

Robert McMillen, PhD Nell Valentine, MS Emily McClelland, MS

{BACKGROUND}

- In 1994, Mississippi filed litigation against the tobacco industry that resulted in a \$4 billion settlement for the state.
- Funds from this settlement have supported statewide tobacco control programs since 1998.
- Initially our statewide programs were led by a foundation supported with settlement funds.
- In 2007, the Mississippi Supreme Court determined only the Mississippi Legislature could appropriate funds to tobacco prevention programs, and our statewide programs were interrupted for most of 2007/08.
- In FY2008, the Legislature allocated funding for the Office of Tobacco Control, MSDH, to create 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.
- Since 2008, the Office of Tobacco Control of the Mississippi State Department of Health (OTC) has directed our statewide prevention and cessation programs, community coalitions, and media campaigns and the Social Science Research Center of Mississippi State University (SSRC) has provided surveillance and evaluation services to the OTC.
- Surveillance efforts over the past twenty years include annual surveys of youth, college students, and adults; surveys of restaurant owners; hospital discharge data; Medicaid expenditure data; tobacco tax revenue, tourism tax revenue; casino administrative data; QuitLine data; and air quality assessments.
- Dissemination of surveillance findings include: our website (mstobaccodata.org), community presentations, testimony to the state legislature, conference presentations, and publications in the Journal of the Mississippi State Medical Association.
- During this period of twenty years, the prevalence of high school smoking decreased from 33% to less than 7% and the number of Mississippi municipalities with smoke-free ordinances increased from 0 to 159.
- However, the prevalence of high school vaping almost doubled from 11.5% in 2017 to 21.6% in 2018.

{KEY FINDINGS}

Funding for statewide tobacco prevention has fluctuated since 2000. The state currently funds our programs at 23.1% of the CDC's minimum recommended funding.



Since 2002, 160 municipalities and five counties have implemented comprehensive smoke-free ordinances. Most of these ordinances also apply to e-cigarettes.







MISSISSIPPI STATE UNIVERSIT SOCIAL SCIENCE RESEARCH CENTE

designed by: miranda robertson > mstobaccodata.org

These local ordinances have not harmed hospitality revenue.

Economic Effects of Smoke-Free

Ordinances in Mississippi Communities:

AN EXAMINATION OF TOURISM & ECONOMIC DEVELOPMENT TAX REVENUES

32.04%

-2.93%

3.18%

5.00%

-6.35%

-2.96%

This table presents the inflation-adjusted pre- and post-ban data for the Mississippi communities that have comprehensive smoke-free ordinances, collect a TED tax, and have at least 12 months of post-ban data¹. The percentage change in revenue

for these towns ranges from -17% to 33%. As other researchers have noted, this wide range reflects the volatile nature of the restaurant and hospitality industries, due to seasonality and turnover in businesses. Also, the largest percentage changes occurred

For the communities with smoke-free ordinances as a whole, inflation-adjusted TED tax revenue was 4.94% greater in the 12 months following the enactment of a smoke-free

ordinance. Conversely, there was no meaningful change in TED tax revenue in the aggregated control communities (-0.06%).

But these local smoke-free ordinances have improved health.

SCIENCE OF MEDICINE

Smoke-Free Ordinances in Mississippi Predict Lower Hospital

Admission Rates for Acute Cardiovascular, Stroke,

and Pulmonary Events

The Starkville & Hattiesburg Heart Attack Studies

REDUCTIONS IN HEART ATTACK ADMISSIONS FOLLOWING

THE IMPLEMENTATION OF LOCAL SMOKE-FREE ORDINANCES

Starkville implemented a comprehensive smoke-free ordinance that prohibited

smoking inside of all indoor public places on May 20, 2006. Seven months later,

Hattiesburg implemented a similar comprehensive ordinance on January 1, 2007.

Findings from controlled observational studies demonstrate that hospital admissions

for heart attacks in both Starkville and Hattiesburg decreased substantially following

the implementation of the smoke-free ordinances. Moreover, the observed decrease in

these communities was much higher than that observed in control communities that did

Mississippi has one of the lowest state cigarette taxes

in the nation. However, we did raise this tax in 2009.

