



2 0
1 2

MISSISSIPPI Tobacco Data

Surveillance & Evaluation services for the MS Comprehensive Tobacco Control Program

FINAL REPORT : JULY 2012

TABLE OF CONTENTS

INTRODUCTION

PAGE TWO

Background
Current Projects

SURVEILLANCE

PAGE FOUR

Highlights
Key Indicators
Smoke-Free Places and Support for Smoke-Free Policies
Youth Smoking
Adult Smoking
Data Sources

FEATURED

PAGE TWENTY-THREE

Interactive Charts
Map and Ordinances
Local Ordinances Compared
Blog

APPENDIX

PAGE TWENTY-FOUR

SURVEILLANCE AND EVALUATION SERVICES FOR THE MISSISSIPPI COMPREHENSIVE TOBACCO CONTROL PROGRAM ARE FUNDED BY A GRANT OF THE MISSISSIPPI STATE DEPARTMENT OF HEALTH. THE OPINIONS EXPRESSED OR IMPLIED IN THIS REPORT ARE THOSE OF THE AUTHORS AND DO NOT NECESSARILY REFLECT THOSE OF THE MISSISSIPPI DEPARTMENT OF HEALTH.

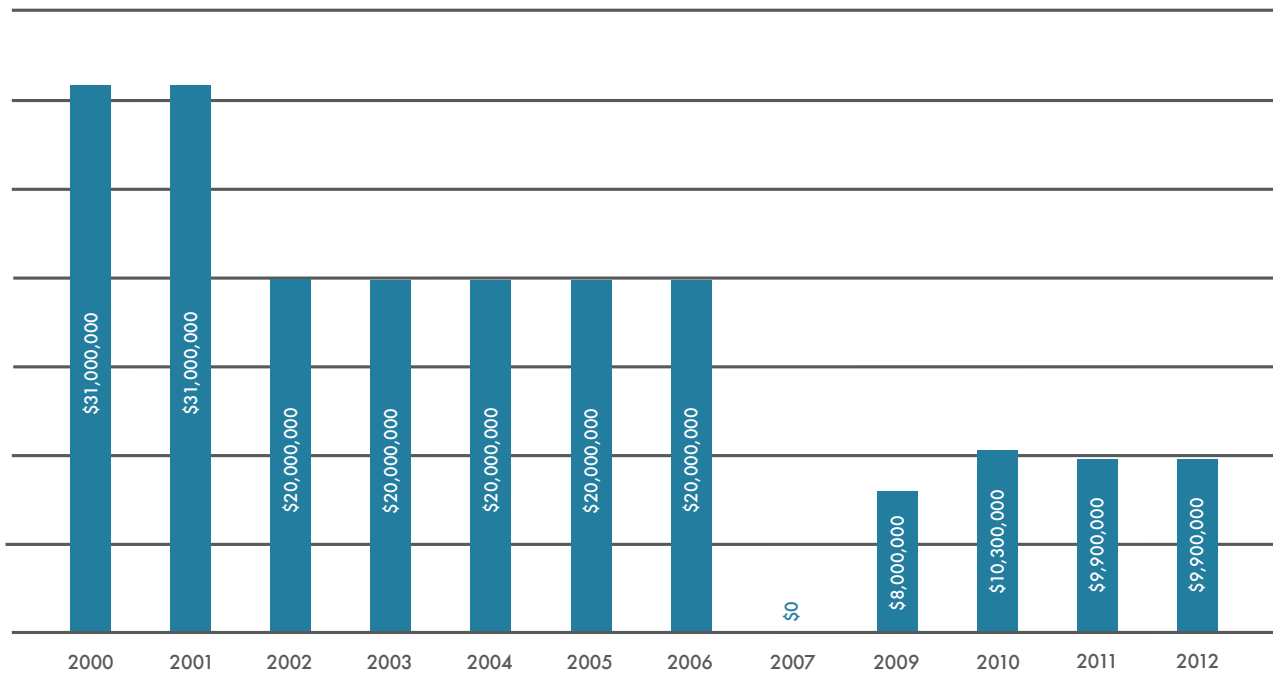
INTRODUCTION

BACKGROUND | 1994-2012

In 1994, Mississippi filed litigation against the tobacco industry that resulted in a \$4 billion dollar settlement for the state. Inherent to the tobacco settlement agreement for Mississippi was a promise to fund prevention and cessation programs designed to reverse the trend of tobacco use in Mississippi. In 1997, Jackson County Chancery Judge William Myers approved an order placing \$62 million in escrow for the state to develop a tobacco prevention pilot program. As directed by the court, Attorney General Mike Moore began assembling public and private organizations to discuss the best features for such a program.

These organizations devised a plan that was presented to the court and approved in 1998. This plan resulted in the formation of The Partnership for a Healthy Mississippi. At the conclusion of the pilot program, approximately \$20 million annually was court ordered to go directly to The Partnership from the state's tobacco settlement. In addition to these funds, The Mississippi Department of Health received funds from the Centers for Disease Control and Prevention through a cooperative agreement to implement and enhance tobacco prevention and cessation efforts.

ANNUAL STATE SPENDING FOR TOBACCO PREVENTION FOR MS | 2000-2012



SOURCE: MISSISSIPPI STATE DEPARTMENT OF HEALTH

INTRODUCTION

BACKGROUND | 2006-2012

Governor Haley Barbour, the state Division of Medicaid, and the Health Care Trust Fund filed motions to vacate the December 2000 order and direct the \$20 million away from tobacco prevention and into the Trust Fund. In May 2006, citing the lack of agreement between the legislative and executive branches regarding funding for tobacco prevention, the Jackson County Chancery Court granted the Governor and Treasurer's motion, denying the tobacco prevention programs access to further funding. In June 2007, the Mississippi Supreme Court upheld the December 2006 order from the Jackson County Chancery Court that determined only the Mississippi Legislature could appropriate funds to tobacco prevention programs.

As of June 1, 2006, counter-marketing campaigns were no longer airing, and the college program for the 18 to 24-year-old market was ended. As of November 30, 2006, the Partnership ceased funding of cessation programs, including a statewide quitline and regional tobacco cessation treatment clinics, law enforcement programs, and numerous statewide and after-school programs.

BACKGROUND | 2007-2010

In 2007, SENATE BILL NO. 2764 called for the development, implementation, and funding of a comprehensive and statewide tobacco education, prevention, and cessation program that is consistent with the Best Practices for Tobacco Control Programs of the federal Centers for Disease Control and

Prevention. The FY2010 allocated \$10.6 million in state funds for tobacco prevention and cessation programs.

CURRENT PROJECT

In March 2008, the MSDH Office of Tobacco Control requested proposals to provide surveillance and evaluation services for the comprehensive tobacco control program. The scope of work was to develop and implement a system of surveillance and evaluation for programs and services administered by the Office of Tobacco Control. This system of surveillance and evaluation was intended to monitor and provide short-term, intermediate, and long-term intervention outcomes to influence program and policy direction, ensure accountability, and demonstrate effectiveness.

The project was awarded to the Social Science Research Center at Mississippi State University on March 30, 2007. This Final Report summarizes our activity toward the development and implementation of this system of surveillance and evaluation during the period between July 1, 2011 and June 30, 2012. This report provides data summaries on key indicators from the surveillance program (more detailed reports from individual data series are included as appendices) and summarizes our progress on this year's Scope of Work. Final Reports from the Evaluation Subcontract and the Media Tracking Subcontract will be provided by the subcontractors.

