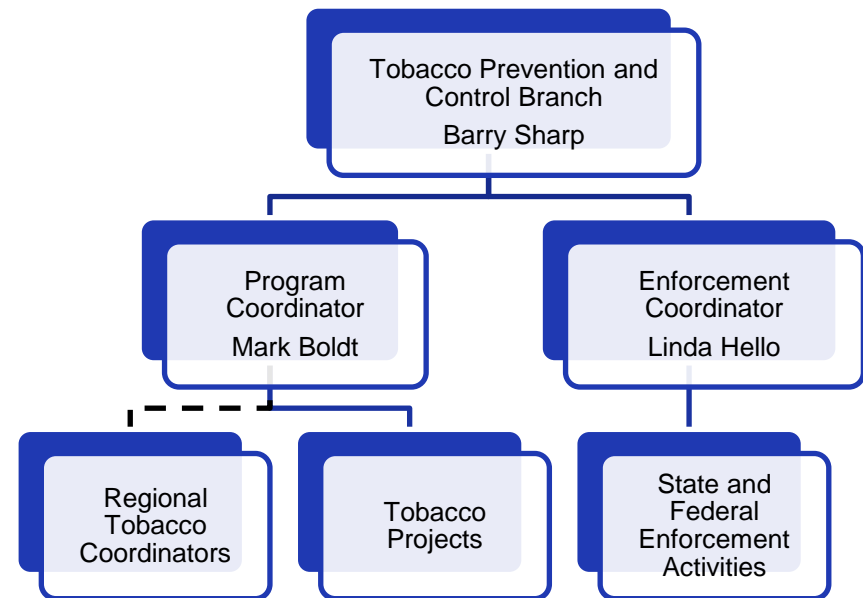
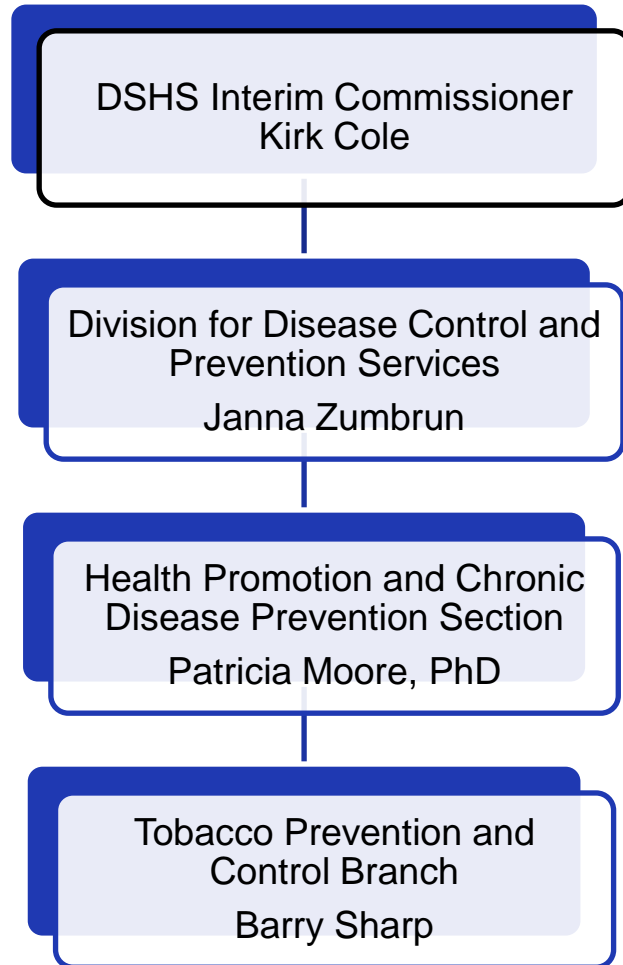
**Barry Sharp, MSHP, MACM, MCHES**  
**Manager**  
**Tobacco Prevention & Control Branch**



- **CDC guidelines**
- **National goals for comprehensive tobacco programs**
  - Prevent initiation
  - Promote quitting
  - Eliminate exposure to secondhand smoke
  - Identify and eliminate tobacco related disparities



# Texas Organizational Structure



**Regional tobacco coordinators are located in Lubbock, Arlington, Tyler, Houston, Temple, San Antonio, Harlingen and El Paso**

# Tobacco is NOT a Puzzle



# Tobacco is a Tapestry



- **Nearly 3,000 youth begin smoking each day**
  - 1/3 will become addicted and die prematurely
- **1,200 people in the U.S. die every day from tobacco related causes**
  - One Texan will die every 22 ½ minutes
- **For every person who dies, 20 will suffer from a tobacco related disease**
- **Federal and State expenditures for treating tobacco related health issues - \$4,983.60 per taxpayer in Texas**