The Mississippi (Tax) Experience

Packs Sold | 2008-2017

Revenues Collected | 2008-2017

These data from tax records clearly demonstrate that following the 2009 increase in the state cigarette tax, the number of

packs of cigarettes sold in Mississippi decreased by more than 30%, while tax revenue from cigarette sales almost tripled.

The Mississippi Legislature increased the state cigarette tax from 18 cents to 68 cents on May 15, 2009.

The average state cigarette tax is currently \$1.79 and Mississippi's tax ranks 40th as of December 21, 2018.

not have a smoke-free ordinance.

DURING THE SAME

0.67%

3.77%

3.45%

-4.81%

1.54%

-2.34%

-0.71%

-5.42%

0.95%

4.42%

1.54%

-0.11%

2.89%

-4.72%

1.14%

-4.35%

5.50%

12.46%

-4.47%

2.04%

8.29%

-2.60%

10.42%

-7.30%

-7.38%

10.44%

-21.72%

9.86%

11.49%

JANUARY 2012

36.84%

8/14/2008

11/6/2007

8/19/2012

7/1/2010

11/1/2007

11/19/2013

6/14/2012

12/1/2011

11/16/2006

7/18/2013

FLORENCE

HATTIESBURG

HOLLY SPRINGS

INDIANOLA

JACKSON

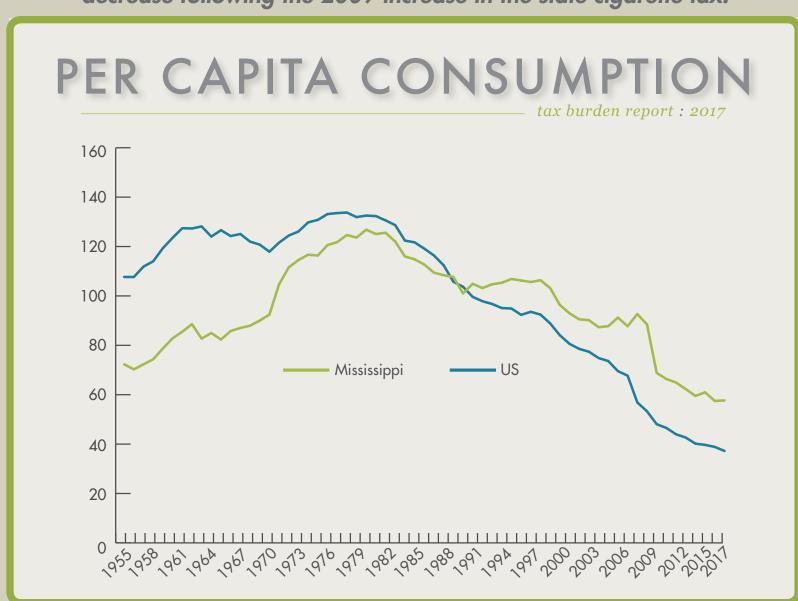
KOSCIUSKO

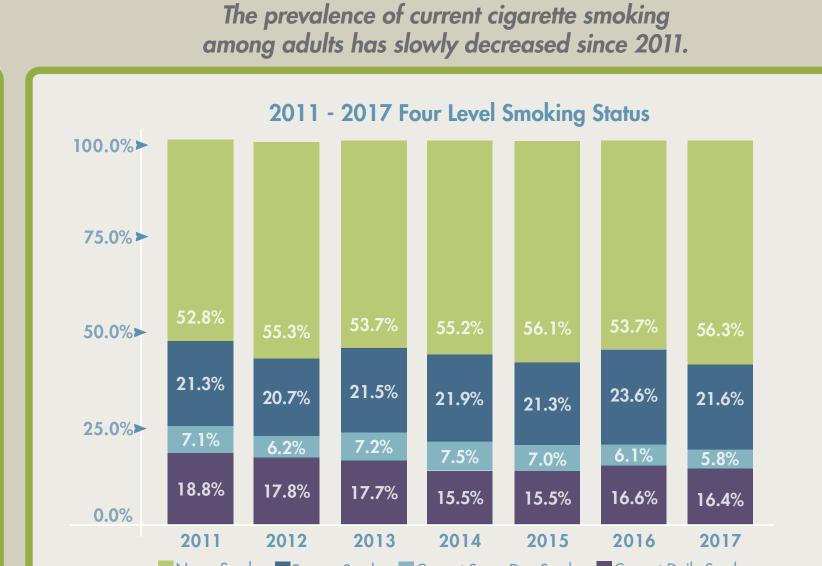
MOSS POINT

OXFORD

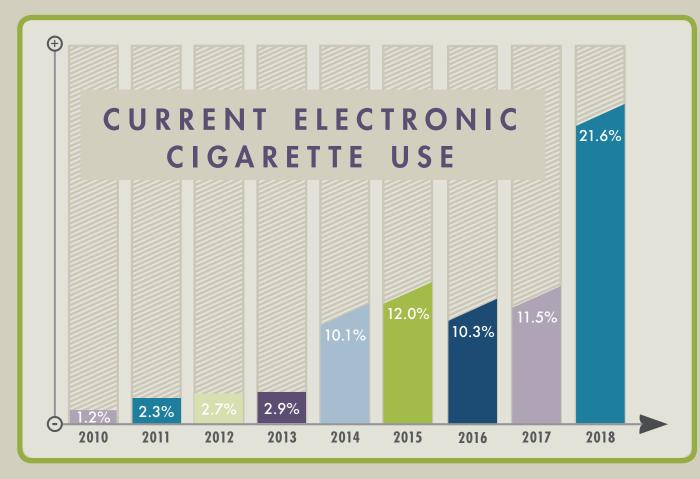
PASCAGOULA

Per capita consumption of cigarettes has decreased. There was a sharp decrease following the 2009 increase in the state cigarette tax.