SOURCE: CAMPAIGN FOR TOBACCO FREE KIDS

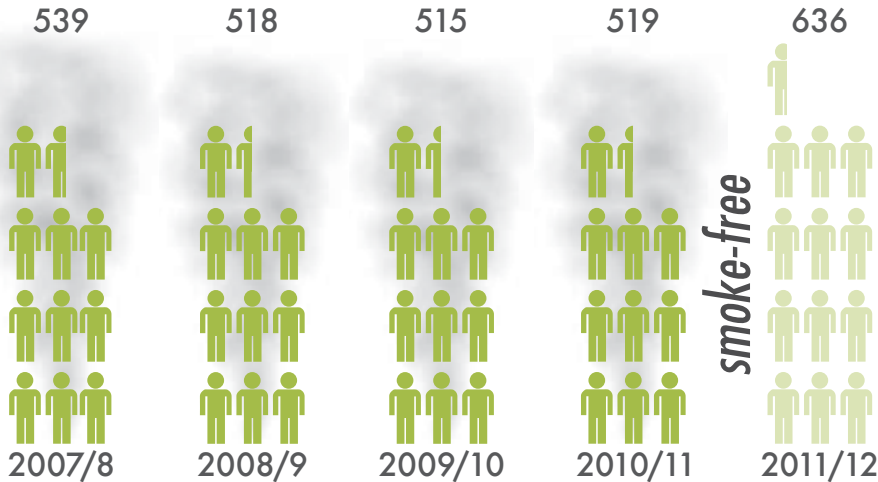
SURVEILLANCE

HIGHLIGHTS

The Palace Casino

GROWTH DURING THE FIRST NINE MONTHS AFTER IMPLEMENTING A SMOKE-FREE POLICY

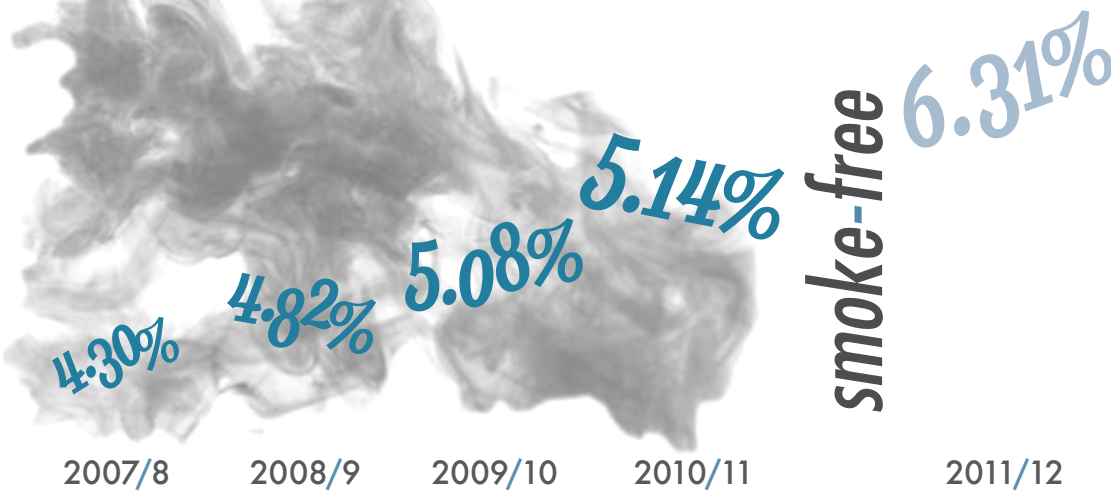
NUMBER OF EMPLOYEES AT THE PALACE CASINO



Number of employees at the Palace Casino *increased by 22%* after going smoke-free.

 = 50 Employees

PERCENT OF TOTAL (COASTAL) EMPLOYEES AT THE PALACE CASINO



Percent of coastal employees who work at the Palace Casino *increased by 31%* after going smoke-free.

The Palace Casino in Biloxi implemented a smoke-free policy when it reopened on June 14, 2011. The casino voluntarily prohibited smoking inside all of the casino facility, with the exception of a smoking lounge located off of the casino floor. The purpose of this brief is to summarize the available data about the potential economic impact of this new policy.

TO VIEW THE TWO FULL REPORTS, PLEASE VISIT THE FOLLOWING LINKS:

[Size of Workforce & Amount of Gaming at the Palace Casino | Before & After Implementing a Smoke-Free Policy](#)
[The Palace Casino | Growth During the First Nine Months After Implementing a Smoke-Free Policy](#)

SURVEILLANCE

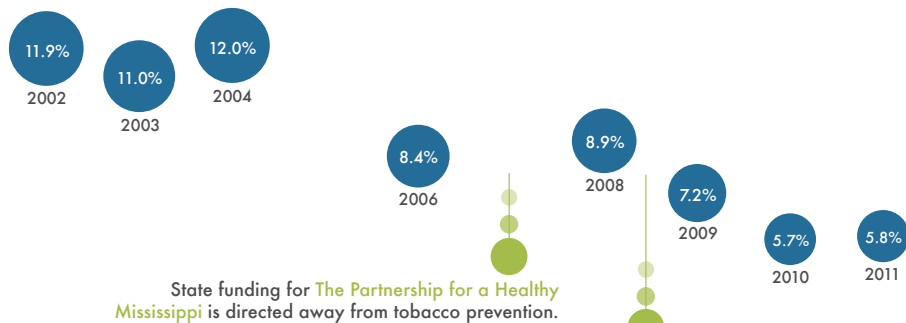
HIGHLIGHTS

Current Cigarette Smoking

MS PUBLIC MIDDLE SCHOOLS



- In 2011, 6,500 Mississippi public middle school students were current smokers.
- The prevalence of current smoking has decreased by 72% since 1998, leading to 16,587 fewer young smokers.
- In the past year, the prevalence of current smoking has not changed significantly.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

Current Cigarette Smoking

MS PUBLIC HIGH SCHOOLS



- In 2011, 25,924 Mississippi public high school students were current smokers.
- The prevalence of current smoking has decreased by 37% since 1998, leading to 15,418 fewer young smokers.
- In the past year, the prevalence of current smoking has not changed significantly.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

CURRENT YOUTH SMOKING

The Mississippi Youth Tobacco Survey demonstrates an approximate 72% reduction in the prevalence of current cigarette smoking among public middle school students from 1998 to 2011 and a 37% reduction among public high school students from 1998 to 2011.

SOURCE: MISSISSIPPI YOUTH TOBACCO SURVEY

SURVEILLANCE

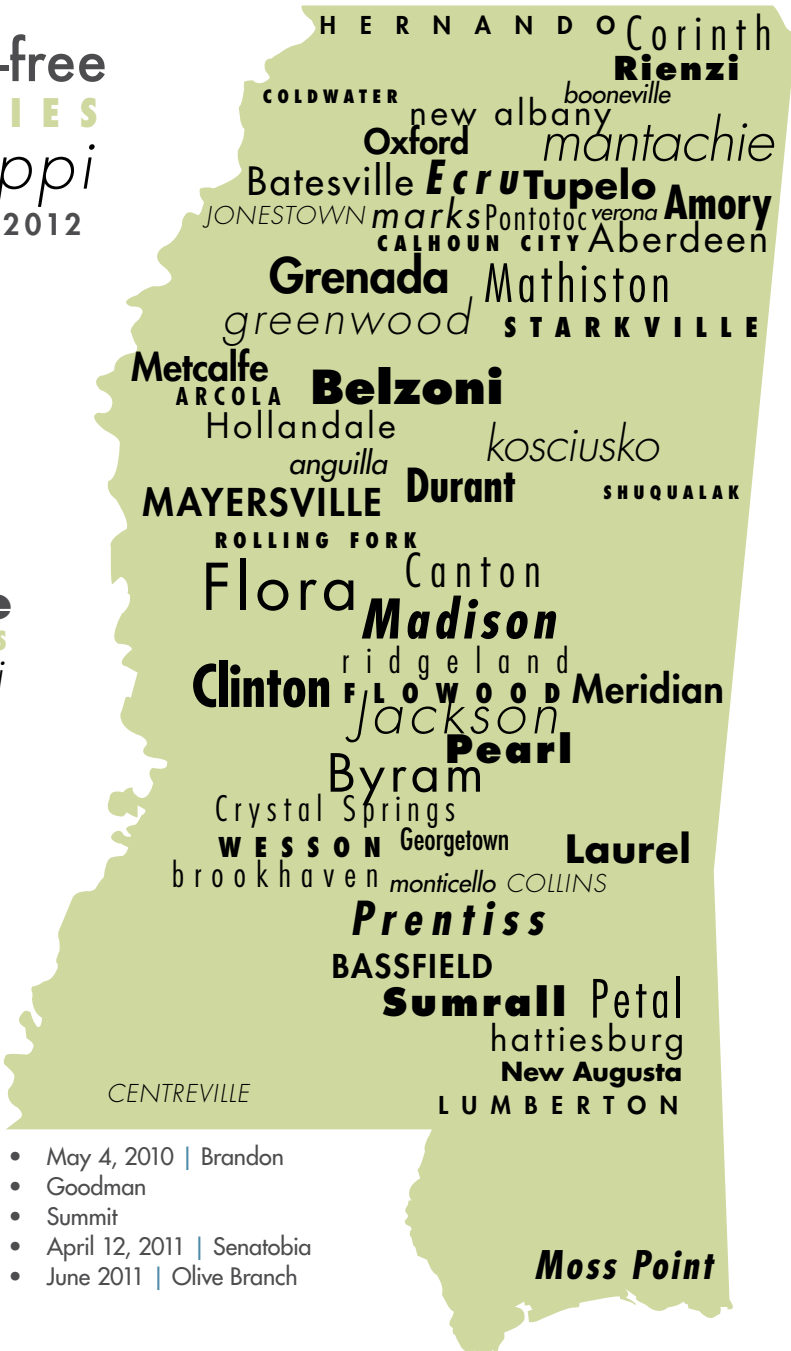
HIGHLIGHTS

100% Smoke-free
COMMUNITIES
in Mississippi
 UPDATED | JUNE 2012

There are **58**
smoke-free
COMMUNITIES
in Mississippi

Partial Smoke-free
COMMUNITIES
in Mississippi

- October 2007 | Greenville
- November 15, 2007 | McComb
- May 1, 2008 | Gulfport
- August 1, 2008 | Walls
- June 26, 2009 | Picayune
- January 6, 2010 | Columbus



- May 4, 2010 | Brandon
- Goodman
- Summit
- April 12, 2011 | Senatobia
- June 2011 | Olive Branch

PROTECTION FROM TOBACCO SMOKE POLLUTION

In 1998, no communities in Mississippi had local smoke-free ordinances for restaurants and/or workplaces. To date, 58 Mississippi communities have enacted comprehensive smoke-free ordinances including Hattiesburg, Oxford, Starkville, and Tupelo. Based on the U.S. Census estimates, 23.73% of Mississippians live in a community with a strong or comprehensive smoke-free law.

SURVEILLANCE

KEY INDICATORS

The key indicators are divided into three sections: 1) Smoke-free places and support for smoke-free places, 2) Youth smoking, and 3) Adult smoking. The first section presents summaries of smoke-free policies, smoke-free homes and workplaces, exposure to secondhand smoke, and public support for smoke-free policies in Mississippi. The second section summarizes prevalence data for current smoking, smoking initiation, and frequent smoking among Mississippi youth. The third section presents data on current smoking, cigarette consumption, and cessation of smoking among Mississippi adults.

