

education

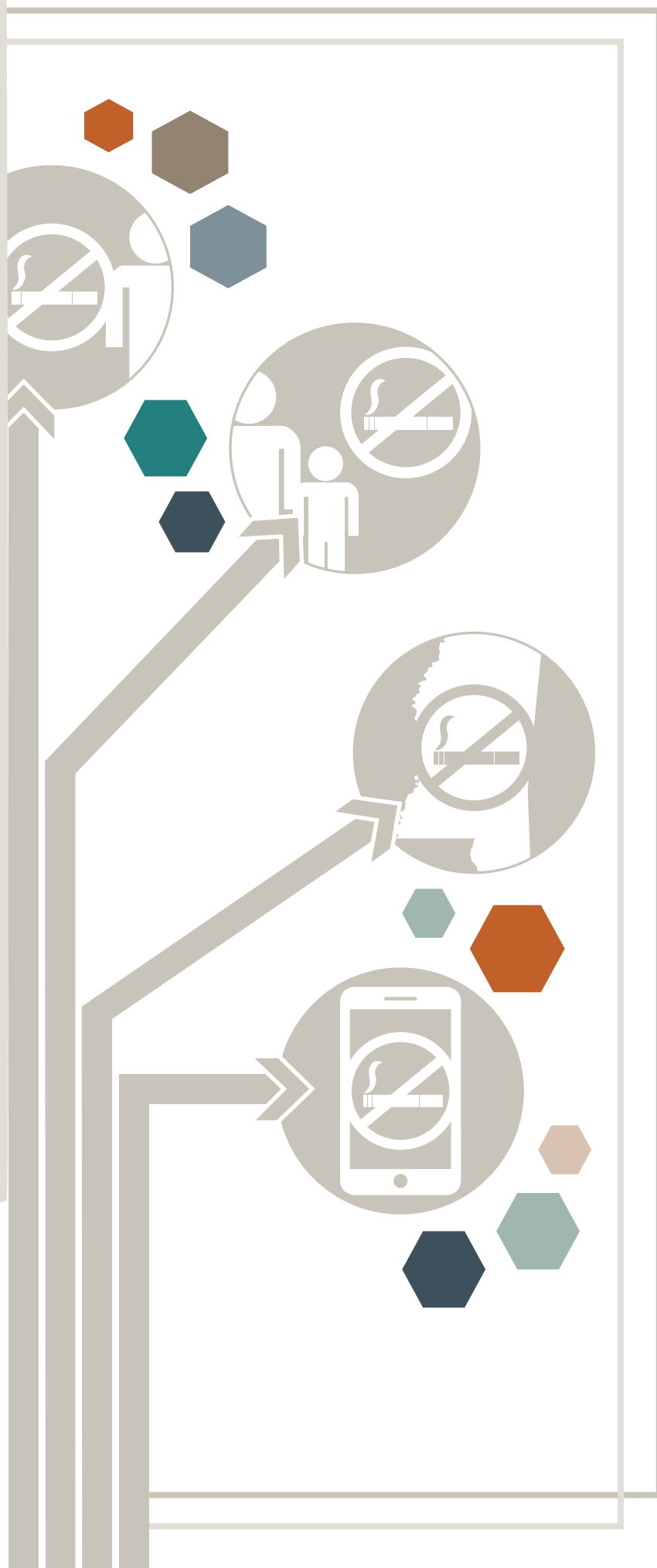
prevention

cessation

2017-2018



MISSISSIPPI STATE UNIVERSITY™
SOCIAL SCIENCE RESEARCH CENTER





acknowledgements

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background + methodology

• **375,629** •
*people impacted by
all OTC programs*

background

The Mississippi State Department of Health Office of Tobacco Control (OTC) was established in 2007 by the state legislature. With the overarching goal of decreasing the use of tobacco products among youth and adults, OTC has worked since that time to develop and implement evidence-based tobacco education, prevention and cessation programs. In FY 2017-2018 OTC continued to fund 34 Mississippi Tobacco Free Coalitions, four state-wide partners, two cessation service programs and youth outreach opportunities within all of the established programs.

methodology

Evaluators at Mississippi State University's Social Science Research Center use a mixed-method approach to assess the impact of the OTC programs. Quantitative data collection and analyses are obtained through the online reporting system (TRAPS), and verification is conducted through site visits, telephone conversations and emails to OTC grantees through the fiscal year.

key findings

ms tobacco free coalitions (mtfc's)



◆ **306,267** ◆
people impacted

30/34
MTFC'S
OPERATIONAL
IN FY18

☞ Town by town we are working to protect the public from the dangers of secondhand smoke. Last month the small town of Hatley (population 467) voted to go smoke-free. It may be small, but every little bit helps. The school in Hatley (K-12) which participates in the RAT Program knows that the leaders of the community agree enough with what they've been learning in school to vote to protect them from the dangers of secondhand smoke. It's WIN WIN! ☞

HELEN BOERNER | MTFC OF ITAWAMBA AND MONROE COUNTIES

1,966 General Awareness
Activities with 93,108 in attendance

1,195 Advocacy & Policy
Activities with 152,571 people impacted

— **406** —
CESSATION
ACTIVITIES WITH 22,549
EDUCATIONAL LITERATURE
DISTRIBUTED

◆ **210** ◆
*communications
published/aired*
WITH AN UNDUPLICATED AUDIENCE OF
◆ **870,629** ◆



1,054 High-Level
presentations with
35,483 in attendance

**46 Great American
Smoke Out**
events with 1,491
people impacted

*“I choose to be a part of
because it fulfills me to work
It also gives me experience in
and advocating for my
community by providing a
opportunities, as well as
on others —*

**67 Youth
Contests**
*453 youth
participating*

**110 Care
for Their Air**
presentations
to 2,386 pre-
school parents,
guardians,
and teachers

**420 Second-
hand Smoke**
presentations
with 8,825
in attendance

**115 RAT
on the Road**
presentations
with 10,275
in attendance



**161 Merchant
Trainings**
with 279 *in
attendance*

**137,192 Residents
Impacted by the
18 Ordinances Passed**
(10 comprehensive ordinances,
4 smoke-free counties,
3 e-cigarette amendments, and
1 partial smoke-free ordinance)

**63 No Menthol
Sunday Presentations**
with 4,378 *people
in attendance*

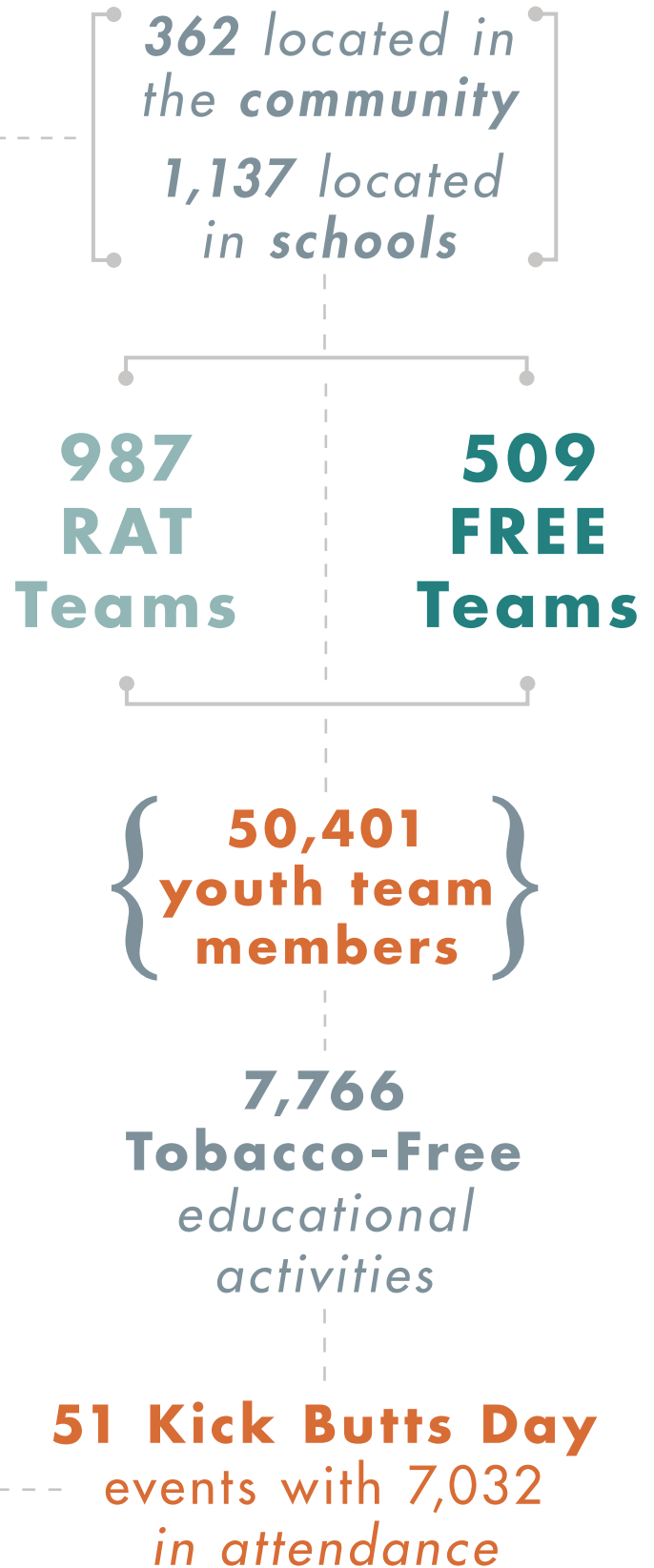
1,496 MTFC Youth Teams

the youth advocacy group for something I believe in. researching, communicating, beliefs. The group impacts the resource for information and serving as a positive influence – especially youth. ☺☺

KAEKOA SIANGCO | OCEAN SPRINGS HIGH SCHOOL



102 Multi-Unit Housing presentations with 1,543 in attendance





key findings

the partnership for a healthy ms youth programs

{ **40,209 youth** }
impacted

“ I enjoyed the interaction between the presenters and the students. They allowed students to ask educational questions related to tobacco. ”

TEACHER SURVEY RESPONSE

38 RAT Troupe Performances
Impacting 11,020
K-6th Graders

“ The program is fantastic! I have been involved in tobacco education as a school nurse since the late 90’s and the RAT program for years! ”

RAT TROUPE TEAM SPONSOR

27 RAT Educational Activities
reaching
564 students

76 GENFREE Activities
reaching
4,272 students

67,256 Team Incentive Distributions
to participating youth teams



“ The Partnership for a Healthy Mississippi has been on the tobacco battleground for over twenty years with many partners protecting our children from the dangers of tobacco. Because of all our efforts, we have lowered youth tobacco rates to historic lows. ”

SANDRA SHELSON | EXECUTIVE DIRECTOR

4 LEAD Summits

139 students in 9th-12th grades

2 FREE Fest Summits

225 students in 7th-8th grades

542
Generation
FREE Social
Media Posts

10 Communications

published/viewed/aired
with unduplicated
audience of 216,828



key findings

state-wide partners

3,157 people impacted

The University of Southern Mississippi Institute for Disability Studies (IDS)

Educational outreach activities: quarterly newsletters posted on the IDS webpage and IDS Facebook page (749 followers) and aired PSA
- **37,074 impacted**

Mississippi Academy of Family Physicians Foundation

- 111 education, awareness activities, and cessation trainings
- 21,542 educational materials distributed
- 173 UMMC medical students participated in the Tar Wars program and then presented Tar Wars message to 2,325 fourth graders and 1,691 fifth graders in 118 schools and community organizations.

“I will now be able to converse with patients about the effect of various forms of nicotine delivery. Very informative!”

UMMC FAMILY MEDICINE RESIDENT FOLLOWING TRAINING



“ The Baby and Me Tobacco Free Program is an excellent opportunity for Mississippi to improve the outcomes for pregnant women and their babies and save the state millions of dollars in health care costs for pre-term deliveries. The program seeks to identify and support smoking, pregnant women and a co-habiting smoker to stop smoking. During the first year of the program, six of 38 women who were enrolled in the program delivered at or greater than 36 weeks gestation. Five of the six infants (83%) weighed 5.5 pounds or greater. This is GREAT SUCCESS for the first year! ”

MARIA MORRIS | PROGRAM COORDINATOR

The Mississippi Chapter of the American Academy of Pediatrics

97 continuing education presentations, trainings, and Lunch and Learns
- **269 impacted**

The Mississippi Primary Healthcare Association

146 awareness activities, Lunch and Learns, and communication efforts
- **1,747 impacted**
38 Baby and Me participants
- **6 delivered at or greater than 36 weeks**





key findings

cessation services

ACT Center

- **26 activities** including Tobacco Treatment Specialist Trainings, tobacco cessation intervention presentations, health fairs, and educational outreach events

“It gives you the will to help you stop smoking.”

ACT CENTER TREATMENT
PROGRAM PATIENT

“Helped me find out my triggers and how to deal with them. Helped me understand I need to change my lifestyle.”

ACT CENTER TREATMENT
PROGRAM PATIENT

- **3 television and radio presentations** potentially reached 63,500
- **755 intake evaluations** completed with **3,439 total visits**
- **36.1%** 12 month quit rate



Mississippi Tobacco Quitline

- **93%** live call answer rate
- **40%** quit rate
- **304,306** website hits
- **1,054** online enrollments
- **9,838** online chat sessions
- **482** educational events impacting 25,454

“The counseling was really helpful. I’m not having any issues, and I’m just happy to be smoke-free.”

CALLER FROM MCKENRY, MS

“I am really appreciative of the Quitline. Even though I haven’t quit for good, they were really there for me during a dark time. I’ll definitely call again when I’m ready.”

CALLER FROM DUNDEE, MS





introduction

If asked to describe the work of the Mississippi State Department of Health's Office of Tobacco Control (OTC), one might think of three words: education, prevention, and cessation. Since its inception in 2007, OTC has been developing and implementing evidence-based tobacco programs and cessation interventions to both decrease the use of tobacco products among youth and adults and to increase awareness about the health risks and community impact involved in tobacco use. In 2014, the Centers for Disease Control and Prevention (CDC) developed the Best Practices for Comprehensive Control Programs for tobacco control networks across the country. In fiscal year 2018, Mississippi's OTC continued to incorporate the four program components into its annual plan. They are as follows:

1. Administration and Management:

- Strategic Plan in place for 2013-2018
- Contracts and grants management
- Financial management system that tracks allocations and expenditure of funds
- Recruitment of staff
- Program contracts and grants awards

2. State and Community Interventions:

Mississippi Tobacco free Coalitions (MTFC's)

- 34 coalitions with a presence in all 82 counties
- Charged with providing awareness activities, advocacy and policy work, cessation services awareness, youth programmatic activities and communications for adults and children/youth in their service areas

Youth Programs

- Administered through a grant provided to the Partnership for a Healthy Mississippi (PHM)
- Generation FREE activities in grades 7-12
- RAT Activities in grades K-6
- RAT Troupe Performances in grades K-6
- Development and implementation of regional youth programming and training

Statewide Grantees

- Mississippi Academy of Family Physicians Foundation (MAFPF)



- Mississippi Chapter of the American Academy of Pediatrics (MSAAP)
- The Institute for Disability Studies (IDS)
- Mississippi Primary Health Association (MPHA)

3. Tobacco Cessation Interventions

- Mississippi Tobacco Quitline
- ACT Center for Tobacco Treatment, Education and Research

4. Surveillance and Evaluation

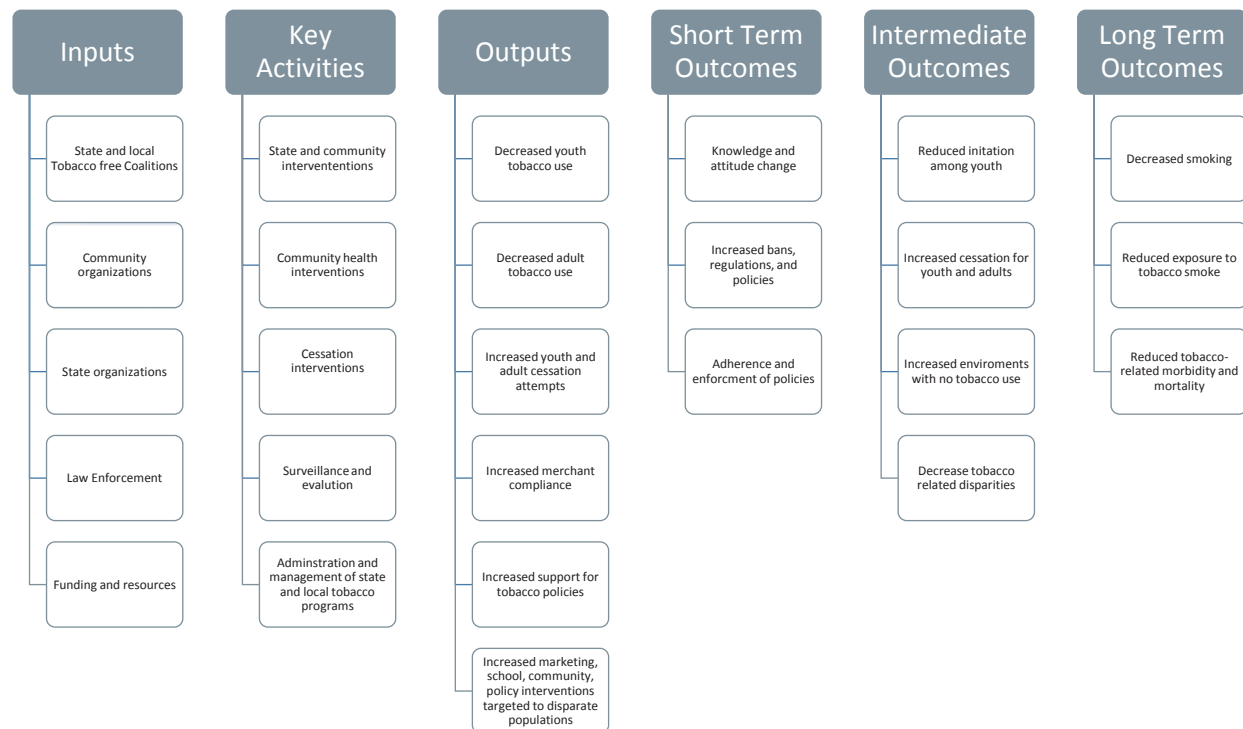
- The Mississippi Tobacco Data Project located at Mississippi State University's Social Science Research Center (SSRC)
- Evaluation services located at Mississippi State University's Social Science Research Center.

Since the evaluation services were moved to the SSRC in 2015, the evaluation team has used a process evaluation approach for its mid-year and annual reports. Expanded from the model employed by the former evaluators located at the University of Southern Mississippi, the reports have included qualitative pieces and visual imagery to enhance the quantitative data collected through the online reporting system, TRAPS. Quantitative research methods include the development and dissemination of surveys to measure participant understanding of specific programs and to identify the source of the program's problems. Tracking data is also crucial to a process evaluation. Because of the TRAPS system and OTC's requirements that grantees' work be documented in a timely manner, detailed reviews of grantee work are made possible. Process evaluation is traditionally used to identify ways to improve programs, monitor program implementation, build effective program models, and demonstrate accountability. Because of the data collected in TRAPS since 2015, the evaluation team and OTC administrators are now able to compare impact between years, drill down to ensure that programs are being implemented as they are designed to be, and hold grantees accountable for their performance.

Process evaluation also allows individuals to link progress of programs to outcomes. A traditional logic model ties inputs, key activities and outputs to the project's outcomes. OTC's logic model, developed in conjunction with the 2013-2018 strategic plan links grantees and community organizations to key activities that have been implemented during the five year period. In examining the outputs, it is clear that efforts have been made to accomplish these goals. In this report, impact numbers are "audience" numbers, people who actually heard educational information about the dangers of tobacco. Distribution numbers are items that were distributed such as brochures, flyers, pencils, bracelets etc. For example, the Mississippi Tobacco Free Coalitions (MTFC's) conduct merchant trainings each year as part of their Scope of work deliverables to educate them about the sale of tobacco to youth and product placement. Although the number of trainings is quantified, compliance is not.



One solution could be to involve the state attorney general’s office and local law enforcement to ensure merchant compliance. In looking at outcomes, how do we know if smoke-free communities are adhering to and enforcing their policies? MTFC’s are now incorporating awareness presentations to disparate populations, but there is no mechanism currently in place to measure their effectiveness.



Mississippi Tobacco Control and Prevention Strategic Plan 2013-2018

National Tobacco Control Programs Goals Year Four Mississippi

With overarching goals of preventing the initiation of smoking among youth and young adults, eliminating nonsmokers’ exposure to secondhand smoke, and promoting quitting among youth and young adults, OTC has developed objectives for a four year period as well as annual objectives. The four year goals related to prevention were to decrease the proportion of middle school students who have ever tried smoking from 19.3% (Youth Tobacco Survey 2014) to 16% by March 2020. This is a six year goal. The latest survey (2017) indicates the rate is now 12.7%.



For high school students, the objective was to decrease the proportion of high school students who have ever tried smoking from 37.4% (2014) to 34% by March 2020. Again, the latest Mississippi Youth Tobacco Survey (2017) indicates the rate is 32.9%.

What were the 2017-2018 OTC strategies used to achieve some of these prevention goals? In order to educate and inform stakeholders and decision makers about evidence-based policies and programs provided by OTC, some annual objectives were developed. The Partnership for a Healthy Mississippi (PHM) facilitated two Free Fest summits for middle school students and four LEAD summits for high school students. PHM also used members of the Youth Advisory Board to facilitate break-out sessions during the conferences to encourage youth to decrease tobacco use among their peers. The Youth Advisory Board members were also charged with participating in local youth advocacy groups to increase their efforts in passing smoke-free ordinances within their communities. These summits, formerly known as iFLY and LEAD conferences offered participants knowledge and suggestions for policy work in their communities.

In order to call attention to the dangers of secondhand smoke, OTC set goals of increasing the number of Mississippi smoke-free ordinances from 129 to 140 by March 29, 2020. That number has been surpassed this year with the passage of the 149th ordinance. A setback was encountered in decreasing the percentage of Mississippians exposed to secondhand smoke at work during the previous seven days from 19.8% to 14% or less by March 2020. According to the 2017 Mississippi Social Climate Survey, 21.4% of adults reported exposure to secondhand smoke at work. Another objective was to decrease the number of Mississippians reporting exposure to secondhand smoke in an indoor public place from 19.1% to 15% by March 2020. The 2017 report indicated the percentage has dropped to 17.5%.

To make more Mississippians aware of how secondhand smoke affects non-smokers, an OTC strategy for the 2017-2018 year was to provide training at housing authorities and multi-unit apartment complexes. MTFC directors provided a total of 102 presentations with 1,543 tenants in attendance. OTC provided up to five mini-grants for cities/municipalities to educate their citizens on the health benefits of smoke-free environments. Because the grants are reimbursable only, small towns and communities are often unable to pay the money upfront. Some directors presented materials about the mini-grant opportunity, but if any grants were funded, they were not captured in TRAPS. The MTFC directors were able to provide technical assistance to municipalities with over 400 secondhand smoke presentations, as well as the distribution of fact sheets, example ordinances and other resources to community stakeholders. To help employers grasp the importance of smoke-free work environments, the MTFC directors provided 19 certificates of recognition to businesses that have voluntarily chosen to go smoke-free. Additionally the Quitline staff presented to employers across the state at health fairs and provided cessation materials to them. Two Quitline staff members are part of the Mississippi Tobacco Control Network Cessation Work Group charged with reviewing and revising strategic plan goals, objectives and strategies.



Other project objectives for the four year period included a decrease in the percentage of adult cigarette smokers as well as a decrease in the percentage of cigarette smoking Mississippians with a mental illness and or physical disabilities. To move toward these goals, OTC provided funding to the Institute for Disability Studies (IDS) to conduct outreach to the mental health community and to provide awareness and educational materials through print, media, and websites compliant with the Americans with Disabilities Act. During the fiscal year, IDS participated in 59 events impacting 8,242 people. Over one thousand educational resources were distributed, and nearly 30,000 people were reached through their communication efforts.

Another strategy was to support the Quitline capacity to ensure that 85% of calls were answered live. For the fiscal year, a 93% rate was achieved. All Quitline staff were trained and certified as Tobacco Treatment Specialists. Efforts to support electronic referrals to the Quitline were put on hold for the year, but should resume in FY 2019. The Quitline also provided monthly reporting on caller demographics and characteristics. The average age of callers was 48 with nearly twice the number of callers being female (1,844 male compared to 3,480 female).

In order to decrease the proportion of high school youth using smokeless tobacco, OTC's objective for the year was to implement a minimum of two targeted media packages to address the issue. In the past, Rescue Social Change Group (RSCG) has provided media via YouTube; however, no contract was implemented for the 2017-2018 year.

The report that follows is representative of a process evaluation. In the coming year, more discussions will be conducted with OTC administrators to develop a model for the future that incorporates process and evidence-based evaluations.

methodology



The Fiscal Year 2017-2018 report marks the third developed by the evaluation team at Mississippi State University's Social Science Research Center. Over the three years, the evaluation team has implemented an evaluation system that includes site visits and telephone interviews to grantees. The team is also available for technical assistance if needed. Periodically the evaluation team may reach out to grantees for clarification of data uploaded or collected in the TRAPS system.

The MTFC directors receive one site visit and one telephone interview per year. Because the scope of work is so detailed, it is important to have these two check-ins annually. The site visits provide the directors with a better understanding of how they may adequately reflect their work within the context of the online reporting system and also assist the evaluators in determining the strengths and weaknesses of each director.

The six-month assessment of all OTC grantees was conducted between January and March 2018 with the report presented to OTC staff on March 30th.



Reports were pulled from the data portal in early January after all grantees were notified of the specific date. Evaluators conducted site visits to 13 MTFC directors during January and February. To be mindful of budgetary matters, evaluators made a concerted effort to visit directors who were located in close proximity. The remaining 17 directors received telephone interviews. Four MTFC's were not operational.

The scope of work contractual areas that were assessed included:

- Timely online reporting
- Coalition building and organization
- Awareness activities
- Advocacy and policy
- Youth advocacy
- Communications
- Cessation
- Programmatic Activities

The average time spent per evaluation was approximately one and a half hours in which directors were asked specific questions related to their work. Each was asked to describe their challenges, and discussion followed on how problem areas could be resolved. Some directors were asked to provide samples of their team activity sheets, rosters, and communication pieces for verification purposes. Templates outlining all scope of work requirements were used as checklists to ensure that the directors were on track at the six month period for completion of requirements prior to the end of the fiscal year.

In July, the evaluation process was repeated with reports pulled from TRAPS on July 6th. Site visits with 18 MTFC directors were conducted in June, July and August followed by 14 telephone interviews.

In addition to the face to face and telephone conversations, the evaluation team continued to provide training and assistance to the MTFC's through regional workshops and quarterly trainings.

Due to turnover in the youth programs area, a number of conversations and trainings were held throughout the year to clear up confusion with reporting and understanding of the scope of work itself. Kimberly Sampson, youth programs project officer, participated in all conference calls and in-person meetings and trainings as well as the end of the year site visit. An assessment of the youth programs' progress was initially conducted using the online report from TRAPS, followed by the face to face evaluation. Additionally, pre and post testing from a sample of RAT and FREE teams from across the MTFC network were used to examine the impact of the programs. A paired-samples t-test allowed evaluators to see if there was a significant difference in overall student tobacco knowledge between their pre and posttest scores. The paired samples t-test examines the average scores of the same group of students at two different points in time. The outcome of this test determines if the two averages are significantly different from each other.



Unfortunately, the number of valid tests were significantly lower than that of the prior year due to the youth programs staff administering the tests. Since the MTFC directors have a direct relationship with the team sponsors, it makes more sense for the directors to administer the tests.

The statewide grantees and representatives from the cessation interventions met with the evaluation team and their respective project officers in November 2017 to review scopes of work and reporting requirements. Grantees were given the opportunity to make suggestions as to how the TRAPS system could be more user friendly, and many were noted and updated. All data for the year was pulled from the TRAPS system on July 6th. Evaluators measured progress from the previous six month evaluations to determine improvement as well as to identify needed target areas for future improvements. Follow-up telephone calls were made to some of the grantees to clarify information.

Finally, because this is the third annual report compiled by the evaluation team, measures of progress made among the years will be reflected in this report.

Tables 1 and 2 show the total events and activities for the state in 2017 (430,237) and in 2018 (375,629) and for each of the four programs.

Table 1 & 2.

Impact Numbers FY 2017		
Programs	Events	Impact
MTFC	8,513	347,061
PHM	254	45,252
IQH	462	23,527
ACT	51	6,008
Statewide	467	8,389
Totals	9,747	430,237

Impact Numbers FY 2018		
Programs	Events	Impact
MTFC	5,856	306,267
PHM	941	40,209
IQH	499	25,430
Statewide	338	3,157
ACT	29	566
Total	7,663	375,629

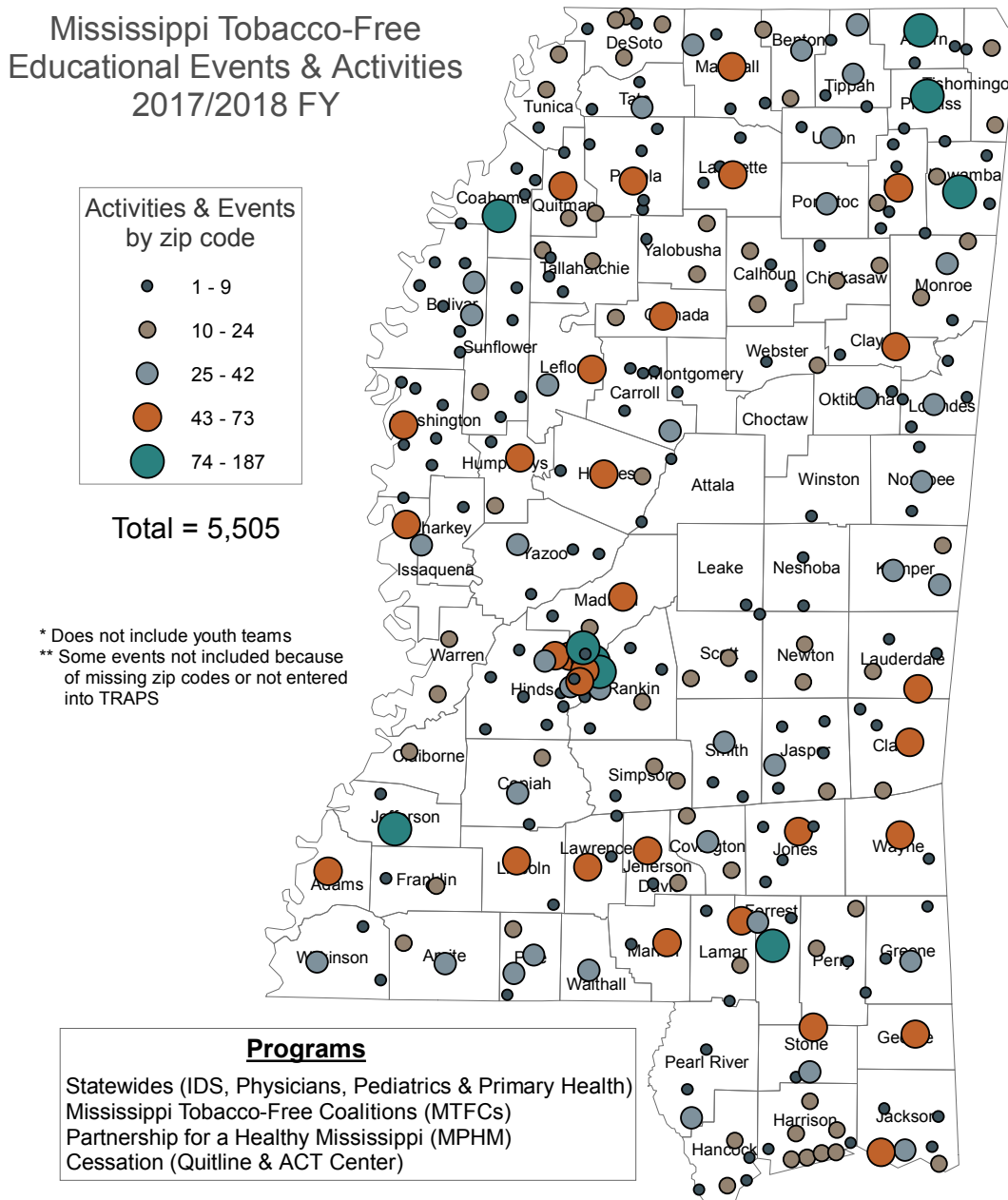
In actuality, there were 5,856 activities and events conducted during the year, but some zip codes were not entered in TRAPS that enables the location to be identified, and some activities did not require location information.



This accounts for the difference in the two numbers. To help with this confusion, a new directors' training should be held again in this fiscal year to ensure they understand the importance of entering zip codes to determine impact.

Map 1 below illustrates geographically where 5,505 activities and events conducted by the MTFC's, cessation services, youth programs, and statewide partners evaluated in this report were located.

Map 1.





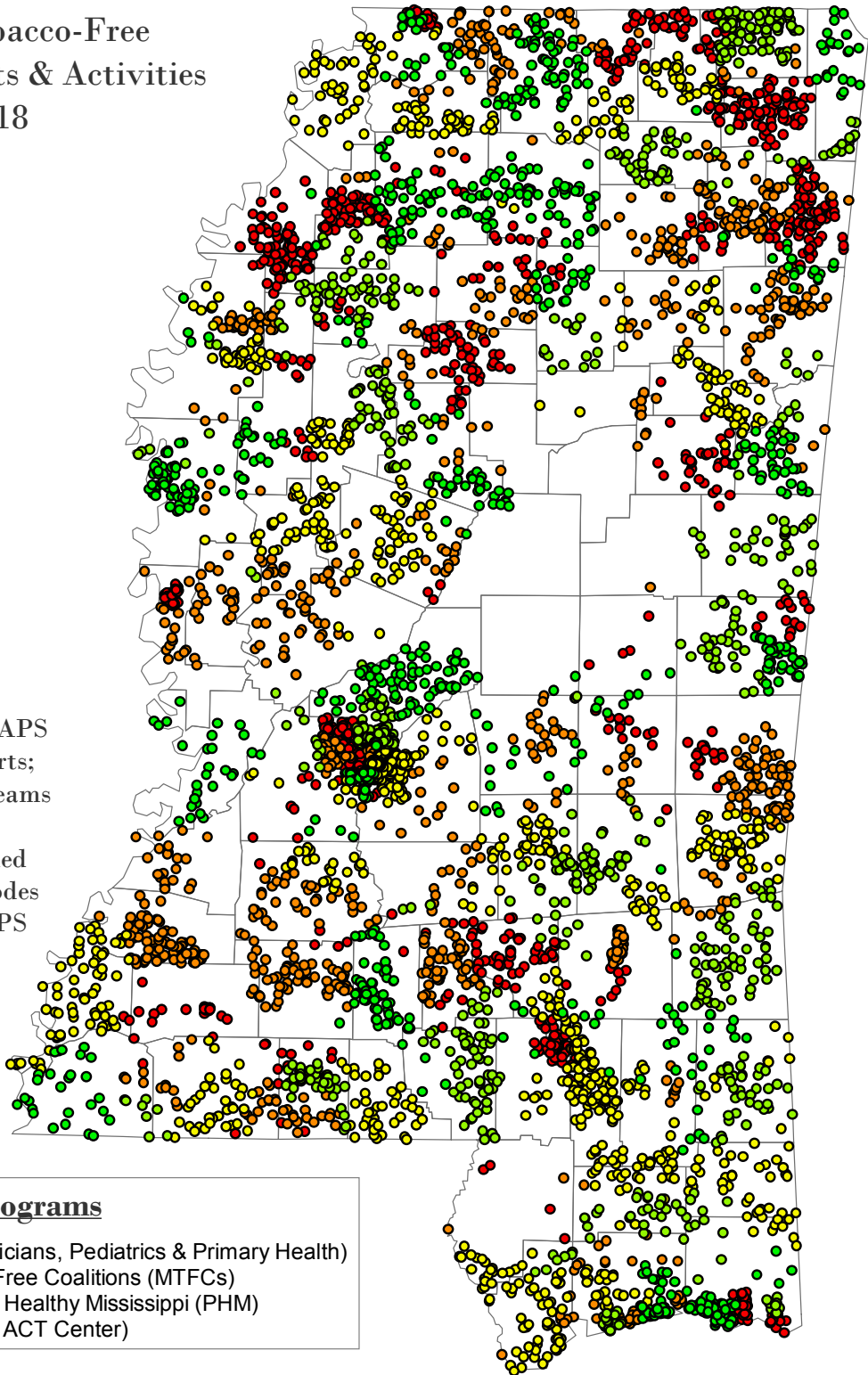
Map 2.

Mississippi Tobacco-Free Educational Events & Activities FY 2018

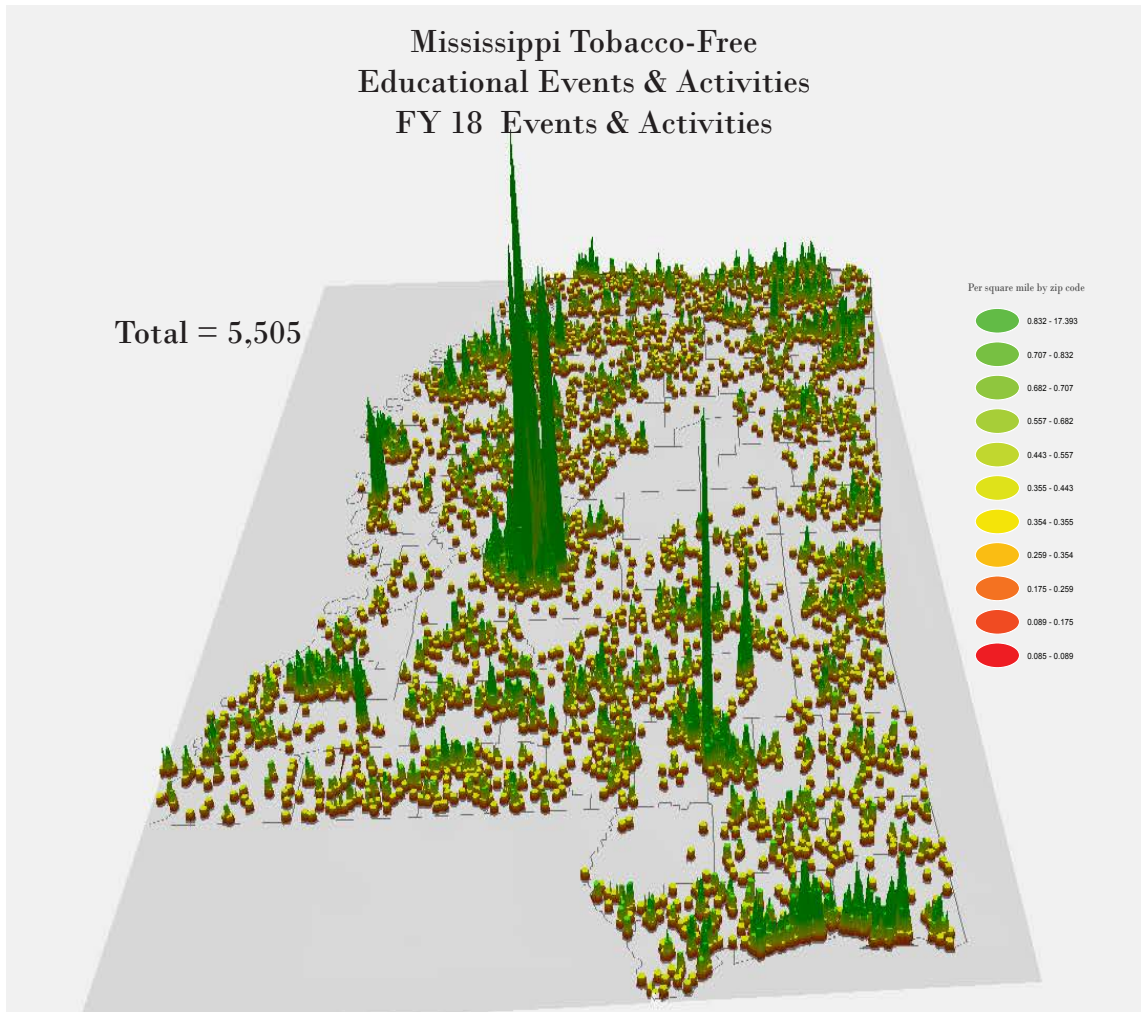
* Total = 5,505

Data extracted from TRAPS
(online data portal) reports;
does not include youth teams

* Some events not included
because of missing zip codes
or not entered into TRAPS



Map 3.