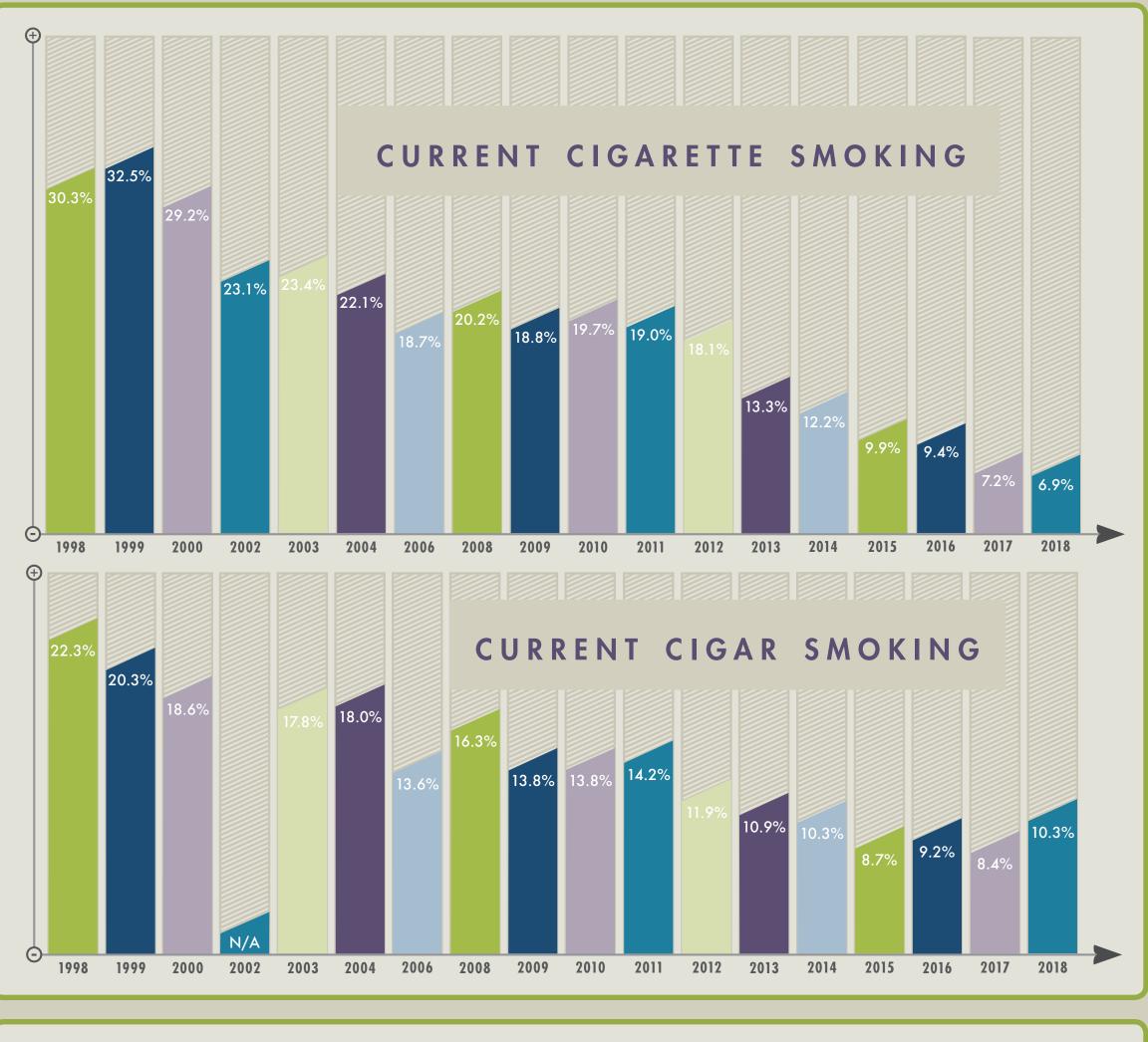




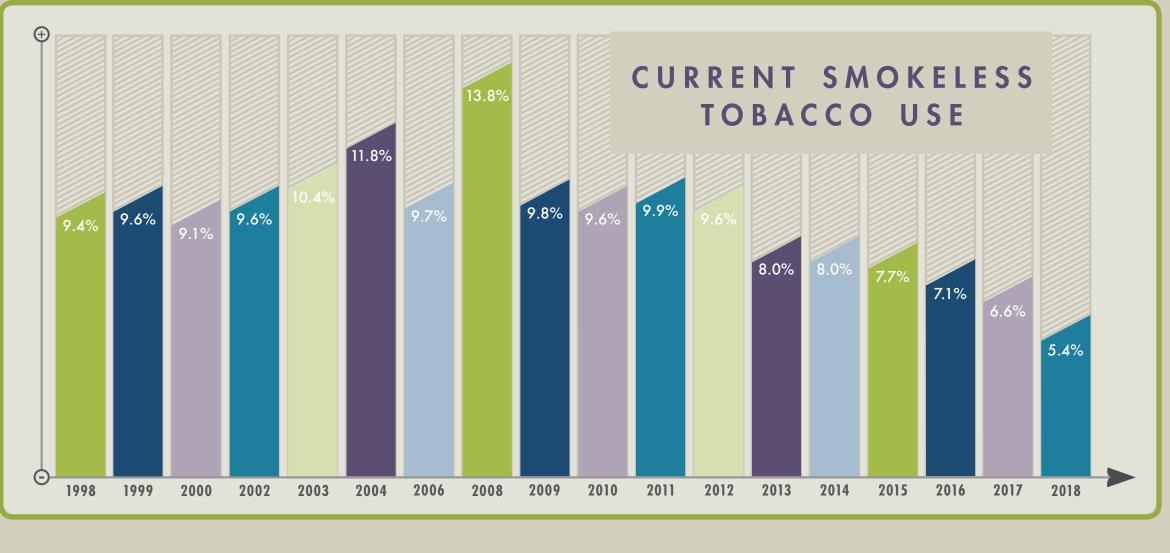
Source: Behavioral Risk Factor Surveillance System (BRFSS)



The prevalence of past 30-day e-cigarette use among high school students almost doubled over the past year.







Whereas, the prevalence of smokeless tobacco use has not changed.

{CONCLUSIONS}

With the exception of one transitional year, Mississippi had funded statewide tobacco programs for the past two decades. The MSDH Office of Tobacco Control currently supports youth programs, community coalitions, and cessation services and health systems change. Although it is not possible to make strong statements about the causal relationship between these programmatic activities and the reduction in youth tobacco use, the substantial reduction over the past 20 years following successfully implemented programs is highly consistent with the hypothesis that these programs are effective.

Mississippi has successfully reduced youth tobacco smoking. However, smokeless tobacco use among use remains at 1998 levels and e-cigarette use has nearly doubled over the past year. The state should continue to support efforts to reduce youth use of combustible products, while also targeting e-cigarette and smokeless tobacco use with educational and regulatory strategies. Moreover, higher tobacco taxes and a statewide smoke-free law could increase the decline in adult cigarette smoking.