Secondhand smoke contains more than 7,000 chemical compounds. Sixty-nine of these toxic chemicals cause cancer.

Smoking cigarettes accounts for one out of every five mortalities, making it the leading preventable cause of death in the United States (CDC, 1994.) However, the effects of secondhand smoke, while substantial, are not as commonly recognized. Diseases acquired through exposure to secondhand smoke account for over 53,000 deaths of nonsmokers each year (Glantz, & Parmley, 1991.) Risks of secondhand smoke include, but are not limited to, increased risk among nonsmokers for lung cancer, heart disease, and respiratory

there is no safe level of exposure to secondhand smoke

“The health effects of secondhand smoke exposure are more pervasive than we previously thought. The scientific evidence is now indisputable: secondhand smoke is not a mere annoyance. It is a serious health hazard that can lead to disease and premature death in children and nonsmoking adults.

We know that secondhand smoke harms people’s health, but many people assume that exposure to secondhand smoke in small doses does not do any significant damage to one’s health. However, science has proven that there is NO risk-free level of exposure to secondhand smoke. Let me say that again: there is no safe level of exposure to secondhand smoke. *Surgeon General Carmona, June 27, 2006*

SMOKE-FREE PLACES AND SUPPORT FOR SMOKE-FREE POLICIES

One of the four primary goals of the Mississippi Comprehensive Tobacco Control Program is to eliminate exposure to secondhand smoke. This section details progress towards this goal.

The California EPA Air Resources Board recently declared secondhand smoke to be a toxic air contaminant, putting this by-product of cigarette smoking in the same category as diesel exhaust and arsenic.

illness (California Environmental Protection Agency, 1997; United States Department of Health and Human Services, 1986.) While smoking cigarettes is a choice left up to the individual, secondhand smoke is often not presented as a choice for those being exposed, leaving individuals—from babies to seniors—vulnerable not only to the immediate effects of secondhand smoke, but also to the health complications it can cause.

SURVEILLANCE

SMOKE-FREE PLACES & SUPPORT FOR SMOKE-FREE POLICIES

100% Smoke-free COMMUNITIES in Mississippi TIMELINE DATA

key	YEAR	LOCAL ORDINANCES	DATE IMPLEMENTED	% OF MS POP. PROTECTED
	2002	METCALFE	SEPTEMBER 3RD	0.04%
	2005	MAYERSVILLE	SEPTEMBER 17TH	0.06%
	2006	STARKVILLE	MAY 20TH	0.90%
	2006	TUPELO	OCTOBER 5TH	2.11%
	2006	MANTACHIE	NOVEMBER 5TH	2.15%
	2006	OXFORD	NOVEMBER 17TH	2.82%
	2007	HATTIESBURG	JANUARY 1ST	4.43%
	2007	HERNANDO	MARCH 8TH	4.93%
	2007	ABERDEEN	MARCH 22ND	5.13%
	2007	MATHISTON	APRIL 15TH	5.15%
	2007	RIDGELAND	JULY 19TH	6.00%
	2007	GREENWOOD	AUGUST 17TH	6.53%
	2007	KOSCIUSKO	NOVEMBER 2ND	6.79%
	2007	AMORY	NOVEMBER 2ND	7.05%
	2007	CORINTH	NOVEMBER 6TH	7.56%
	2007	FLORA	DECEMBER 13TH	7.63%
	2007	PETAL	DECEMBER 20TH	7.99%
	2008	ECRU	MARCH 12TH	8.02%
	2008	PONTOTOC	MAY 1ST	8.22%
	2008	COLLINS	JUNE 8TH	8.31%
	2008	CLINTON	AUGUST 14TH	9.20%
	2008	LAUREL	DECEMBER 4TH	9.85%
	2009	GRENADA	JANUARY 8TH	10.31%
	2009	HOLLANDALE	DECEMBER 3RD	10.41%
	2010	MERIDIAN	FEBRUARY 19TH	11.85%
	2010	BATESVILLE	MARCH 4TH	12.10%
	2010	BASSFIELD	MARCH 10TH	12.11%
	2010	PRENTISS	APRIL 17TH	12.16%
	2010	LUMBERTON	JUNE 1ST	12.23%
	2010	MADISON	JUNE 1ST	12.75%
	2010	SUMRALL	JUNE 1ST	12.79%
	2010	CRYSTAL SPRINGS	JUNE 15TH	12.99%
	2010	JACKSON	JULY 1ST	19.20%
	2010	WESSON	JULY 1ST	19.26%
	2010	BELZONI	JULY 1ST	19.35%
	2010	PEARL	SEPTEMBER 1ST	20.13%
	2010	JONESTOWN	OCTOBER 11TH	20.19%
	2011	RIENZI	JANUARY 1ST	20.20%
	2011	FLOWOOD	MAY 4TH	20.36%
	2011	MARKS	JULY 14TH	20.42%
	2011	CALHOUN CITY	SEPTEMBER 2ND	20.49%
	2011	BROOKHAVEN	NOVEMBER 17TH	20.93%
	2011	CENTREVILLE	NOVEMBER 17TH	20.99%
	2011	NEW ALBANY	DECEMBER 1ST	21.27%
	2011	COLDWATER	DECEMBER 1ST	21.33%
	2011	BYRAM	DECEMBER 7TH	21.73%
	2011	ROLLING FORK	DECEMBER 15TH	21.81%
	2012	MONTICELLO	JANUARY 18TH	21.86%
	2012	CANTON	JANUARY 19TH	22.33%
	2012	GEORGETOWN	MARCH 12TH	22.35%
	2012	ANGUILLA	MARCH 28TH	22.38%
	2012	DURANT	MAY 4TH	22.47%
	2012	VERONA	MAY 4TH	22.58%
	2012	ARCOLA	MAY 9TH	22.60%
	2012	BOONEVILLE	JUNE 1ST	23.21%
	2012	SHUQUALAK	JUNE 1ST	23.23%
	2012	NEW AUGUSTA	TBD	23.25%
	2012	MOSS POINT	JUNE 14TH	23.73%

SMOKE-FREE LAWS & ORDINANCES

Many states have passed comprehensive smoke-free laws. These laws prohibit smoking in 100% of all indoor public places. Specifically, these laws contain no provisions for exemptions for certain types of businesses or certain business hours. As of July 2012, 37 states and commonwealths have enacted comprehensive smoke-free laws for restaurants and 31 states and commonwealths have enacted comprehensive smoke-free laws for bars. Tennessee, Georgia, and Arkansas have also passed state-wide laws, but their smoke-free laws are not comprehensive. Restaurants that do not serve or employ minors are exempt in these three states. In addition to the states with comprehensive smoke-free laws, 506 communities have a comprehensive smoke-free ordinance that prohibits smoking in workplaces, restaurants, and bars. Currently, almost half (48%) of the U.S. population lives in a state or a community that has a comprehensive smoke-free law for worksites, restaurants, and bars.

Although much of the southeastern U.S. has passed strong smoke-free laws over the past several years, Mississippi has not passed any

state-wide legislation that would apply to indoor work areas, restaurants, or bars. Presently, state legislation on smoking is limited to two laws: 1) smoking is not allowed on school grounds and 2) smoking is not allowed in government-owned buildings. Forty Mississippi communities have enacted comprehensive smoke-free ordinances for all indoor public places, including restaurants and bars. These local ordinances protect 19.84% of the Mississippi population.

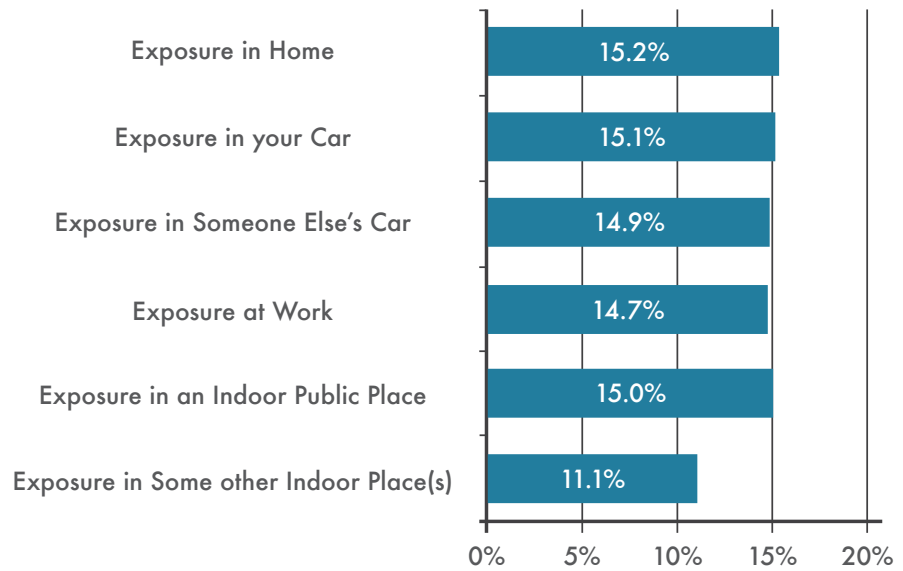
In addition, Brandon, Columbus, Goodman, Greenville, Gulfport, McComb, Olive Branch, Picayune, Senatobia, Summit, and Walls have passed smoke-free ordinances that include significant exemptions.