Maps 2 and 3 visualize the concentrated amounts of all of the activity in the state by each of the four programs. The data is determined by location (zip code), entered into TRAPS by program directors. These total 5,505 and include ordinance work, presentations, trainings, youth advocacy, collaborations and communications. The point density (map 2) shows the least amount of activity (reds) and the highest density of activity (greens).

Map 3 is a three-dimensional “heat map” that also displays all activity in the state by each of the four programs. The map reveals a high level of visual convergence between the activities and the geographic areas around the state using a diverging color ramp. The red color represents the fewest activities and events per square mile, while the green color represents the most activity per square mile.

Maps 1, 2 and 3 are virtually representative of the same data but are visualized differently with proportional distributions, geographic point density and finally the ratio of activities per square mile.

ms tobacco-free coalitions

(mtfc's)



Turnover among MTFC directors has somewhat impaired the complete implementation of programs for the last two years. The design of the tobacco free coalition concept is to have 34 operating MTFC's with a presence in each of the state's 82 counties. However, Attala, Leake, and Winston as well as Montgomery, Webster and Choctaw were not operational in FY18 or in FY17. For purposes of this report, information from Warren and Claiborne and Rankin, Scott, and Simpson are not included since directors were not in place for the full year. Therefore the evaluation of the MTFC's for FY18 includes 30 rather than 34 coalitions. Fifteen directors (44.1%) left their positions at some point in FY18 compared to 12 (35%) in FY17. Of the eight directors hired in FY17, only four remain today.

Table 3.

FY18 Staff Departures		
Directors Left	Coalition	Date
Beverly Raddin	Warren & Claiborne	6/2017
Leigh Lamkin	Attala, Leake & Winston	6/2017
Keetha Mosley	Choctaw, Montgomery & Webster	6/2017
Cassie Clinton	Lamar & Marion	6/30/2017
Justin Pope	Lafayette, Panola and Pontotoc	10/31/2017
Kellie Lamb	Jackson	11/30/2017
Nicole Henley	Lauderdale and Newton	12/1/2017
Paige Dickey	Adams, Franklin & Jefferson	12/29/2017
Jon Weeks	Rankin, Scott & Simpson	1/1/2018
Rochelle Culp	Holmes, Madison, & Yazoo	1/1/2018
Cheree' Albritton	Program Officer	1/29/2018
Shakeizia Jones	Hancock & Pearl River	3/23/2018
Rhonda Hayes	Covington and Smith	6/30/2018
Jackie Carter	Hinds	6/30/2018
Linda Turner	Benton, Marshall & Union	6/30/2018

Table 4.

FY18 NEW Staff		
Directors Start	Coalition	Date
Harry Gaston	Lafayette, Panola and Pontotoc	11/1/2017
Nicole Banks	Lamar & Marion	11/1/2017
Kristina Mullis	Jackson	1/2018
Sharon Nettles	Holmes, Madison, & Yazoo	1/8/2018
Jamara Dunn	Lauderdale and Newton	1/18/2018
Denise Diaz	Program Officer	1/2018
Jolaunda Hoye	Rankin, Scott & Simpson	2/2018
*Tatiana Hammond	Warren & Claiborne	2/16/2018
Shirley Brown	Adams, Franklin & Jefferson	3/1/2018
Brittney Perkins	Hancock & Pearl River	4/23/2018
Kathryn Allman	Choctaw, Montgomery and Webster	5/25/2018
*Shakela Banks	Warren & Claiborne	7/1/2018

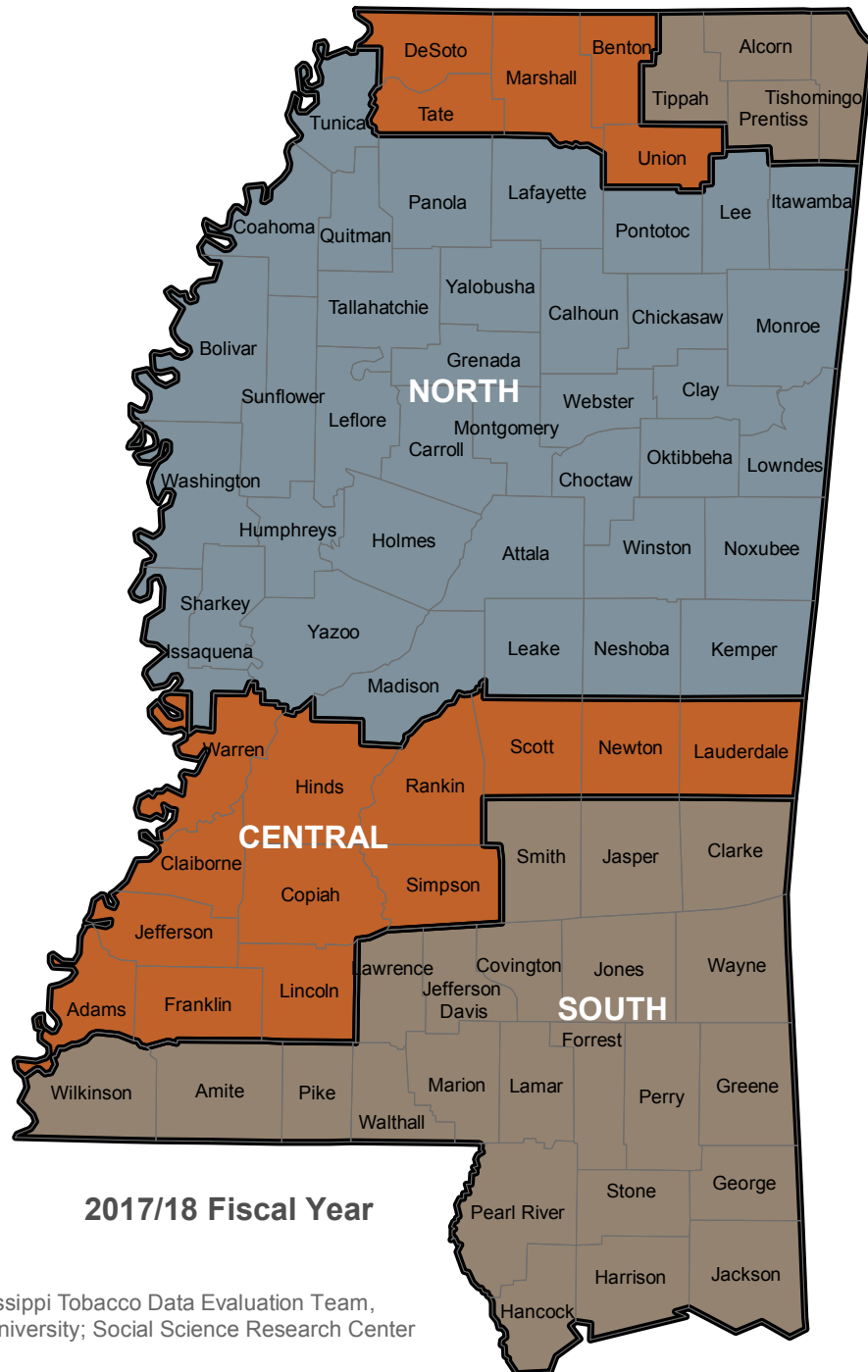
*Hired and left the position in 2018

MTFC scope of work requirements included general reporting, coalition organization and operational activities, programmatic activities, awareness, communication, advocacy and policy, youth advocacy and cessation awareness. As a whole, the work of the coalitions improved in FY18 with the exception of reporting itineraries through the monthly calendars and updates. (74% compared to 76.5% in FY17). There was a notable increase in the percentage of coalitions which met the team requirements for the year, with 64.5% attaining the goal compared to 32.4% in FY17 and 47.1% in FY16. Advocacy and policy work increased also with a 31% improvement.

Map 4.

Mississippi Tobacco-Free Coalition Regions & Directors

July 1, 2017 - June 30, 2018



Prepared by: Mississippi Tobacco Data Evaluation Team,
Mississippi State University; Social Science Research Center



Regions	County	Directors	Officers
N O R T H C E N T R A L	Attala, Leake & Winston	Vacant	M i c e h e s t l e r
	Bolivar & Sunflower Counties	Beverly Johnson	
	Chickasaw & Lee Counties	Shatara Agnew	
	Coahoma & Tunica Counties	Jasmine Pittman	
	Grenada, Yalobusha & Calhoun	Sue Mashburne	
	Issaquena, Sharkey & Washington	Tasha Bailey	
	Itawamba & Monroe Counties	Helen Boerner	
	Leflore, Humphreys & Carroll	Desiree Norwood	
	Madison, Yazoo & Holmes	*Sharon Nettles	
	Montgomery, Webster & Choctaw	Vacant	
	Noxubee, Kemper & Neshoba	Beverly Knox	
	Oktibbeha, Clay & Lowndes	Yolanda Pruitt	
	Panola, Lafayette & Pontotoc	*Harry Gaston	
Tallahatchie & Quitman	Pearl Watts		
C E N T R A L	Adams, Jefferson & Franklin	*Shirley Brown	D e D n i a s z e
	Copiah & Lincoln	Meishia Smith	
	Desoto & Tate	Marcus Ross	
	Hinds County	Jacqueline Carter	
	Lauderdale & Newton	*Jamara Dunn	
	Rankin, Scott & Simpson	*Jolaunda Hoye	
	Union, Benton & Marshall	Linda Turner	
	Warren & Claiborne	*Tatiana Hammond	
S O U T H E R N	Alcorn & Tippah Counties	Stacy Brooks	B S r a n f o r d
	Clarke, Jasper & Wayne	Pamela Lang-Prestage	
	Covington & Smith	Rhonda Hayes	
	Forrest, Jones & Perry	Wendy Magee	
	Greene, George & Stone	Stephanie Mayfield	
	Hancock & Pearl River	*Brittney Perkins	
	Harrison County	Kim Hart	
	Jackson County	*Kristina Mullis	
	Jeff Davis, Lawrence & Walthall	Casey Ward Hamilton	
	Lamar & Marion	*Nicole Banks	
	Pike, Amite & Wilkinson	Tabitha Wilson	
	Prentiss & Tishomingo Counties	Jennifer Palmer	

* Directors hired in 2017/2018



Figure 1.

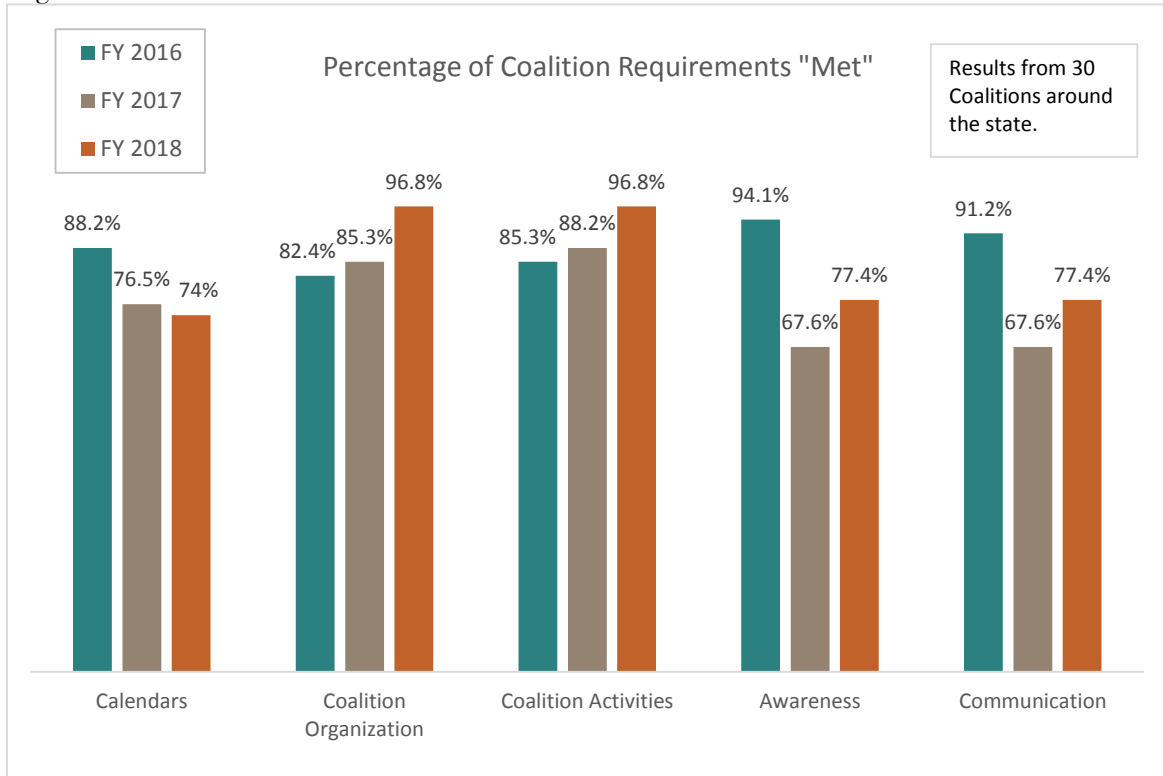
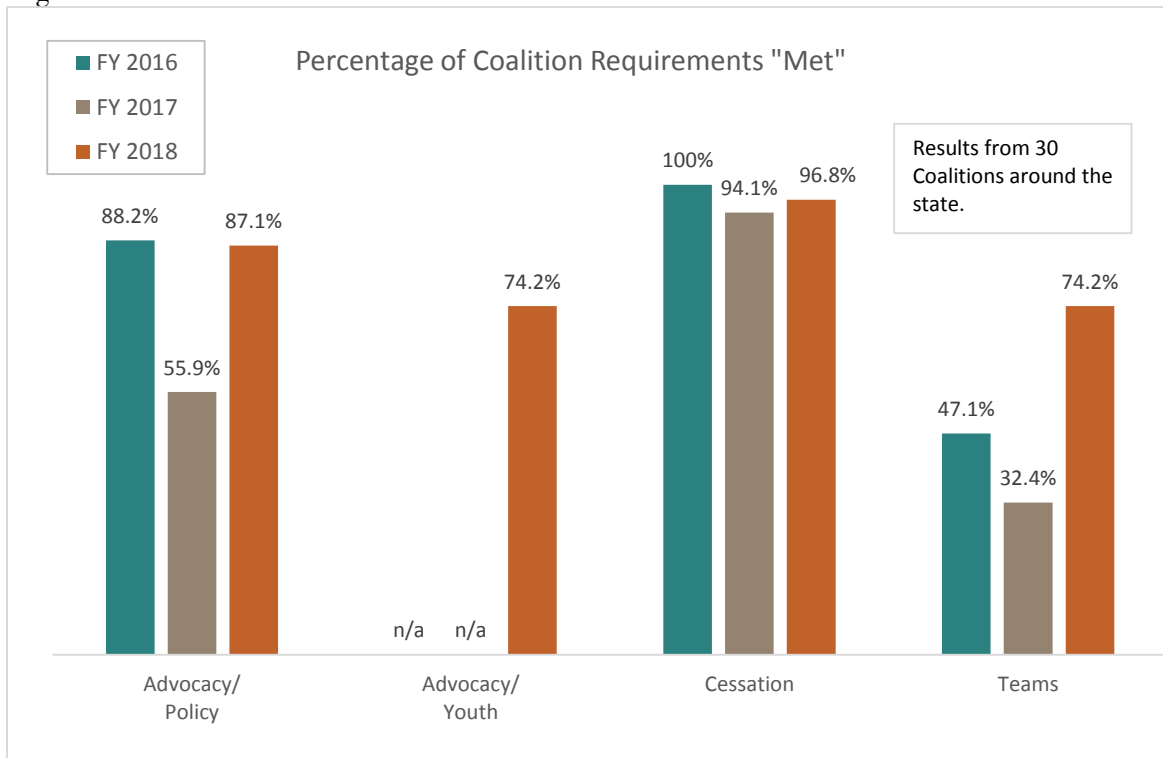


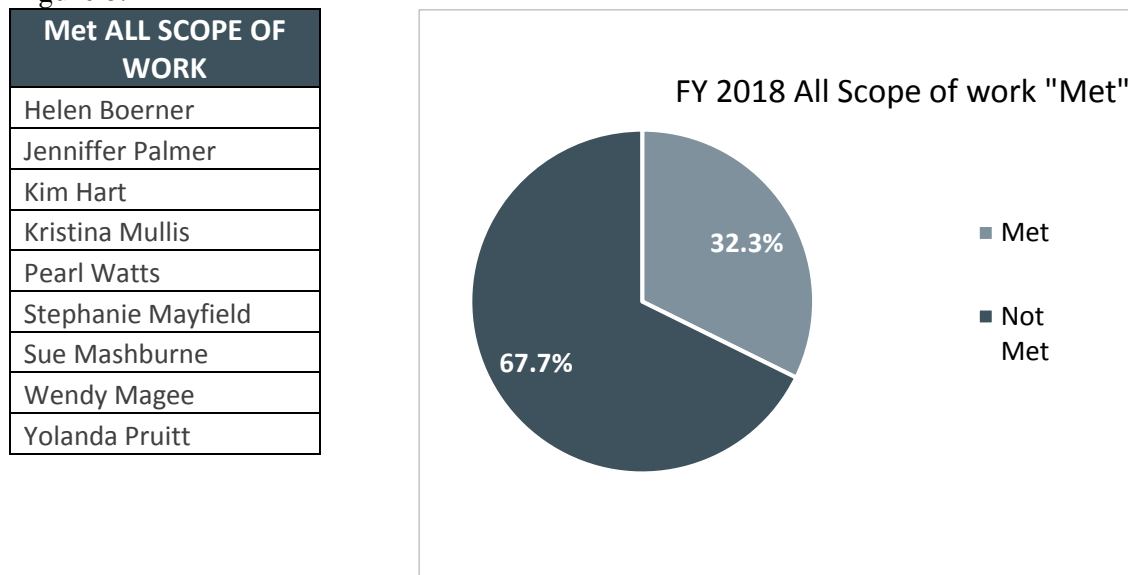
Figure 2.





Nine MTFC directors met or exceeded all of the scope of work requirements for the fiscal year, an increase from last year’s six. They are: Sue Mashburne, MTFC Director for Grenada, Yalobusha, and Calhoun Counties, Helen Boerner, MTFC Director for Itawamba, and Monroe Counties, Yolanda Pruitt, MTFC Director for Oktibbeha, Clay and Lowndes Counties, Pearl Watts, MTFC Director for Tallahatchie and Quitman Counties, Wendy Magee, MTFC Director for Forrest, Jones and Perry Counties, Stephanie Mayfield, MTFC Director for Greene, George and Stone Counties, Kim Hart, MTFC Director for Harrison County, Kristina Mullis, MTFC Director for Jackson County, and Jenniffer Palmer, MTFC Director for Prentiss and Tishomingo Counties. Ms. Boerner, Ms. Magee, Ms. Mashburne, and Ms. Mayfield were also among the six who successfully met or exceeded their scope for FY17. For a snapshot of MTFC activities, see Appendix A. For a more detailed look at each of the coalitions, see Appendix B.

Figure 3.



In Figure 3, the percentage of MTFC directors completing all scope of work requirements (32.3%) for the fiscal year is compared to those who did not (67.7%).

Table 5.

MTFC Breakdown	Events	Impact	Distribution
Advocacy/Policy	1,195	152,571	12,030
Cessation	406	0	22,549
General Awareness	1,966	93,108	62,080
Meetings (various)	298	3,213	0
Programmatic	64	834	492
Youth Teams	1,496	50,401	0
Team Sponsors	0	1,160	0
Summer Programs	428	4,980	0
Total	5,853	306,267	97,151



Table 6.

Advocacy/Policy	Events	Impact	Distribution
Merchant Training	161	279	545
Multi-Unit Housing	102	1,543	1,950
Ordinance Passage	19	96	61
Ordinance Work	277	1,458	731
SHS Pres	420	8,885	6,941
Youth Advocacy	142	2,224	1,602
Youth Trainings	2	285	51
Other	73	705	149
Total	1,196	15,475	12,030

Table 7.

Cessation	Events	Impact	Distribution
Resource Distribution	406	0	22,549

Table 8.

General Awareness	Events	Impact	Distribution
High Level Pres.	877	29,565	22,759
Disparate High Level Pres.	177	5,918	4,923
Not High Level Pres	258	23,001	12,188
Care for Their Air	110	2,386	3,172
Presentations	328	24,025	14,714
Leadership	51	253	84
Other	97	7,507	2,533
Total	1,898	92,655	60,373

Table 9.

Programmatic	Events	Impact	Distribution
Contests	67	453	1,707
Trainings	62	834	492
Total	129	1,287	2,199



Table 10.

Communications (MTFCs)	Events	Impact
Television	6	184,587
Radio	8	304,000
Published	196	382,042
Other Print	47	55,896
Submitted (unpub.)	360	0
Total	617	926,525

Tables 5-10 break down the scope of work components for the year. Events simply indicate the number of events/activities conducted; impact means the number of participants, and distribution means the number of materials disseminated during the event. Table 11 compares FY 17 to FY 18.

Table 11.

MTFCs by the Numbers	FY 2017		FY 2018	
	Events	Impact	Events	Impact
Advocacy/Policy	1,609	38,386	1,195	152,571
Cessation	902	14,704	406	0
General Awareness	2,935	210,013	1,966	93,108
Meetings (various)	276	3,089	298	3,213
Programmatic	11	688	64	834
Youth (Teams)*	2,606	72,947	1,496	50,401
Team Sponsors	0	1,534	0	1,160
Summer Programs	174	5,700	428	4,980
Total	8,513	347,061	5,853	306,267

* in 2017 totals included team activities (20,588)

Collectively, the MTFC’s directly impacted 1,496 Mississippi students through their work with youth teams (987 RAT teams and 509 FREE Teams). They also reached 35,483 adults through 1,054 high-level presentations (including disparate presentations). A small example of high level presentations include: How to keep kids away from tobacco and the importance of a smoke-free home (Quitman Upper Elementary), Surprise Santa presentation to Union County sheriff, deputies, and dispatch workers, Grenada School Administrators presentation on electronic cigarettes and information on JUUL, Dangers of tobacco and impact on production numbers at Raytheon of Forest, and the dangers of smoking presented at Terry Grove MB Church. For the first time, MTFC directors were charged with each presenting at least four high level awareness presentations to disparate populations in the state. 177 presentations were conducted reaching 5,918 Mississippians.



Examples included a presentation to African American and Latina pregnant mothers at the Senatobia Health Department, homeless individuals at Our Daily Bread in Pascagoula, students with reading deficiencies at Jackson State University, a teen mom group at the Hancock County Schools, disabled and elderly African Americans at Forever Young Adult Daycare in Shaw, tobacco education presented to LGBTQ individuals at Kaho Healthcare Training Facility in Brookhaven, and a second-hand smoke presentation to a drug addiction support group at Life Help Center in Greenville.

Other MTFC activities included:

Great American Smoke Out: 46 events across the state with 1,491 people in attendance compared to 62 events with 18,891 people impacted in the previous year (FY 17).

Kick Butts Day: 51 events with 7,032 people in attendance compared to 49 events with 9,059 in attendance in FY 17.

Ordinance groundwork: 277 activities with 1,458 people in attendance compared to 253 activities with 1,681 people in attendance in FY17.

Ordinance or amendment passage: 18 for FY18 compared to 18 in FY17.

Care for Their Air: 110 presentations to 2,386 child care center staff as well as parents and caregivers of the children enrolled in such programs compared to 109 presentations to 2,625 in the preceding year (FY 17).

Secondhand Smoke Presentations: 420 around the state to civic clubs, local government entities, conferences, youth groups back to school events with 8,825 in attendance compared to 571 with 21,425 last year (FY 17).

Merchant Training Presentations: 161 trainings with 279 in attendance compared to 187 with 273 in attendance in the preceding year (FY 17).

Multi-Unit Housing Presentations: 102 with 1,543 in attendance compared to 93 with 1,226 in the preceding year (FY 17).

RAT on the Road Presentations: 115 with 10,275 youth in attendance compared to 198 with 10,237 in attendance in FY 17.

MTFC Active Youth Teams: 1,496 teams (2,607 in FY 17)

Number of Students on Active Teams: 50,401 (72,969 in FY 17)

Number of educational activities completed by active teams: 7,766 (20,588 in FY 17)



Communication messages conveyed via newspaper (382,042), radio (304,000), and television (184,587) markets reaching a potential audience of 870,629 people.

Other print communication pieces (i.e. newsletters, bulletins) impact: 55,896.

196 published pieces; 360 submitted.

Although it seems, in some cases, as if the numbers for FY 2018 were not as impactful as in the preceding year, it is important to remember that not all coalitions were operational this year, and in many cases more accurate numbers were reflected in TRAPS.

Directors were asked to record all of their activities in TRAPS in a timely and synchronized manner that corresponds with what appears on the monthly calendars, their monthly activities in TRAPS and their monthly expenditures. Seven directors were negligent in completing their calendar obligations (Beverly Johnson, Tasha Bailey, Desiree Norwood, Sharon Nettles, Marcus Ross, Casey Ward Hamilton, and Nicole Banks). Eight directors were negligent in reporting in a timely manner during the last fiscal year. They included Marcus Ross, Tasha Bailey, and Desiree Norwood. All directors are constantly reminded to devote time on a weekly basis to reflecting their work in TRAPS. Those who do have much less trouble in keeping up with their data and activities. It is important that calendars be uploaded as required prior to the upcoming month to enable project officers to make check-in visits. 74% did so compared to 76.5% for FY17.

In reviewing the coalition organization and activities, 29 directors (96.8%) conducted the required four coalition meetings and had uploaded all sign in sheets, agendas, and minutes. Only one director, Harry Gaston, newly hired (fall, 2017) Project Director for Panola, Lafayette, and Pontotoc Counties was missing some of these documents. All 30 directors conducted and uploaded a SWOT analysis, and all submitted a yearly work plan as required by the Scope of work.

Each May, coalition members are surveyed to gauge their views on the work of their coalitions in their specific communities. The evaluation team retrieves email addresses from the membership lists found in TRAPS and sends an electronic survey using Qualtrics software. In the past, many of the membership lists have been lacking working email addresses. Directors were reminded throughout the year to update their lists to ensure that an adequate number of coalition members would have the opportunity to be surveyed. The total responses to the coalition board members survey was 90. According to the results of this year's survey, the majority of respondents (87%) reported that they had been asked to be involved in coalition planning by their directors compared to 92% for last year. At least 82.6% said that they had been asked by the director to recruit new members. Respondents (N) were also given a list of coalition activities and were asked if they had assisted in any way during the year. The following represents the percentage of coalition member respondents who reported they had directly participated in the coalition in some way.



Figure 4.

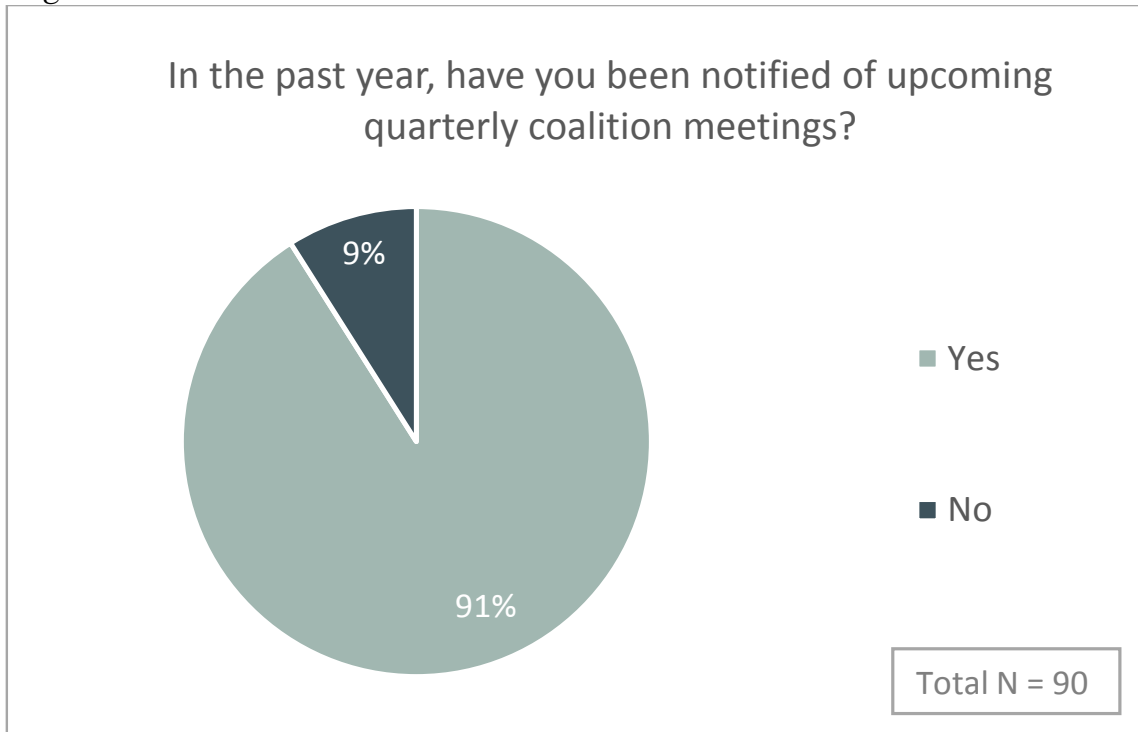


Figure 5.

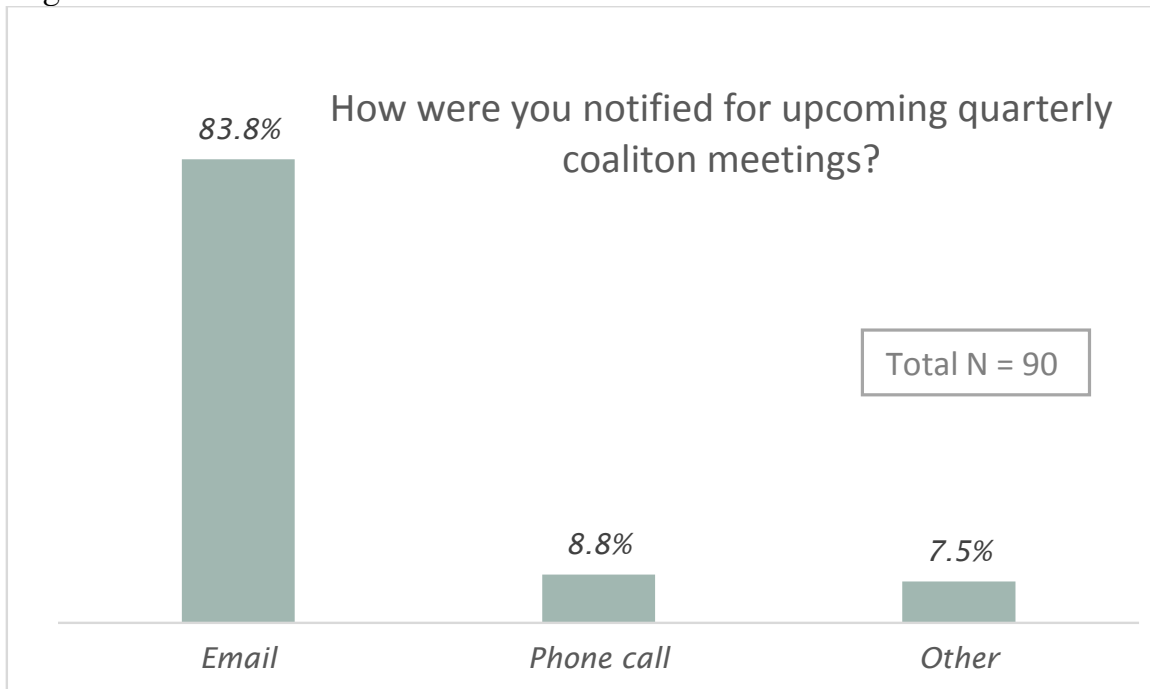




Figure 6.

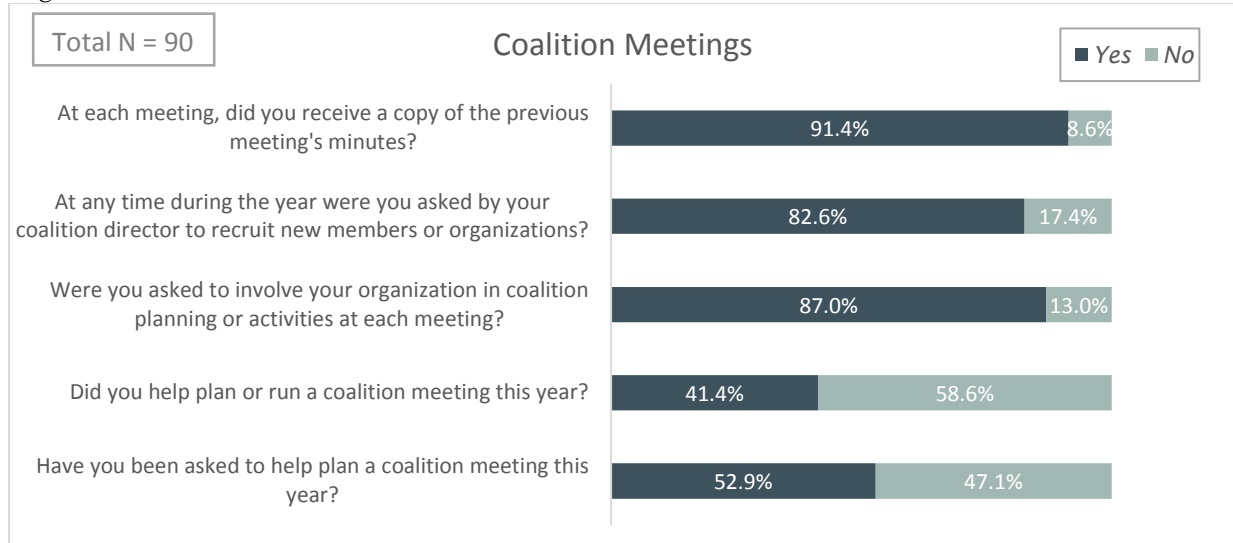


Figure 7.

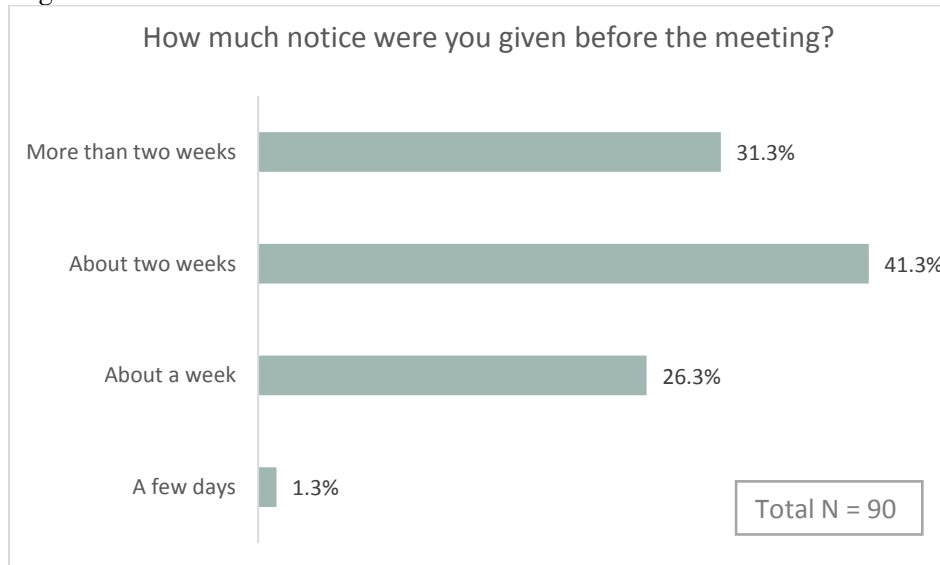




Figure 8.

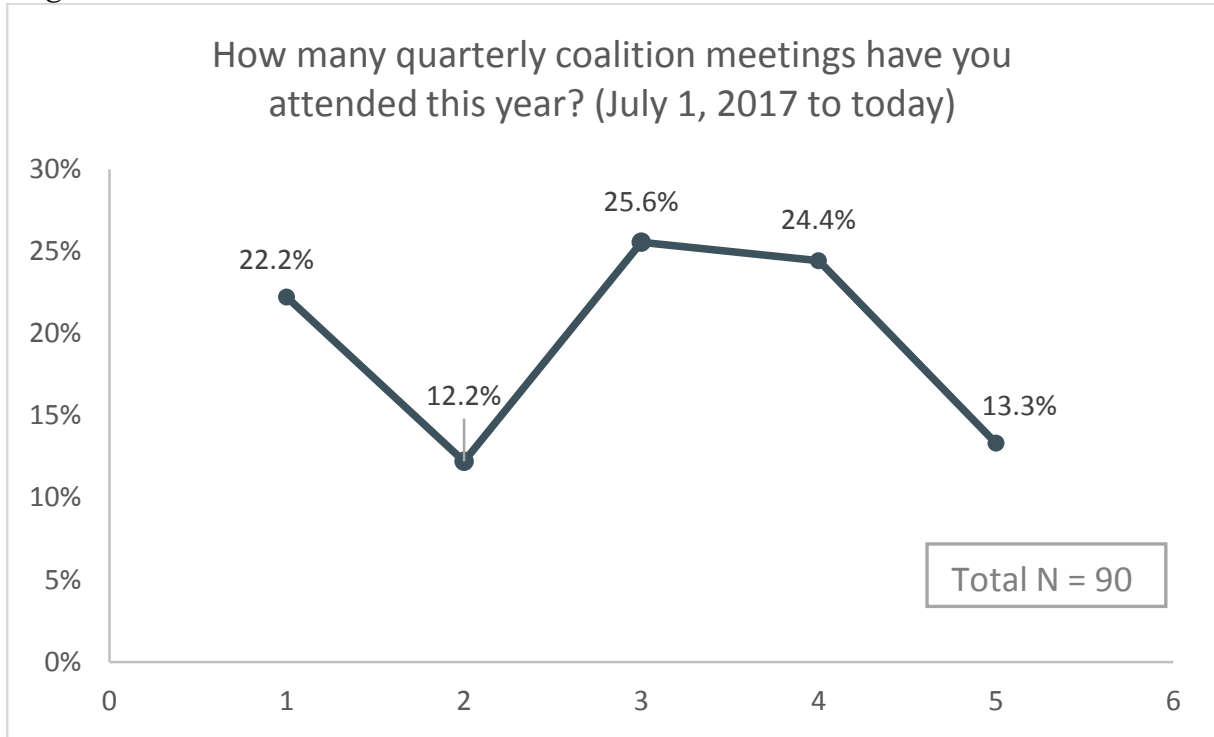


Figure 9.