# Everything touches everything



- **Goal: To keep youth and young adults (<24) from initiating the use of tobacco/nicotine products**
- **Methods:**
  - Youth outreach, “Say What!” to engage hundreds of youth advocate groups reaching thousands of youth
  - Youth education through coalitions and Prevention Resource Centers
  - College Peers Against Tobacco initiative
  - Media, Web and Social Media
  - Changing community norms, reducing exposure to secondhand smoke
  - Enforcement of youth tobacco access laws



## • **Challenges**

- **Texas has the highest amount of tobacco advertising than any state in the union**
- **New products coming to the marketplace**
  - Snus
  - Orbs
  - Electronic Nicotine Delivery Systems
- **An ever changing target population**

## • **What You Can Do:**

- **Support environmental changes to support tobacco free living, including clean indoor air policies.**
- **Engage youth groups to become involved in the Say What! movement. Open to school, community and faith youth groups.**
- **Support retailer compliance and local enforcement of state laws regarding youth access and possession of tobacco products. (Funds available for enforcement)**

- **Goal: To help tobacco users wanting to quit be successful in quitting.**
- **Texas Quitline**
  - Cessation counseling via phone, on-line
  - Nicotine replacement therapy for targeted populations, i.e. geographic or high risk
  - Supportive messaging via text option
  - Services available 24/7, English & Spanish live, other languages with translation service
  - New Outreach video to engage deaf and hard of hearing tobacco users

- Clinical Outreach
  - Ask-Advise Refer model
    - On-line tool kit
    - On-line training with continuing education credits
  - eTobacco Protocol
    - Connecting Electronic Health Record system to quitline provider for making referrals
    - On-line training
- Media – CDC and state
- Website, [www.yesquit.org](http://www.yesquit.org)
- Changing community norms, reducing exposure to secondhand smoke

## • **What You Can Do:**

- **Support environmental changes to support tobacco free living, including clean indoor air policies.**
- **Engage local healthcare providers to implement the Ask-Advise-Refer model as part of their treatment of all clients.**
- **Ensure that YOUR insurance providers cover tobacco cessation services with no co-pays for treatment or medications.**

- **Subsets of the population:**
  - Higher risk for tobacco initiation of tobacco use
  - Are impacted by tobacco related diseases disproportionately higher than their prevalence
  - Are using tobacco at rates dramatically higher than the general public
  - Accessing cessation services disproportionately lower levels than the general public
- **Initiatives are integrated into all program areas**
- **Targeted initiatives underway for Hispanic and LGBT populations**

## • **What You Can Do:**

- Support environmental changes to support tobacco free living, including clean indoor air policies.
- Make sure that all segments of your community are engaged health initiatives. Ask yourself, who is not at the table and how do we get them there.
- Use data to identify gaps in services or disparate populations.
- Get comfortable with your uncomfortableness.

- **Adult Prevalence: BRFSS**
- **Youth Prevalence: YTS**
- **Cessation: Quitline utilization reports**
- **Cross-Coalition Evaluation: UT-Austin**
- **State Epidemiological Workgroup**
- **Local evaluators for each funded comprehensive coalition**
- **Office of Surveillance, Evaluation and Research**



- **Austin Staff**

- **Barry Sharp, Manager**
- **Mark Boldt, Coordinator**
- **Linda Hello, Enforcement Coordinator**
- *Jessica Hyde, Comprehensive Cancer (LGBT outreach)*
- *Chelsea Frand, Office of Surveillance, Evaluation and Research (Data)*

- **Regional Staff**

- Jennifer Hasty, Lubbock
- Tammie Harris, Arlington
- Lana Herriman, Tyler
- Vacant, Houston
- Cheryl Hill-Burse, Temple
- Rick Meza, San Antonio
- Becky Zima, El Paso
- Berta Cavazos, Harlingen

- **Funding**

- State activities funded through a variety of state and federal sources
- Each county receives Permanent Tobacco Settlement Funds for unreimbursed health care – Amarillo uses these to fund a comprehensive tobacco program.

- **Coalitions**

- Galveston County
- Brazos County
- Nueces County
- Ellis County
- Red River, Lamar and Rusk Counties
- Waller County
- Angelina and Nacogdoches Counties
- Hidalgo County
- Wichita County

**“Change does not roll in on the wheels of inevitability, but comes through continuous struggle.”**

– Martin Luther King

**“Light yourself on fire with passion and people will come from miles to watch you burn.”**

– John Wesley

**“The nine most terrifying words in the English language are: I’m from the Government, and I’m here to help.”**

– Ronald Reagan



**Thank You!**

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