SURVEILLANCE

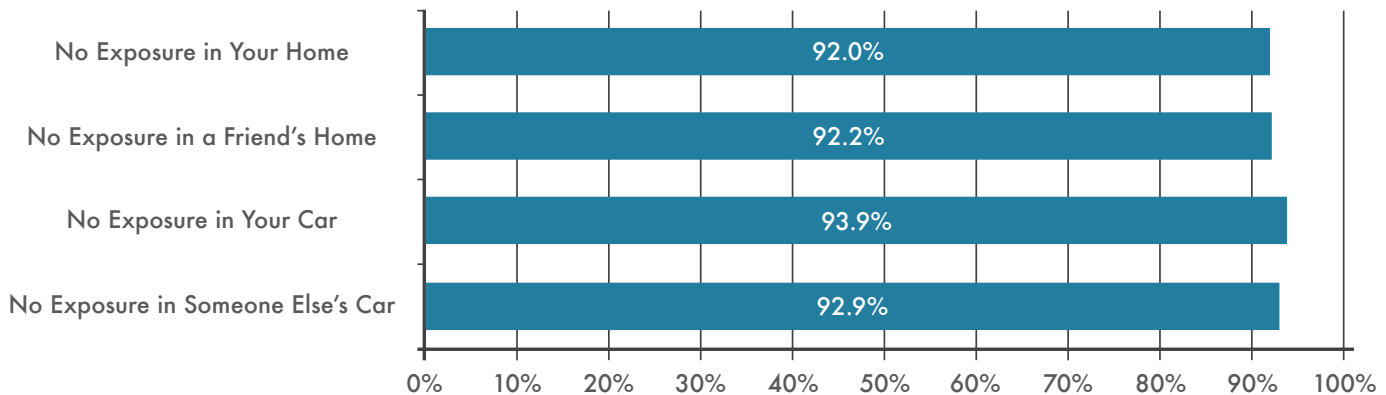
EXPOSURE TO SECONDHAND SMOKE

PERCENT OF MS ADULTS WHO WERE EXPOSED TO SECONDHAND SMOKE IN THE PAST SEVEN DAYS

ADULTS
Many Mississippi adults continue to report being exposed to secondhand smoke in the past seven days.



PERCENT OF MS PARENTS WHO REPORT THAT THEIR CHILDREN WERE NOT EXPOSED TO SECONDHAND SMOKE IN THE PAST SEVEN DAYS



YOUTH

Based on parental reports, the majority of Mississippi youth have not been exposed to secondhand smoke in the past seven days. However, up to 8% of Mississippi children were exposed in their home or a relative's home.

SOURCE: 2011 MISSISSIPPI SOCIAL CLIMATE SURVEY OF TOBACCO CONTROL

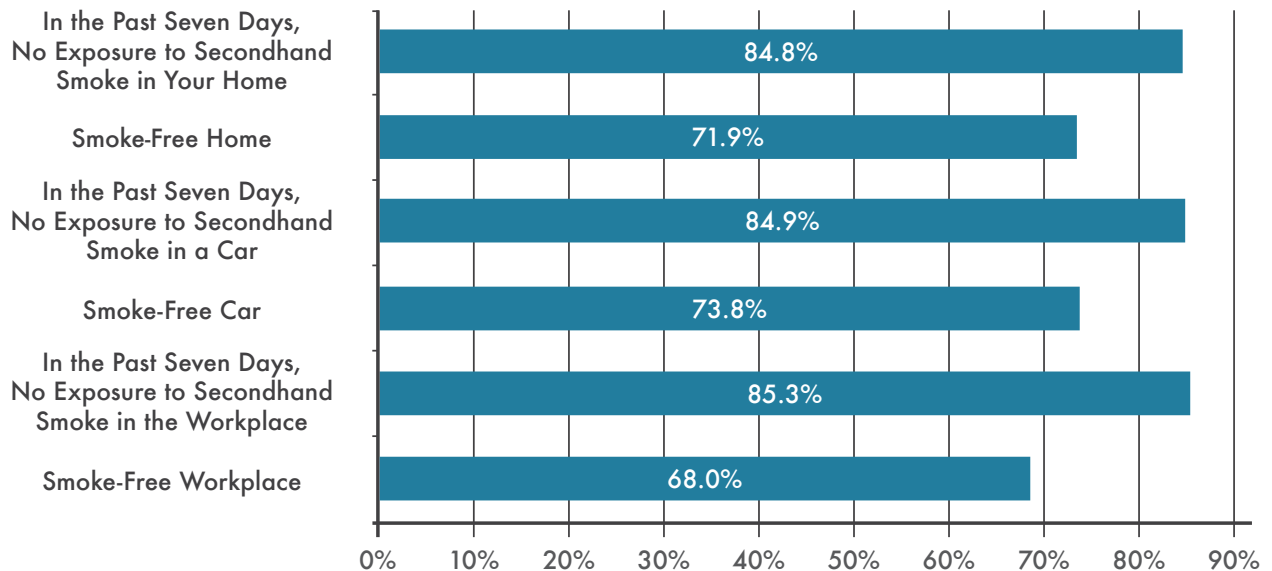
SURVEILLANCE

SMOKE-FREE HOMES & WORKSITES | SUPPORT FOR SMOKE-FREE POLICIES

Information about smoking bans and levels of support for smoking bans was collected from the Social Climate Survey of Tobacco Control, which was administered by the Social Science Research Center at Mississippi State University.

The 2011 Mississippi Social Climate Survey of Tobacco Control reduces noncoverage bias due to wireless substitution by including two sampling frames, an RDD frame of households with a landline telephone and an address-based frame that includes all households that receive deliveries from the US Postal Service. Both sample frames represent the civilian, non-institutionalized adult population over age 18. The overall sample was weighted by race, gender, and age based on the most current U.S. Census estimates.

SMOKE-FREE HOMES AND WORKSITES



SMOKE-FREE HOMES & WORKSITES

The majority of Mississippians live and work in places that do not allow indoor smoking. Results from the 2011 Mississippi Social Climate Survey of Tobacco Control indicate that almost nine-tenths of Mississippi adults (85.3%) work in places that do not allow smoking in indoor places, and almost three-quarters (71.9%/ 73.8%) do not allow smoking inside of their homes or their cars.

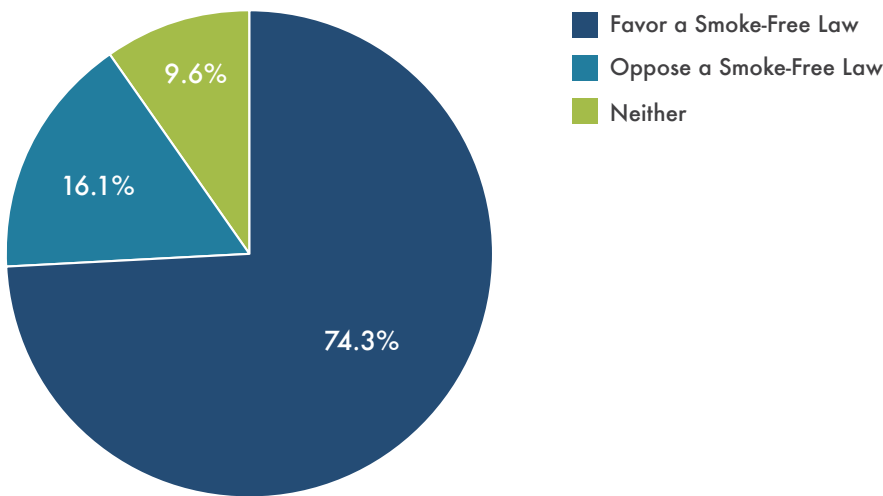
SOURCE: 2011 MISSISSIPPI SOCIAL CLIMATE SURVEY OF TOBACCO CONTROL

SURVEILLANCE

SMOKE-FREE HOMES & WORKSITES | SUPPORT FOR SMOKE-FREE POLICIES

SUPPORT FOR SMOKE-FREE LAWS

Would you favor or oppose a law in Mississippi prohibiting smoking in most public places, including workplaces, offices, restaurants, and bars?



PUBLIC SUPPORT FOR SMOKE-FREE POLICIES IN MISSISSIPPI

Almost 3/4 of Mississippi adults favor a law in Mississippi prohibiting smoking in most public places, including workplaces, offices, restaurants, and bars. Results from the Social Climate Survey of Tobacco Control also revealed that smoke-free public places are an issue with substantial bipartisan support among Mississippi adults. The majority of Republicans and Democrats stated that these public places should be smoke-free.

SUMMARY

Currently, 48.6% of the U.S. population lives in a state or a community that has a comprehensive smoke-free law, and most of the southeastern states have enacted statewide smoke-free laws. Yet, only 23.73% of Mississippians are protected by law from secondhand smoke. Mississippi has not passed any state-wide legislation that would apply to indoor work areas, restaurants, or bars. However, most Mississippians live in homes and are employed in worksites that prohibit smoking; and the majority of Republicans and Democrats believe that smoking should not be allowed inside of restaurants.