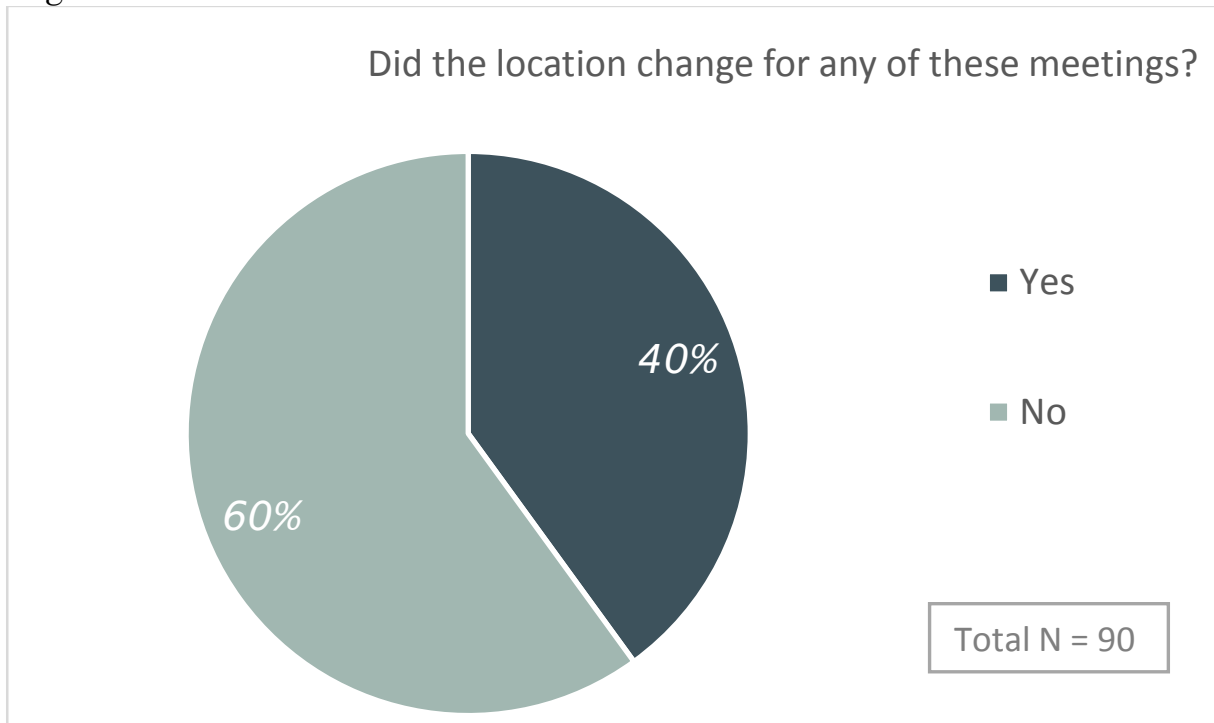


Figure 10.

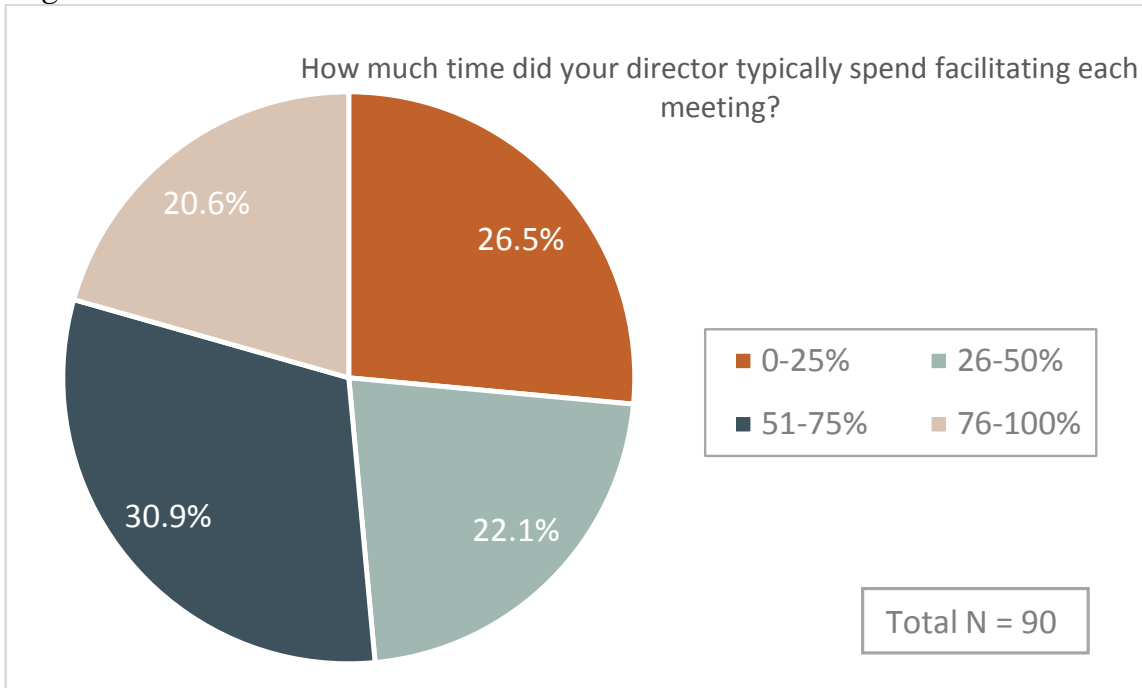


Figure 11.

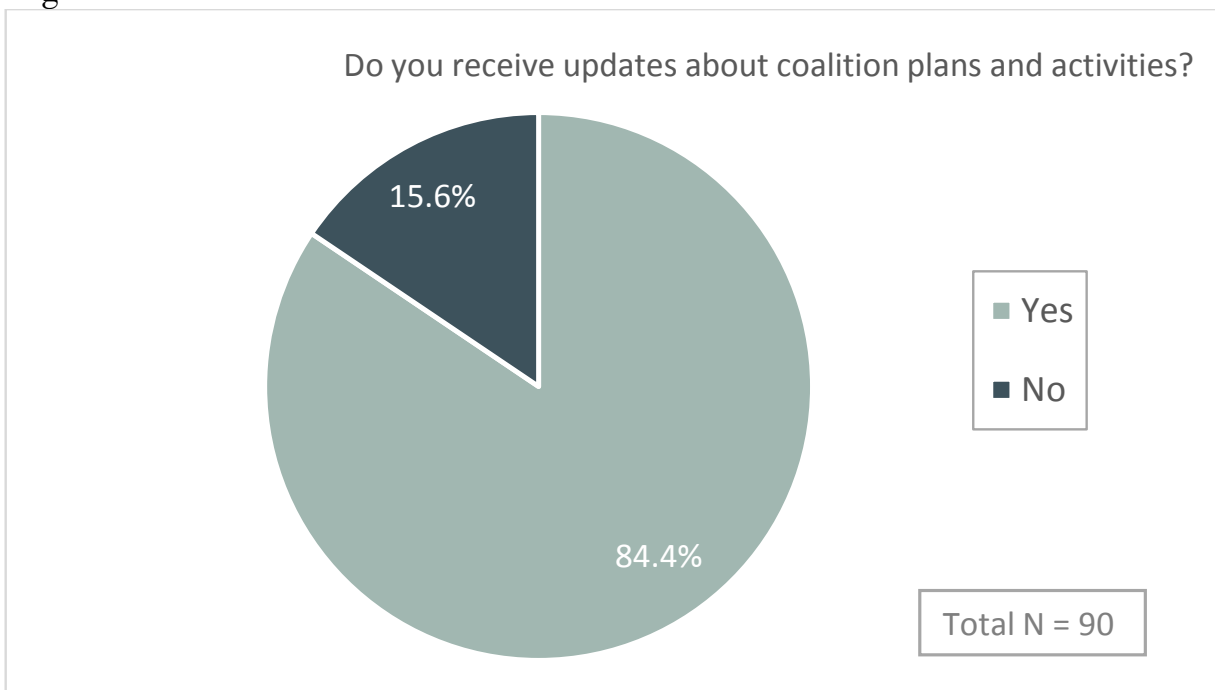




Figure 12.

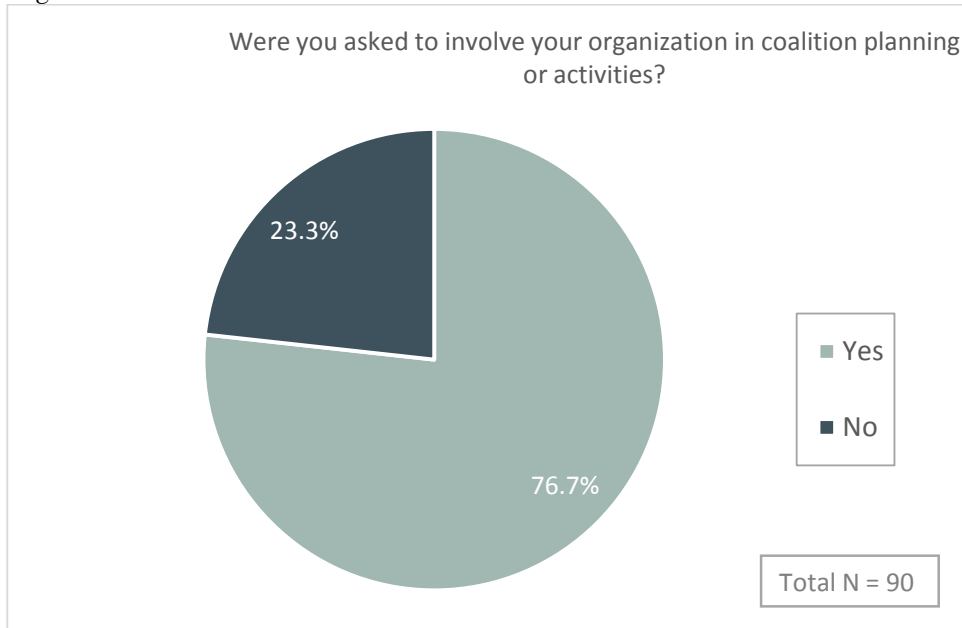
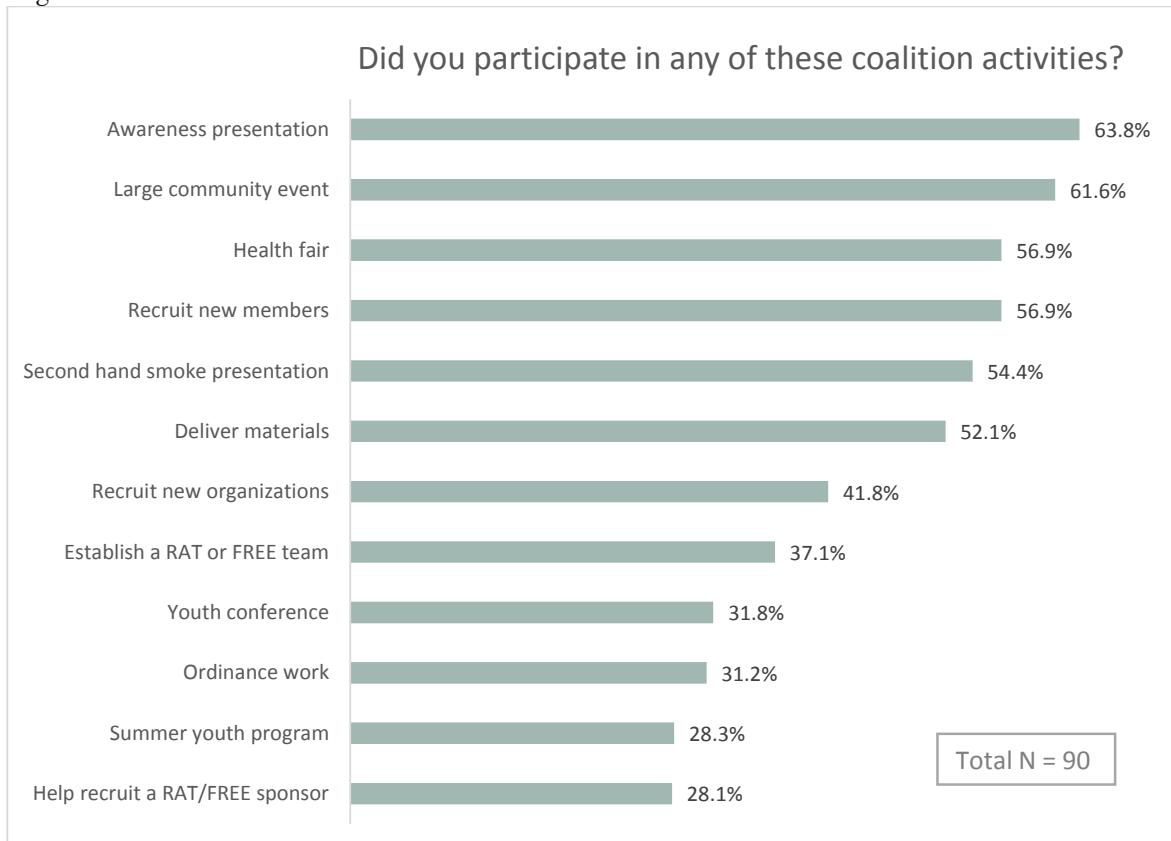


Figure 13





Open-ended questions:

Please list other activities you participated in:

- I helped put together goodie bags for her RAT Team
- Set up booths at health fairs and presentation to church youth
- Red Ribbon Week Activities, Volunteer track coach drawing contests, etc.
- Civic clubs and community events like Walk for Life and Relay for Life
- Tobacco Presentation for Healthcare Providers promoting the Quitline Relay for Life
- Church events...No Menthol Sunday
- RAT Program Spread the word about the coalition and its mission
- Church smoke outs, Great American Smoke Out

What do you consider to be your Director's greatest skill?

- I feel she is well rounded in all these areas and connects well with the community
- All of the above (2)
- Perseverance
- She is good at organization, communication and being involved locally
- Connecting with students
- She has it all the whole package
- ALL - she is well rounded in the above areas and an asset to us all
- I think that my director is doing a pretty good job. She will try to get in on Community Events and she does involve her Coalition Members by checking to see if they need any information or what events they are having.
- She is good in what she does!
- Great director. Very active within the community I think she is doing a great job!
- She's awesome!
- I think she is doing a great job!



What is the best thing that has happened this year (July 1, 2017 to now) related to your Coalition's work?

- Increased Youth Involvement (3)
- Edwards became a smoke-free community
- Dancing Like the Stars program for the Boys and Girls Club and how it was presented with coalition tobacco free promoted through this program, great job!!
- Getting my church more involved in being smoke-free
- The Kick Butt Rally, it really provided the team members with valuable information, hands on activities, and guest speakers. All worked to bring awareness of Kicking the Butts. Cigarette smoking. Most kids did not have a clue.
- As a faith based and community organization we have been able to infuse coalition work into all of the work that we do from the community garden, health fairs, fishing rodeo, walking and youth activities in our church and inclusive of the community. We make sure our director is aware of our calendar and is included. We are thankful for the partnership.
- We are a smoke-free community
- Creating smoke-free environments
- Smoke-free Ordinances
- I've experienced contact with young smokers who are interested in quitting and requesting help. Awesome!
- The smoke-free initiative Countywide
- The Coalition is more visible and active in Yazoo area schools
- Students have gained more knowledge about the horrible effects of tobacco on the body
- The participation of the communities served
- Our local school district updated its handbook to include all new products and a town ordinance was passed in our area
- Passing an ordinance from 7 years back now it happened
- All Tallahatchie towns are smoke-free
- Advocacy training
- Recruitment and new members and organizations, and the counties becoming smoke-free
- Our director joined our Boys and Girls Club Board
- Our coalition did not progress this year
- I became chairman and implemented great programs for students and events
- Community Involvement
- The county wide ordinance for Stone County that their youth have led!
- Lots of awareness is being built throughout our community through various events and presentations



In what way(s) could (your director) improve as the director of your coalition?

- None (3)
- I cannot think of any at this time
- Inform the team of upcoming events in advance, at least a month in advance. She recently joined the coalition, but we have met with her about 5 times and have been involved in 2 activities. So I will have additional comments after our first year.
- Get help - much needed
- We need to have additional training to prevent young people from starting to smoke
- Our director has a lot of area to cover and organizations to cover, maybe dividing up some of her area or organizations would be beneficial
- It would be great if our director would visit our campus and talk to our classes once every semester
- I have not met her
- She is new so she just needs to learn her material better
- We need a new director
- She is really doing a fantastic job! No negative comments!
- Follow through with sponsorship or items in a quicker/timely manner. Be more active and involved
- She often takes on too much responsibility

Awareness presentations play a big role in the MTFC Scope of work requirements. In FY18, all awareness presentations were to be presented to adults and were considered high-level. Overall, the percentage of directors who met the requirements jumped to 77.4% compared to 67.6% in the preceding year. Those directors who met or exceeded the required number of presentations were: Sharon Nettles (51/36), Meishia Smith (27/24), Linda Turner (46/36), Stacy Brooks (61/24), Pamela Lang Prestage (51/36), Rhonda Hayes (61/24), Brittney Perkins (30/24), Tabitha Wilson (45/36), Jenniffer Palmer (45/36), Wendy Magee (39/36), Tasha Bailey (37/24), Stephanie Mayfield (49/36), Pearl Watts (30/24), Nicole Banks (26/24), Marcus Ross (26/24), Kristina Mullis (15/12), Jolaunda Hoye (39/36), Desiree Norwood (46/36), Casey Ward-Hamilton (41/36), Brittney Perkins (30/24), Beverly Johnson (25/24), Yolanda Pruitt (38/36), Sue Mashburne (36/36), Shirley Brown (47/36), Shatara Agnew (29/24), Kim Hart (17/12), Jackie Carter (20/12), Harry Gaston (36/36), Helen Boerner (29/24).



From MTFC Coalition Members:

“Lots of awareness is being built in our community through various events and presentations.”
MTFC Coalition Member

“The Kick Butts rally really provided the team members with valuable information, hands-on activities and guest speakers. They all worked to bring awareness to kicking the butts. Most kids did not have a clue.”

MTFC Coalition Member

“I’ve experienced contact with young smokers who are interested in quitting and requesting help. Awesome!”

Photo Voice Presentations and Success Stories came under the awareness umbrella and marked the second year of implementation. Photo Voice is designed to record and reflect a community’s strengths and concerns through the lens of the camera. The objective is for the photos to create a conversation to promote dialogue and raise awareness among community stakeholders and elected officials. Directors were instructed to present their Photo Voice at a coalition meeting, elected officials meeting, or any other community event. Twenty-seven MTFC directors completed a Photo Voice Project. (Marcus Ross, Sharon Nettles, and Harry Gaston did not submit projects.) Initially many directors were confused about the specific components needed to have a quality product. A follow-up during the June 2017 MTFC quarterly training clarified some issues, but many new directors hired during the course of FY18 did not have the benefit of learning some of the specifics. Kristina Mullis, MTFC Director for Jackson County did an outstanding job of conveying how vaping is affecting the city of Pascagoula. The evaluation team reviewed all Photo Voice projects and commends the following directors for their grasp of the project’s intent:

Photo Voice
Brittney Perkins
Jasmine Pittman
Kim Hart
Kristina Mullis
Meishia Smith
Nicole Banks
Pearl Watts
Shatara Agnew
Shirley Brown
Yolanda Pruitt



The Success Stories were also to be presented at a community event, coalition meeting and/or an elected officials meeting. The story is meant to be a concise way to explain a health issue that needs to be addressed, a description of the intervention, and key outcomes from it. Directors were given an outline from the CDC describing how to develop a success story. All but one director (Shirley Brown) created and uploaded a Success Story in the TRAPS system. Many directors focused on the youth program in their communities, and several new directors highlighted their feelings as they began their journeys. Although the process of examining the Success Story as well as the Photo Voice is somewhat subjective, the evaluation team has selected the following Success Stories as those who presented a clear message.

Stacy Brooks, Alcorn and Tippah MTFC

Highlighting her work with the Good Samaritan Center, a food pantry located in Ripley, Mississippi where she is currently working to pass a smoke-free ordinance. Good job of tying in local data, particularly around low-income citizens with the need to curtail smoking in the area.

Desiree Norwood, Carroll, Humphreys, and Leflore MTFC

Featuring her presentation process for tenants in Cottonwood Glen Apartments in Greenwood, a HUD complex.

Yolanda Pruitt, Clay, Lowndes and Oktibbeha MTFC

Explaining the process of passing an amendment to the Starkville Smoke-Free Ordinance to include vaping and e-cigarettes. Yolanda also talked about how the passage can further impact future ordinance work.

Jasmine Pittman, Coahoma and Tunica MTFC

Outlining the impact that youth advocates can have on the community.

Kim Hart, Harrison County MTFC

Outlining her partnership with the EPA, My Brother's Keeper and the Gulf Coast Health Policy Coalition encouraging Biloxi Housing to go smoke-free since it was not covered under the new HUD policy.

Jackie Carter, Hinds County MTFC

Focusing on a partnership with a community activist in rural Edwards, Mississippi that ended in the passage of a smoke-free ordinance. Jackie did a good job of using data to convey her message.

Helen Boerner, Itawamba and Monroe MTFC

Focusing on her efforts to educate tenants and administrators in the Aberdeen Housing Authority about going smoke-free. Helen did a good job of citing sources from HUD.

Beverly Knox, Kemper, Neshoba, and Noxubee MTFC

Outlining the coalition's work in changing the mindset of Mississippi Choctaws (youth and adults) living on the reservation in Neshoba County.



Many of the Success Stories had a good story to relate but lacked content or concise reporting. Some did not follow all the way through with the CDC guidelines. In the coming fiscal year, evaluators will work with the OTC administrators to select a few Success Stories that can be expanded and reworded to create a substantial piece for OTC use in highlighting work at the local level.

For Fiscal Year 2018, the concept of identifying youth advocates was added to the advocacy and policy deliverables. MTFC directors were asked to recruit youth advocates from each of their counties. Travel across counties proved to be a hardship for some directors since teens were often not allowed by parents and guardians to travel on their own to meetings. Despite some of the challenges, nearly three-quarters (74.2%) of directors were able to achieve the deliverables described in the SCOPE OF WORK. Kristina Mullis, Jackson County MTFC Director was successful in using her youth advocate team in Ocean Springs to educate community members about the need for a smoke-free ordinance and even appeared on a television news segment in her area.

“I feel my work around my community impacts my peers and community by opening their eyes to the dangers that lurk within tobacco-related products and changes their view on the products. I chose to participate as a youth advocate to hopefully change peoples’ lives and to create a healthier future for everyone.”

*Natalie Santiago
Youth Advocate
Jackson County*

Advocacy and policy work as a whole had a significant jump in FY18, with 87.1% of all directors completing their work, compared to 55.9% in the previous year. With the exception of the MTFC’s that were not operational, all directors submitted ordinance work plans for the year.

Eighteen directors participated in passing ordinances and/or amendments in their communities, the same as the previous year. In FY 18 there were: 10 comprehensive ordinances passed (14 in FY 17); three amendments (2 in FY 17); one partial ordinance (one in FY 17); and four county-wide passages (one in FY 17).

Tasha Bailey is to be commended for her efforts with the passages in Issaquena and Sharkey Counties. Sue Mashburne is also recognized for the Yalobusha County smoke-free ordinance which included the towns of Coffeerville and Water Valley as well as Rochelle Culp for Madison County. Pearl Watts successfully worked towards the passage of comprehensive ordinances in Glendora, Lambert and Falcon. Amendments were passed in four communities: Ridgeland, Starkville, Magee (partial), and Pascagoula. In September 2017, Mississippi Valley State University went smoke-free with assistance from MTFC Director Desiree Norwood.



Table 12.

Ordinances	Director	Date	Type
Yalobusha County	Sue Mashburne	7/5/2017	Comprehensive
Coffeetown	Sue Mashburne	7/5/2017	Comprehensive
Water Valley	Sue Mashburne	7/5/2017	Comprehensive
Roxie	Paige Dickey	7/6/2017	Comprehensive
Madison County	Rochelle Culp	7/19/2017	Comprehensive
Glendora	Pearl Watts	9/7/2017	Comprehensive
Scooba	Beverly Knox	10/14/2017	Comprehensive
Blue Mountain	Stacy Brooks	12/27/2017	Comprehensive
Vaiden	Desiree Norwood	1/4/2018	Comprehensive
Sharkey County	Tasha Bailey	3/7/2018	Comprehensive
Lambert	Pearl Watts	3/7/2018	Comprehensive
Falcon	Pearl Watts	4/18/2018	Comprehensive
Gunnison	Beverly Johnson	5/3/2018	Comprehensive
Issaquena County	Tasha Bailey	6/6/2018	Comprehensive
Amendments	Director	Date	Type
Ridgeland	Rochelle Culp	9/14/2017	(e-cig)
Starkville	Yolanda Pruitt	10/3/2017	(e-cig)
Magee	Jon Weeks	10/3/2017	Partial
Pascagoula	Kristina Mullis	3/18/2018	(e-cig)

Table 13.

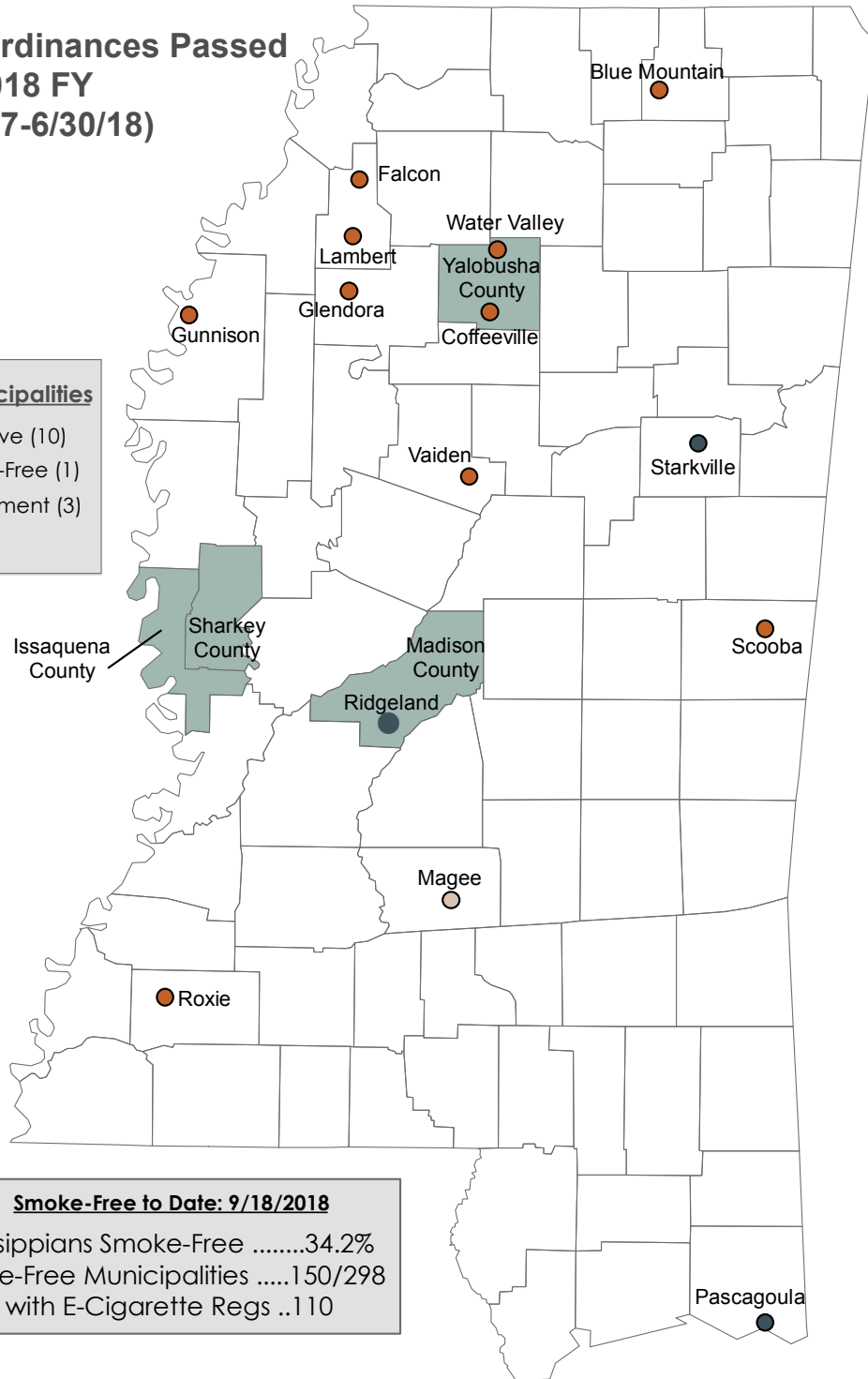
Place	Pop	Status	Date
Yalobusha County	7,759	C	7/5/2017
Coffeetown	862	C	7/5/2017
Water Valley	3,362	C	7/5/2017
Roxie	473	C	7/6/2017
Madison County	39,518	C	7/19/2017
Glendora	137	C	9/7/2017
Scooba	694	C	10/14/2017
Blue Mountain	7,220	C	12/27/2017
Vaiden	971	C	1/4/2018
Sharkey County	1,537	C	3/7/2018
Lambert	1,440	C	3/7/2018
Falcon	150	C	4/18/2018
Gunnison	412	C	5/3/2018
Issaquena County	785	C	6/6/2018
Ridgeland	24,266	A	9/14/2017
Starkville	25,352	A	10/3/2017
Magee	425	P	10/3/2017
Pascagoula	21,733	A	3/18/2018
Total (18)	137,096		7/1/2017 - 6/30/2018

Map 5.

**Smoke-Free Ordinances Passed
2018 FY
(7/1/17-6/30/18)**

Smoke-Free Municipalities

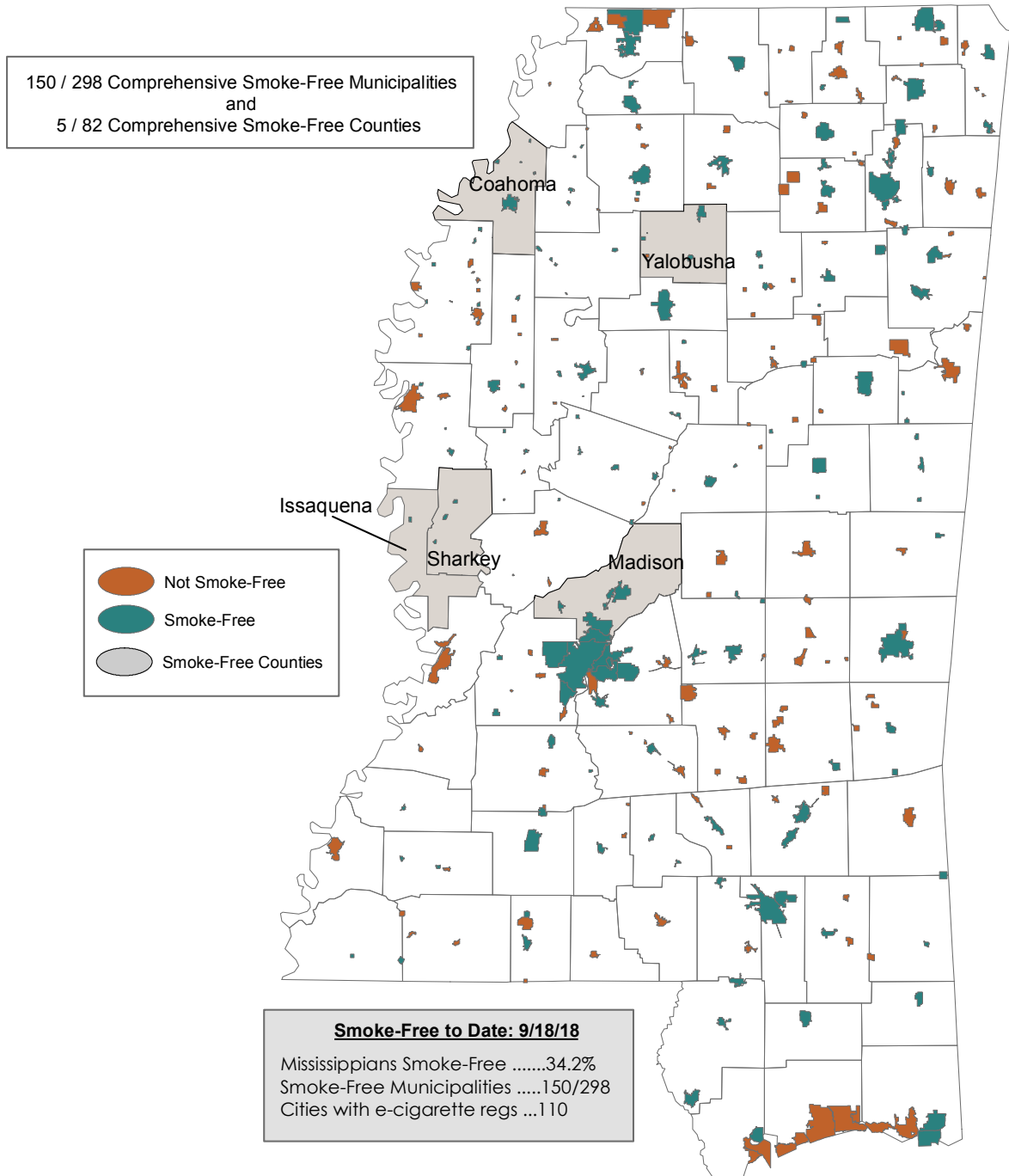
- = Comprehensive (10)
- = Partial Smoke-Free (1)
- = E-Cig Amendment (3)
- = Counties (4)



Source: Mississippi Tobacco Data, Mississippi State University
 For more details: <http://traps.msussrc.com/smokefree/map>

Map 6.

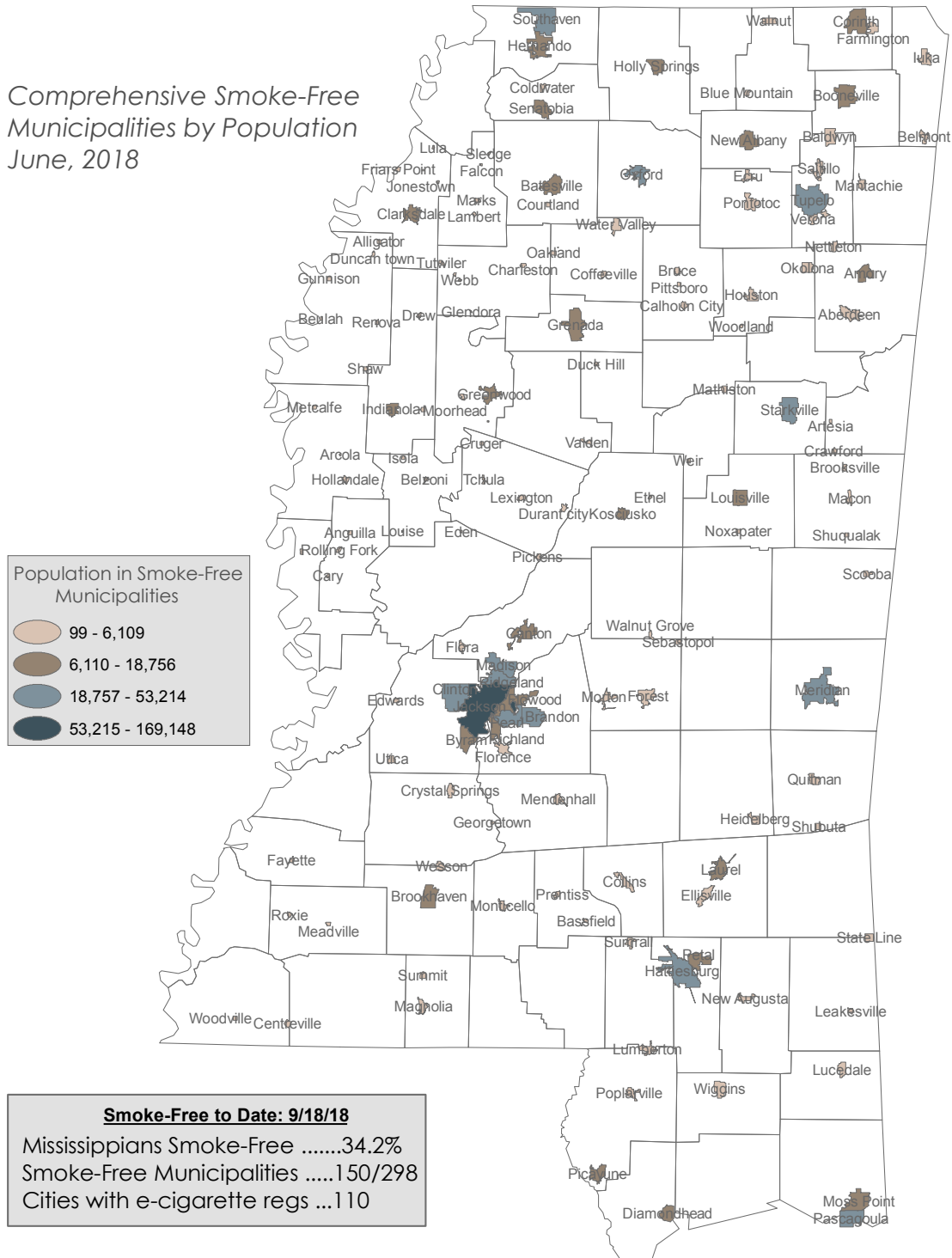
Status of Mississippi Comprehensive Ordinances June, 2018



Source: Mississippi Tobacco Data, Mississippi State University;
For more details: <http://traps.msusrc.com/smokefree/map>

Map 7.

*Comprehensive Smoke-Free Municipalities by Population
June, 2018*



Source: Mississippi Tobacco Data, Mississippi State University; 2017 U.S. Census Population
 For more details: <http://traps.msusrc.com/smokefree/map>

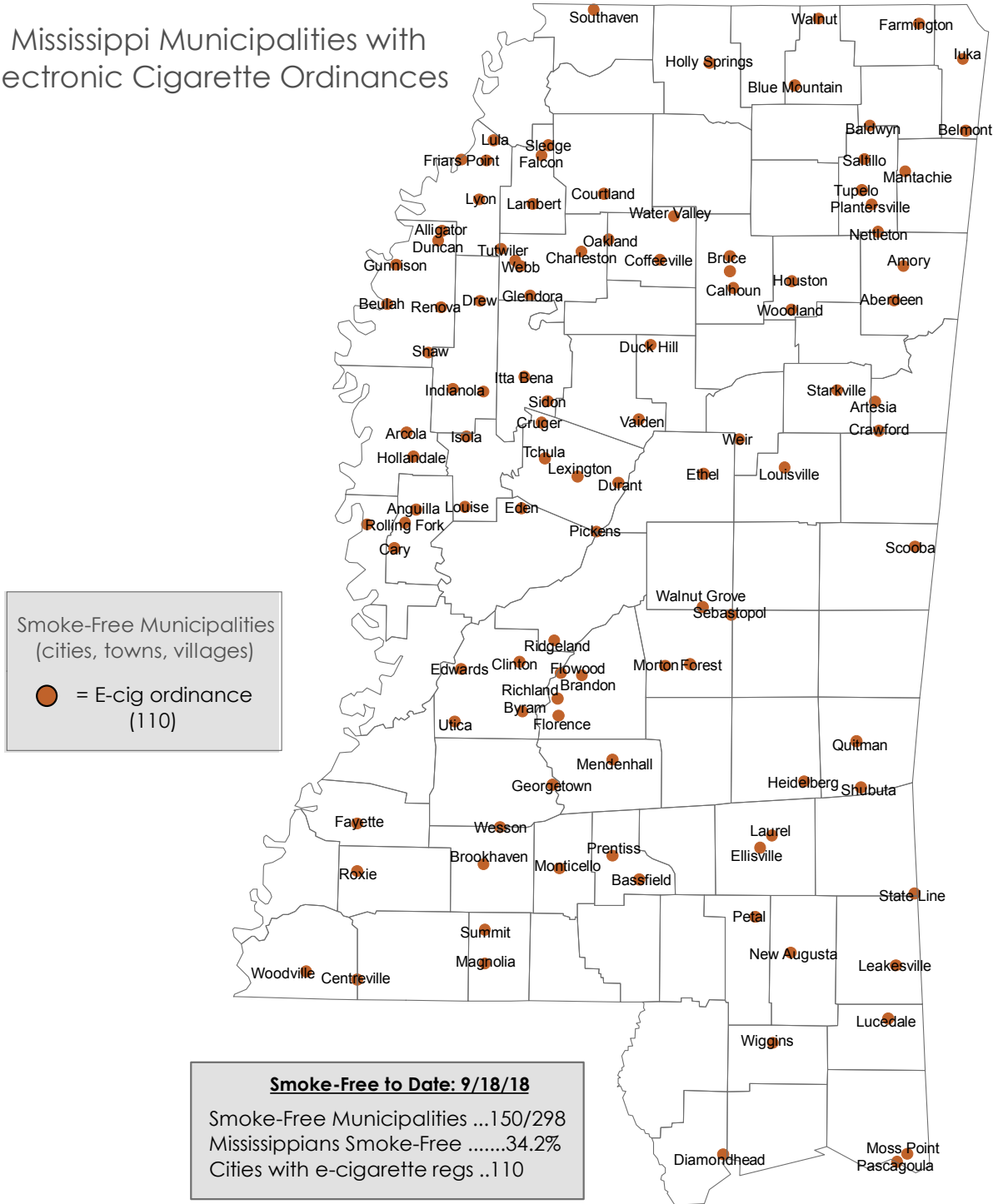


Table 14.

Comprehensive Smoke-Free Mississippi 9/18/2018			
Aberdeen	Duck Hill	Louise	Prentiss
Alligator	Duncan	Leakesville	Pittsboro
Amory	Durant	Lexington	Quitman
Anguilla	Ecu	Louisville	Renova
Arcola	Eden	Pontotoc	Ridgeland
Artesia	Edwards	Poplarville	Rolling Fork
Baldwyn	Ellisville	Lucedale	Roxie
Bassfield	Ethel	Lula	Saltillo
Batesville	Falcon	Lumberton	Sebastopol
Belmont	Farmington	Lyon	Senatobia
Belzoni	Fayette	Macon	Scooba
Beulah	Flora	Madison	Shaw
Blue Mountain	Florence	Magnolia	Shubuta
Booneville	Flores	Mantachie	Shuqualak
Brandon	Forest	Marks	Sidon
Brookhaven	Friars Point	Mathiston	Sledge
Brooks	Fulton	Mayersville	Southaven
Bruce	Georgetown	Meadville	Starkville
Byram	Glendora	Mendenhall	State Line
Calhoun City	Greenwood	Meridian	Summit
Canton	Grenada	Metcalfe	Sumner
Cary	Gunnison	Monticello	Sumrall
Centerville	Hattiesburg	Moorhead	Tchula
Charleston	Heidelberg	Morton	Tupelo
Clarksdale	Hernando	Moss Point	Tutwiler
Clinton	Hollandale	Nettleton	Utica
Coahoma	Holly Springs	New Albany	Vaiden
Coldwater	Houston	New Augusta	Verona
Coffeeville	Indianola	Noxapater	Walnut
Collins	Isla	Oakland	Walnut Grove
Corinth	Ita Bena	Okolona	Water Valley
Courtland	Iuka	Oxford	Webb
Crawford	Jackson	Pascagoula	Weir
Cruger	Jonestown	Pearl	Wesson
Crystal Springs	Kosciusko	Petal	Wiggins
Diamondhead	Lambert	Picayune	Woodland
Drew	Laurel	Pickens	Yalobusha

Map 8.

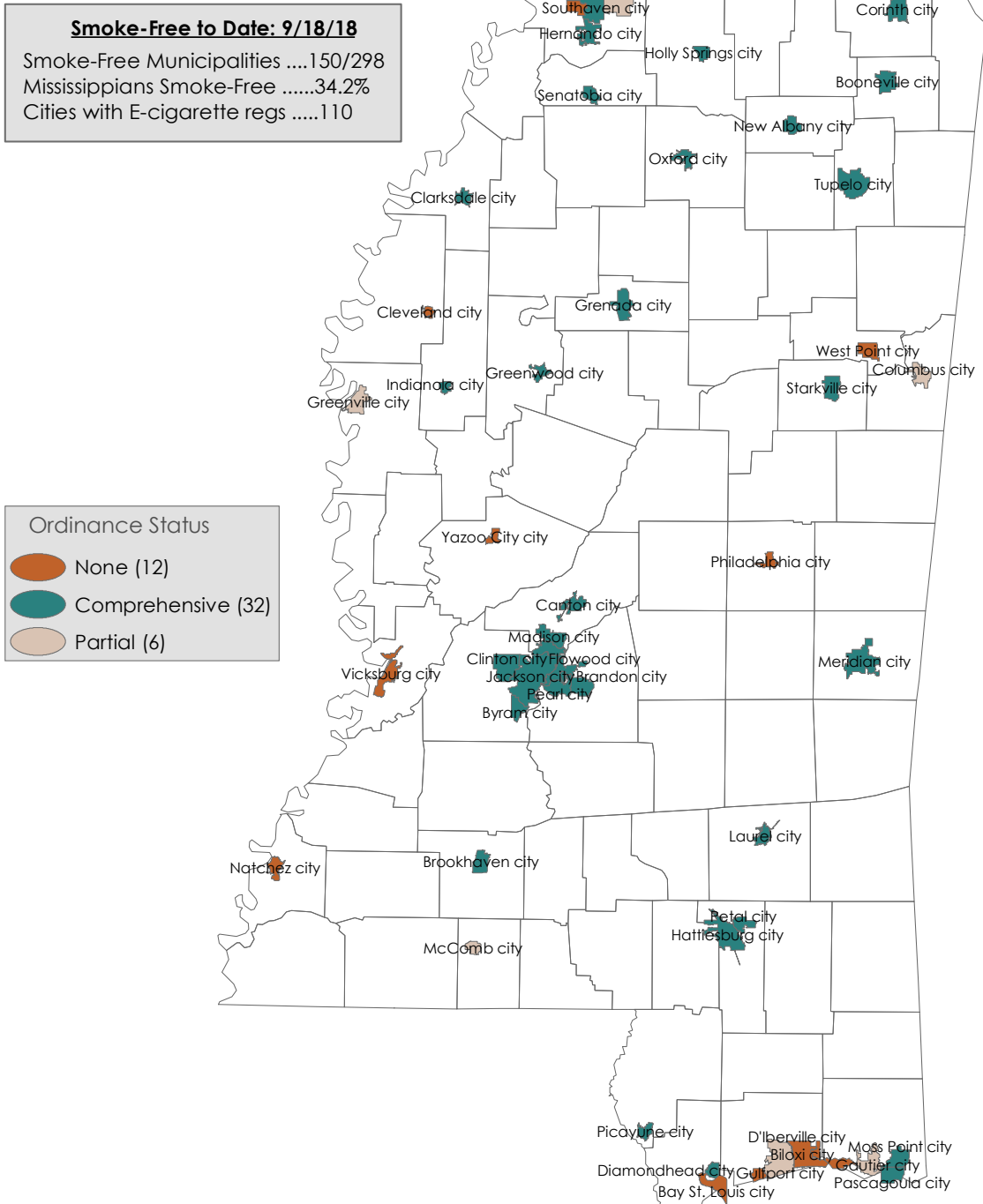
Mississippi Municipalities with Electronic Cigarette Ordinances



Source: Mississippi Tobacco Data, Mississippi State University
 For more details: <http://traps.msussrc.com/smokefree/map>

Map 9.

Ordinance Status of Mississippi's 50 Largest Cities June, 2018



Source: Mississippi Tobacco Data, Mississippi State University; 2017 U.S. Census Population
 For more details: <http://traps.msusrc.com/smokefree/map>



Almost all directors (96.8%) completed the cessation requirements for the fiscal year, up from last year (94.1%). Cessation activities included the distribution of Quitline resources, brochures, flyers, and coloring pages.

Communication activities were up this year also. Just over 77% of directors submitted monthly articles generated by the MSDH Communications team, the director, or some other contributor. The preceding year, 67.6% completed the communication deliverables. MTFC directors were once again informed of the importance in determining circulation numbers of their respective media outlets and counting those numbers only when information was actually published or relayed in the media. Many directors did not document articles and/or media accounts if they were not generated by MSDH or the directors. More efforts will be made in upcoming trainings to clear the confusion.

Figure 14.

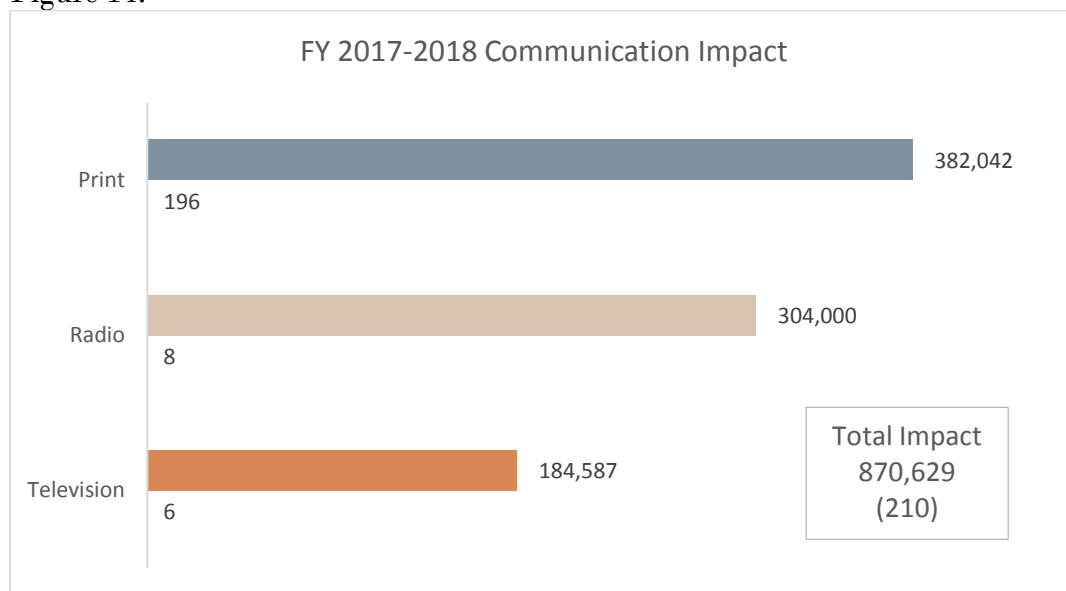


Figure 14 depicts the number of MTFC-related print, radio, and television communication pieces that actually aired or were published across the state during the fiscal year. There were 196 newspaper articles/photos published, followed by eight radio interviews/announcements conducted, and six television interviews/segments produced for a total of 210 with a potential reach to 870,629 Mississippians. The circulation/viewer numbers of the television stations, newspapers, and radio stations which actually aired/printed communication submissions were added to determine the overall potential impact number and were counted one time. This more accurately reflects the number of people who had access to tobacco-related messages. Forty-seven newsletters and/or other print materials were distributed for a total of 55,896. At least 360 submissions to print media were not published. There were 383 communication messages in the preceding year with a reported audience of 1,551,899.



Finally, the recruitment and maintenance of youth teams (RAT and FREE) had the largest growth among the SCOPE OF WORK requirements with 64.5% of MTFC directors meeting their goals, compared to just 32.4% in FY 17 and 47.1% in FY 16. One reason for this growth may stem from a mistake in the SCOPE OF WORK requirements for the year. MTFC's were required to organize a minimum of four RAT teams and four FREE teams per county for a total of eight. So for an MTFC with three counties, the work requirement was tripled to 24 per year, compared to 16 for those with two counties and just eight for those with one county. In years past, the MTFC directors with one or two counties still had to recruit 24 teams per year. The overlook made it much easier for directors with less than three counties to reach their goals for the year. Another reason could be that activity requirements for the year went from six to four per year. At the six-month point, nearly forty percent of directors (38.7%) had fully met the number of required active teams compared to 25.8% at the six-month point of FY2017.

Twenty-two MTFC directors met or exceeded all of the SCOPE OF WORK Team category requirements for the year. This compares to 11 from the preceding year. The following contains the name of the director, followed by the actual number of active teams, and then the number that were required.

Table 15.

ALL SOW Teams MET	
Helen Boerner	(132/16)
Tasha Bailey	(97/16)
Kristina Mullis	(91/8)
Sharon Nettles	(78/24)
Tabitha Wilson	(65/24)
Beverly Knox	(65/24)
Sue Mashburne	(63/24)
Jennifer Palmer	(59/16)
Yolanda Pruitt	(56/24)
Wendy Magee	(57/24)
Stephanie Mayfield	(55/24)
Desiree Norwood	(46/24)
Marcus Ross	(43/16)
Nicole Banks	(35/16)
Pearl Watts	(34/16)
Rhonda Hayes	(34/16)
Stacy Brooks	(31/16)
Kim Hart	(27/8)
Jacqueline Carter	(20/8)
Brittney Perkins	(19/16)
Beverly Johnson	(18/16)
Jasmine Pittman	(16/16)



Figure 15.

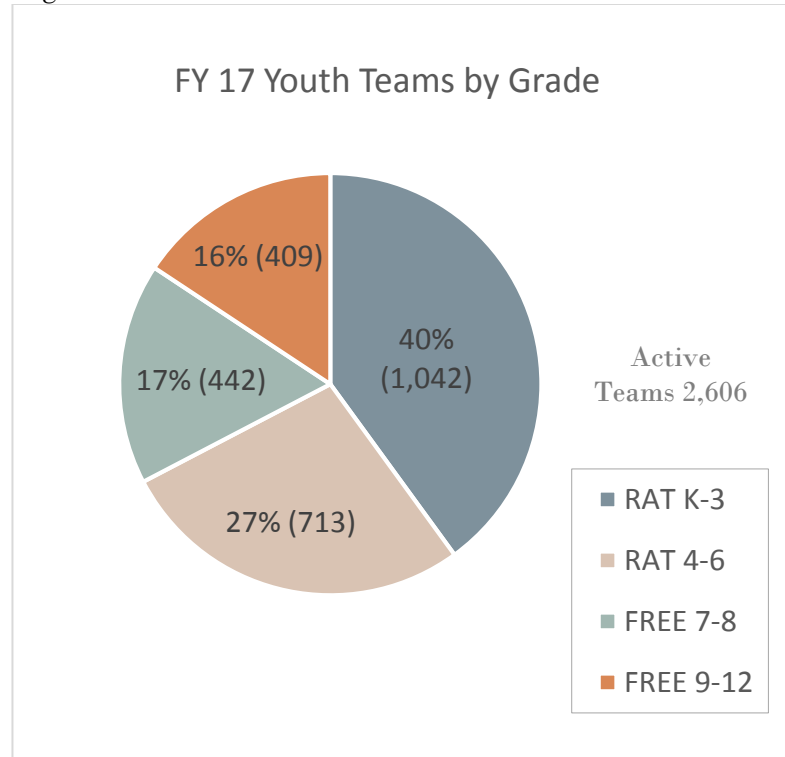
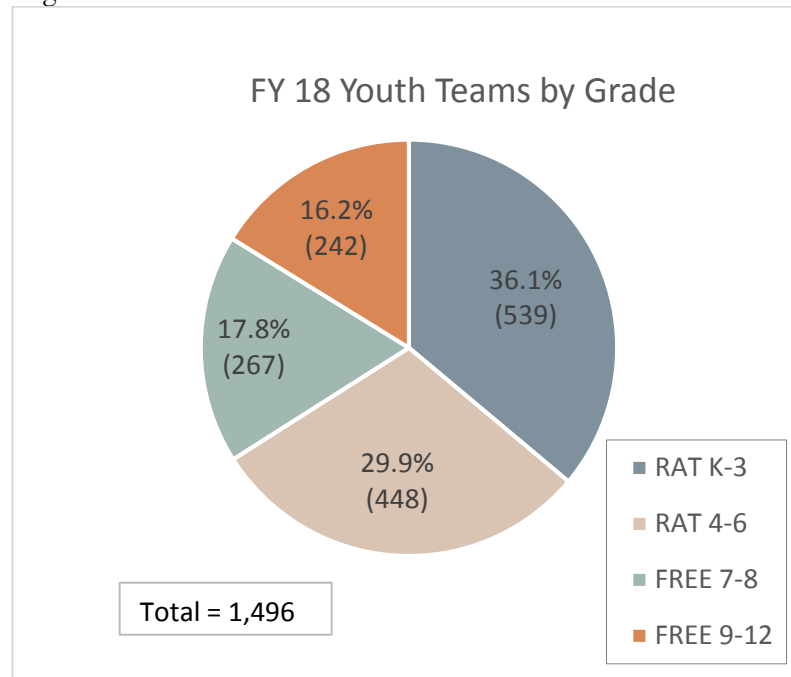


Figure 16.

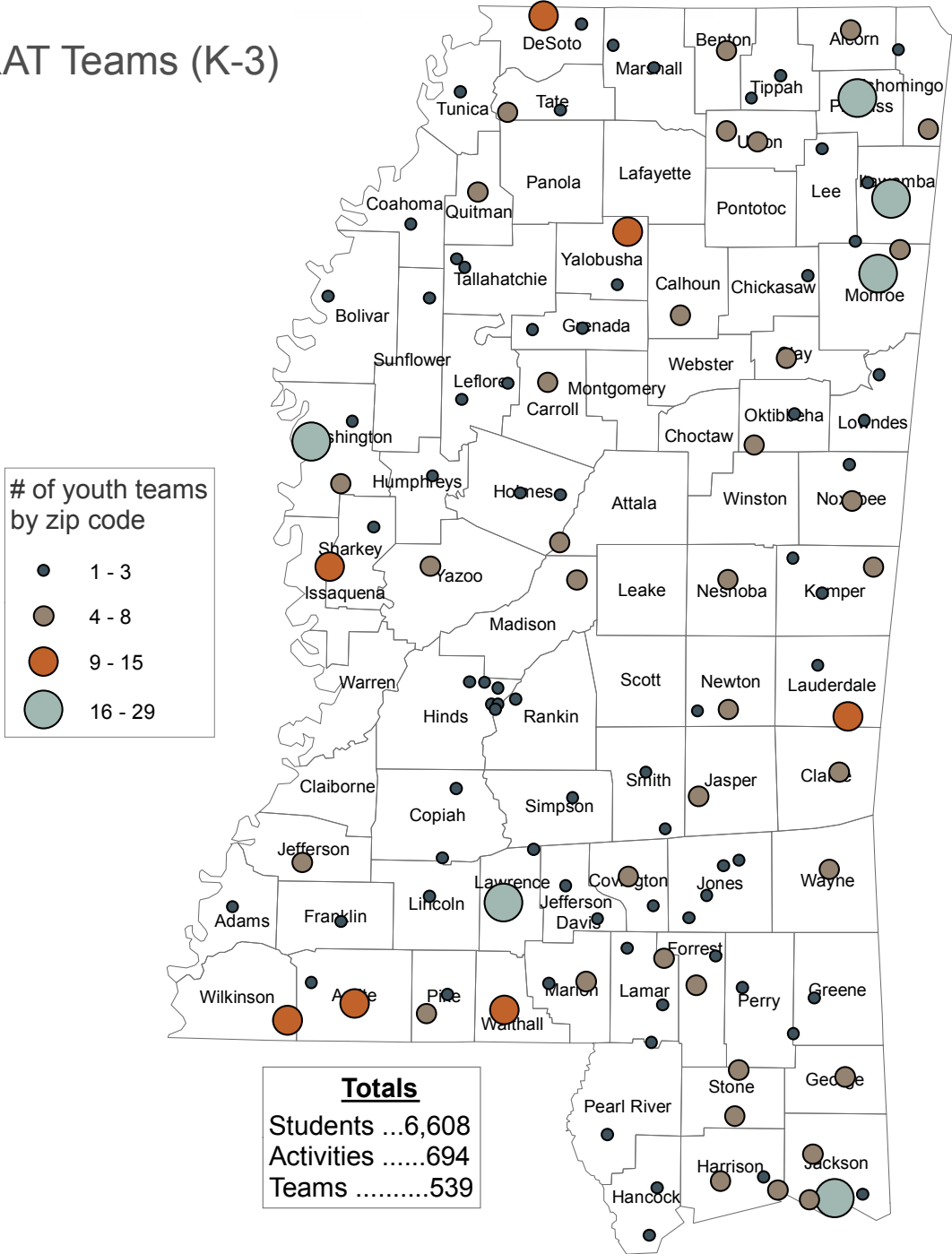




As noted in Figures 15 and 16, the total number of active youth teams this year was 1,496. The largest portion of student involvement was in the elementary grades (987 RAT Teams) followed by 509 Free Teams (Grades 7-12). The combined activities for all of the active teams was 7,766 with 50,401 students enrolled. A team was considered active if at least four activities were completed through the year.

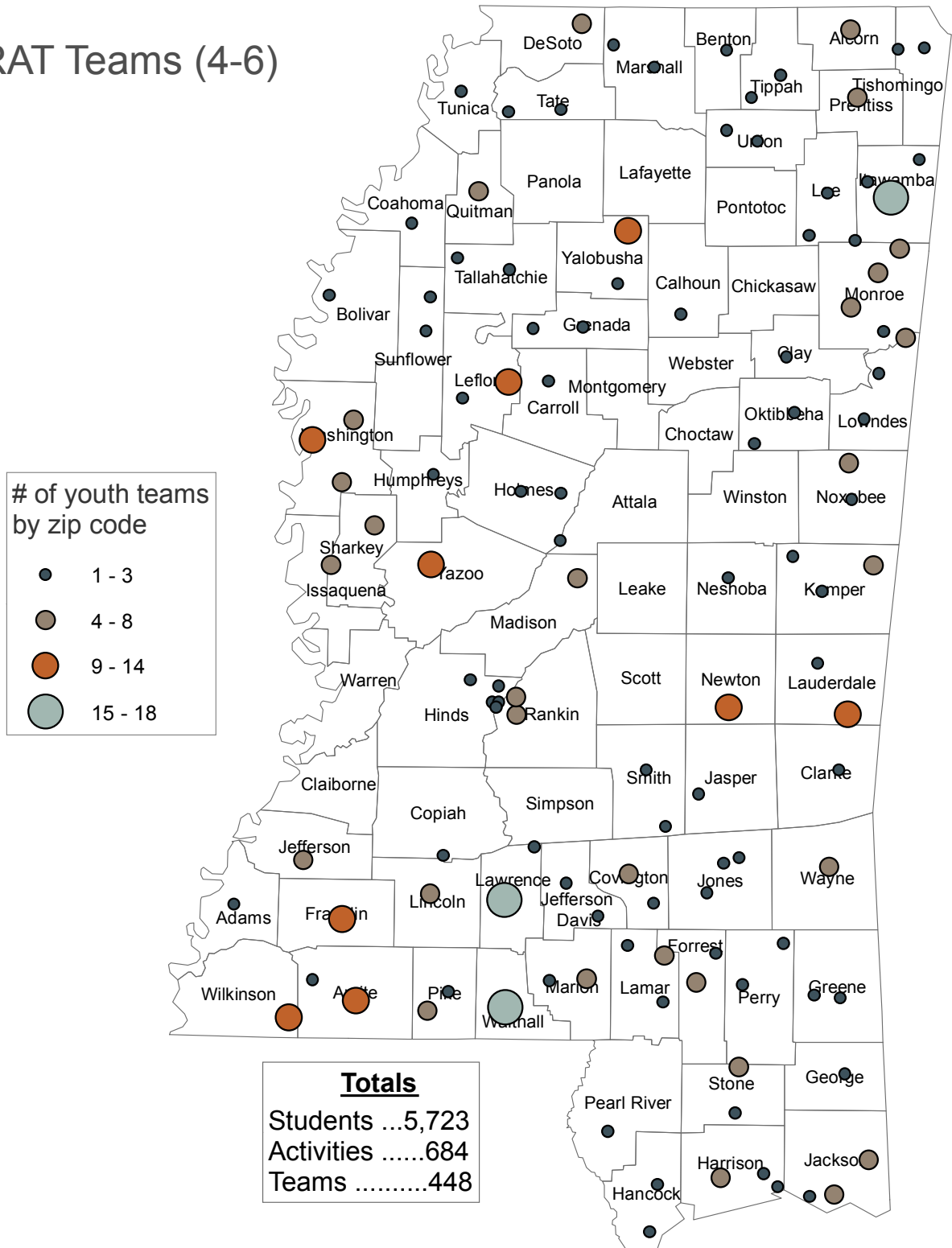
Map 10.

RAT Teams (K-3)



Map 11.

RAT Teams (4-6)





Map 10 shows that 539 RAT Teams (Grades K-3) were operational during FY18 in either school or non-school settings. Locations were determined by zip codes entered by each project director. For that reason, it is important that directors double check zip codes to ensure accuracy in displaying locations. According to the entries, there were at least 12 counties where children had no access to a RAT Teams. The map highlights where some directors may have more of a presence in a particular county. For example Itawamba, Monroe, Washington, Prentiss, Lawrence and Jackson had 16-19 teams as denoted by the largest green symbol in the map.

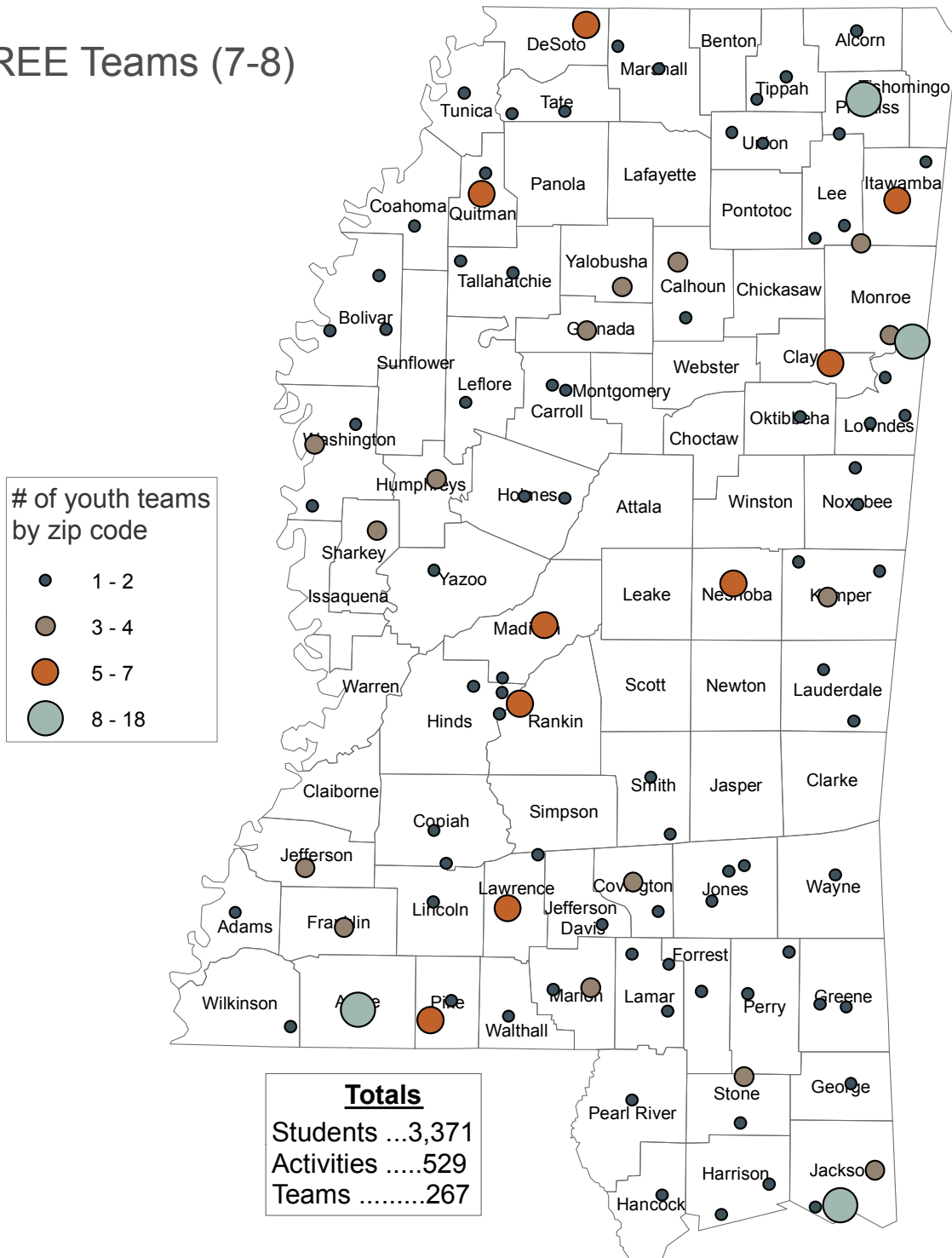
Map 11 shows that there were 448 RAT Teams (Grades 4-6) during the fiscal year. Thirteen counties did not have a RAT Team presence in grades 4-6 according to the self-reported entries in TRAPS by MTFC directors.

“Many times in the schools when I am doing activities with the students, I tell them my name, but I say that if you can’t remember it, you can call me the RAT Lady. I’ll be out in the community and I’ll hear, ‘Hey, RAT Lady!’ I go woo hoo, and ask what does that stand for? They always respond with Reject All Tobacco. I say, ‘So you’re never going to smoke or dip, right?’ If they see me, and it brings back any of the education about the dangers of tobacco that we have gone over with them, it means at least at some point, they will have to make that decision whether to be a user or not—hopefully they will make the right one!”

*Helen Boerner
MTFC Director
Itawamba and Monroe Counties*

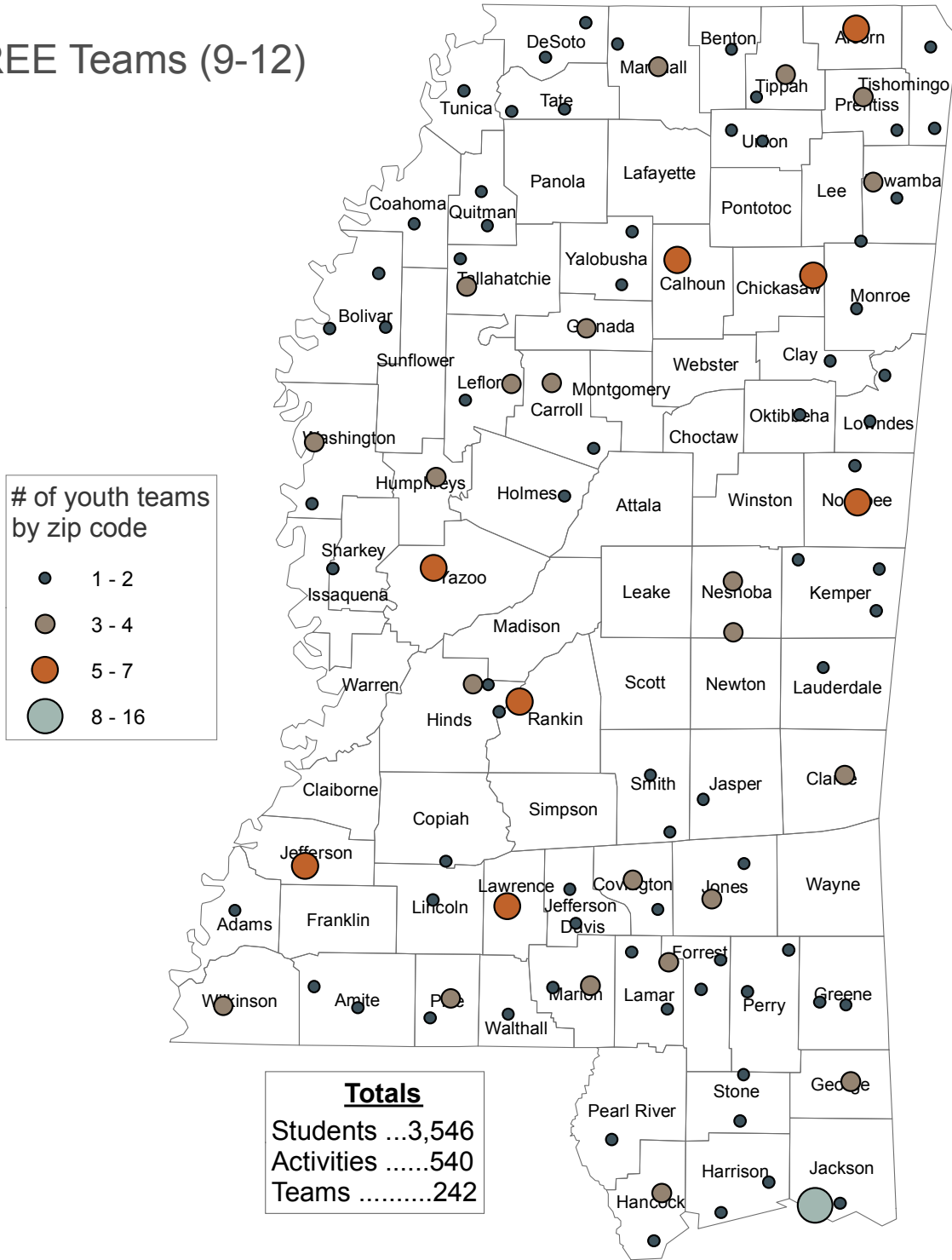
Map 12.

FREE Teams (7-8)



Map 13.

FREE Teams (9-12)





Map 12 shows in grades 7-8, there were 267 FREE Teams. Eighteen counties did not have access to a FREE (7th-8th) team.

Map 13 displays grades 9-12 saw the fewest number of youth teams with just 242 across the state compared to 539 grades K-3. Twenty counties had no FREE 9-12 presence.

In an effort to lighten some of the workload for the MTFC's, the Partnership for a Healthy Mississippi was asked to conduct pre and post surveys of all youth team participants for the fiscal year instead of the MTFC directors as in previous years. Pre-surveys were conducted by the PHM team prior to the teaching of any curriculum. Posttests were completed in the spring, and all were mailed to the evaluation team for analysis. Because a high turnover in PHM staff as well as some difficulties in getting into particular schools, the survey size was much smaller than the previous year.

Evaluators conducted a Qualtrics survey by email with youth team sponsors on how the year went in their opinion. Sponsors typically administer the activities (at least 4) to the youth teams throughout the year. The following figures show the results of the 83 sponsors who responded. (Note: There were 1,160 team sponsors for the year.)

Figure 17.

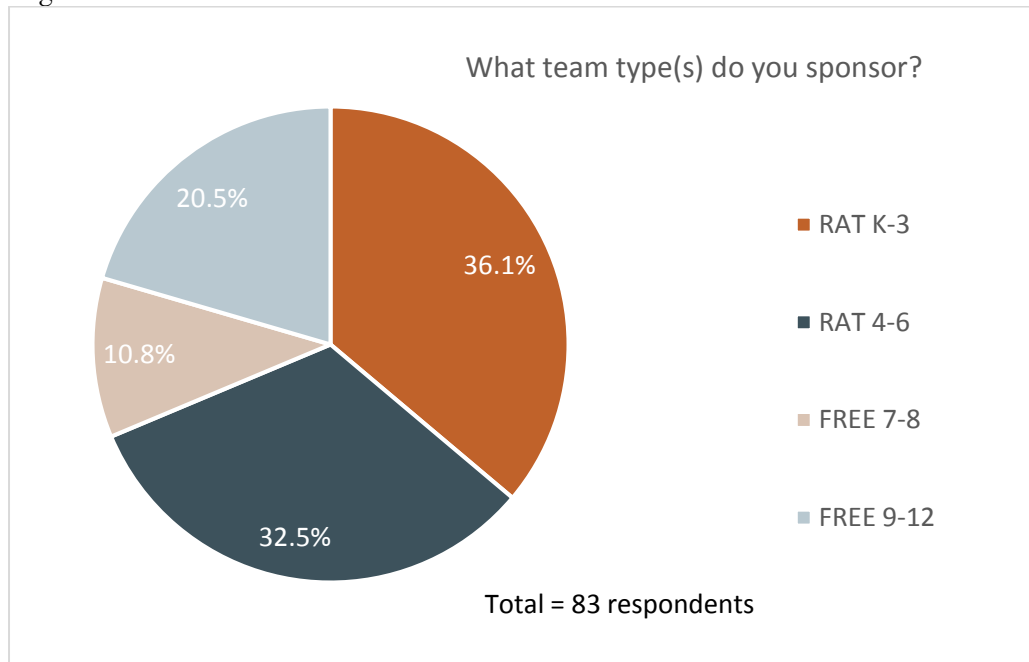




Figure 18.

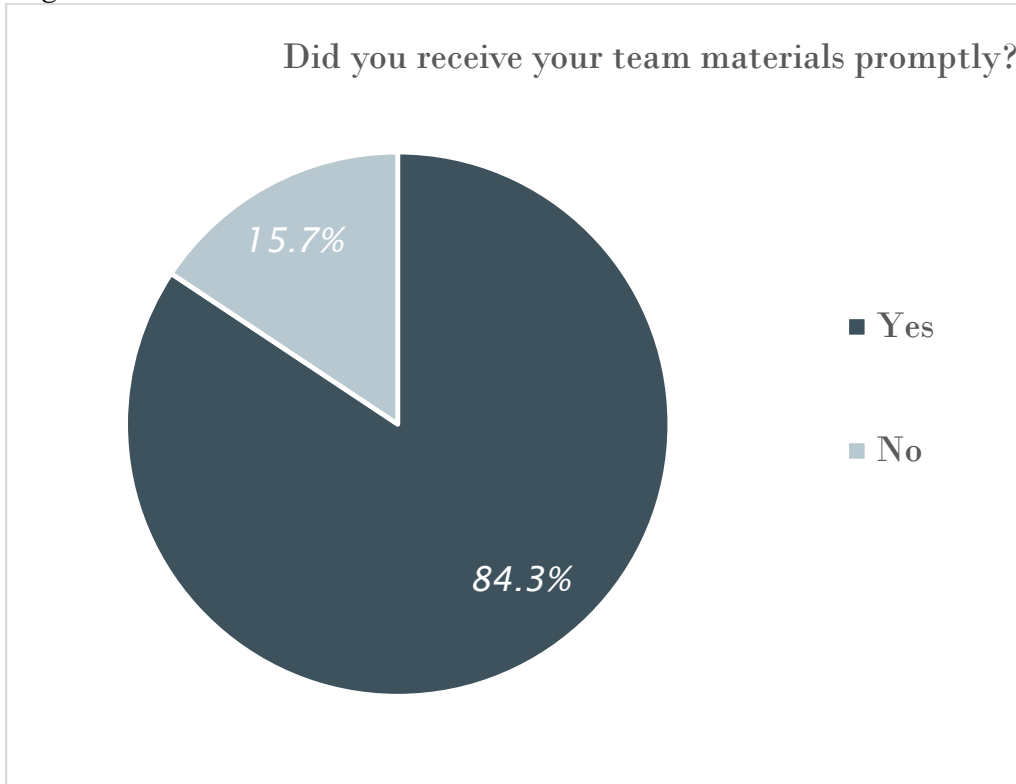


Figure 19.

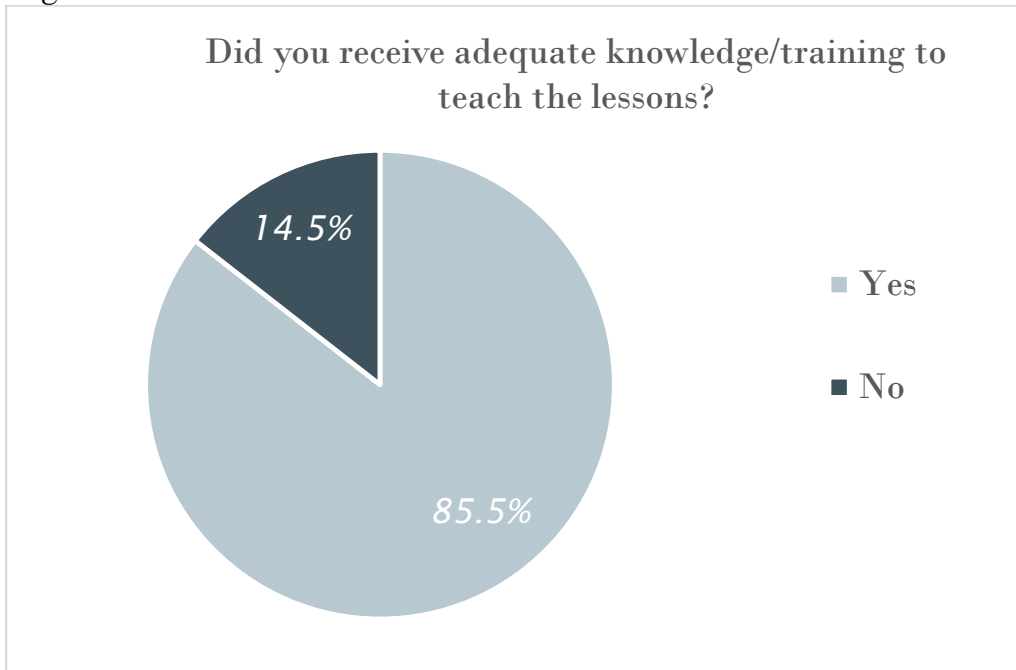




Figure 20.