SOURCE: 2011 MISSISSIPPI SOCIAL CLIMATE SURVEY OF TOBACCO CONTROL

SURVEILLANCE

YOUTH SMOKING

The Youth Tobacco Survey (YTS) and the Youth Risk Behavior Surveillance Systems (YRBSS) are the primary data sources for monitoring tobacco control issues related to youth. These data series share many characteristics: 1) the Centers for Disease Control and Prevention developed and support these data series, 2) these are school-based surveys, 3) schools and classrooms are randomly selected using the same sampling protocols, and 4) both surveys measure smoking status using the same questions. There are also some differences: 1) the YTS assesses students' knowledge, attitudes, and behaviors related to tobacco use and exposure to secondhand smoke; whereas the YRBSS only assesses students' behaviors related to tobacco use, 2) the YTS is typically administered to 6-12 grade students; whereas the YRBSS is typically administered to 9-12 grade students, 3) the YRBSS is administered in the spring semester of odd years, and 4) the YRBSS is not typically administered in private schools; whereas the YTS is administered in private schools (in some years.) This report presents data from the YTS, given that this data set is specific to tobacco. However, more detailed reports from both the YTS and the YRBSS are attached and listed in the Appendix.

Mississippi has experienced a substantial decrease in the prevalence of current cigarette smoking in the years following the implementation of a statewide comprehensive tobacco control program. From 1998 to 2011, the prevalence of current smokers decreased by 37% among public high school students and decreased by 72% among public middle school students.

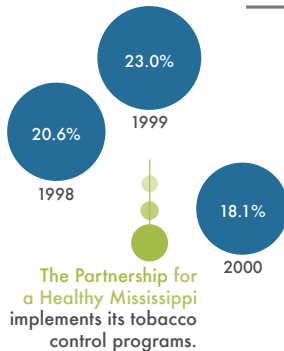
SOURCE: MISSISSIPPI YOUTH TOBACCO SURVEY

SURVEILLANCE

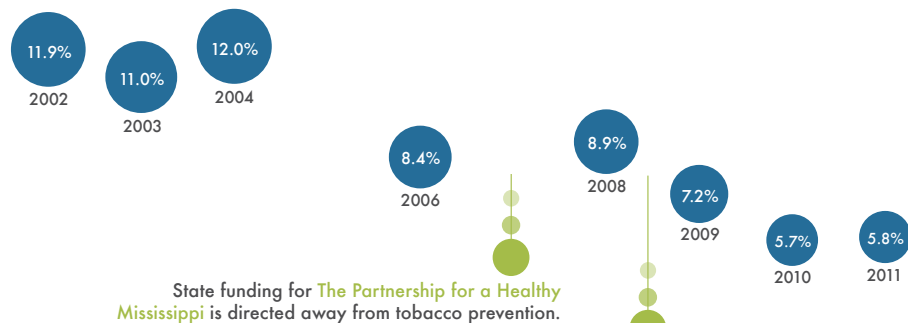
YOUTH SMOKING

Current Cigarette Smoking

MS PUBLIC MIDDLE SCHOOLS



- In 2011, 6,500 Mississippi public middle school students were current smokers.
- The prevalence of current smoking has decreased by 72% since 1998, leading to 16,587 fewer young smokers.
- In the past year, the prevalence of current smoking has not changed significantly.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

Current Cigarette Smoking

MS PUBLIC HIGH SCHOOLS



- In 2011, 25,924 Mississippi public high school students were current smokers.
- The prevalence of current smoking has decreased by 37% since 1998, leading to 15,418 fewer young smokers.
- In the past year, the prevalence of current smoking has not changed significantly.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

CURRENT YOUTH SMOKING

The Mississippi Youth Tobacco Survey demonstrates an approximate 72% reduction in the prevalence of current cigarette smoking among public middle school students from 1998 to 2011 and a 37% reduction among public high school students from 1998 to 2011.

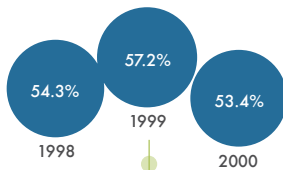
SOURCE: MISSISSIPPI YOUTH TOBACCO SURVEY

SURVEILLANCE

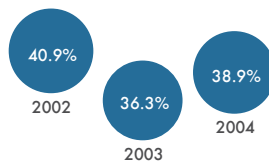
YOUTH SMOKING

Ever Tried a Cigarette

MS PUBLIC MIDDLE SCHOOLS



The Partnership for a Healthy Mississippi implements its tobacco control programs.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.



Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.



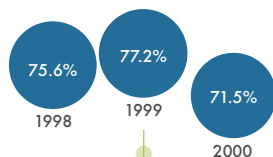
In 2011, 26,113 Mississippi public middle school students had tried at least one cigarette.

The prevalence of having ever tried a cigarette has decreased by 57% since 1998, leading to 34,742 fewer middle school students who have tried smoking.

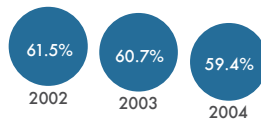
In the past year, the prevalence of having ever tried smoking has not changed significantly.

Ever Tried a Cigarette

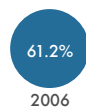
MS PUBLIC HIGH SCHOOLS



The Partnership for a Healthy Mississippi implements its tobacco control programs.



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.



Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.



In 2011, 63,854 Mississippi public high school students had tried at least one cigarette.

The prevalence of having ever tried a cigarette has decreased by 38% since 1998, leading to 39,295 fewer high school students who have tried smoking.

In the past year, the prevalence of having ever tried smoking has not changed significantly.

SMOKING INITIATION

Preventing initiation of tobacco use among youth is one of the primary goals of a comprehensive tobacco control program. Efforts toward preventing initiation among middle school students have been followed by a 57% reduction in the number of students who have tried smoking. The number of high school students who have tried smoking has decreased by 38%.

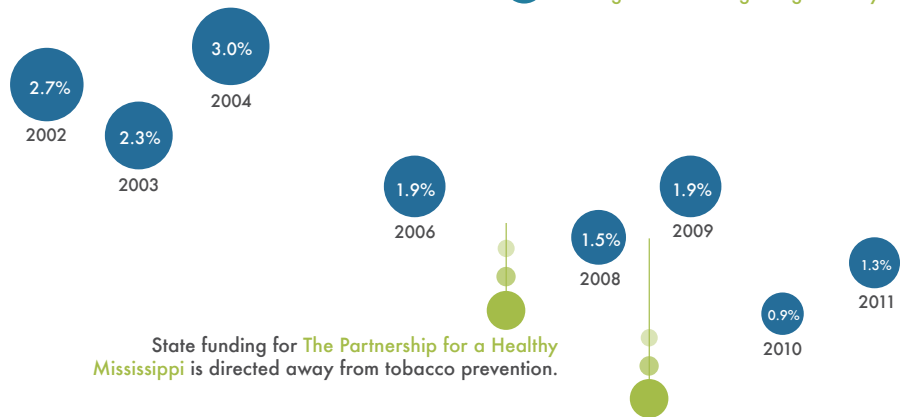
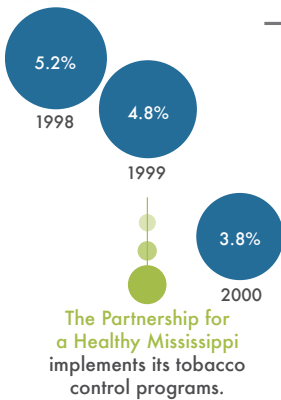
SOURCE: MISSISSIPPI YOUTH TOBACCO SURVEY

SURVEILLANCE

YOUTH SMOKING

Frequent Cigarette Smoking

MS PUBLIC MIDDLE SCHOOLS



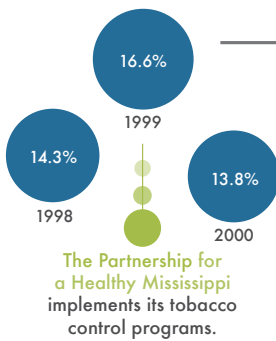
State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

- In 2011, 1,457 Mississippi public middle school students had smoked cigarettes on at least 20 of the past 30 days.
- The prevalence of frequent smoking has decreased by 75% since 1998, leading to 4,371 fewer middle school students who are frequent smokers.
- In the past year, the prevalence of frequent smoking has not changed significantly.

Frequent Cigarette Smoking

MS PUBLIC HIGH SCHOOLS



State funding for The Partnership for a Healthy Mississippi is directed away from tobacco prevention.

Comprehensive and statewide tobacco education, prevention, and cessation programs are implemented by the Office of Tobacco Control, Mississippi State Department of Health.

- In 2011, 8,869 Mississippi public high school students had smoked cigarettes on at least 20 of the past 30 days.
- The prevalence of frequent smoking has decreased by 55% since 1998, leading to 10,642 fewer high school students who are frequent smokers.
- In the past year, the prevalence of frequent smoking has not changed significantly.