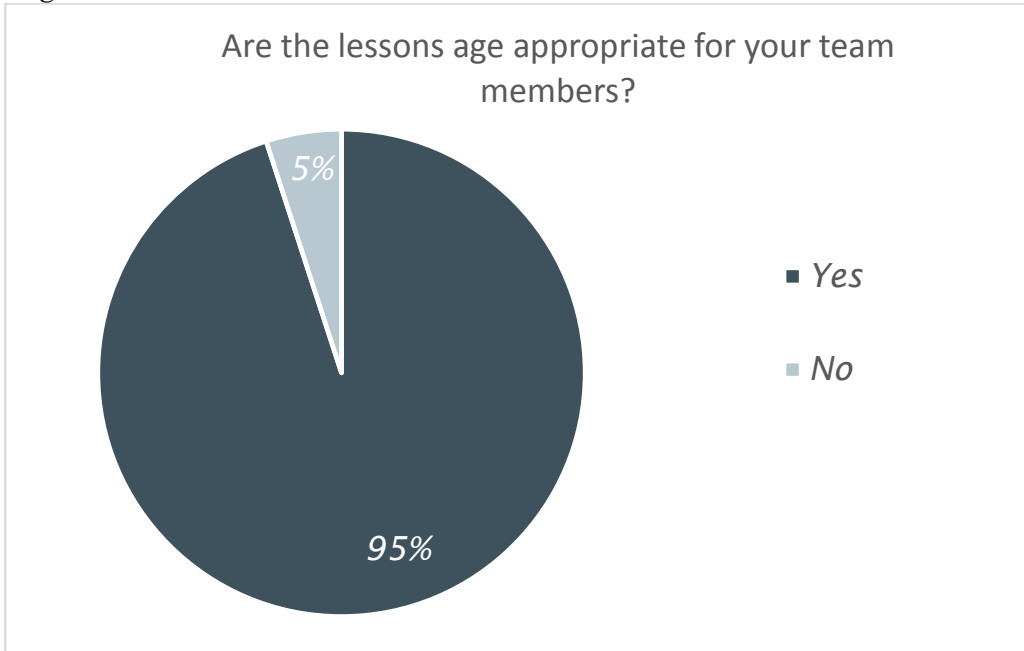


Figure 21.

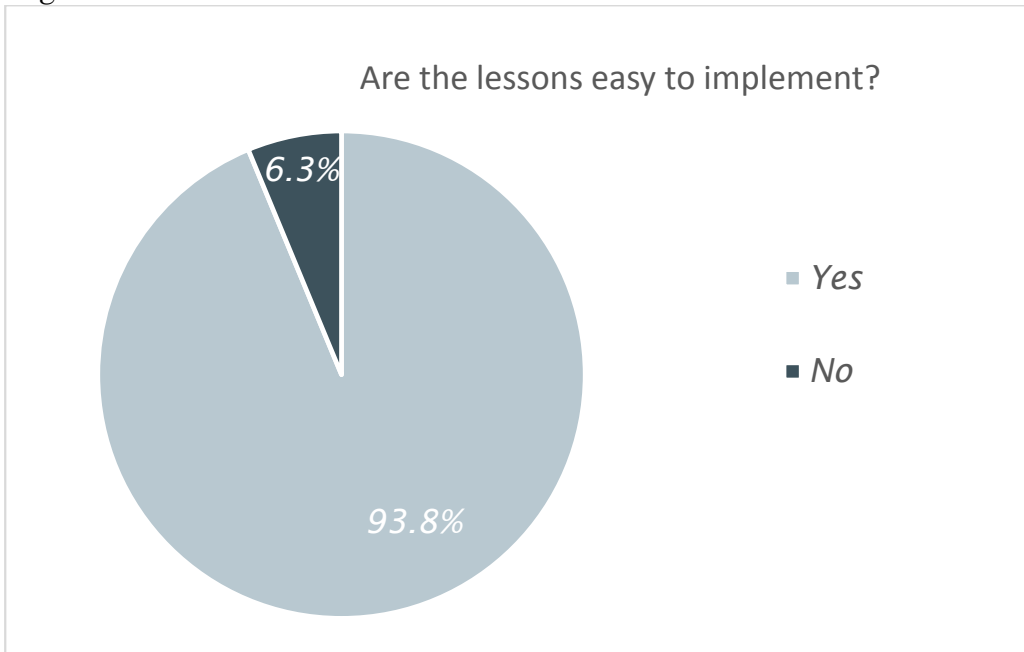




Figure 22.

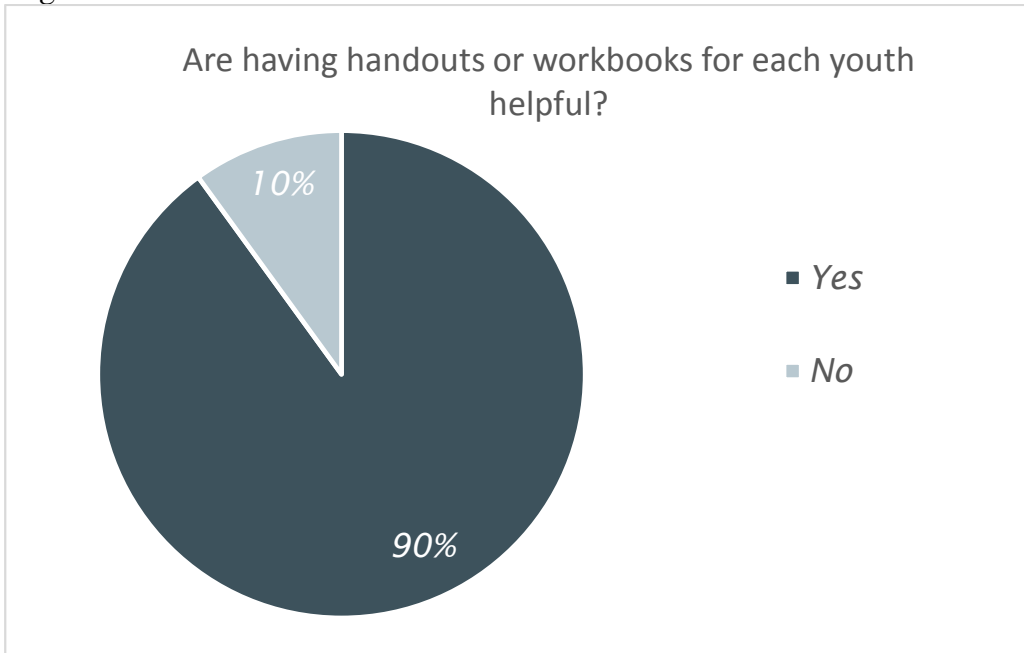


Figure 23.

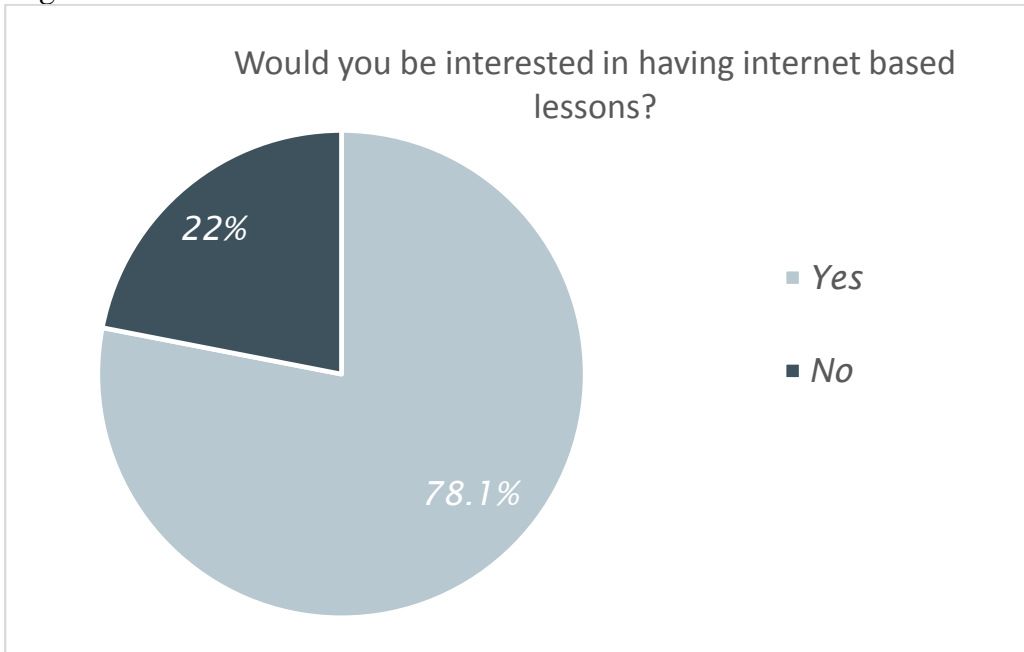




Figure 24.

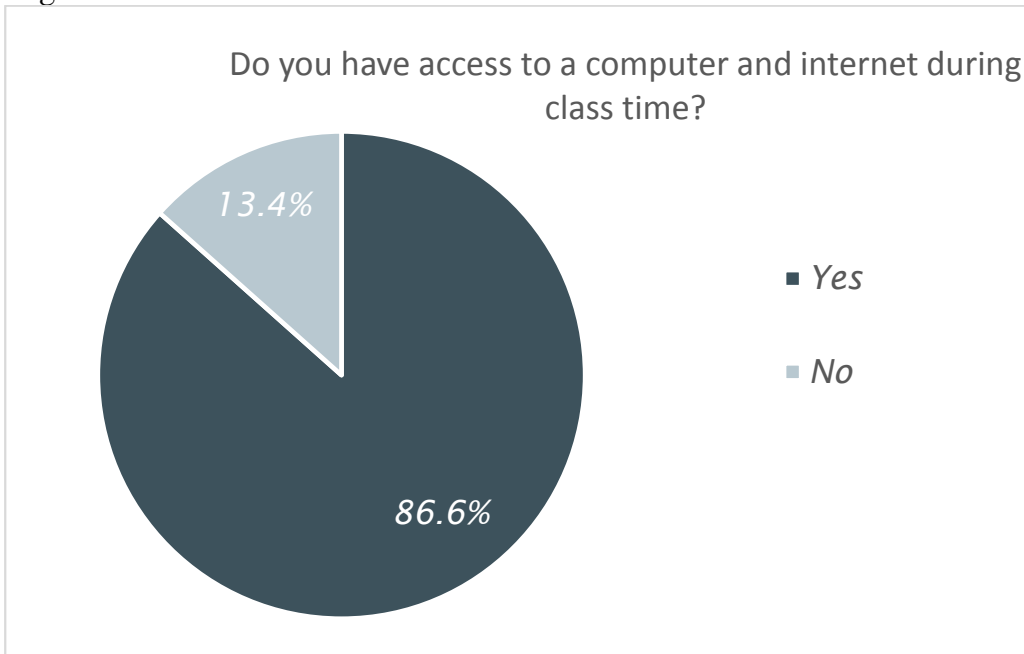


Figure 25.

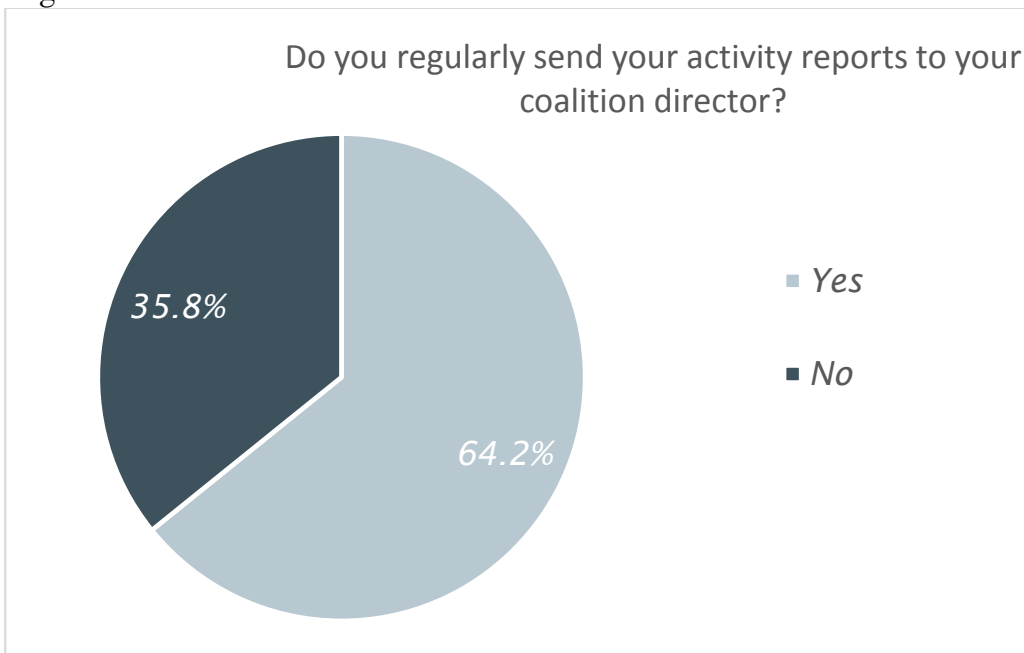




Figure 26.

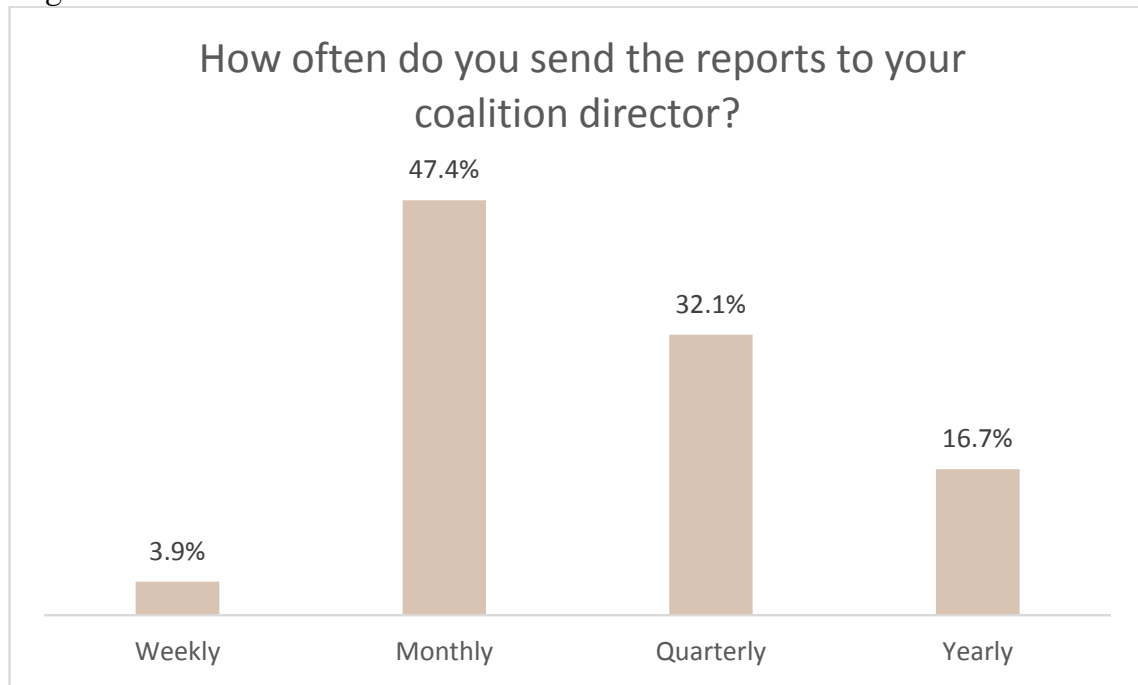
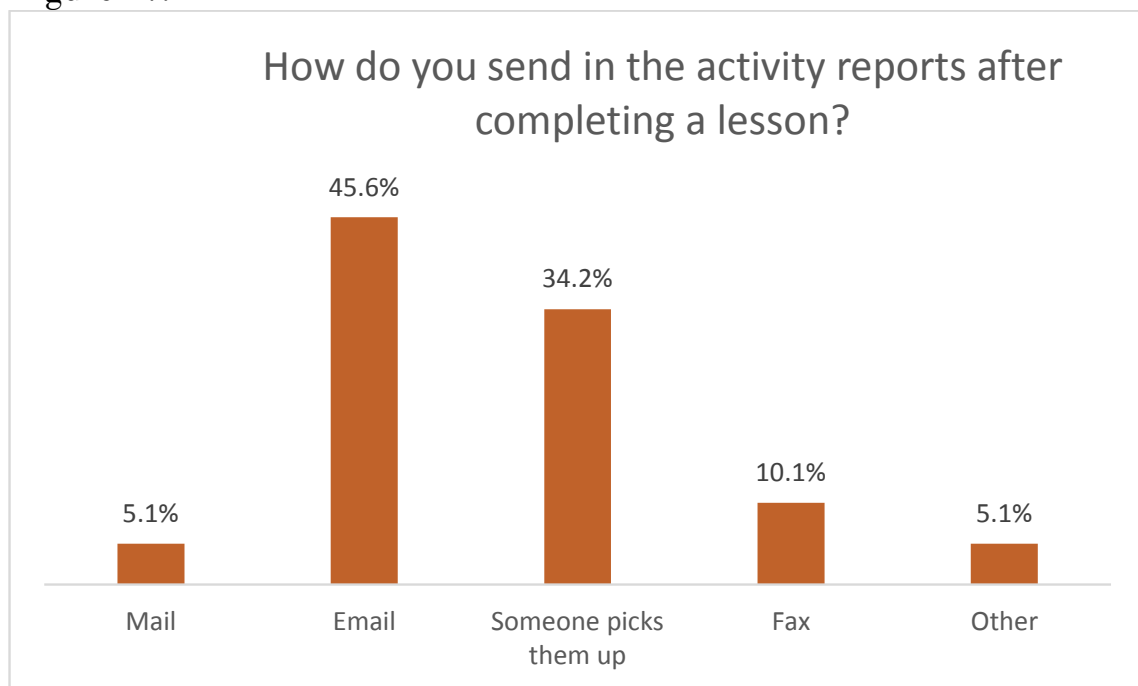


Figure 27.





What would make the lesson presentation and process easier for you?

- Being able to implement it during other subject areas
- Student booklets (3)
- For each student to have a copy already
- I might like the internet based lessons after all...where can I get more information about this?
- I never received materials (2)
- I did not see any evidence of activities as we had in the past years
- Someone from RAT comes and presents the lesson (2)
- If I had everything at the beginning of the school year and there was an easier process for turning the lessons in (maybe an internet site that I could click when the class completed)
- Having pictures available, the internet lessons, and testimonials
- If it was incorporated with my course objectives that are required
- It is fine the way it is (5)
- Preprinted booklets
- Digital lessons
- Workbook form lessons for kids. Lots of word finds and puzzles.
- Training and material
- If we could have the materials and workbook for each child so that we can have the materials ready instead of waiting for someone to copy them
- More time (4)
- I liked it when you basically had it by the month, the activity you were supposed to do rather than looking through the binders
- Very easy; making copies takes a few minutes, but isn't bad. Having all instructions, answer keys, etc all together instead of in various areas of the manual would be a big timesaver



We value your opinion. Are there any thoughts you would like to share with us?

- I have so little time to try to include the RAT lessons. I would like to be able to use them during other subject areas
- Have more incentives (5)
- Need a form to email our activities directly
- Great program! (3)
- If the workbook was online with the lessons so I could print out what I needed to. Also, I could paste items from the lesson to my school lesson plans. Also, if I could submit a form online showing what we have completed for the month
- I never received materials (3)
- I think the live positive messages are very significant to the drug-free initiative
- All good
- We would like to get active again now there is a person representing Warren County
- Thanks for all you are already doing
- Change convention forum to include middle school students and giving more notice for convention
- I wish that the Mississippi Dept. of Ed. would make this mandatory. Administrators need to take it seriously
- I DID NOT RECIEVE ANY FREE MATERIAL THIS SCHOOL TERM
- My Tobacco Personnel has not contacted me at all this school year. I am aware that my director is no longer with the Tobacco group. I spoke with someone in April and May 2017. That was the last time I have been notified by anyone
- I haven't had any material given to me this year

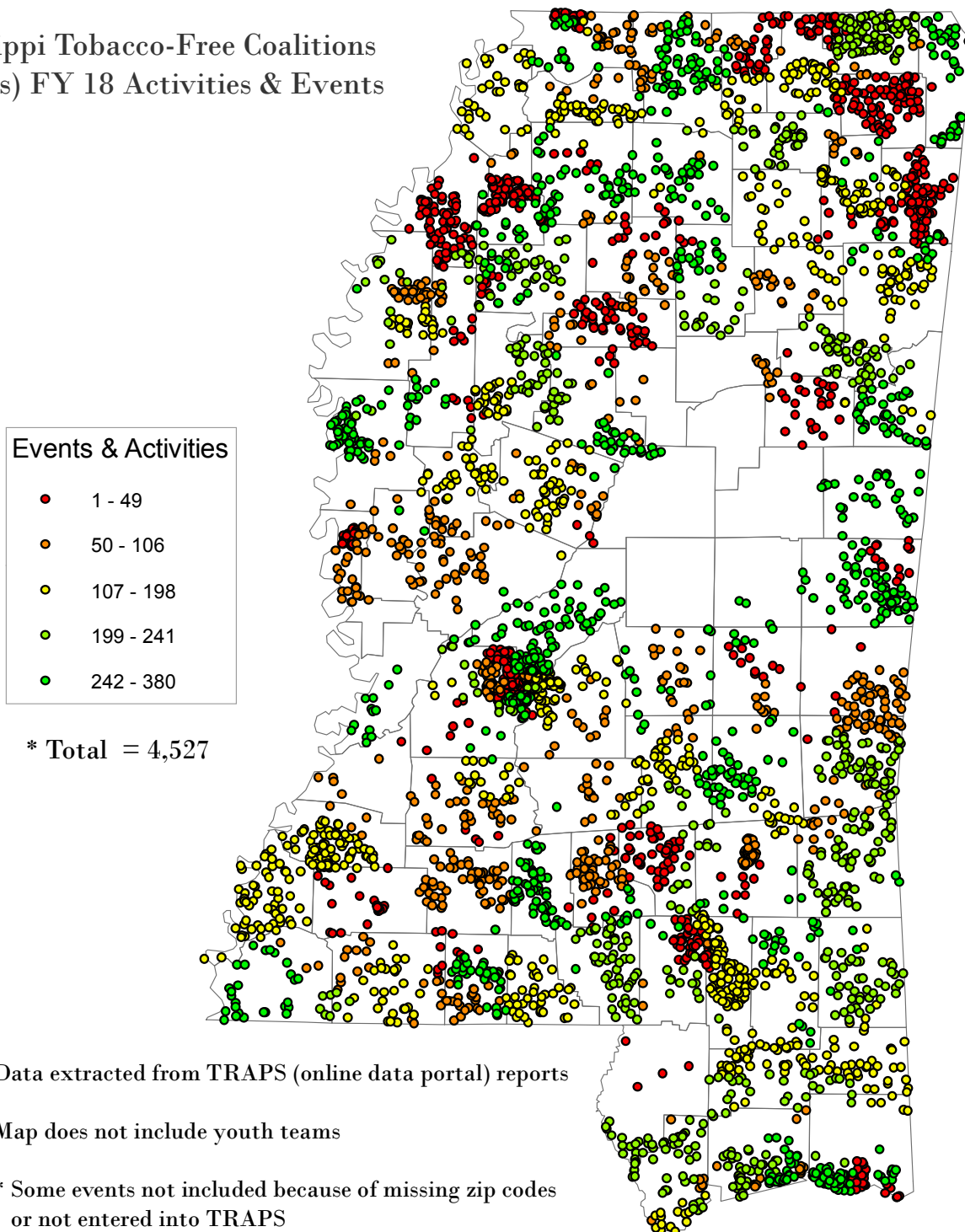
Maps 14 and 15 visualize the concentrated amounts of MTFC activity and is determined by location (zip code) data, entered into TRAPS by MTFC directors. These total 4,527 and include ordinance work, presentations and communications. The point density (map 14) shows the least amount of activity (reds) the highest density of activity (greens).

Map 15 is a three-dimensional “heat map” that also displays all MTFC activities and events. The map reveals a high level of visual convergence between the activities and the geographic areas around the state using a diverging color ramp. The red color represents the fewest activities and events per square mile, while the green color represents the most activity per square mile.

Maps 14 and 15 are virtually representative of the same data but are visualized differently with geographic point density and the ratio of activities per square mile.

Map 14.

Mississippi Tobacco-Free Coalitions (MTFCs) FY 18 Activities & Events



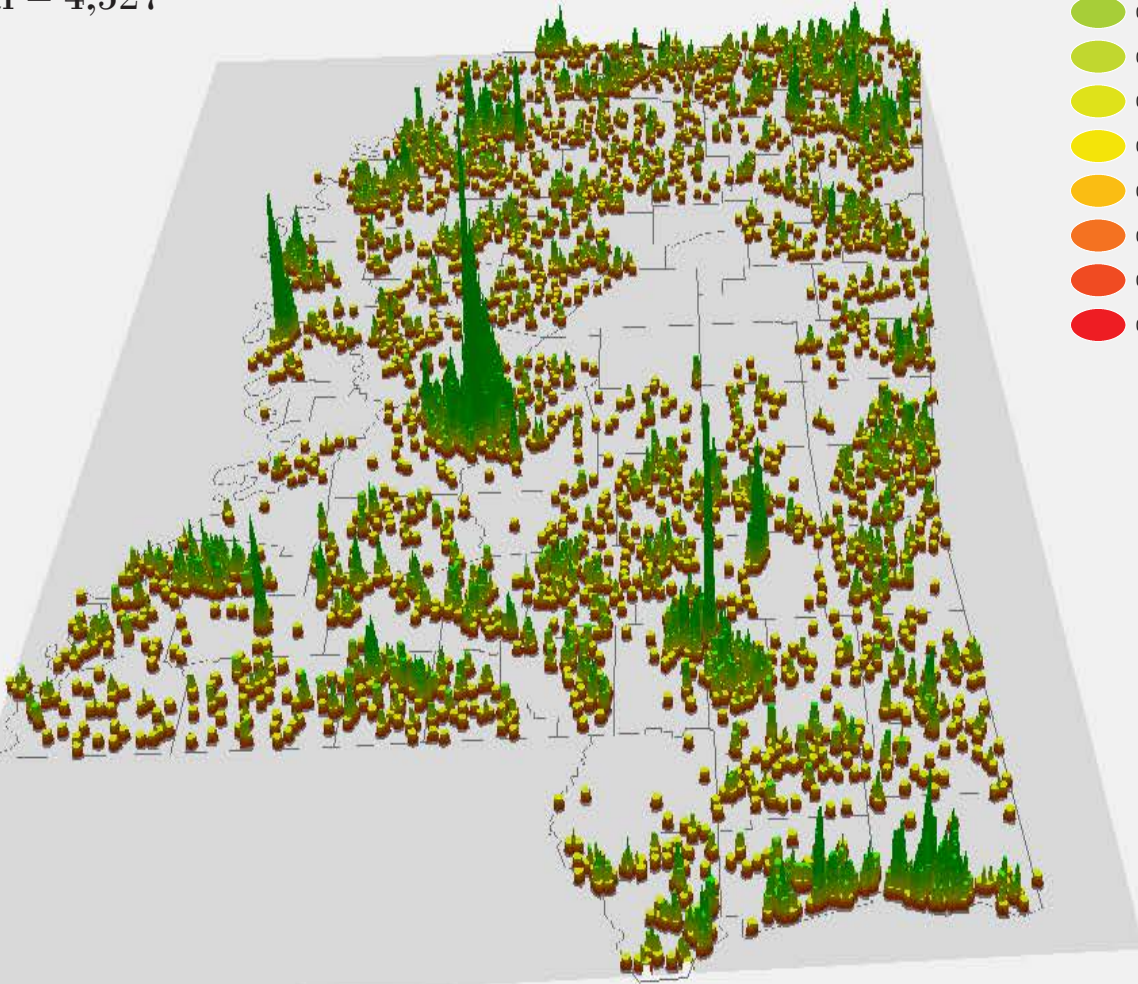
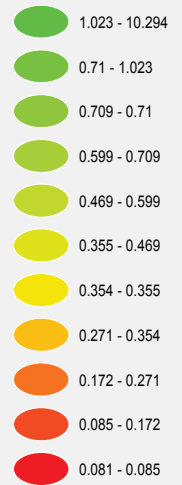


Map 15.

2018 Mississippi Tobacco-Free Coalition Events & Activities

Total = 4,527

Per square mile by zip code



youth programming



The Partnership for a Healthy Mississippi (PHM) contracts with OTC to administer youth programming. A large component of the work is administering the statewide Reject all Tobacco (RAT) program for elementary-aged children and Generation FREE for middle and high school students. This work is done in association with the MTFC's who oversee the youth team activities in schools and community locations. The scope of work for fiscal year 2018 differed from previous years. In addition to the traditional programs, there was a focus on developing, training, and providing technical assistance to MTFC youth advocates who were charged with promoting the implementation of tobacco policies in their schools and communities. In addition to the development of a youth advocacy toolkit, PHM was asked to help youth advocates and youth advisory board members educate at least 200 policy-makers and other stakeholders about the addictive nature of e-cigarettes and other Electronic Nicotine Delivery System (ENDS) products.

The new scope of work requirements combined with an unusually high staff turnover presented many challenges for those implementing the projects and objectives (PHM) and for those monitoring the work (OTC monitors and the evaluation team). A number of trainings were held to familiarize new staff with the online reporting system; numerous conference calls and in-person meetings were held with the evaluation team, Kimberly Sampson, the youth programs project officer, and the staff to determine how to reflect their work properly and in a timely manner.

The yearly self-reported tally of program efforts shows more in-depth efforts of their work (see appendix C).

Table 16.

PHM by the Numbers	Events	Impact	Distribution
Events/Attendance	155	8,165	13,350
Summits	0	364	886
RAT Troupe	38	11,020	17,707
RAT Troupe Follow-up	38	0	17,096
Newsletters	4	20,660	0
Team Incentive Distribution	3	0	67,256
Press Releases	121	0	0
Social Media Posts	542	0	0
Pre/Posttests (1,256)	40	0	0
Total	941	40,209	116,295
Communication			
Published Audience		161,028	9
Radio		55,800	1
Total		216,828	10



Table 16 shows each of the events and activities the PHM staff have entered into TRAPS, this year. Overall, there were more than 40,000 people impacted by the presentations, shows, summits, camps, etc. in Mississippi. There were several new deliverables this fiscal year noted in the table above. Follow-up activities were sent to the over 17,000 students that experienced the traveling RAT Troupe shows.

These activities were delivered, mailed or emailed to the school sponsors. Another new task for the PHM were the pre and post testing of youth teams that receive the activity sheets during the year (at least four times) to gauge the knowledge gained by the program and to keep the content current.

Reject All Tobacco: RAT

Strategic Goals for RAT as Outlined in the FY 2018 Scope of work:

- Increase awareness and provide education regarding the need for recognition of e-cigarettes and other alternative nicotine products to be classified as a tobacco product in Mississippi among parents and educators of students in grades K-6.
- Increase awareness regarding the need for comprehensive smoke-free policies, including e-cigarettes and other alternative nicotine products in the respective counties and school districts of the RAT Troupe members with specific emphasis on the counties that do not currently have a comprehensive tobacco free policy among parents and educators of students in grades K-6.

RAT materials for the year did include information about e-cigarettes and alternative products, and programming was targeted to areas that don't have comprehensive ordinances. For fiscal year 2019, SMART goals have been developed.

In spring 2018, five RAT Troupes were established, and members were selected for the upcoming school year. Locations were Delta (Simmons High School), Northwest Rankin, Madison Central, Oxford, and Oak Grove. In addition to learning dance techniques during a two-day dance camp, members were trained on tobacco prevention, policy implementation, advocacy, media training, and leadership/character building. There were two mini-camps conducted for RAT troupes; one was held in June for the Madison RAT Troupe; the other in Flowood. The number of RAT Troupe performances was down from previous years. As shown in map 16, there were 38 troupe shows in FY 18 compared to 69 shows the previous year. However, the 38 shows did surpass the 25 required by the SCOPE OF WORK. Three performances were held at Prentiss Christian Academy in Prentiss, Carroll Academy in Carrollton, and Mt. Salus Christian School in Clinton, to complete the SCOPE OF WORK requirement of two. At least one performance was to be held in each of the 26 counties targeted by OTC.



Outreach efforts to promote the performances were done through the dissemination of press releases to areas with a media presence. Family Guides were distributed to 11,020 students at 38 RAT Troupe performances across the state. (Note: The Family Guide was uploaded to TRAPS on March 27, 2018 which was past the deadline of December 1, 2017.)

Map 16.

2018 RAT Troupe Performances

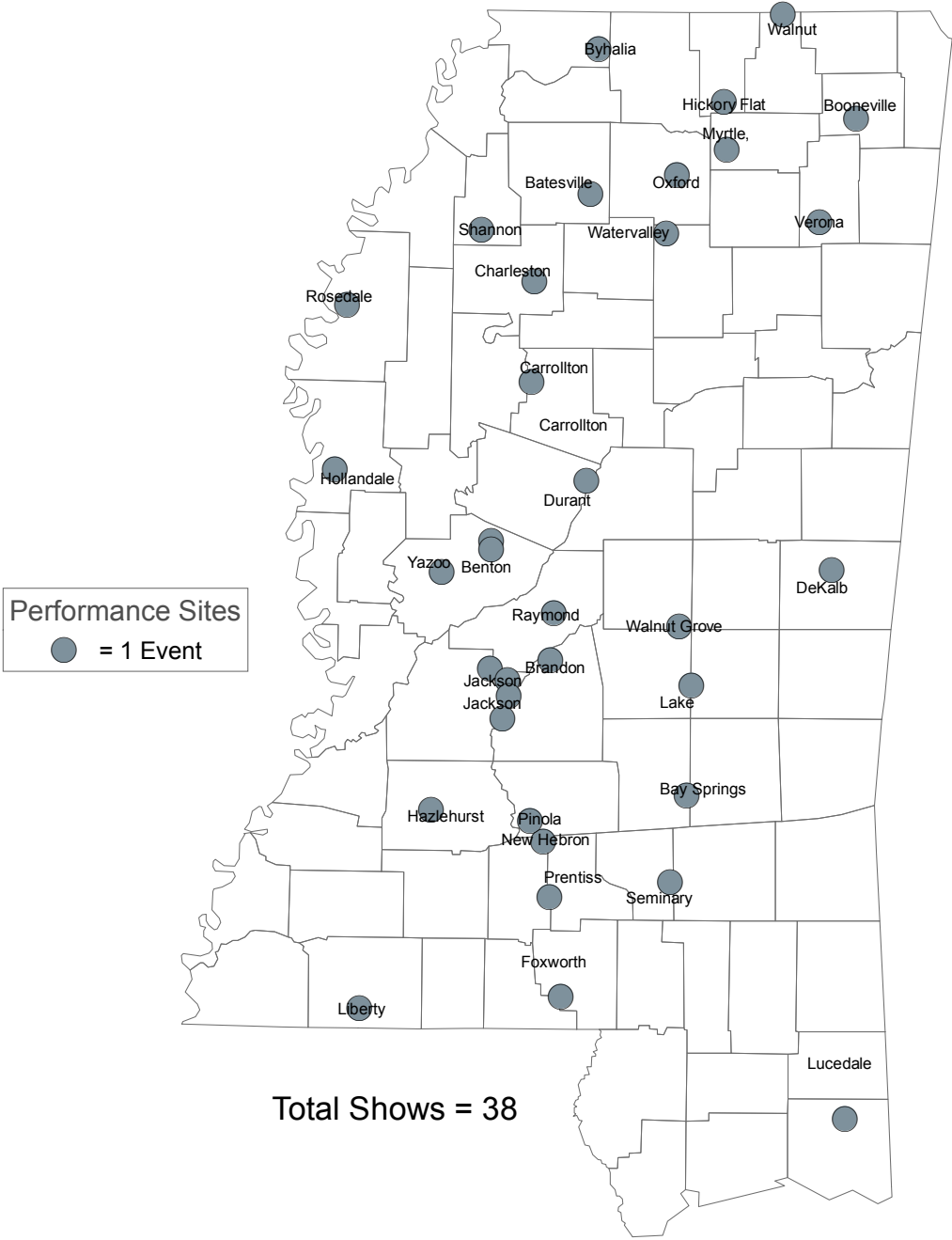


Figure 28.

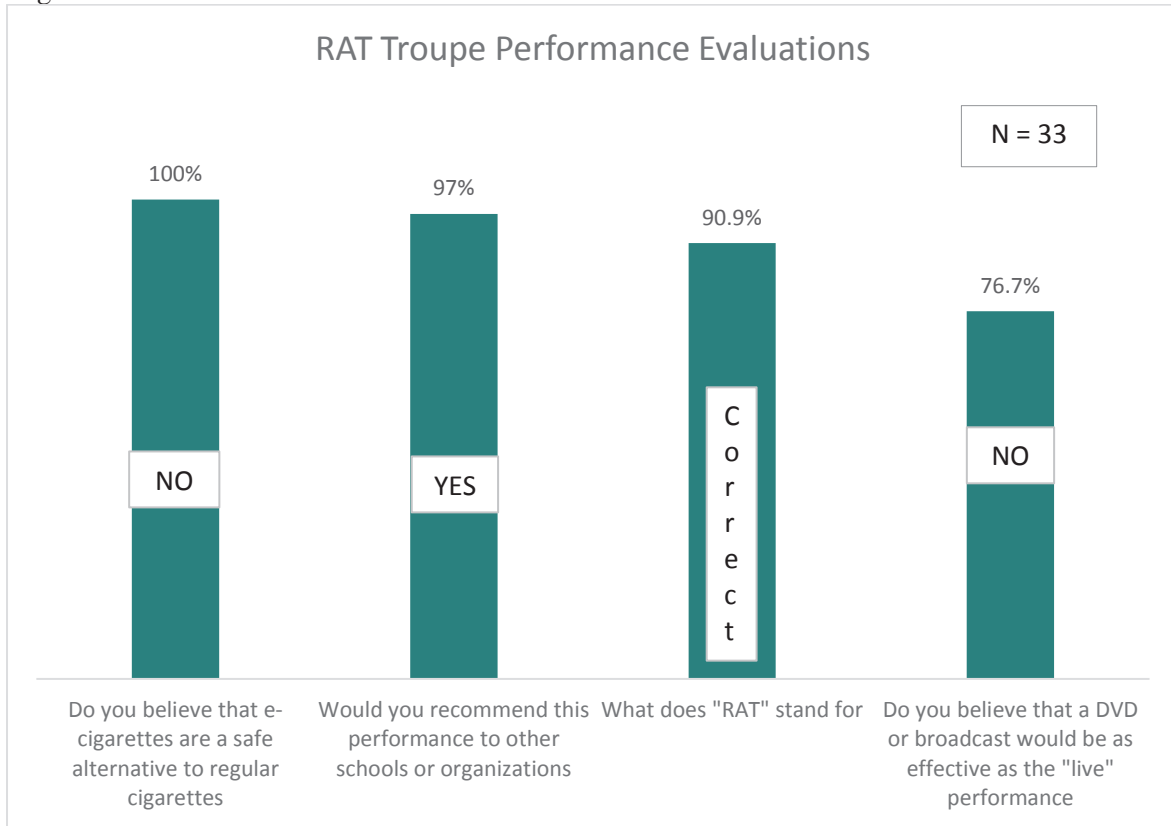
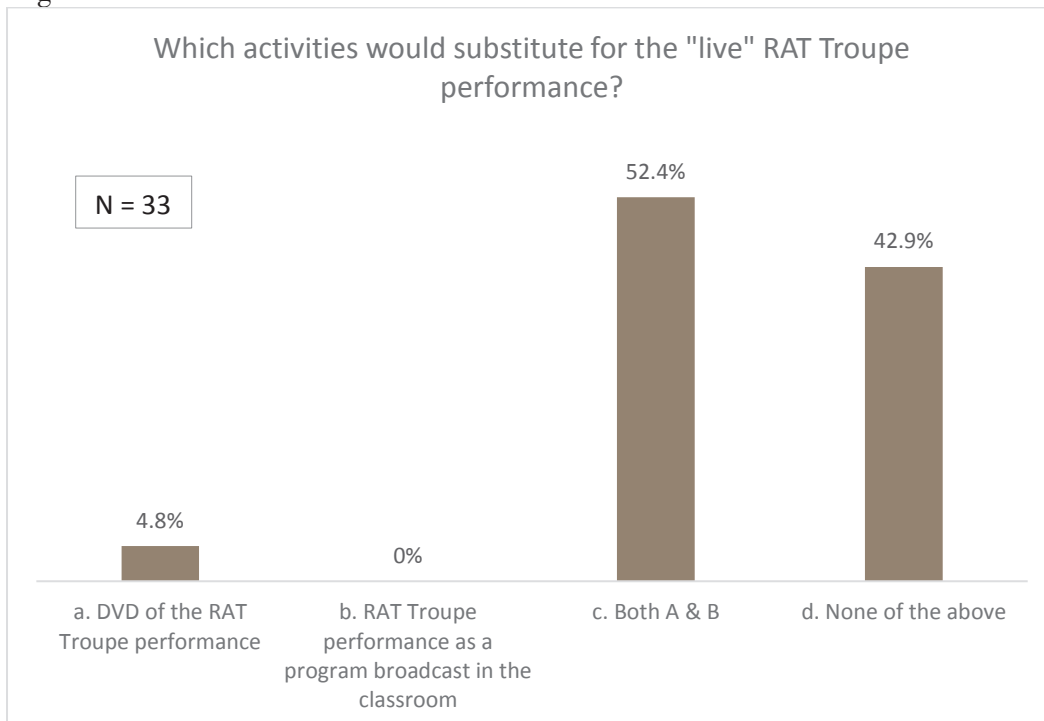


Figure 29.





What was the best part of the performance?

- Student involvement; the Students; Interacting with Students
- I liked it when they involved the kids
- Interactive and engaging
- Singing and dancing; Songs
- Performances and video
- The dancing, pulling the children in and involving them
- I enjoyed the entire performance
- The music and dancing. Kids can relate
- The message and performance
- Having older kids share with our young students about the danger of tobacco

How could the performance be improved?

- It was good! No improvement;
- With the little ones, it is extremely hard sometimes to keep them still. I think throwing items into a crowd could become chaotic for the teachers to keep them under control
- Teacher participation
- Ask our students questions; Select only a few student volunteers to come forward
- Give all students a prize or none
- I enjoyed the entire performance
- The computer wasn't working and we thought they did great improvising
- It was a great performance, not too long, I wouldn't change anything
- Live performance with mascot; having Terrance the rat mascot
- Work on solid dance moves
- I would be to have more microphones for volume for a couple troupe members

Figures 28 and 29 and the comments above represent the views of adult sponsors who attended the RAT Troupe shows.

As part of the RAT Troupes' focus on advocacy and policy goals, a minimum of 20 educational sessions focused on engaging K-6 grade students in the five school districts represented by the RAT Troupes were required for the first time. A series of activities were to be completed and an evaluation to be conducted and sent to the RAT Troupe within a week.

Following the 38 shows, the RAT coordinator was responsible for following up with the schools to schedule two activities per performance.



According to data entered in TRAPS, there were 39 distribution occurrences that were mailed to the schools (17,080) which included e-cigarette fact sheets, advertising the truth about e-cigarettes, and connect the lines fact sheets. The e-cigarette fact sheets were electronically shared. The other 14 schools were emailed all of the items. This is the first year of follow-up to the troupe show schools. There is no way for evaluators to know if the materials sent to the schools were actually used.

Figure 30.

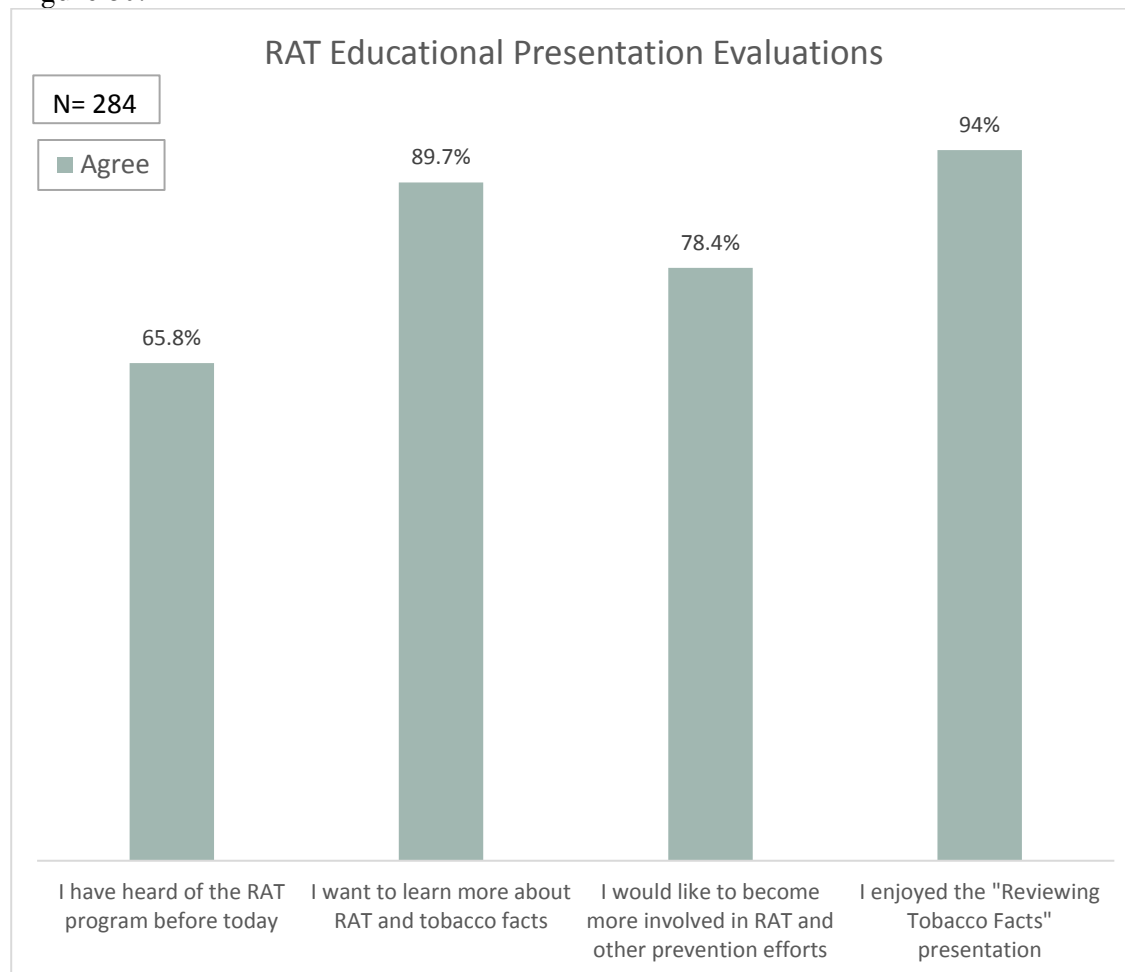
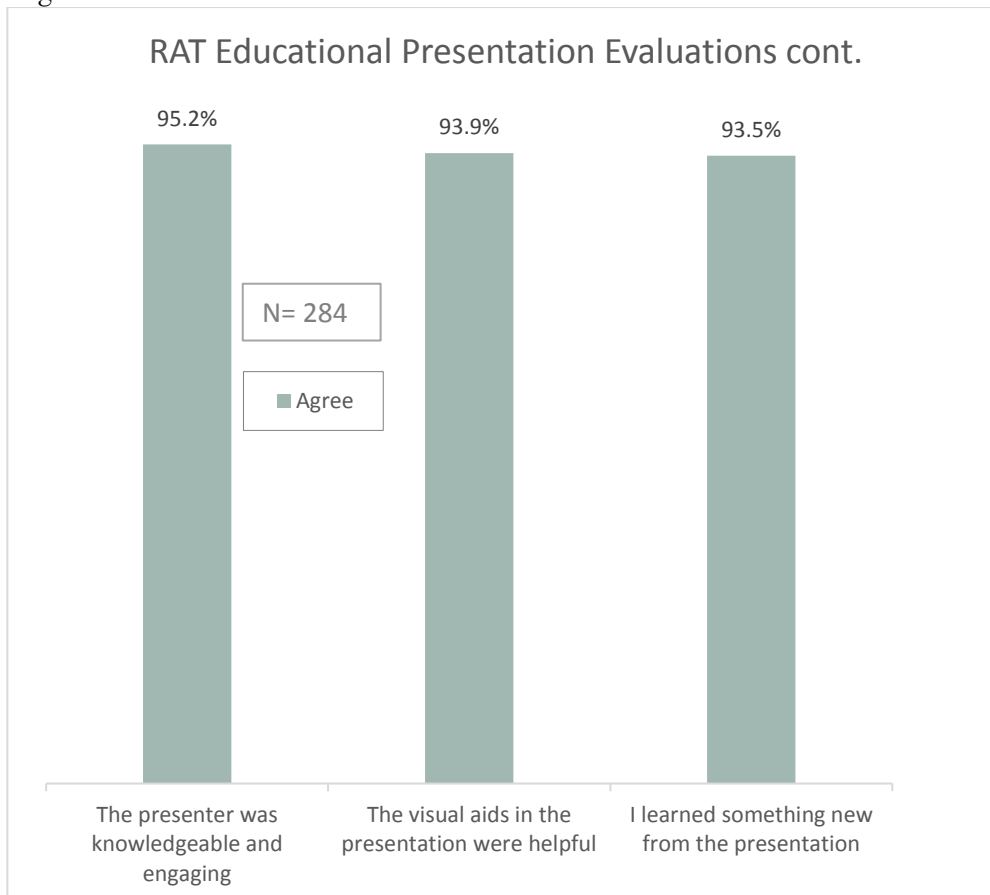




Figure 31.



The graphs represent the 284 student surveys analyzed this year. The evaluation response choices were: Strongly Disagree, Disagree, Not Applicable, Agree, and Strongly Agree. The Agree & Strongly Agree responses have been collapsed into "Agree" in the above figures.



What was your favorite part about the presentation?

- The pig lungs; pumping the lungs; when we got to push the things to see the different parts of the lungs
- When they taught us about tobacco
- Catching the ball and pushing the lungs down
- My favorite part was getting to pump the lungs
- All of it mostly Mr. Big Mouth
- They told us all of the facts about not smoking
- Visual aids
- When I saw the stuff in the jar
- I would like to become more involved in RAT
- Feeling and touching the lungs; When we felt the lungs
- My favorite part is everything
- My favorite part about the presentation is how the slideshow went showing us the effects smoking tobacco has on us
- The beach ball game
- When they passed objects around to show us what's in tobacco
- The part when we got to look at the gross stuff in the jars
- My favorite part was that when they said stop vaping it determined me to never ever vape
- My favorite part was when they talked about what could happen if you smoke because I learned a lot when they talked about that
- My favorite part was seeing the stuff that would be inside your body
- My favorite part was when the teens were telling about why it is bad to smoke

Teachers Responses:

- My favorite part was how professional and polite the presenters were to the students, they showed great patience
- I like for my students to see and hear and interact with nice high school students - I like them seeing high school students trying to do right
- I enjoyed the interaction between the presenters and students. They allowed students to ask educational questions related to tobacco, then showed posters about tobacco
- High school students leading the presentation with enthusiasm
- Everything. It was outstanding
- How they taught us about the dangers of smoking
- The green goo and how many chemicals are in each cigarette



Please share with us anything we could do to improve this presentation.

- Nothing they were good and taught me that to never smoke
- Nothing; it was great; it was perfect
- bring more pictures
- to tell mom and dad to stop
- have the rat come in and dance with us as a whole class
- Show videos
- That a rat could come and do a dance with it
- They could bring some of the things in cigars that are in other products. If they did this we would understand more that cigars have things we never want to put in our mouth.
- You could show more things like a smoker lung and stuff like that
- Have the different types of cigarettes/tobacco products to show/pass around
- Making sure everyone saw the visual aids
- I think they did good talking about tobacco and they should not improve on anything
- What we can do to help out for people to stop

Teachers Responses:

- The presentation was very good but I think I still want to know some more about "Reviewing Tobacco Facts" but otherwise I loved the presentation
- You do not have to improve anything in my opinion
- I think to share the heart and show the effects of electric smoking
- Nothing really needs to be improved I like how the presentation went and how we could interact with the things you brought
- Do questions during the story for pre-K students
- Keep doing positive things for our students
- I think maybe ya'll could bring a good set of lungs to pass around, and bad set of lungs in which someone smoked
- I think what would be helpful if they showed the class a vape to tell them why you should stop vaping



Communications always play an important role in increasing awareness and bringing attention to any program. The RAT coordinator and communications coordinator were charged with working closely together to reflect their message through social media, websites, and traditional media. A new template was created for tracking purposes and was to be uploaded into TRAPS on a monthly basis. This however, was not accomplished for the year. When looking at the Media Tracking folder, it seems there were uploads on a quarterly basis with one final “comprehensive tracking sheet” uploaded in June. According to the scope of work, the RAT Facebook page was to be updated a minimum of four times per month. A total of 75 updates with at least four per month were provided during the year. Newsletters were also a way to increase awareness of the RAT program. Over five thousand Mississippians received quarterly newsletters from the Partnership for a Healthy Mississippi (newsletters were uploaded to TRAPS). Some of the communication numbers related to media circulation numbers were not accurate. PHM staff need to call media stations and newspapers to get an accurate circulation count. For example, PHM had originally reported that Super Talk radio had a circulation of over one million listeners. The evaluation team called Super Talk and learned it was closer to 50,000.

In partnership with the MTFC’s, 987 RAT Teams were implemented in 1,137 schools and 363 other community venues/clubs across most all of the 82 counties in Mississippi. PHM staff provided monthly activity binders for team sponsors from which to choose the required activities. The binders have activities specific for each grade grouping (RAT & FREE) K-3, 4-6, 7-8 and 9-12. New inserts focused on point of sale activities and electronic cigarette information with several activities aimed at family/parent participation. There were 67,256 incentives provided to the MTFC’s for distribution to participating RAT Teams. A youth tobacco prevention contest was developed for K-6 students with the theme being based on one of the three strategic goals.

Generation FREE

Like RAT, the strategic goals for Generation FREE included increased awareness about e-cigarettes and alternative products, but also focused on the following:
Increasing the number of youth actively engaged in supporting state and community efforts to educate lawmakers about the health benefits of increasing the tobacco tax.
Increasing awareness about the need for comprehensive tobacco free campus policies at community colleges, colleges, universities, and technical colleges throughout the state and developing an FY 2019 plan for supporting policy development in post-secondary schools.
There were also strategic outcomes provided in the scope of work for the year, although the process of measuring such outcomes was not attainable since there was no baseline data available.

As in the past, a statewide Youth Advisory Board (Grades 9-12) was recruited and selected to serve. New this year was the Tobacco Free College Board (TFCB) (also called Gen FREE U) consisting of five students enrolled in a post-secondary institution whose members will serve in FY19.



The five members represent William Carey University, the University of Mississippi, Jackson State University, East Central Community College, and Millsaps College. The selection process and recruiting plans were outlined in the FREE Action Plan and were uploaded into TRAPS (October 9th, 2017). At least three and up to four multi-day YAB trainings focusing on advocacy were to be held. The August retreat held in Flowood (August 12-13) included sessions on messaging, facilitating training, and planning for upcoming events. The second training was held in Pearl on September 30, 2017 for a one day event and focused on LEAD Summit responsibilities and expectations. The Winter Retreat (January 20-21, 2018) was held in Flowood and featured team building exercises and FREEFest 18 preparations. (NOTE: One training was to occur during the April 1, 2018 to June 30, 2018 time frame.) Five Street-Team Marketers were selected for the 2017-2018 school year as required by the SCOPE OF WORK. Marketers did participate in freestyle events and helped with a table at a Jackson Braves game to promote their new smoke-free park.

In order to increase awareness among teens in grades 7-12, PHM staff were required to conduct at least two summits/trainings for Generation FREE teams in partnership with the Youth Advisory Board members and the Tobacco Free College Board. YAB members did participate in a brainstorming session in August as well as a conference call.

A FREEFest was held in Hattiesburg for 7th and 8th grade students and sponsors on March 20, 2018 (14 in attendance) and one in Oxford on March 22, 2018 (211 in attendance). For the Hattiesburg event, of the 14 participants, only one was a student according to information posted in the Operations folder. Four LEAD Summits were held during the year with a total of 139 student attendees. The Batesville Summit held on October 7th had 47 student attendees; another was held in Cleveland on October 14th and had 22 student attendees. In November two more opportunities were available. On November 4th, a LEAD Summit was held in Hattiesburg (38 attendees) followed by one in Clinton on November 11th (32 attendees). These numbers were pulled from the TRAPS activity report. Registration sheets were uploaded in TRAPS; sign-in sheets were embedded in wrap-up reports from the events. Numbers reflected in the PHM operations folder reflected different numbers that were recorded in TRAPS. In fact, even in the TRAPS Operations folder, there were two final reports for the LEAD Summits that had different attendance numbers.

Youth Advisory Board members presented workshops, “Taking Down Tobacco 101” and “Advo-Kit/Messaging Matters.” A third workshop, conducted by PHM staff focused on how to effectively advocate. To be noted, there was to be a debrief meeting no more than ten days after the final Youth Advocacy Academy with all pertinent PHM, OTC, and SSRC evaluation staff. The evaluation team was not aware of the meeting although a copy of the report was uploaded in TRAPS. In the past, PHM has conducted such briefings with the evaluation team and found that it was very helpful to have everyone around the table. The evaluation team will make an effort in the coming year to attend at least one conference.

Figure 32.

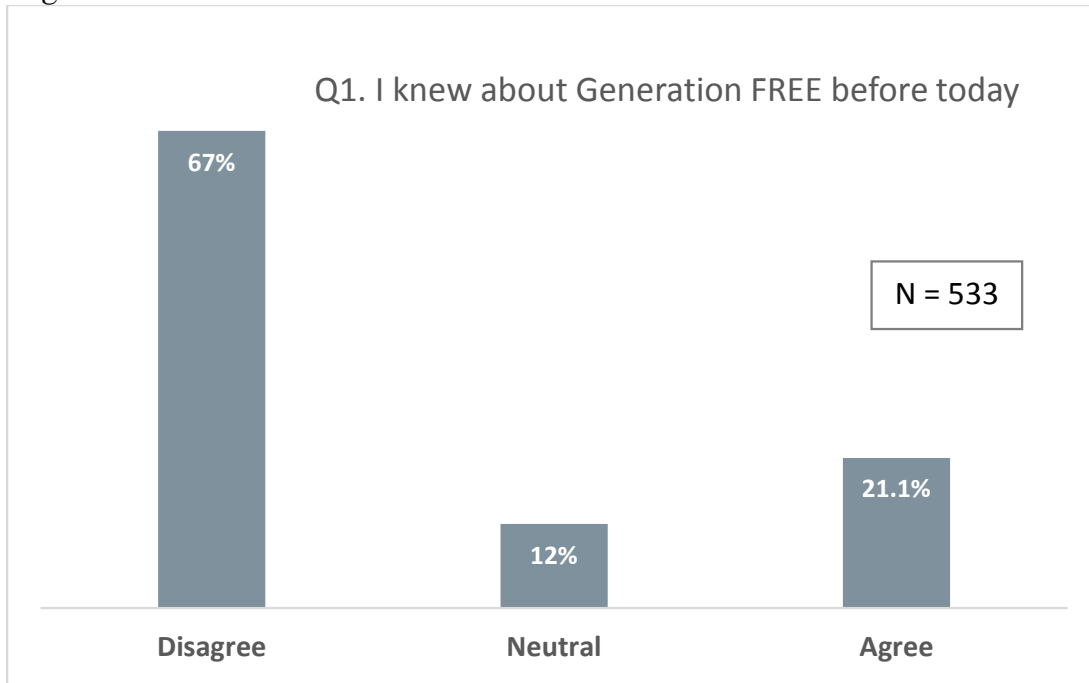
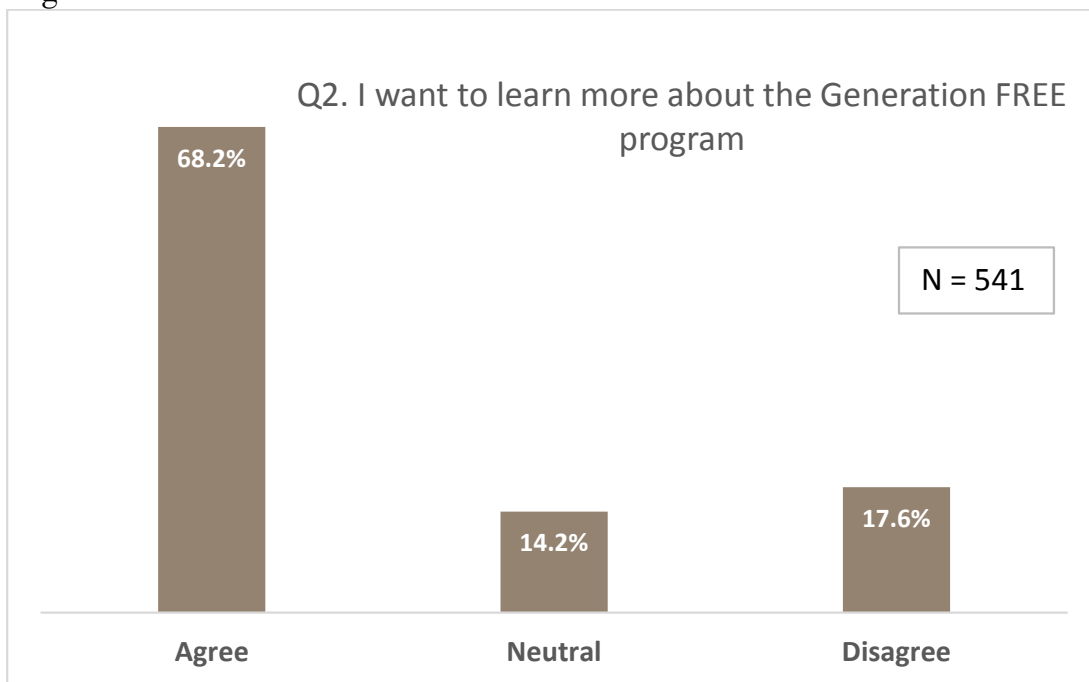


Figure 33.



*Strongly disagree & disagree are combined; strongly agree & agree categories are combined



Figure 34.

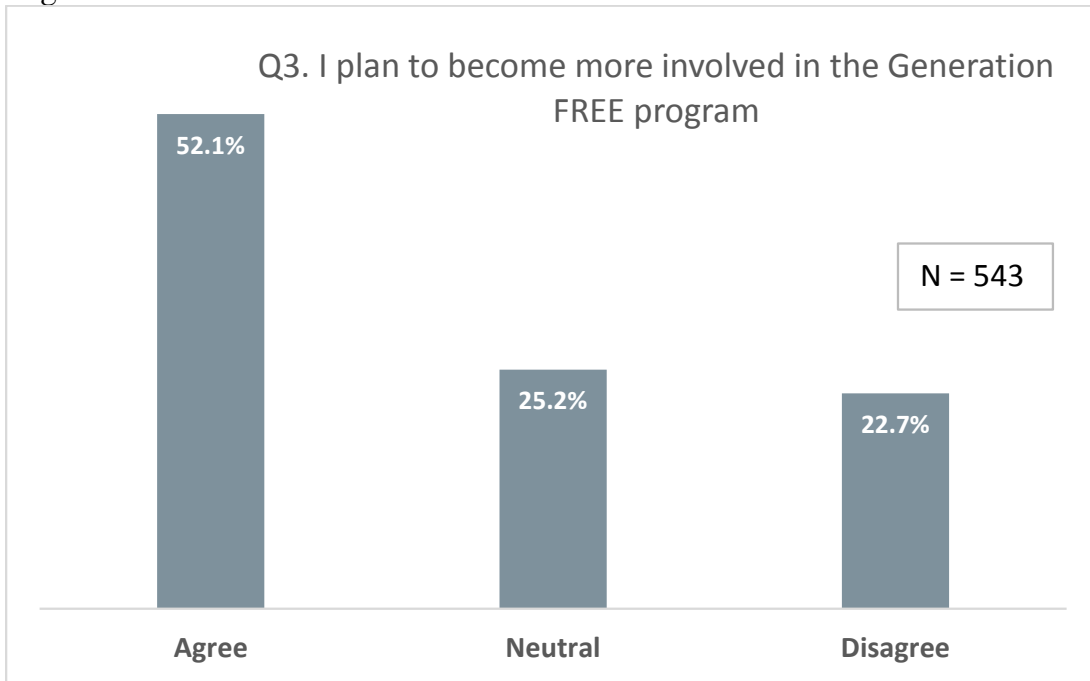
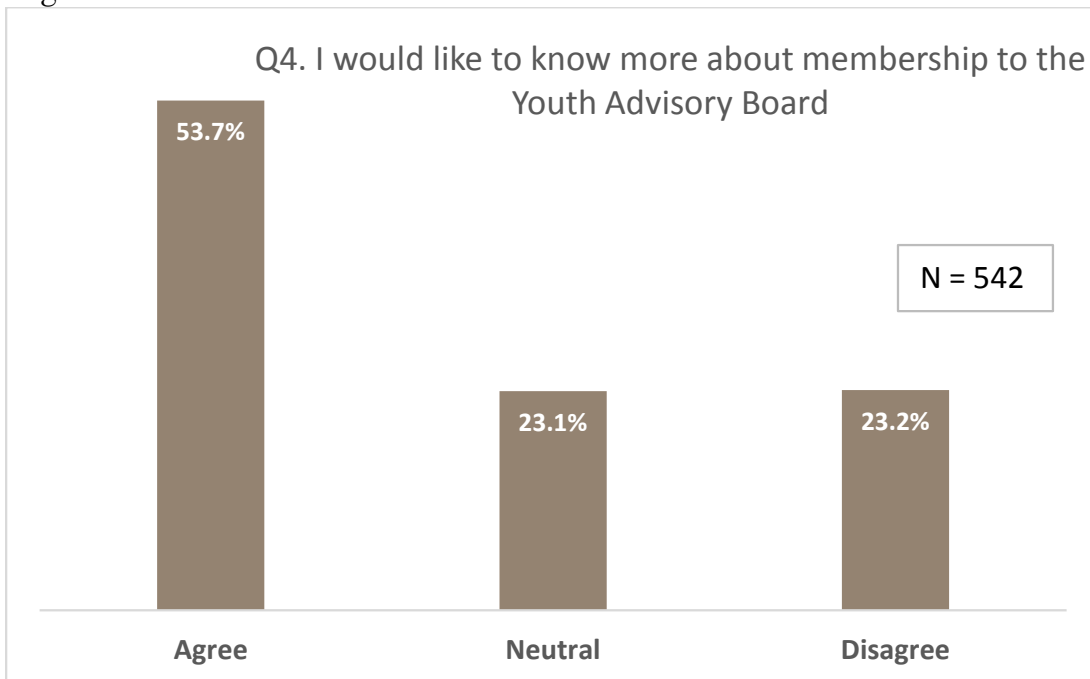


Figure 35.



*Strongly disagree & disagree are combined; strongly agree & agree categories are combined

Figure 36.

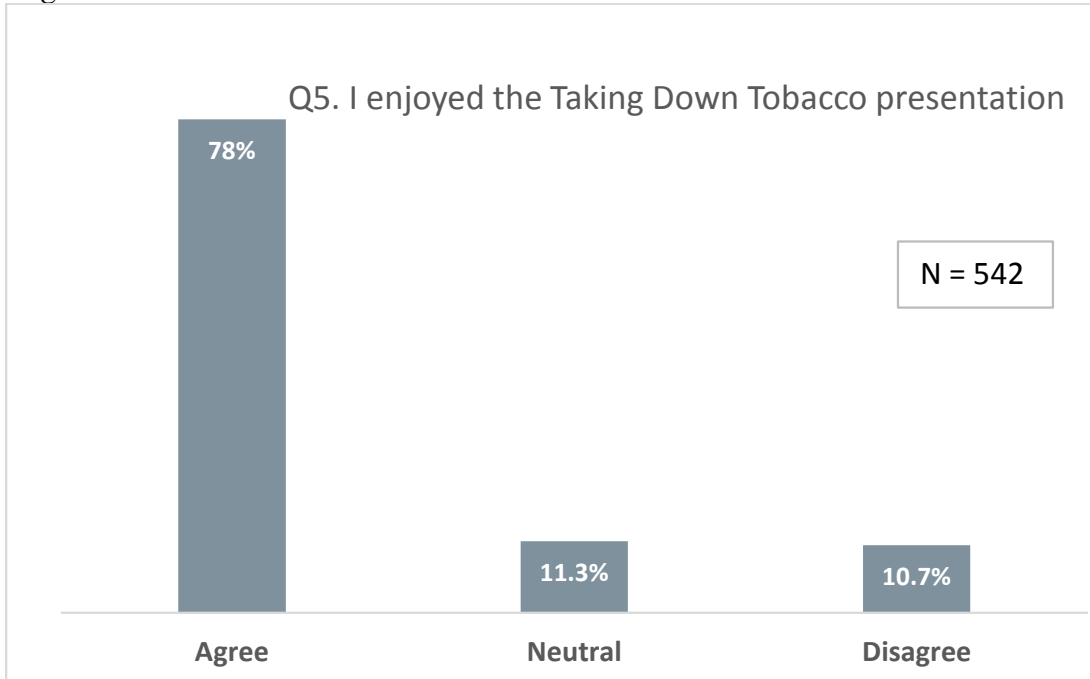
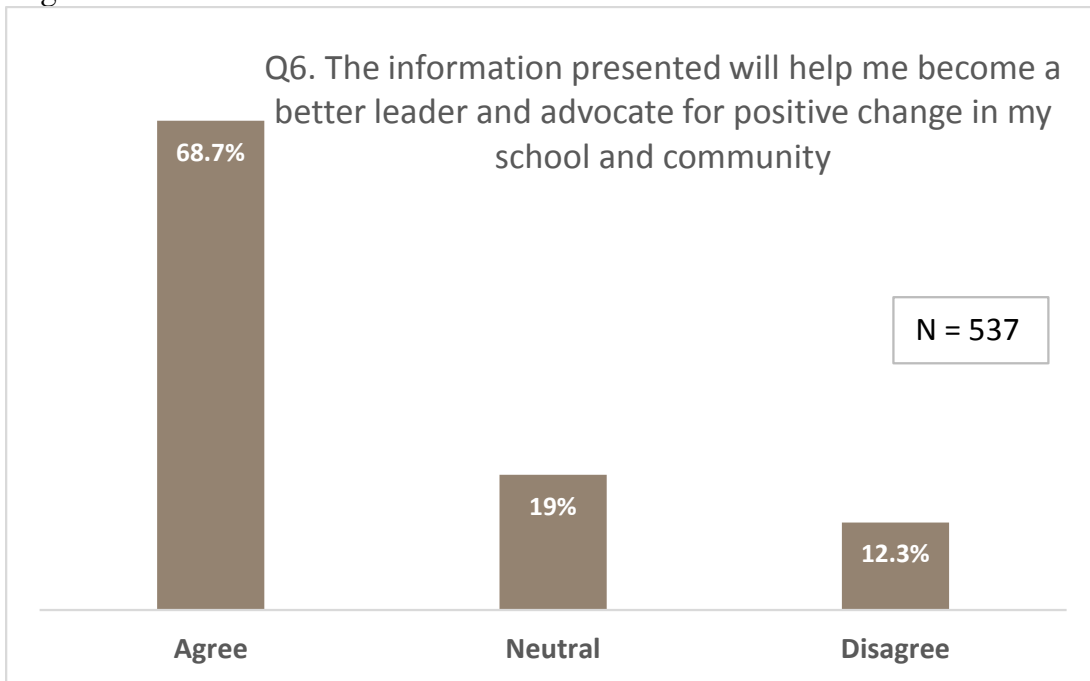


Figure 37.



*Strongly disagree & disagree are combined; strongly agree & agree categories are combined



Figure 38.

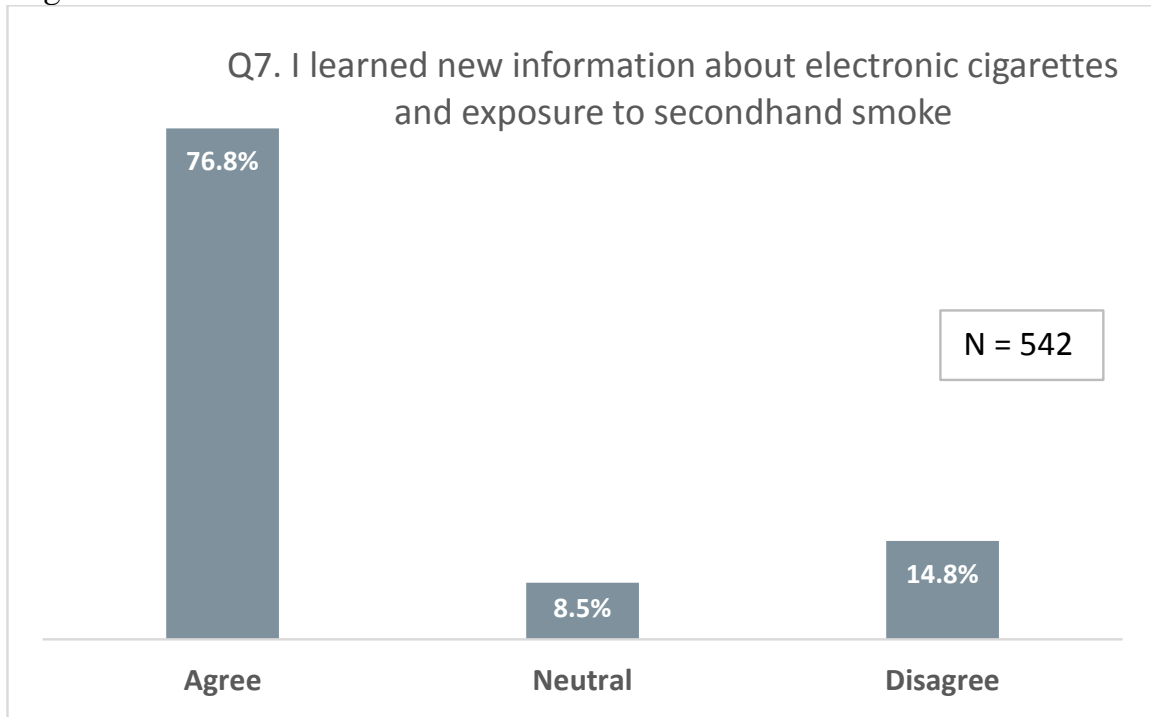
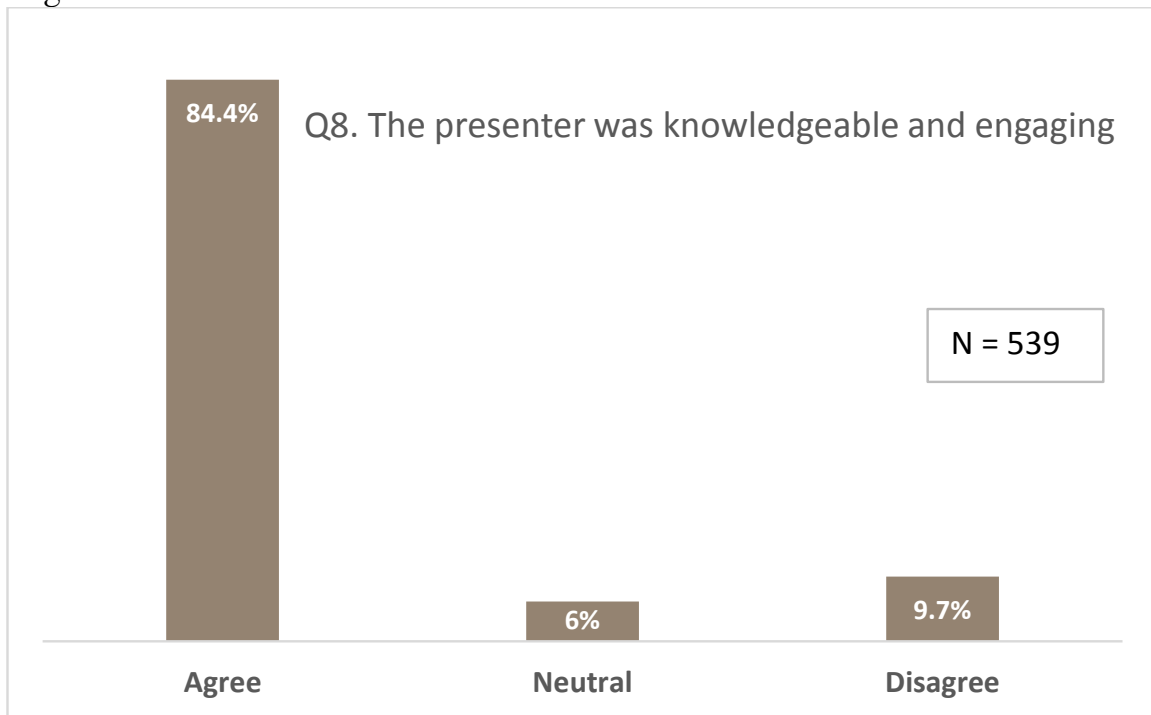


Figure 39.





Please share with us anything we could do to improve this presentation.

- 3rd hand smoking. vape to kids blowing Os and French inhale
- #nosmoking; #Nocigs
- Bring people in that have been through problems
- add more things about chew tobacco
- 4th Handsmoking
- change the red font
- Everything was fine; Everything was good; Everything was great
- Give out free cigs; Give tobacco out; I don't believe there are any bad things
- I improved that I learned a lot about this program and I would like to learn more
- I like the presentation, it was perfect; I liked it
- Is weed more dangerous than tobacco
- it was cool; It was great; loved it;
- Learn more about E-cigarettes
- More games that help us learn
- more pictures of the different types of tobacco
- provide more information about smokeless tobacco
- Stop people from smoking; Take it off the markets; Thank you a lot
- Talk more about vapes and its juices
- Try to take drugs and cigarettes out of the stores. Plus you can increase the smoking age. The teenagers can't do it if the age isn't right.
- You can get adults and kids in the same room and talk to them
- You could try making the information more compact
- You don't have to change anything
- you put navy blue on black so we couldn't read
- you really did a good job but I would like more information

At least 40 FREE educational presentations for 7-8th grade students were to be conducted during the year. PHM conducted 42 events with 4,021 students in attendance according to the information reported in TRAPS. Classroom evaluations were randomly collected in order to gauge the interest and knowledge of the students. The feedback is important since this was the pilot year for this activity.