FREQUENT SMOKING

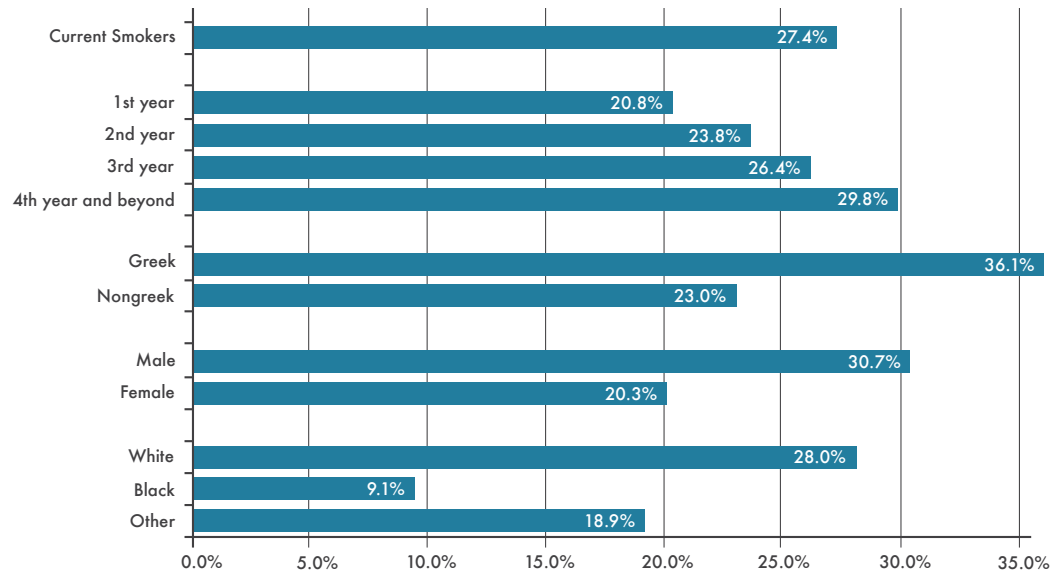
In 1998, more than 14% of high school students reported having smoked cigarettes on at least 20 of the past 30 days. The prevalence of frequent smoking decreased by 55% from 1998 to 2011. Frequent smoking among middle school students decreased by 75%.

SOURCE: MISSISSIPPI YOUTH TOBACCO SURVEY

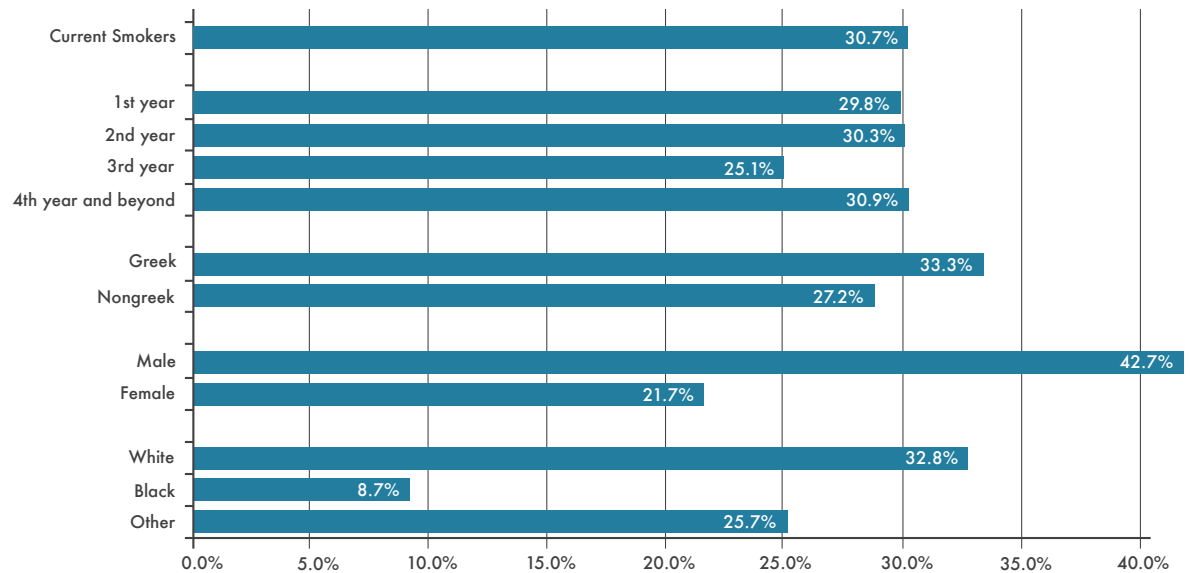
SURVEILLANCE

UNIVERSITY STUDENT SMOKING

Mississippi State University



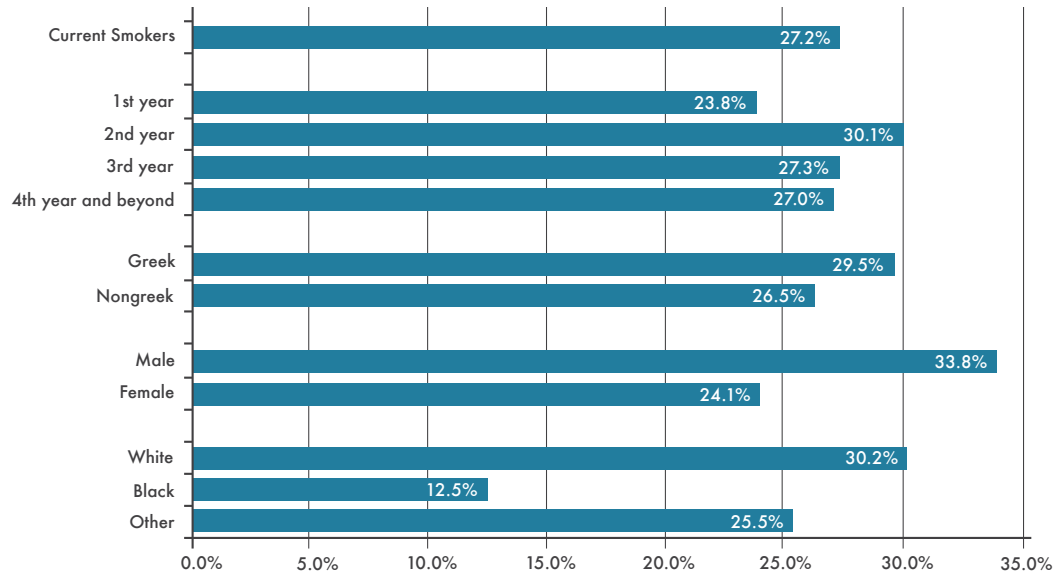
University of Mississippi



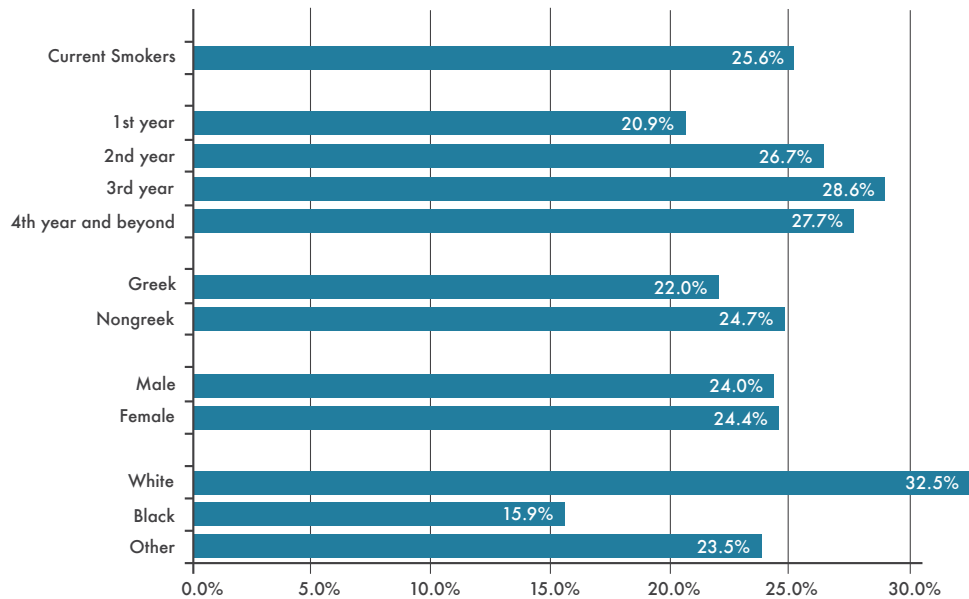
SURVEILLANCE

UNIVERSITY STUDENT SMOKING

University of Southern Mississippi



Hinds Community College



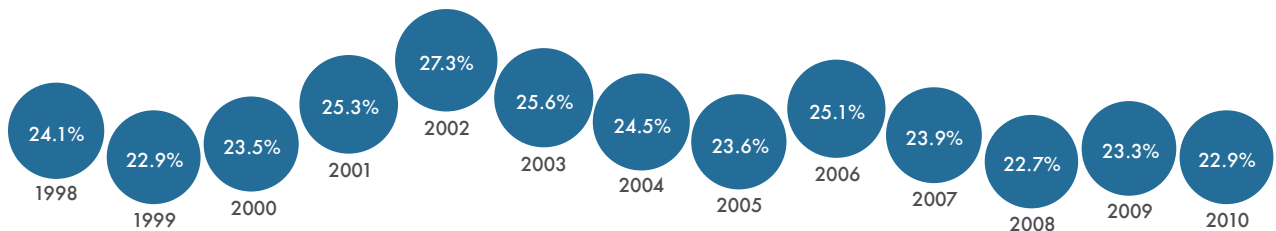
UNIVERSITY STUDENT SMOKING

Cigarette smoking among students at these institutions is higher among males than females and is higher among white students than nonwhite students.