Nine FREESTyle events were recorded in TRAPS with 1,765 students in attendance. Examples of such events included: street marketers events at Pearl Junior High School and Armstrong Middle School in Starkville, assemblies at Hernando Middle School, Indianola Academy, and Lake Cormorant Middle School. Additionally Free Style street team events were to take place at nine sites. Interactive experiential events at post-secondary institutions were designed to focus on increasing awareness about the benefits of campus smoke-free and tobacco free policies. A total of four were held at the University of Southern Mississippi, Millsaps, East Central Community College and the University of Mississippi; five were required.



Announcements regarding social media contests and mini-grants sponsored by PHM were uploaded into TRAPS, but there were no detailed plans on development and implementation as required by the scope of work. There were, however three entries in the TRAPS activity report acknowledging the distribution of information about the mini grant contest. The recipient of the mini grant was the Oxford High School FREE team which partnered with Mr. and Miss Ole Miss for a video presentation on why they do not use electronic cigarettes.

New in Fiscal Year 2018 was the development of a Youth Advocacy Toolkit that could be distributed to youth advocacy teams to support their community and school efforts. Specific components of the toolkit were specified such as public speaking and presenting, social media engagement, SMART goal setting, advocacy training etc. Many of these components have been separately uploaded into TRAPS.

Youth Advisory Board members, Tobacco Free College Board members, and MTFC youth advocacy teams were charged with educating at least 200 policymakers, members of civic groups, and other institutional boards on the importance of classifying ENDS products as a tobacco product in the state of Mississippi and the benefits of smoke-free college campuses. YAB and GENFREE U members were responsible for educating 75-100 while the youth advocacy teams were responsible for 100-125. According to PHM's reporting in TRAPS, there were 17 events in which 124 people were impacted in some way. There were no "touches" recorded for the youth advocacy teams. While the total goal was worthwhile, it was not attainable due to the low number of MTFC youth advocates and the challenges they faced in conducting any kind of meetings. For the most part, they did not have the opportunities to come in contact with stakeholders to present their messages. Examples of completed activities included:

YAB presentation at the American Cancer Society Action Network Day at the State Capitol
Presentation to the Madison County Youth Leadership group on what Generation FREE is and how to be involved

Meeting with City of Ridgeland Healthy Hometown Committee to discuss the importance of having strong smoke-free policies

Presentation to Southeast Dairy Association

West Marion Primary School meeting with principal and school nurse to discuss smoking and e-cigarettes

The Youth Advisory Board was also charged with providing training and technical assistance to MTFC youth advocacy teams throughout the year. They were advised to join their own youth advocacy teams in their communities. However, most of the MTFC youth advocacy teams never really got off the ground during the year in part because of travel concerns for teens having to cross several counties in some cases to attend meetings. There were six technical assistance activities noted in the TRAPS activity reports that include a RAT Troupe education presentation at Madison Central, a RAT booth at Saucier Elementary School health fair, and a back-to-school fair in Flowood.



For the first time in recent years, the PHM staff were charged with conducting pre and post testing for students engaged in RAT and FREE programs. Youth teams were selected randomly to participate in initial knowledge and knowledge retention and attitudes about tobacco use and influence from the RAT and FREE materials they had been exposed to. Teams chosen to test were comprised of students who had not participated in any youth teams previously. Forty teams were tested with 1,256 students ranging from grades 5 to 12. The RAT (grades 5-6) pretests (383) and posttests (373) had a match of 296 valid tests. The FREE (grades 7-12) pretests (389) and posttests (189) had a match of just 155 tests. The number of valid tests were down from the previous year when MTFC directors conducted the testing. PHM staff found that often school team sponsors were more open to allowing the MTFC Directors with whom they had a connection to come into the classroom and conduct the tests.

Table 16 shows the RAT (K-6 grade) student improvements in tobacco knowledge from the pre to posttests in the majority of areas. Conventionally, a p value of less than .05 is considered statistically significant. The evaluation team conducted a paired-samples t-test allowing examination of possible significant difference in overall student tobacco knowledge between their pre and their posttests scores. The RAT students had 30 questions to test their knowledge on tobacco and how it relates to health. Fourteen of the 30 questions were statistically significant from the pre to post testing with a p value most times at $<.001$, down from last year (24). This means that there is a greater than 99% probability that the difference between pre and posttest is valid. In other words, the knowledge increases on tobacco-related dangers are statistically valid in almost half of the knowledge areas tested. The main questions that did not show knowledge increase, or statistical significance were those surrounding vaping, e-cigarettes, cigars and other non-tobacco nicotine products and the dangers in comparison to cigarettes.



Table 16.

RAT - Pre & Posttest (t-test) (1=Yes, 2=Maybe Yes, 3=Don't Know, 4=Maybe No, 5=No)	Matched N	Pre- Mean	Post- Mean	Mean Diff	Sig. (2- tailed)
1. Smoking					
a. Smoking makes teeth yellow	297	1.31	1.09	0.22	.001***
b. Smoking makes breath, hair, and clothes stink	295	1.34	1.17	0.17	.003**
c. Smoking turns lungs black	297	1.12	1.06	0.06	0.10
d. Smoking makes your heart work harder than it should	295	2.28	1.75	0.53	.000***
e. Smoking can cause cancer	293	1.11	1.14	-0.03	0.46
f. Smoking is hard to stop once you start	291	1.37	1.30	0.07	0.22
g. Smoking costs a lot of money	291	2.29	1.87	0.42	.000***
h. Smoking can make it hard to taste your food	295	2.18	1.65	0.53	.000***
2. Spit tobacco					
a. Spit tobacco causes cavities	295	1.75	1.51	0.24	.001***
b. Spit tobacco causes mouth cancer	293	1.85	1.43	0.42	.000***
c. Spit tobacco causes tooth loss	293	1.77	1.39	0.38	.000***
d. Spit tobacco costs a lot of money	293	2.34	1.90	0.44	.000***
3. Electronic Cigarettes/Vaping					
a. E-juices can be harmful and even deadly to toddlers	295	1.59	1.71	-0.12	0.17
b. E-cigarette vapor is NOT harmless "water vapor"	294	3.03	2.82	0.21	0.07
c. The nicotine in the e-juice can harm growing brains	293	2.15	1.99	0.16	0.06
d. E-cigarettes delivers MORE nicotine than actual cigarettes	291	2.37	2.21	0.16	0.11
4. Secondhand Smoke (SHS)					
a. Secondhand smoke comes from cigarettes and cigars	295	1.51	1.41	0.10	0.16
b. Secondhand smoke causes cancer	295	1.56	1.51	0.05	0.44
c. Secondhand smoke is safe in small amounts	294	4.12	3.93	0.19	0.05*
d. Secondhand smoke causes earaches	293	2.83	2.14	0.69	.000***
e. Secondhand smoke should be avoided	293	1.43	1.34	0.09	0.22
5. I know how to tell others about the dangers of:					
a. Cigarettes	295	1.18	1.26	-0.08	0.23
b. Cigars	293	1.51	1.46	0.05	0.57
c. Smokeless Tobacco	290	1.71	1.60	0.11	0.31
d. Electronic Cigarettes/Vaping	285	2.02	1.72	0.30	.006**
6. I have been to the RAT website	293	3.83	3.14	0.69	.000***
7. Exercise					
a. Smoking makes running or jumping harder to do	288	1.65	1.53	0.12	0.06
b. Spit tobacco makes running or jumping harder to do	283	2.42	2.18	0.24	.007**
c. Breathing in SHS makes running & jumping harder to do	284	2.15	1.96	0.19	0.02*
8. Cigarette butts can harm					
a. Plants b. Animals c. People d. All of the Above	292	0.73	0.81	-0.08	0.01*
9. RAT stands for:					
a. Rebel Against Tobacco b. Really Awful Tobacco	292	0.95	0.94	0.01	0.82
c. Run Around Town d. Reject All Tobacco					
10. The name of the drug found in cigarettes that is addictive is:					
a. Sugar b. Menthol c. Nicotine d. Tylenol	288	0.84	0.88	-0.04	0.01*
11. Cigars are safer than cigarettes?					
a. True b. False	281	0.85	0.82	0.03	0.47

* $p < .05$, ** $p < .01$, *** $p < .001$

Table 17.

Generation FREE - Pre & Posttest (t-test) (1=Strongly Agree - 5=Strongly Disagree)	Matched N	Pre- Mean	Post- Mean	Mean Diff	Sig. (2- tailed)
1. Tobacco companies sell products that are harmful	154	1.32	1.39	-0.07	0.45
2. Smoking causes stress	153	2.09	2.17	-0.08	0.45
3. Tobacco is a waste of money	147	1.24	1.39	-0.15	0.06
4. I know how to say 'No' to cigarettes	151	1.24	1.30	-0.06	0.44
5. I know how to say 'No' to:					
a. smokeless tobacco	150	1.31	1.29	0.02	0.76
b. hookah	143	1.42	1.48	-0.06	0.55
c. electronic cigarettes/vaping	143	1.36	1.51	-0.15	0.14
6. I know how to tell people about the dangers of					
a. cigarettes	154	1.54	1.49	0.05	0.56
b. electronic cigarettes/vaping	146	1.75	1.76	-0.01	0.88
c. smokeless tobacco	148	1.66	1.59	0.07	0.46
d. secondhand smoke	147	1.59	1.50	0.09	0.33
7. I know how to ask someone to stop using tobacco	151	1.93	1.95	-0.02	0.84
8. Smokeless tobacco is a harmless alternative to cigarettes	152	3.60	3.76	-0.16	0.24
9. Vaping/electronic cigarettes are a safe alternative to cigarettes	151	3.43	3.52	-0.09	0.52
10. Tobacco companies:					
a. influence me to smoke	153	3.50	3.58	-0.08	0.58
b. influence my friends to smoke	146	3.13	3.09	0.04	0.74
c. influence others my age to smoke	146	2.46	2.51	-0.05	0.69
d. target teens	148	2.14	2.20	-0.06	0.61
e. target women	147	2.85	2.82	0.03	0.82
11. I have invited classmates to tobacco-prevention activities	154	3.31	3.56	-0.25	0.06
12. I have shared tobacco facts with others	153	2.46	2.56	-0.10	0.44
13. I have shared tobacco facts at a school activity	152	3.05	2.93	0.12	0.36
14. Tobacco companies spend a lot of money in advertisements	153	1.88	1.90	-0.02	0.81
15. Tobacco companies should be held responsible for hurting people	153	1.95	2.02	-0.07	0.54
16. During this school year, I have visited these websites:					
a. Campaign for Tobacco Free Kids	149	1.92	1.86	0.06	0.07
b. Generation FREE	147	1.88	1.80	0.08	.02*
c. World Health Organization	147	1.84	1.78	0.06	0.17
d. TheTruth.com	147	1.85	1.80	0.05	0.13
e. The American Lung Association	147	1.89	1.88	0.01	0.70
f. the American Cancer Society	146	1.88	1.78	0.10	.01**
Social Media (1=Yes, 2=No)					
17. I have posted a tobacco fact on social media	148	1.89	1.86	0.03	0.42
18. I have posted on social media during an anti-tobacco/smoke-free activity	146	1.88	1.81	0.07	.03*
19. I have followed Generation FREE on:					
a. Twitter	148	1.95	1.94	0.01	0.78
b. Snapshot	148	1.91	1.86	0.05	0.18
c. Facebook	147	1.89	1.90	-0.01	0.64
d. Instagram	147	1.88	1.79	0.09	.02*
20. I have seen a Generation FREE advertisement on the internet	146	1.54	1.51	0.03	0.49
21. I have researched tobacco facts on the internet	147	1.46	1.43	0.03	0.48
22. The most common form of cancer associated with tobacco is:					
a. Colon b. Liver c. Lung d. Skin	147	0.95	0.96	-0.01	0.53
23. Secondhand smoke increases the chances of:					
a. Cancer b. Heart Attack c. Lung Disease d. All of the Above	148	0.82	0.84	-0.02	0.72
24. What is the number one cause of preventable death in the US?					
a. Smoking b. Accidents c. Infections d. Malaria	146	0.9	0.94	-0.04	0.20

*p<.05, **p<.01



Table 17 displays the Generation FREE (grades 7-12) results from pre to post testing. The FREE students had 38 questions to test their knowledge on tobacco and how it relates to health. Most of the 38 questions were not statistically significant from the pre to post testing with a *p* value most times at $<.001$, meaning there is a greater than 99% probability that the difference between pre and posttest is valid. In other words, the knowledge increases on tobacco-related dangers are statistically valid. Only four questions showed enough students gained knowledge to be statistically significant in FY 18, compared to 22 in FY 17. As noted in table 16, the questions that showed the need for attention, or the least knowledge obtained from the program were questions surrounding vaping, e-cigarettes, cigars and other non-tobacco nicotine products and the dangers in comparison to cigarettes.

Evaluators conducted several surveys using Qualtrics software to understand how various events and groups were portrayed by the members and the community. The first one, shown below was of the GenFREE U members. There were five members, but only one responded to the survey. It was sent four times to the email addresses listed in the contact membership uploaded in TRAPS.

Figure 40.

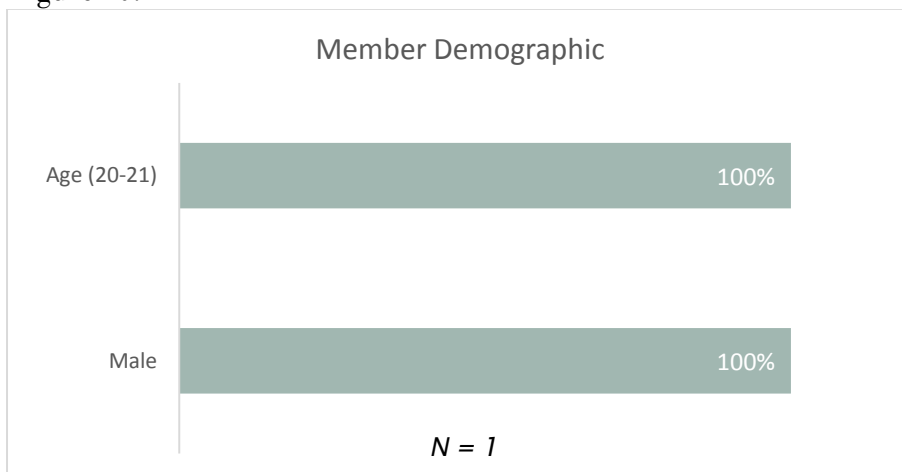


Figure 41.

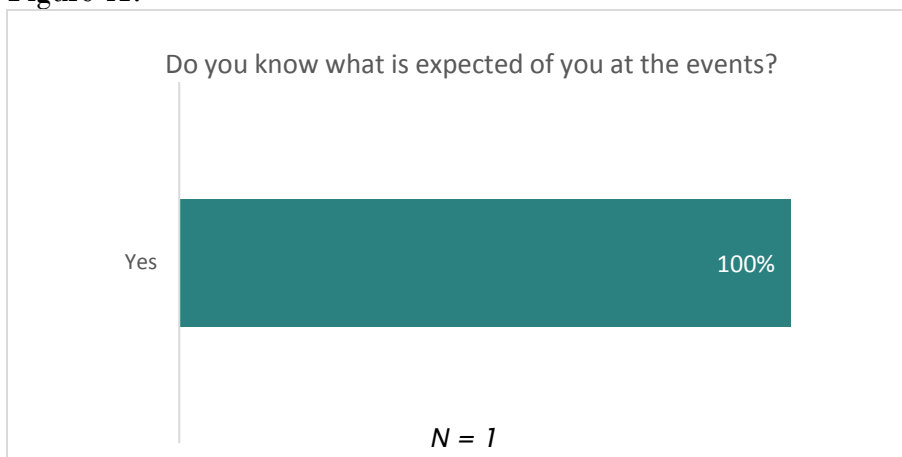




Figure 42.

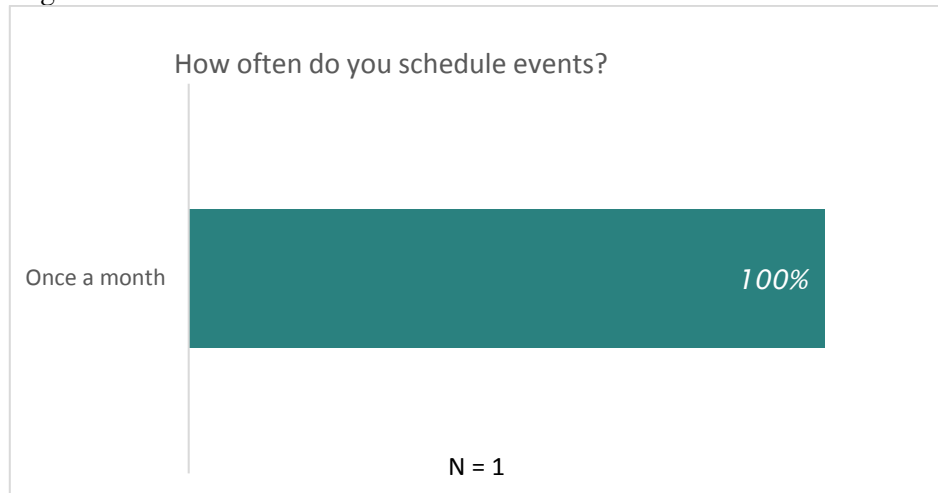


Figure 43.

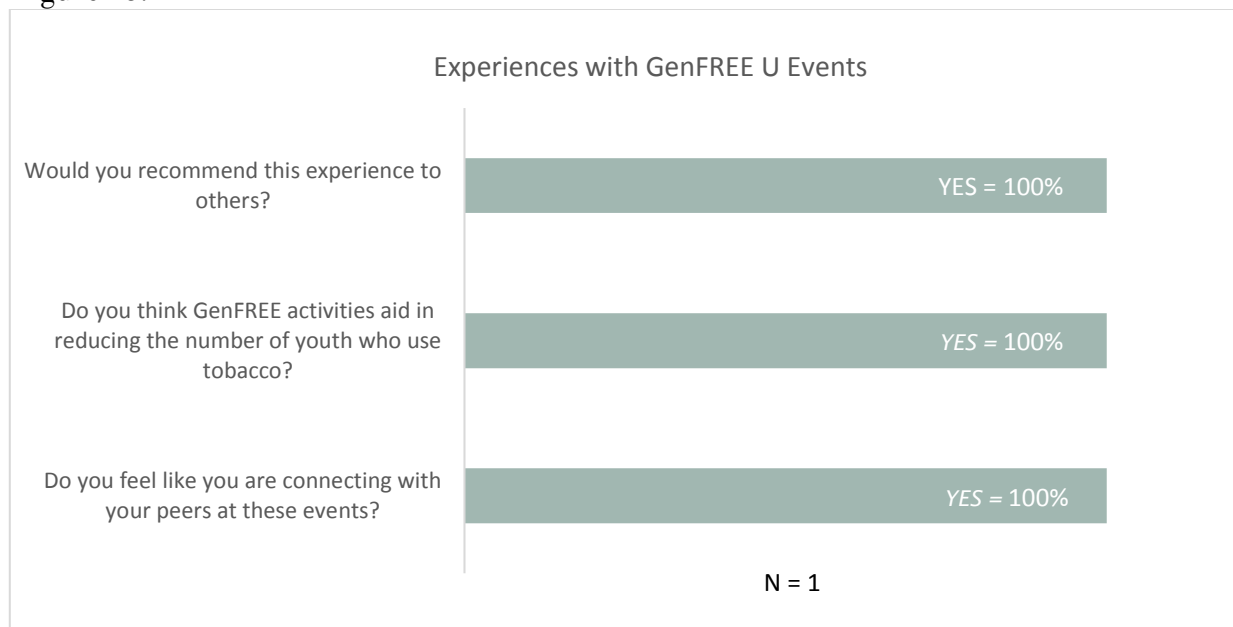
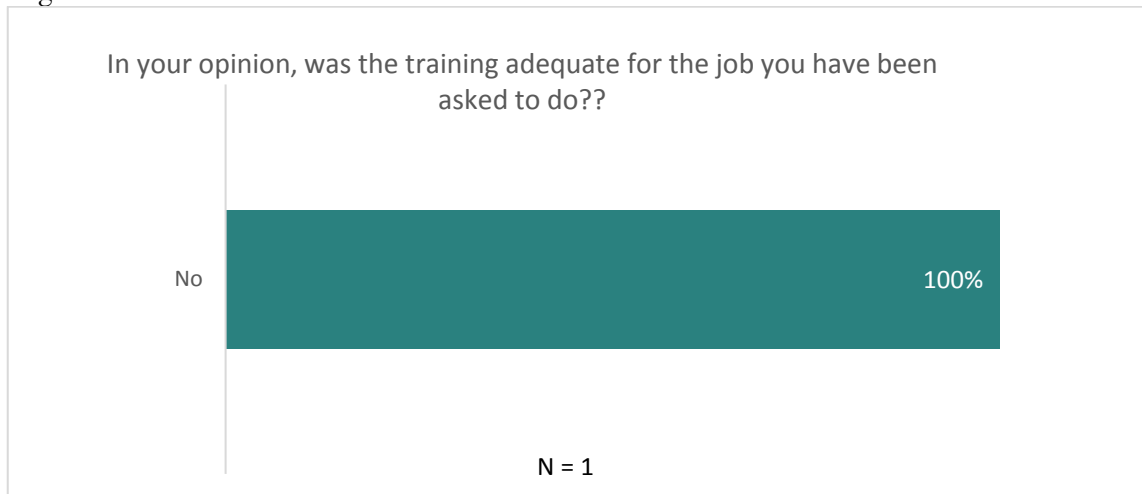




Figure 44.



What suggestions do you have to improve the program?

I think there needs to be more members and there needs to be something done to get our name more out there. There also seem to be way too many requirements like having us talk to 5 people in the community. I think that instead of that, we should have to organize a focus group with students on our campus prior to the big event that we organize for the year. In that focus group, we can see what topics in tobacco control our school struggles with or would like to learn more about. That way, when we have our big event for the year, we will better be able to take it to our school. This also engages other students on our campus and they could get some incentives for participating.

Share with us what we can do to better prepare team members?

We only had one training this year. We definitely needed another training. We also needed more conference calls to help keep us in the loop. Also, providing us with resources on our campus can help.



Evaluators also surveyed the RAT Troupe Sponsors who were involved in FY 18. Only three responded to the email survey. The results are as follows:

Figure 45.

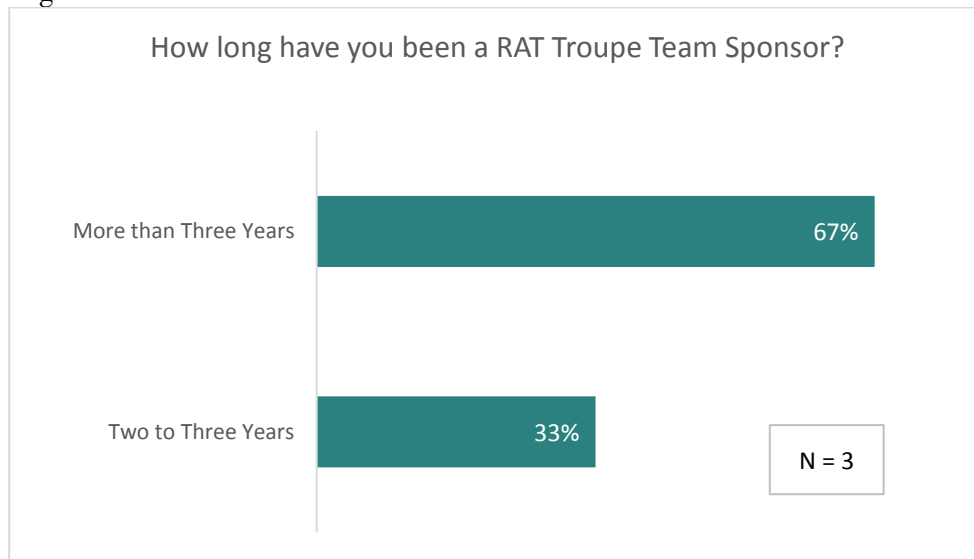
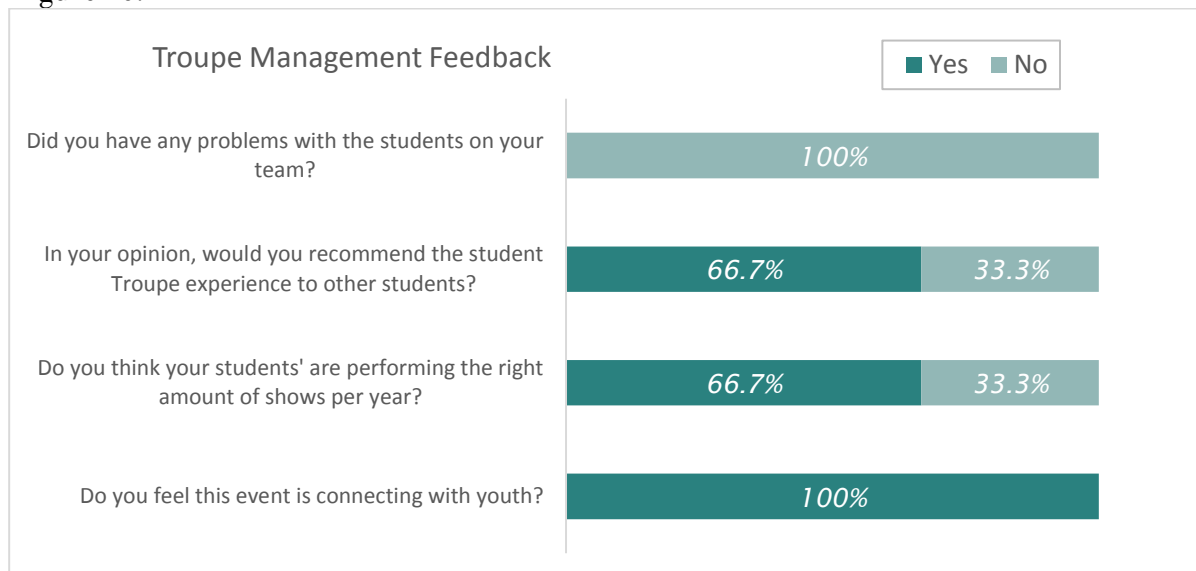


Figure 46.





In your opinion, how can we improve the program?

- The Program is Fantastic!! I have been involved in the Tobacco Education as a School Nurse since the latter 90's and with The Rat Program for years!! I would like to suggest more time for the Kids during RAT Camp especially with new coming members coming aboard!!
- This year has been very crazy since Sarah left. A lot has been asked of us since she left - performance dates told to us last minute, issues with the bus, people being late to pick us up, etc. I know you are getting new people in but this year has been very rough.

Evaluators also surveyed the RAT Troupe school contacts who work with the PHM to host the shows and facilitate the follow-up activities and distribution of materials. Out of 20 potential respondents, 11 responded to the online. The results are displayed below.

Figure 47.

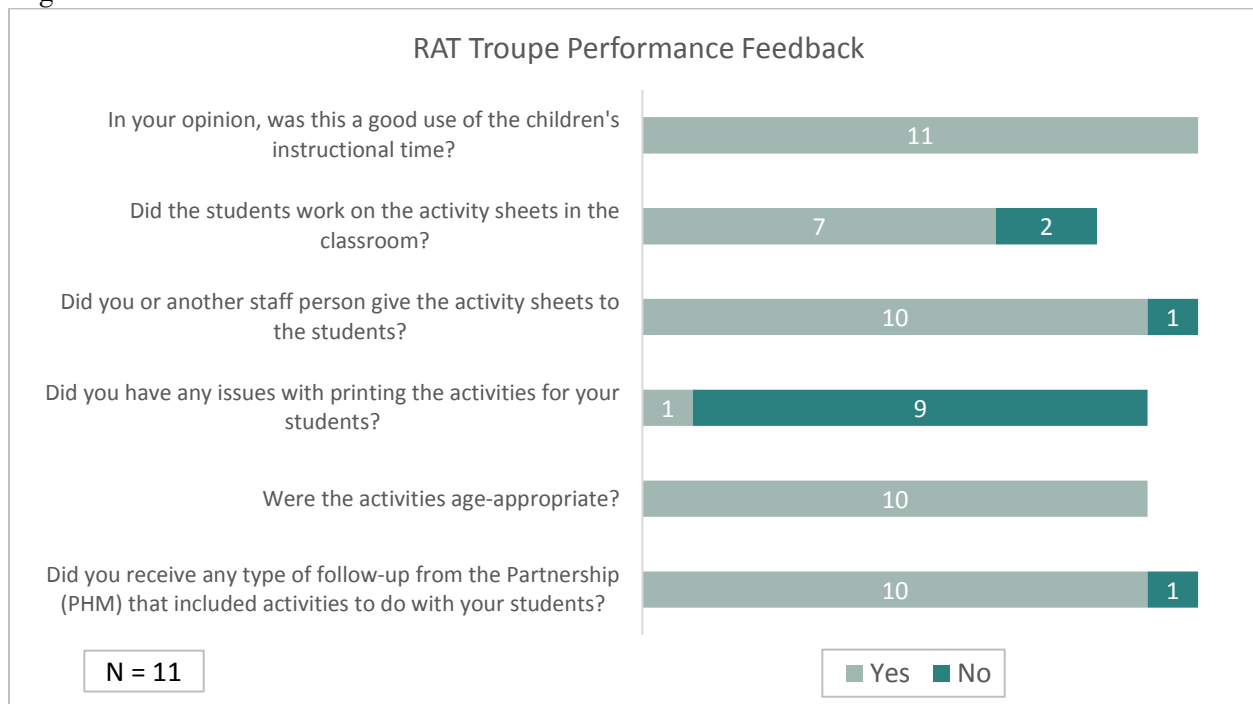
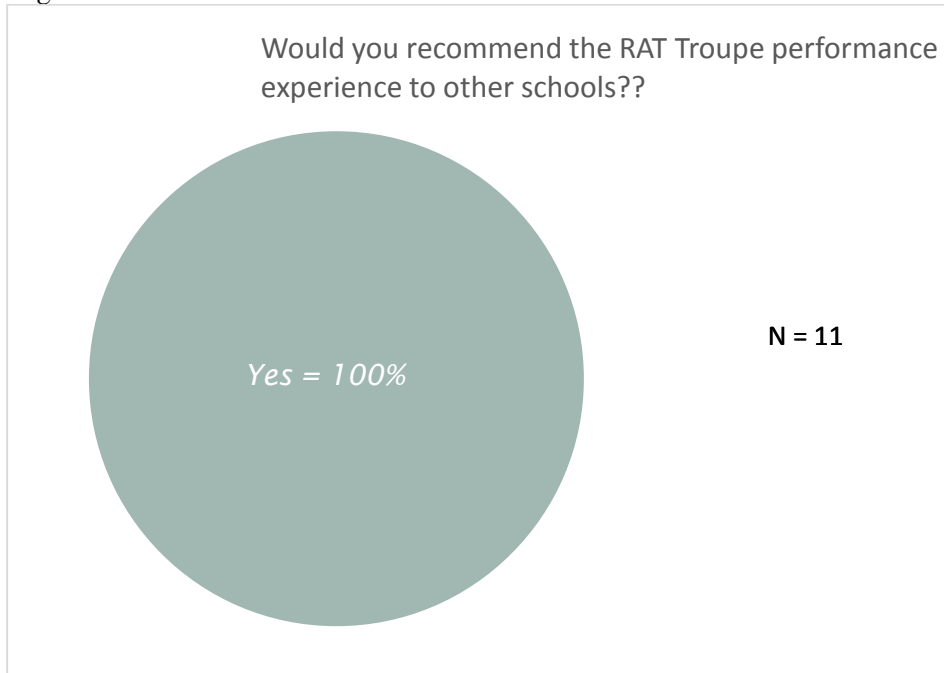


Figure 48.



What follow-up activities do you think would reinforce the message for a healthier tobacco free Mississippi?

- Have a short quiz on what they learned during the assembly

In your opinion, how can we improve the program?

- Everything is great now
- Great Program!
- Nothing

Similar to the RAT program, PHM staff who were engaged in FREE activities were required to update the FREE website a minimum of once per month by submitting photos of FREE events, and promoting upcoming events. A total of 542 posts (Snap Chat, Facebook, Instagram, websites, and Twitter) were completed during the year.

Administratively, the PHM staff were to submit a monthly calendar of events to include RAT Troupe performances, advocacy trainings, Street Team events, academies, and presentations for the month ahead. Although the RAT Troupe shows and FREE presentations were uploaded into TRAPS, there were no other calendars to reflect other activities coordinated by PHM. Annual Action Plans were uploaded to TRAPS for the RAT and FREE programs.



In 2017, LEAD Summits were held in the cities of Batesville, Cleveland, Clinton and Hattiesburg. The following figures are the responses of the 130 youth who participated in the evaluations.

Figure 49.

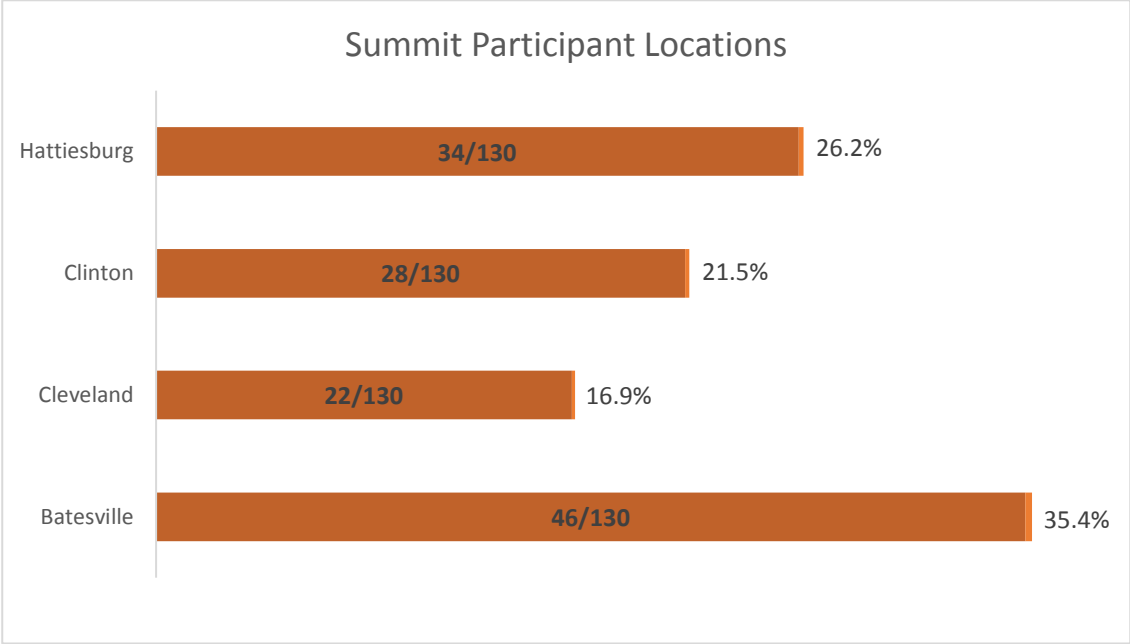


Figure 50.