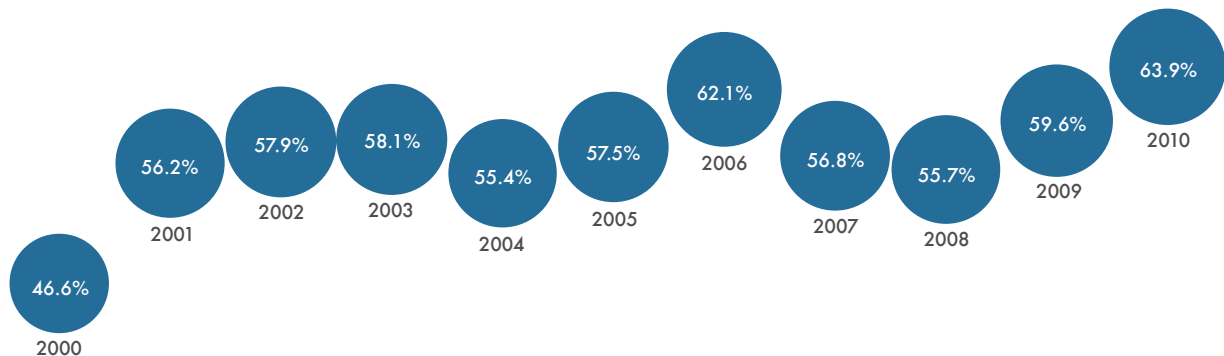
SURVEILLANCE

ADULT SMOKING

CURRENT SMOKING AMONG MS ADULTS



SMOKING CESSATION AMONG MS ADULTS



The Behavioral Risk Factor Surveillance System (BRFSS) is an annual state-based system of health surveys that were developed and conducted in order to monitor state-level prevalence of the major behavioral risks among adults associated with premature morbidity and mortality, and includes measures for current cigarette smoking and smoking cessation. The Social Climate Survey of Tobacco Control (SCS-TC) and the Tobacco Use Supplement to the Current Population Survey (TUS-CPS) provide more detailed data on attitudes and practices, however the BRFSS is the standard for estimating the prevalence of smoking in each of the states. More detailed reports from both the SCS-TC and the TUS-CPS are attached and listed in the Appendix.

CURRENT SMOKING

The prevalence of current smoking among Mississippi adults has centered around 25% for the past ten years, while decreasing steadily among U.S. adults from 2002 to 2010.

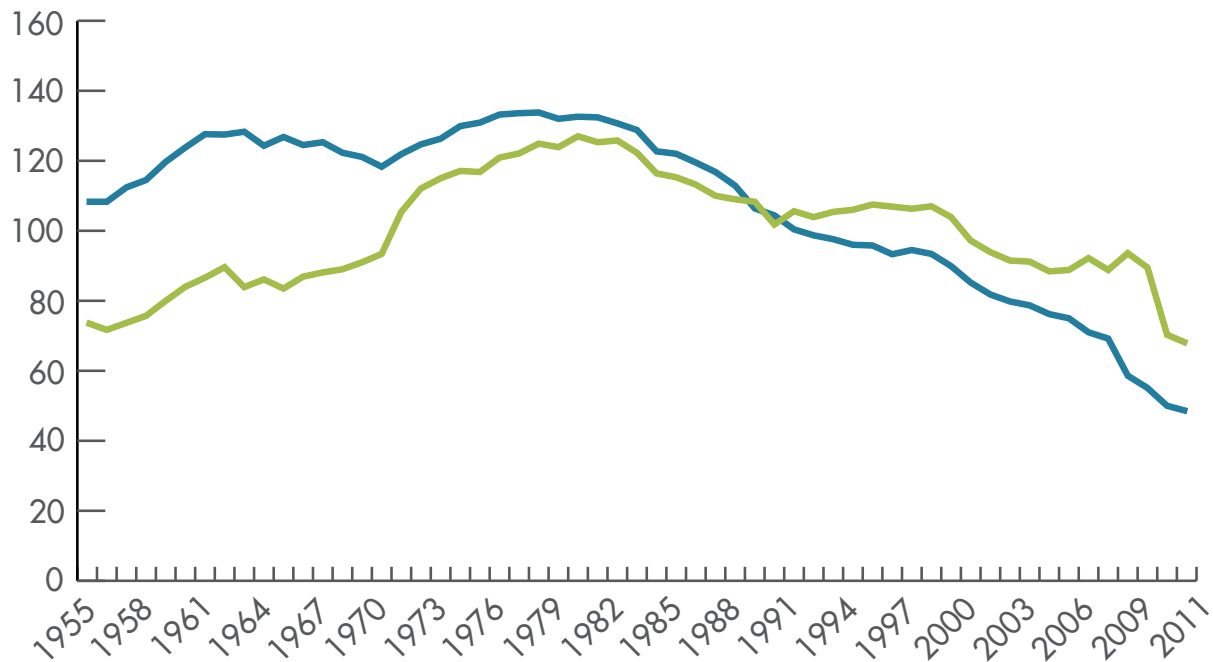
CESSATION

The promotion of tobacco cessation is one of the four primary goals of the Mississippi Comprehensive Tobacco Control Program. Initial analyses from the BRFSS indicate that 22% of Mississippi adults are former smokers, and this estimate has been relatively stable from 1998 to 2010. The percent of current smokers who have made at least one quit attempt (for at least 24 hours) increased from 2004 to 2006, but decreased slightly in 2007. Note that there was no funding allocation for statewide comprehensive tobacco control programs in 2007.

SOURCE: BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM

SURVEILLANCE

ADULT SMOKING



PER CAPITA CONSUMPTION

The Tax Burden on Tobacco is published yearly and details tobacco revenue and industry statistics. Per capita consumption rates are available for each state from 1955-2011. In 1955, per capita consumption was substantially lower in Mississippi than in the U.S. However, consumption increased until the early 1980s and began to approximate that of the U.S. as a whole. By the mid 1980s, per capita consumption was decreasing for both Mississippi and the U.S., but the rate of decrease was greater in the U.S. In 2011, per capita consumption (67.9 packs per adult) in Mississippi was substantially higher than in the U.S. (48.5 packs per adult.)

SOURCE: THE TAX BURDEN ON TOBACCO

SURVEILLANCE

DATA SOURCES | YOUTH

THE YOUTH TOBACCO SURVEY & THE YOUTH RISK BEHAVIOR SURVEILLANCE SYSTEMS

The Youth Tobacco Survey (YTS) and the Youth Risk Behavior Surveillance Systems (YRBSS) are the primary data sources for monitoring tobacco control issues related to youth.

THESE DATA SERIES SHARE MANY CHARACTERISTICS:

- The Centers for Disease Control and Prevention developed and support these data series.
- These are school-based surveys.
- Schools and classrooms are randomly selected using the same sampling protocols.
- Both surveys measure smoking status using the same questions.

THERE ARE ALSO SOME DIFFERENCES:

- The YTS assesses students' knowledge, attitudes, and behaviors related to tobacco use and exposure to secondhand smoke; whereas the YRBSS only assesses students' behaviors related to tobacco use.
- The YTS is typically administered to 6-12 grade students; whereas the YRBSS is typically administered to 9-12 grade students.
- The YRBSS is administered in the spring semester of odd years.
- The YRBSS is not typically administered in private schools; whereas the YTS is administered in private schools (in some years.)

THE YOUTH TOBACCO SURVEY

The Youth Tobacco Survey (YTS) was developed by the Centers for Disease Control and Prevention to provide states with the data needed to design, implement, and evaluate comprehensive tobacco control programs that

work to prevent young people from beginning tobacco use and help those who have already started using tobacco to quit. The YTS collects data from young people in grades 6 through 12. Both public and private schools are eligible for inclusion (although private schools have not been included in recent YTS administrations.) Schools are randomly selected with probability proportional to enrollment size, and classrooms are chosen at random within the selected schools. All students in these selected classes are eligible to participate. Only one class period is required to administer the survey. The self-administered questionnaire is anonymous. States administer a core survey and have the option of adding questions to the survey. These data provide information on many key tobacco-related intermediate and long-term indicators, allowing states to measure progress toward state and national goals and objectives. For example, YTS data increase our understanding of the influence of pro-tobacco marketing, advertising, and products on young people and conversely, of the effects of anti-tobacco campaigns working to counter them. Further, due to its methodology, a state can directly compare its YTS data both to those collected in another state as well as to national data. The Youth Tobacco Survey was conducted in Mississippi in Spring 1998, Spring 1999, Spring 2000, Fall 2002, Fall 2003, Fall 2004, Fall 2006, Spring 2008, Fall 2009, Fall 2010, and Fall 2011. The National YTS was administered in 1999, 2000, 2002, 2004, and 2006.

SURVEILLANCE

DATA SOURCES | YOUTH & ADULTS

THE YOUTH RISK BEHAVIOR SURVEILLANCE SYSTEM

The Youth Risk Behavior Surveillance System (YRBSS) was designed in 1990 to determine the prevalence of health risk behaviors such as tobacco use, unhealthy dietary behaviors, inadequate physical activity, alcohol and drug use, sexual behaviors contributing to unintended pregnancy and sexually transmitted diseases, and behaviors contributing to unintended injuries and violence. The YRBSS is intended to assess whether health risk behaviors increase, decrease, or stay the same over time, as well as examining the co-occurrence of health risk behaviors. The YRBSS provides comparable national and state data among subpopulations of youth. The YRBSS includes national and state school-based surveys of representative samples of 9th through 12th grade students. These surveys are conducted every two years, usually during the spring semester. The national survey, conducted by the Centers for Disease Control and Prevention (CDC), provides data representative of high school students in public and private schools in the United States. The state surveys, conducted by departments of health and education, provide data representative of the state. The YRBSS data are provided for 1991, 1993, 1995, 1997, 1999, 2001, 2003, 2005, 2007, and 2009 (the 2005 survey was not administered in Mississippi due to Hurricane Katrina).

SOCIAL CLIMATE SURVEY

Although comprehensive tobacco control programs have moved toward logic models that incorporate political and social intermediate objectives such as smoke-free worksites, tobacco control planning and evaluation has been hampered by the lack of timely, comprehensive data about the attitudes and practices of U.S. adults. The Social Climate Survey of Tobacco Control (SCS-TC) was developed as a methodology to objectively measure the fundamental position of tobacco control in society and thereby provide a data collection system to monitor program impacts. The survey includes items to measure progress toward intermediate objectives such as policy changes, changes in social norms, reductions in exposure of individuals to secondhand smoke, and rejection of pro-tobacco influences.

The Social Climate Survey of Tobacco Control (SCS-TC) was administered to representative samples of Mississippi adults and U.S. adults who were interviewed by telephone in 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, and 2011 (the SCS-TC was not administered to a Mississippi sample in 2006). Samples from all years represent the civilian, non-institutionalized adult population over age 18. Households were selected using random digit dialing procedures to include households with unlisted numbers. Once a household was contacted, the adult to be interviewed was selected by asking to speak with the person in the household who is 18 years of age or older and who will have the next birthday. Five attempts were made to contact those selected adults who were not home. The sample was weighted by race and gender, based on the most current U.S. Census estimates.

SURVEILLANCE

DATA SOURCES | ADULTS

BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM

The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of health surveys that were developed and conducted in order to monitor state-level prevalence of the major behavioral risks among adults associated with premature morbidity and mortality. The basic philosophy was to collect data on actual behaviors, rather than attitudes or knowledge, that would be particularly useful for planning, initiating, supporting, and evaluating health promotion and disease prevention programs.

The BRFSS is a cross-sectional telephone survey conducted by state health departments with technical and methodological assistance provided by the CDC. Every year, states conduct monthly telephone surveillance using a standardized questionnaire to determine the distribution of risk behaviors and health practices among non-institutionalized adults. Adults 18 and over are asked to take part in the survey. Only one adult is interviewed per household. Data from Mississippi adults are available on the BRFSS website from 1995-2010.

THE TOBACCO USE SUPPLEMENT TO THE CURRENT POPULATION SURVEY

The Tobacco Use Supplement to the Current Population Survey (TUS-CPS) is an NCI-sponsored survey of tobacco use that has been administered as part of the U.S. Census Bureau's Current Population Survey in 1992-1993, 1995-1996, 1998-1999, 2000, 2003, and 2006-2007. The TUS-CPS is a key source of national and state level data on smoking and other tobacco use in the U.S. household population because it uses a large, nationally representative sample that contains information on about 240,000 individuals within a given survey period. These data can be used by researchers to monitor progress in the control of tobacco use, conduct tobacco-related research, and evaluate tobacco

control programs. Although the TUS-CPS has changed slightly between 1992 and the present, it has generally contained 40 items covering cigarette smoking prevalence, smoking history, current and past cigarette consumption, cigarette smoking quit attempts and intentions to quit, medical and dental advice to quit smoking, cigar, pipe, chewing tobacco, and snuff use, workplace smoking policies, smoking rules in the home, attitudes toward smoking in public places, opinions about the degree of youth access to tobacco in the community, and attitudes toward advertising and promotion of tobacco. The same files can also be used to assess trends in tobacco control efforts, including both formal workplace and home restrictions on smoking, and doctor/dentist advice to stop smoking. In 2003, a Special Topics questionnaire oriented toward tobacco cessation was fielded. Items focused on respondents' personal history of quit attempts over the preceding 12 months, level of nicotine addiction, and the nature of the quitting methods, products, and treatment information that respondents have used in order to attempt to quit, quitting history and methods used for both cigarette smoking and other forms of tobacco (cigars, pipes, chewing tobacco, and snuff,) information concerning the type of cigarette product used, and information related to harm reduction. Currently available data files (1992-1993, 1995-1996, 1998-1999, 2000, 2001-2002, 2003, and 2006-2007) can be used to track trends in tobacco use over time. Because of the large sample size for most survey items, analyses can be done at either the national or state levels, and in some cases, for areas smaller than the state level.

SURVEILLANCE | FEATURED

DATA SOURCES | ADULTS

PER CAPITA CONSUMPTION - TAX BURDEN REPORT

The Tax Burden on Tobacco is published yearly and details tobacco revenue and industry statistics. Per capita consumption rates are available for each state from 1955-2011.

UNIVERSITY STUDENTS

From 2004-2006, 2008, 2010, 2011, and 2012, the Social Science Research Center at Mississippi State University administered an annual cross-sectional web-based survey to a representative sample of students at Mississippi State University, the University of Southern Mississippi, and the University of Mississippi. All respondents were 18 years of age or older and currently enrolled as students during the spring term. These surveys assessed students' knowledge, attitudes, and behaviors related to tobacco use and exposure to secondhand smoke.

FEATURED links

→ interactive charts

→ map and ordinances

→ local ordinances compared

→ blog

APPENDIX

(JULY 1, 2011–JUNE 30, 2012)

→ links to our **REPORTS | BRIEFS**

The Palace Casino: Growth During the First Nine Months After Implementing a Smoke-Free Policy

Size of Workforce & Amount of Gaming at the Palace Casino Before & After Implementing a Smoke-Free Policy

100% Smoke-Free Communities in Mississippi

Economic Effects of Smoke-Free Ordinances in Mississippi Communities

The Mississippi Tax Experience

State Rankings of Current Cigarette Smoking, June 2012

Mississippi Adult Current Cigarette Smoking | The Mississippi Behavioral Risk Factor Surveillance System (1998-2010)

The 2012 MS Youth Tobacco Survey Publication
Youth Cigarette Smoking (1998-2011)

Mississippi Middle School Students Current Smoking Status (1998-2011)

Mississippi High School Students Current Smoking Status (1998-2011)

Support Among MSU Students for Tobacco-Free Policies on Campus

Universities with Smoke-Free Air Policies How Does Mississippi Compare?

Support for Smoke-Free Air

2011 Mississippi Social Climate Survey of Tobacco Control Code Book

Secondhand Smoke Exposure | SCS-TC

Lifetime Prevalence of Tobacco Products | SCS-TC

Public Opinion on Secondhand Smoke and Smoke-Free Policies | SCS-TC

Cigarette Butts Fact Sheet

The Starkville & Hattiesburg Heart Attack Studies Fact Sheet

Cigarette Consumption and Tax Revenue Fact Sheet for Mississippi
(with detail of graph)

Cigarette Consumption and Tax Revenue Fact Sheet for Alabama

Cigarette Consumption and Tax Revenue Fact Sheet for Arkansas

Cigarette Consumption and Tax Revenue Fact Sheet for Louisiana

Cigarette Consumption and Tax Revenue Fact Sheet for Mississippi

Cigarette Consumption and Tax Revenue Fact Sheet for Tennessee

APPENDIX

(JULY 1, 2011–JUNE 30, 2012)

→ links to our **INTERACTIVE CHARTS**

Youth Smoking - YTS

Youth Smoking - YRBSS

Percent of Population Protected from Tobacco Smoke in Each State (1990-2012)

Revenue and State Cigarette Tax

Cigarette Smoking and Tobacco Control Policies

Cigarette Smoking and Smoke-Free Laws

→ links to our **CONFERENCE PRESENTATIONS**

McMillen, R., Hart, R., & Grubbs, C. (2012). Heart Attack Admissions in Rural Mississippi Counties Following Smoke-Free Ordinances. Paper presented at the National Rural Health Association Conference, Denver, CO.

McMillen, R. (2011). Tobacco Smoke, Smoke-Free Policies, and Physician Counseling: Public Perceptions. Annual Conference of the Mississippi Academy of Family Physicians, Natchez, MS.

Hart, R., Jones, S., & McMillen, R. (2011). The Impact of Research on Local Policies: Engaging and Informing Communities and Policy-Makers on the Benefits of Smoke-Free Air. Poster presented at the 19th Annual Conference of the National Association of Local Boards of Health, Coeur d'Alene, ID.

upcoming **CONFERENCE PRESENTATIONS**

McMillen, R. (2012). Economic Effects of Smoke-Free Ordinances in Mississippi Communities. Poster accepted to the 2012 National Conference on Tobacco OR Health, Kansas City, MO.

McMillen, R. (2012). Before and After: A Look at Mississippi's Only Smoke-Free Casino. Poster accepted to the 2012 National Conference on Tobacco OR Health, Kansas City, MO.

Valentine, N., McMillen, R., Zhang, L. (2012). Linkage between Delcines in Youth Smoking and Mississippi Tobacco Control. Poster accepted to the 2012 National Conference on Tobacco OR Health, Kansas City, MO.

CONTACT INFORMATION

Robert McMillen, Ph.D.
Social Science Research Center
Mississippi State University

ROBERT.MCMILLEN@SSRC.MSSTATE.EDU
WWW.SSRC.MSSTATE.EDU
WWW.MSSTATE.EDU

One Research Blvd., Suite 103
Starkville, MS 39759

P: 662.325.7127
F: 662.325.7966

For more information visit

MSTOBACCODATA.ORG

MISSISSIPPI STATE UNIVERSITY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, DISABILITY, OR VETERAN STATUS. THIS REPORT IS FUNDED BY A GRANT OF THE MISSISSIPPI STATE DEPARTMENT OF HEALTH.