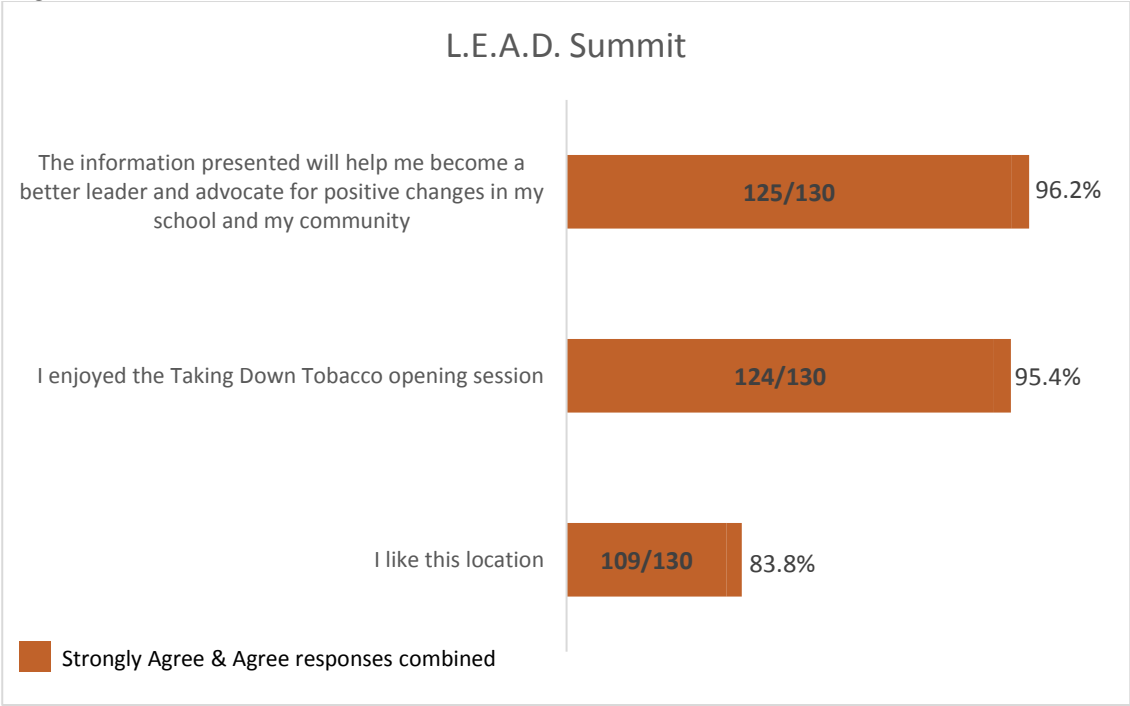
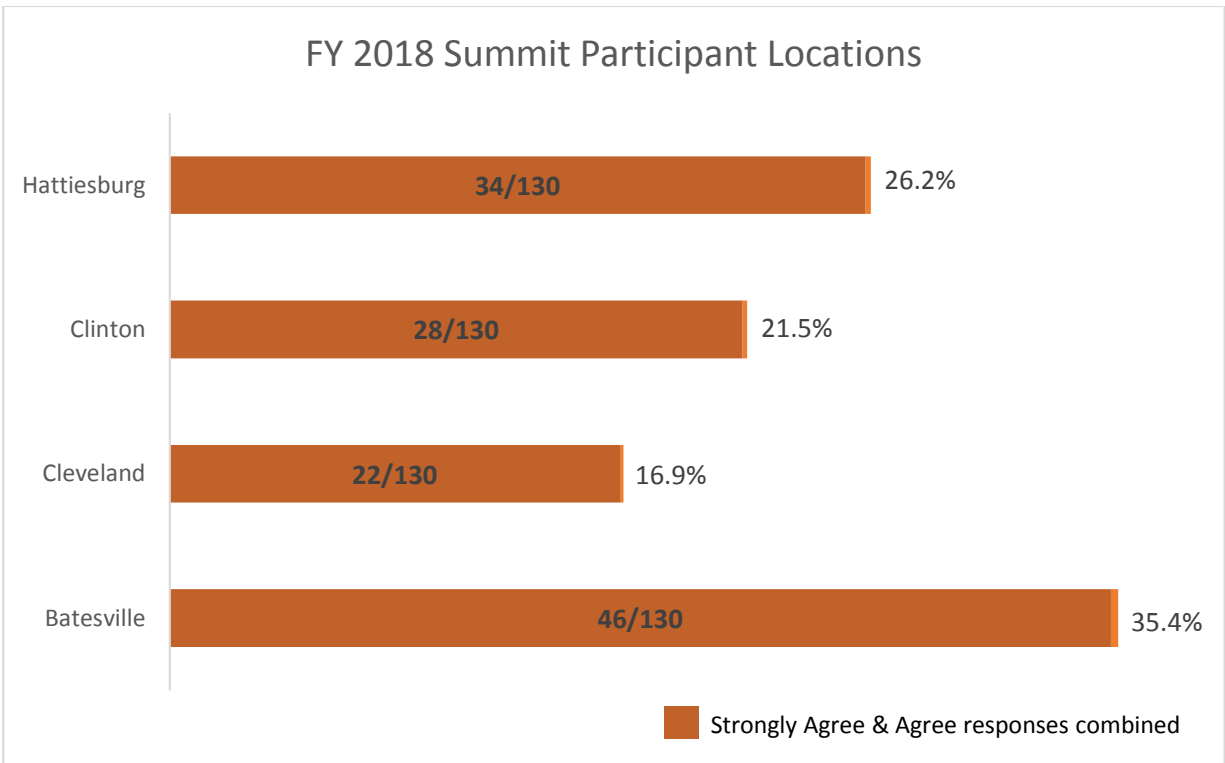




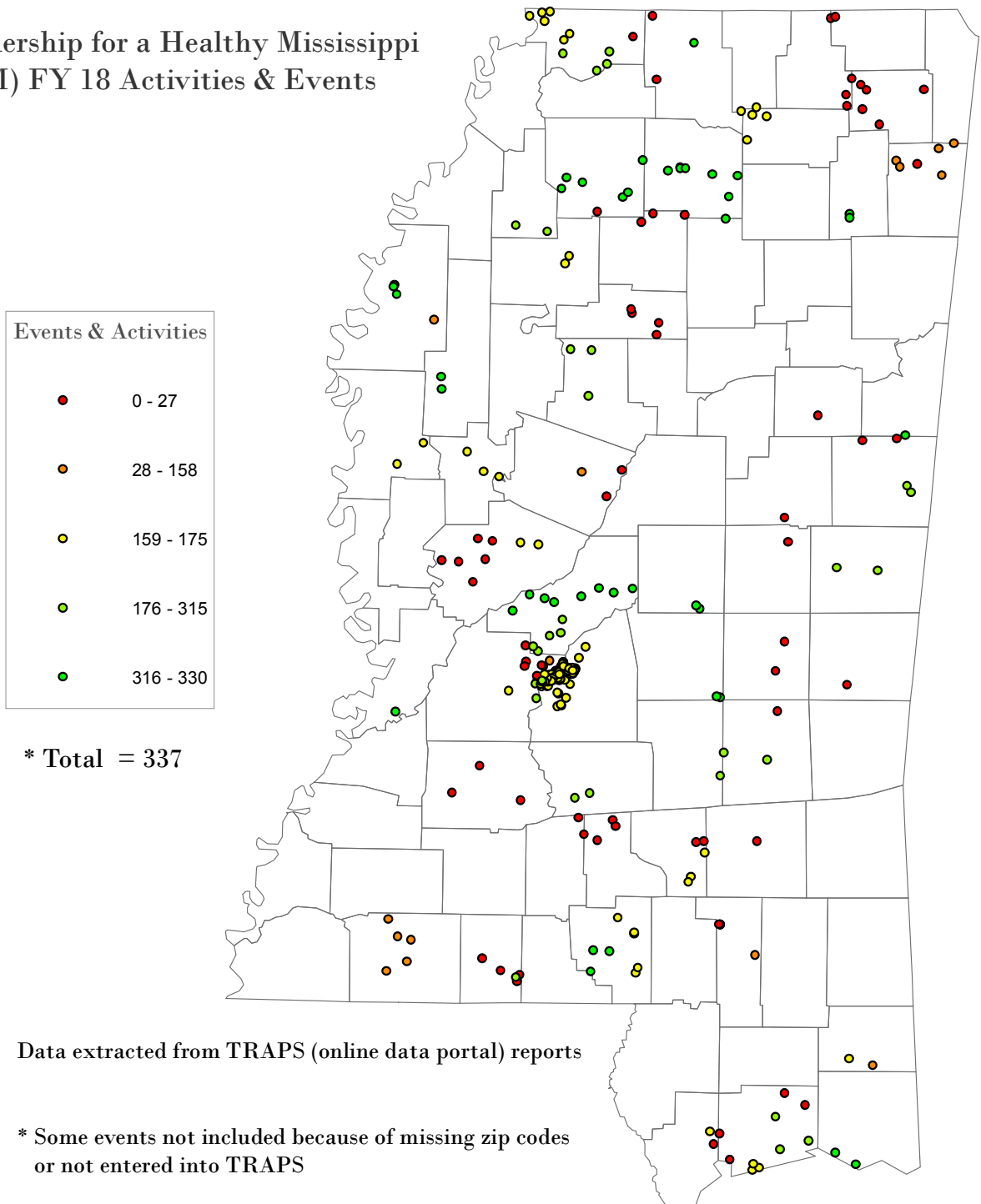
Figure 51.



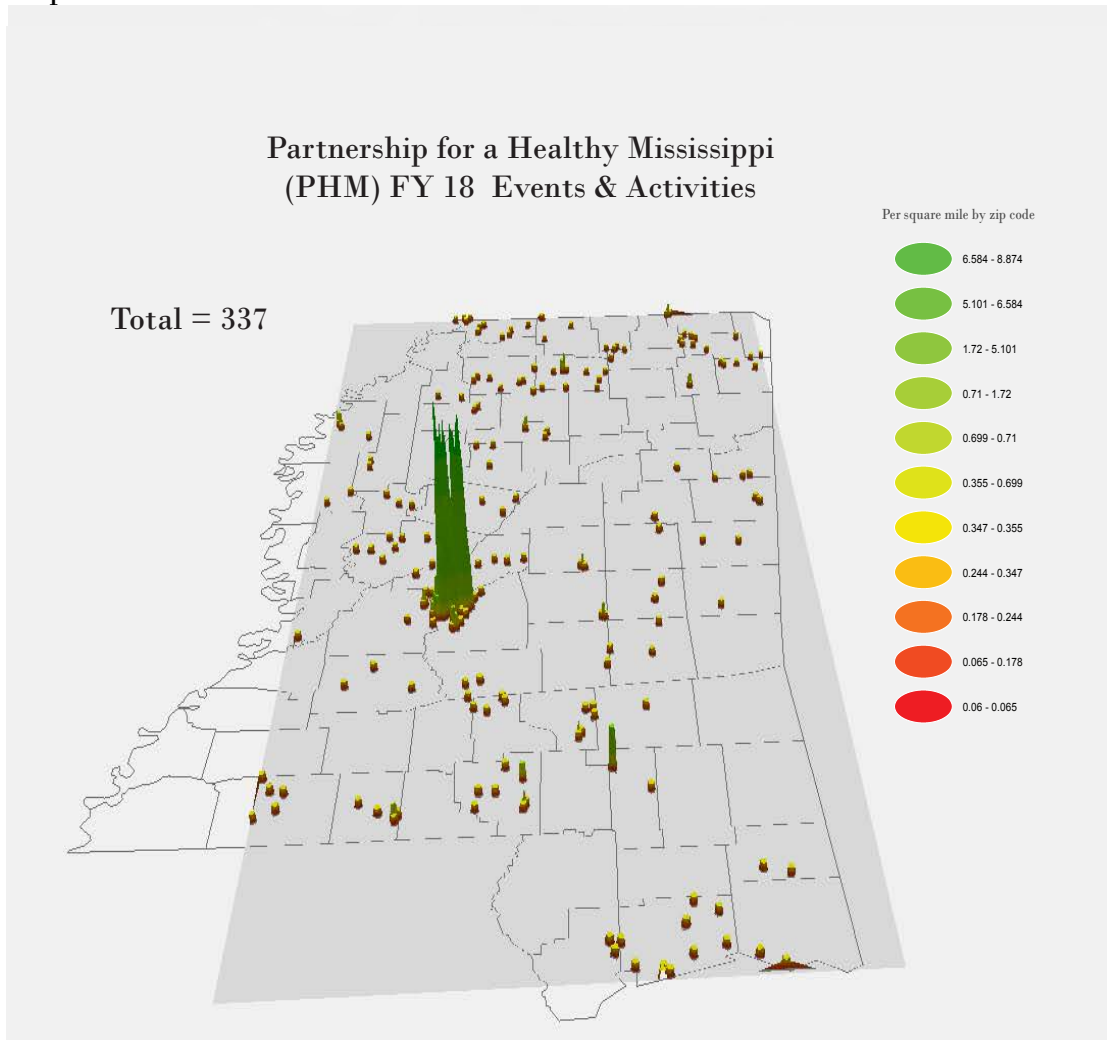


Map 17.

Partnership for a Healthy Mississippi (PHM) FY 18 Activities & Events



Map 18.



Maps 17 and 18 visualize the concentrated amounts of the PHM activity and is determined by location (zip code) data, entered into TRAPS by various PHM staff and the director. These events and activities total 337 and include policy work, youth advocacy training, presentations and communications. The point density (map 17) shows the least amount of activity (reds) and the highest density of activity (greens).

Map 18 is a three-dimensional “heat map” that also displays all the PHM activities and events. The map reveals a high level of visual convergence between the activities and the geographic areas around the state using a diverging color ramp. The red color represents the fewest activities and events per square mile, while the green color represents the most activity per square mile.

Maps 17 and 18 are virtually representative of the same data but are visualized differently with geographic point density and the ratio of activities per square mile.

statewide grantees



The Office of Tobacco Control partnered with four health-provider organizations during the fiscal year 2017-2018 along with nine Community Health Directors and nine Public Health Nurses. Although the Community Health Directors and Public Health Nurses used the online reporting system to record data, they did not come under the purview of the evaluation team. Project Officer DeGarrette Tureaud evaluated their services for the fiscal year, and the evaluation team provided TRAPS training. The Mississippi Academy of Family Physicians (MAFPF), the Mississippi Chapter of the American Academy of Pediatrics (MSAAP), the University of Southern Mississippi's Institute for Disability Studies (IDS), and the Mississippi Primary Health Care Association (MPHCA) contracted with OTC for services. The following is reflective of the work completed. For a more complete look at individual grantees (self-reported), please see Appendix D.

Table 18.

FY 18 Programs	Events	Impact
Primary Health	146	1,903
Pediatrics	97	269
IDS	28	168
Family Physicians	67	817
Totals	338	3,157

The numbers listed in table 18 are pulled from the data reports in TRAPS. Some programs did not enter all of their events, audience numbers or distribution numbers in the drop down portal links; therefore the numbers may not reflect what the programs have listed in their annual reports. This discrepancy can be rectified with diligent reporting in the system after each event or presentation and thorough reviews from project officers.

The Mississippi Academy of Family Physicians Foundation (MAFPF)

In 2011, the Mississippi Academy of Family Physicians Foundation began to administer the Tobacco free Mississippi: Engaging Mississippi's Family Physicians Project through its contract with OTC. Using the U.S. Public Health Service (USPHS) Guidelines for Treating Tobacco Use and Dependence recommendations, the MAFPF has partnered with specific family physician clinics to provide technical assistance and outreach opportunities on a regular basis.

In Fiscal Year 2018, the academy continued to communicate with Rounds 1-5 as outlined in the scope of work.



Quarterly emails were sent and included information on the availability of TTS trainings for the year, the American Academy of Family Physicians (AAFP)'s Pharmacologic Product Guide for Tobacco Treatment, the possibility for national TTS certification for those who are certified in Mississippi, and a look at how opioid use and tobacco use must be addressed together in order to improve outcomes.

Table 19.

Family Physicians	Events	Impact	Distribution
Training	4	85	605
Communication Rounds 1-3	4	0	175
Lunch n Learn	1	4	298
Engaging MS	15	555	73
Newsletters	6	0	1,081
Tar Wars to Med Students	10	173	17,544
Distribution of Materials	9	0	1,766
Planning & Other	18	0	0
TOTALS	67	817	21,542

Capacity building requirements included providing up to five Lunch and Learn presentations to clinics that have not been a part of the Engaging Mississippi's Family Physicians project. In August 2017, Bonnie Mangum from the Quitline conducted a presentation at Pioneer Family Medicine in Hamilton, Mississippi, and approximately 300 brochures were handed out. Although there were numerous attempts to reach out to clinics, there were no other Lunch and Learn presentations conducted during the fiscal year. As required, tobacco cessation trainings for medical residents were conducted at the University of Mississippi Medical Center (UMMC) (December 13, 2017), Forrest General Hospital (January 22, 2018), North Mississippi Medical Center (NMMC) Family Medicine Residents (January 26, 2018), and EC HealthNet Meridian Family Medicine Residents. Dr. Thomas Payne conducted each training and distributed brochures which included "The Truth about Vaping, E-Cigs, and Hookah Pens," "Relapse Happens—10 Steps to Quit Smoking Again," "Can E-Cigarettes Help You Quit Smoking?" and "Vaping: We Really Didn't Think This Through, Did We?"



Figure 52.

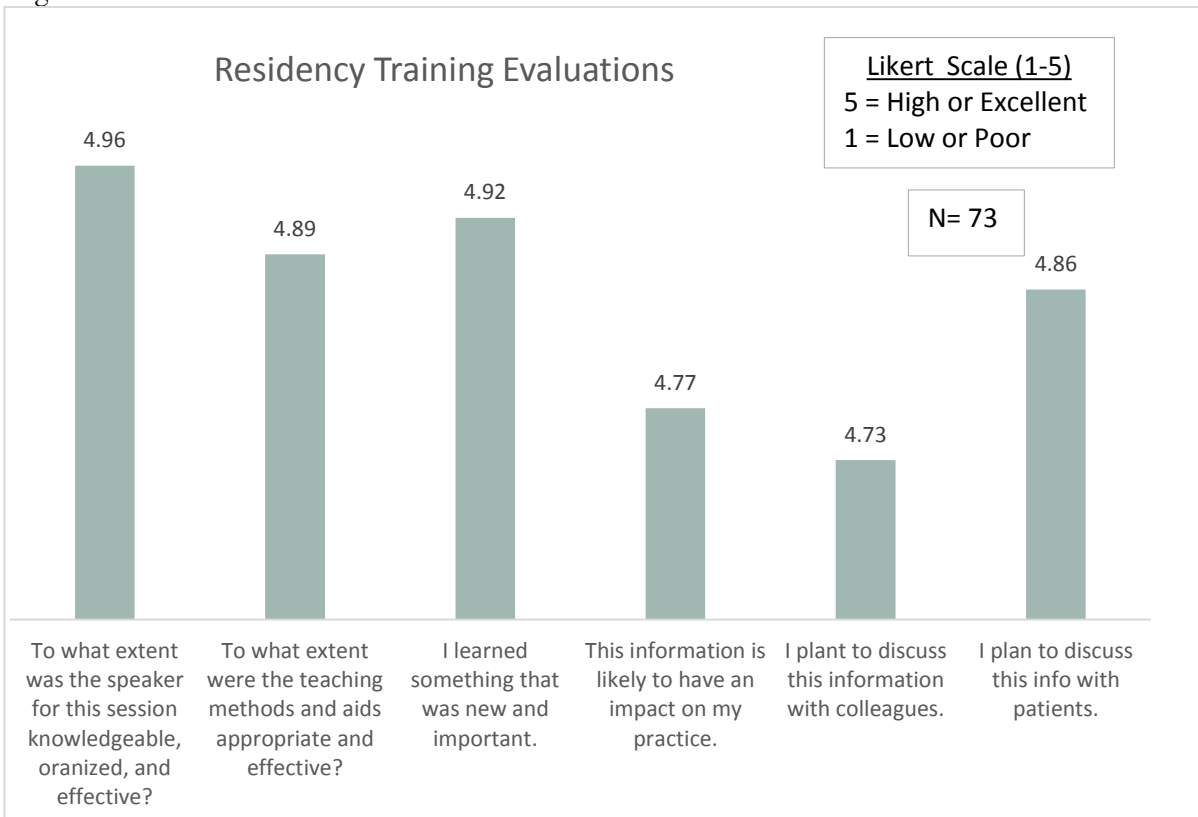
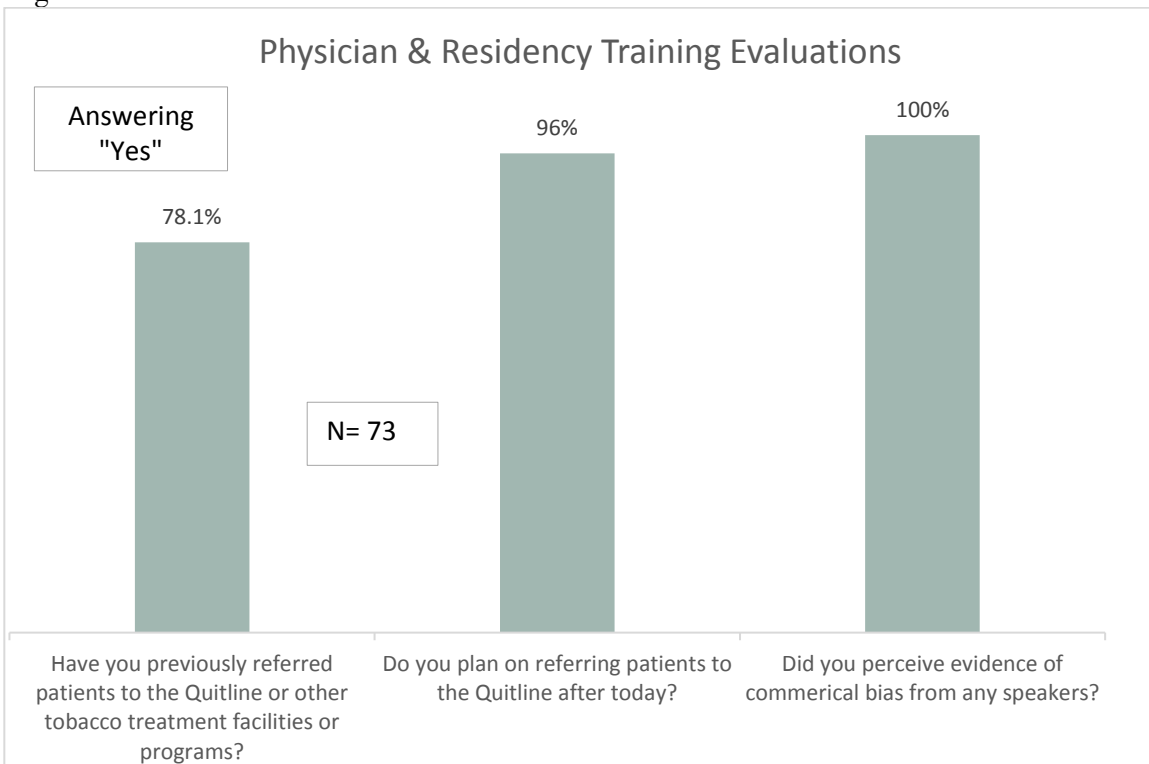


Figure 53.





Qualitative Responses:

What change(s), if any, do you plan to take in your practice as a result of your participation in this session?

1. Feel more comfortable initiating NRT w/ my patients after sitting in this presentation.
2. Will use all this info.
3. Talk to patients re: quit date
4. Chantix safe*
5. I will feel more comfortable talking to patients about various ways to help cessation
6. Refer patients to the ACT Center when needed
7. Tell patients that Chantix/Bupropion gave bi suicidal side effects
8. More counseling and follow up
9. Asking if patients use tobacco vs. smoke
10. Refer more to ACT Center
11. Spending more time talking about cessation with my patients
12. Spend more time on smoking cessation
13. Increase use of meds
14. More active in smoking cessation
15. Starting pt more and quitting option
16. Consider Chantix at earlier intervention rate
17. Making sure providers know how to properly use substitutions for tobacco
18. I feel more educated regarding NRT: Nicotine Replacement Therapy, as well a use of Bupropion and Chantix
19. Will refer more quickly

Suggestions?

1. Keep doing what you're doing b/c you're doing great!
2. Excellent presentation, but may need to localize for Mississippi a bit; maybe a teenage version
3. A comparison of price to treat vs. price to maintain habit would be very helpful
4. Is there any way we can get literature for our clinic to hand out to patients?
5. Thank you very much for your presentation
6. Presentation has a lot of good info, but is a bit of information overload
7. Good presentation
8. A little more training on how we can quickly & effectively follow up with our patients in clinic for smoking cessation
9. Vaping awareness
10. It was great!
11. Smoking cessation in general population
12. Great speaker - no changes
13. Thank you so much for the information

Data from the surveys from: FGH, NMMC & UMMC Residency Cessation Training Sessions



Family Medicine Residents on their trainings:

"I plan on changing how I use prescription meds to help my patients stop smoking as well as NRT."

"I feel more educated regarding NRT as well as the use of Bupropion and Chantix."

Other completed activities include promoting the Family Physicians project and tobacco cessation programs at the annual UMMC Family Medicine Residency Fair (September 27, 2017) and the Mississippi Academy of Family Physicians Fall meeting (September 29-30, 2017). Exhibits were set up, and brochures were made available on vaping, e-cigarette use, and relapse help. Quit cards were also available. In October, the academy exhibited at the William Carey University College of Osteopathic Medicine Residency and Hospital Fair followed by MAFP Capitol Day in March. Also in March, exhibits were displayed at the UMMC Family Medicine Update at the Jackson Hilton, where in addition to distributing brochures, Jewell Buckley was able to speak to practitioners about the grant. In April, an exhibit was displayed at the MAFP spring meeting. Over the course of the year, just over 100 events (111) were conducted with nearly one thousand people (817) in attendance. Other deliverables included the distribution of quarterly newsletters via Constant Contact to family physicians. Topics included information on Lunch and Learn opportunities, Smoking Cessation and Reduction in Pregnancy Training (SCRIPT) availability, incorporating tobacco cessation into HER, information on the proposed tobacco tax hike, and tobacco cessation and mental health. As required, a Success Story featuring the Tar Wars program was developed and uploaded to the TRAPS system. It is noted that Ms. Buckley grasped the intent of the project and did a good job of outlining the impact of the program. Because of the Tar Wars program reach in the community, it is a perfect example of a "success" story.

Third year family residence medical students at UMMC actively engaged and mobilized in the Tar Wars program. Following an educational presentation to the residents about the health risks associated with tobacco use and the need for physicians to be actively involved in tobacco cessation, the residents then went into the community, armed with Tar Wars materials, to conduct presentations to upper elementary students. During Fiscal Year 2018, 173 UMMC medical students were educated about the importance of tobacco cessation and in return presented Tar Wars to 118 schools and community organizations. Over two thousand fourth graders (2,325) and 1,691 fifth graders heard the presentations during this year alone. Although the Tar Wars presentations to the medical residents were reflected in TRAPS, the outreach to the elementary schools was not captured. It's important to make sure that project officers remind grantees of how vital all the impact numbers are.



Family Medicine Residents on their TAR WARS Presentations

“This was a fun experience for both the kids and myself. The students were very curious about the topic, and I am very glad I got to be a part of this.”

“Awesome experience, great class, kids were really involved and participated in the presentation, teacher was really helpful. Would do it again.”

“I had a great experience with this presentation. The students were very receptive and were able to add to the conversation of the harmful effects of tobacco.”

The evaluation team believes the Tar Wars model is one way to multiply impact. Not only are the medical students educated on the harmful effects of tobacco use, the message is compounded. Fewer than 200 medical students were able to spread the message to 4,015 fourth and fifth graders.

Finally, social media has played a role in promoting the work of the academy as it relates to tobacco cessation. Facebook posts include quarterly newsletter articles, updates on Tar Wars presentations, and exhibits. Twitter and Instagram have also been used. There were 44 social media posts reported during the fiscal year; however, no analytics were provided to determine the direct number of outreach.

The Mississippi Chapter of the American Academy of Pediatrics (MSAAP)

The chapter completed 97 activities impacting 269 Mississippians during the fiscal year as part of the Tobacco Free Mississippi: Engaging Mississippi’s Pediatricians project. The promotion of tobacco abstinence and tobacco cessation were conducted in various ways including Lunch and Learn presentations, quarterly newsletters, cessation trainings for UMMC pediatric residents and other activities. Quarterly newsletters were published and emailed to over 500 pediatricians across the state. Topics included:

- Links to articles about smoke-free community efforts, promotion of smoke-free legislation, and invitations to participate in chapter Lunch and Learn presentations. (July 31, 2017 newsletter sent to 558 people)
- Links to resources about mental health and tobacco use, research summaries and links, and invitation to the Lunch and Learn presentations (September 29, 2017 to 563 people)



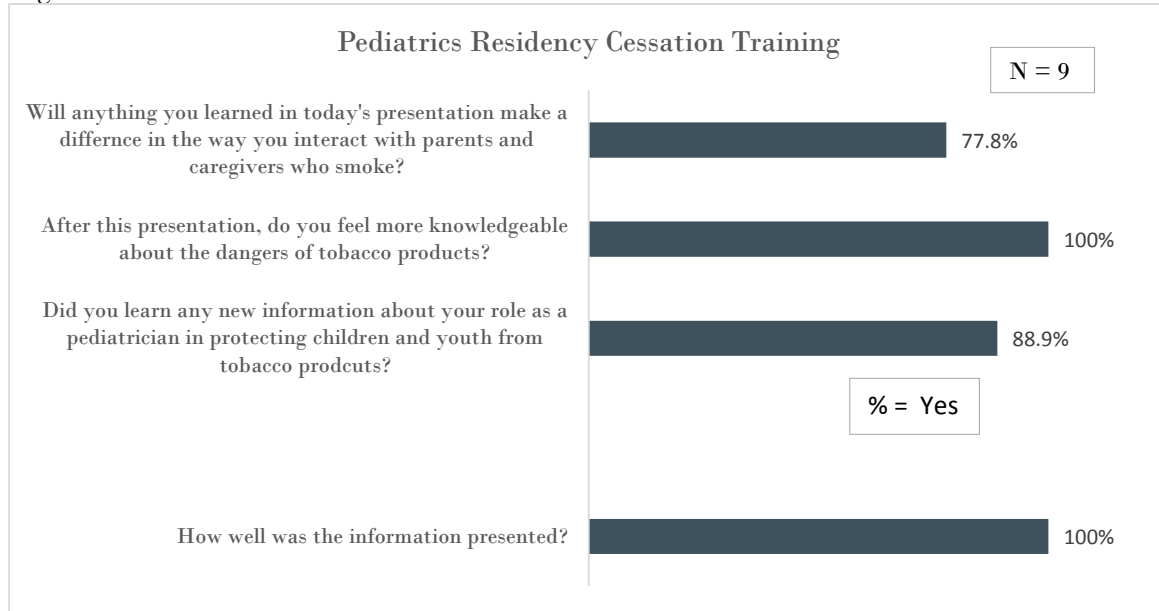
- Secondhand smoke exposure and preclinical markers of cardiovascular risk in toddlers, teen E-cigarette users are more likely to use traditional cigarettes, cigarette price increase may be linked to decrease in infant deaths, and opportunities for Lunch and Learn presentations (December 19, 2017 to 560 people)
- Multiple resources about e-cigarettes, a national American Academy of Pediatrics (AAP) clinical practice training for pediatricians, secondhand smoke exposure and morbidity in children, and national AAP journal articles on secondhand smoke exposure and the role of research and advocacy in protecting children from secondhand smoke exposure. (February 28, 2018 to 610 people)
- Links to multiple educational and policy resources about Juul (May 7, 2018 to 610 people).

Table 20.

Pediatrics	Events	Impact	Distribution
Newsletters	5	0	2,901
Training to Med Students	2	80	1
Reach out & Read	0	5	225
Lunch n Learn	2	38	1,900
Promote Edu	1	65	300
Research on Mental Health	1	65	30
Other Activities	86	16	9,801
Total	97	269	15,158

Cessation trainings for UMMC pediatric residents and UMMC residents with an interest in pediatrics were conducted. The trainings were based on the United States Public Health Service (USPHS) Guidelines for Tobacco Cessation Training and included motivational interviewing. Dr. Mary McLeod and Dr. Anza Stanley presented “Tobacco Cessation and the General Pediatrician” to approximately 30 pediatric residents on November 3, 2017. In addition to the 5As and an R, content included motivational interviewing, information from the AAP Richmond Center and several case scenarios. In April, approximately 50 first year medical students attended a training with Bonnie Mangum, the Outreach Coordinator for the Mississippi Tobacco Quitline. The presentation included 2A’s and an R, Quitline and ACT Center information, and how to refer, e-cigarettes and JUUL.

Figure 54.



Comments:

- **Very informative presentation. Thank you!**
- **Good refresher. Great illustrations**

UMMC medical students after tobacco training

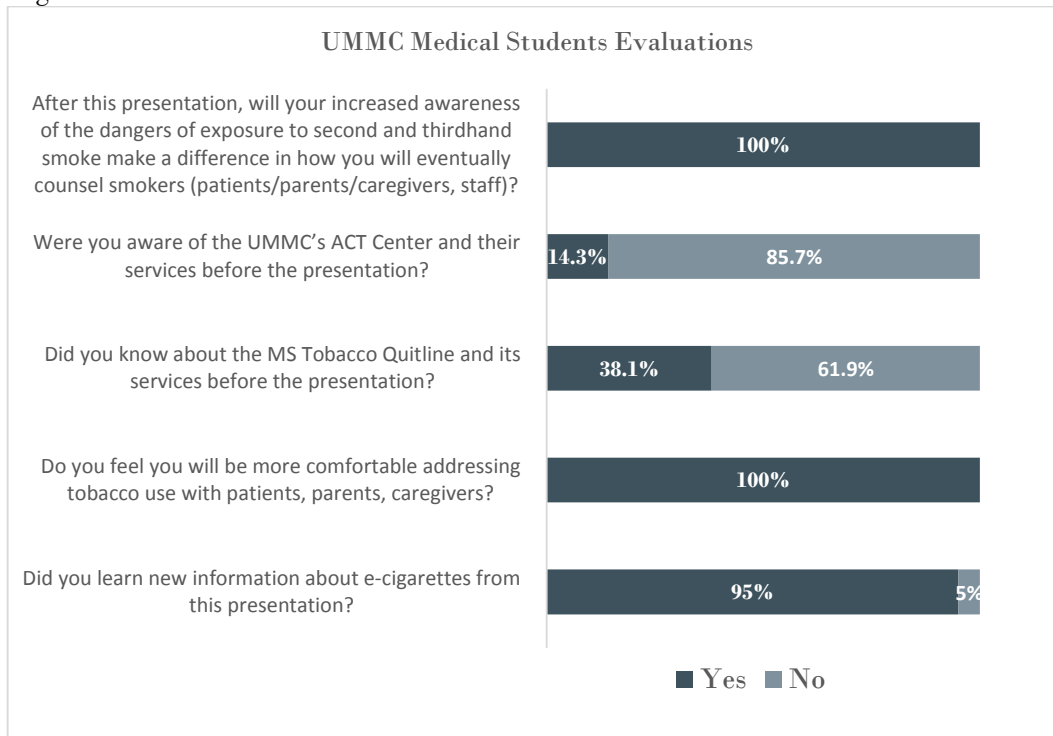
"I now know about the valuable tools to help guide others to quit, such as the Quitline and ACT Center."

"I wasn't aware of thirdhand smoke before, so I will eventually counsel smokers about it."

"I now have educational knowledge and statistics that I can confidently share with my peers."



Figure 55.



If yes, how so?

- I now know about the available tools to help guide others to quit, such as the hotline and ACT center.
- Provide facts on the dangers of these; most people forget about 2nd and 3rd hand smoke.
- More aware of the dangers of e-cigs
- I have educational knowledge and statistics that I can confidently share with my peers
- I did not know about secondhand vaping
- Learned more about e-cigs, liquid marijuana, etc
- I was not aware of the effects of third hand smoke
- I wasn't aware of third hand smoke before, so I will eventually counsel smokers about it
- Put it at the forefront of the conversation because of the adverse effects of tobacco
- Make it a more important topic to be addressed often
- Include smoking questions in patient checkups
- I'll be able to share strategies for decreasing exposure (not smoking inside, washing hands, etc)
- Will work harder to educate patients
- I will be more aware of how parents' actions affect pediatric patient's health
- Particles stay around in the air or on stuff; can be picked up by children later
- I will counsel others to not smoke and change their belongings if they quit



Suggestions for improvement of this training:

- Great job.
- Great.
- Include info on vaping causes dry mouth which can lead to tooth decay.
- Focus more on counseling, call-line, and what we can refer patients to. Quick info (less info) on tobacco products and what children are using now. But it was great!
- Focus more on the 2nd half of the presentation where you addressed strategies or talking to patients/parents.
- Use “presenter’s view” for PowerPoint (Gretchen’s note- we tried but there was a glitch in the computer system)
- It was great, thank you!
- An example of a patient interview addressing these topics (i.e. video, scenario, text on slide)

Other tobacco-related information you need:

- How to stop using JUUL
- How to clearly show hoe e-cigarettes are harmful and how to encourage my patients not to use them

The chapter is also charged with contacting Reach Out and Read Programs within pediatric clinics in Mississippi to offer children’s books related to tobacco control. Messages were sent to clinics and lists were updated. However, only one clinic responded to the offer. Coastal Family Health Clinic in Saucier requested books for their program, and 225 tobacco control books and activity books were provided. The preceding year, seven clinics received materials.

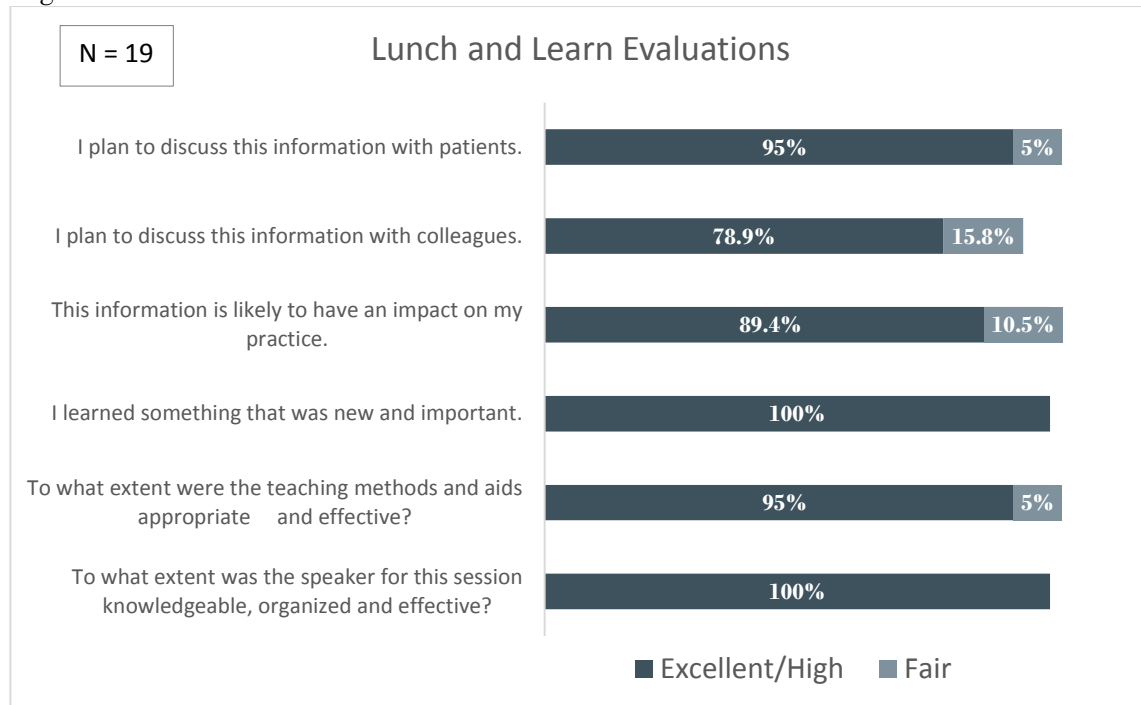
Up to four Lunch and Learn trainings given to pediatric clinics who are not a part of the Engaging Mississippi’s Pediatricians project were required during the fiscal year and were to include the 2 A’s and an R approach, CEASE, and the fax and electronic referral system for the Quitline. The chapter provided two this fiscal year which is down from eight the preceding year. The Lunch and Learn presentations were:

- October 24, 2017 at Coastal Family Health Center in Saucier with Bonnie Mangum (7 in attendance)
- June 13, 2018 at the Pediatric Clinic in Hattiesburg with 31 attendees. Information from the evaluation survey instrument indicates that of the 19 attendees who chose to fill out the survey, 14 said they had never referred patients to the Quitline or other tobacco treatment facilities, but 19 said they planned to do so in the future.



Seventeen said they planned to discuss the information with their patients, and 13 said they planned to discuss the information with their colleagues.

Figure 56.



The participants in the Lunch and Learn presentation included six physician, eleven nurses and two office staff (figure 56).

Following a Lunch and Learn Presentation

“I will be more diligent about asking my teenage patients about vaping and juuling.”

In April, a display table was set up at the Chapter’s Continuing Medical Education meeting. Approximately 65 physicians and nurse practitioners were registered. Those visiting the table received items that included incentives such as water bottle koozies and lunch sacks, e-cigarette posters, vaping and JUUL fact sheets, and posters about cessation for adolescents with mental health issues. A Mississippi Tobacco Quitline representative also exhibited at the event. To complete the scope of work deliverables, the chapter did develop and publish a Success Story and provided information about mental health and tobacco use through several venues such as displays and quarterly newsletters.



Overall, the chapter did an excellent job of reporting and uploading data to the online reporting system.

The University of Southern Mississippi Institute for Disability Studies (IDS)

The Institute for Disability Studies has done a good job of completing scope of work deliverables and reporting and documenting their work in the TRAPS online system in a timely and concise manner. IDS is charged with encouraging tobacco cessation and prevention among Mississippians with disabilities and their families (mental and behavioral disorders as well as physical and developmental disabilities) and to promote cessation and policy change among the individuals and institutions that serve them through its Tobacco Control Strategies project. Although its SCOPE OF WORK was reduced in fiscal year 2018, IDS still impacted just over 37,074 Mississippians through its educational outreach.

Table 21.

IDS	Events	Impact	Distribution
Annual Wellness Event	1	29	46
Chit Chat Videos	2	0	0
Other Activities	16	106	447
Newsletters	9	33	549
Total	28	168	1,042
Communication			
Aired - PSA Poster	1	29,000	
Edu Materials - Facebook	31	8,074	
Total	32	37,074	

IDS Outreach and Education Activities included production and dissemination of a quarterly newsletter called “TCS News” which highlighted the problems of combining tobacco and alcohol, research regarding smoking among individuals with mental illness, tobacco use among the mental health and substance abuse community, and the connection between the opioid epidemic and smoking. IDS staff successfully increased visibility in a number of ways. In addition to sending the newsletter electronically to 181 individuals (including MTFC Directors), the technology specialist posted newsletters to the IDS webpage (<https://msleadership.org/additional-information>). The newsletters were also featured on the IDS Facebook page (749 followers).



Newsletters were distributed at the Building Partnerships: Working Together Mississippi Parent Conference held at the Jackson Convention Complex by the Mississippi Department of Education and the Mississippi Parent Training and Information Center; AmeriCorps Week event at IDS Gulf Park, Nutrition is for Everyone workshop at Flowood Public Library, and the Family Fun Day at the Warren/Yazoo Mental Health Center in Yazoo City by the Wesley Youth Foundation, Mississippi Council on Developmental Disabilities, the Arc of Mississippi and the Family to Family project at the Institute for Disability Studies.

The scope of work requires that Alma Ellis, project director participate in a community health/wellness event for people with disabilities to share tobacco prevention and cessation materials. In fact, she participated in five:

- September 20, 2017: L.I.N.K.S for Health Lifestyles event in Greenwood hosted by the Mississippi State Department of Health and the Delta Health Collaborative for people at risk or diagnosed with heart disease, stroke or diabetes. 121 people in attendance.
- January 1, 2018: Nutrition is for Everyone workshop in Hattiesburg with 30 youth/young adults with disabilities attending
- February 21, 2018: Disability Awareness Day at the Capitol
- March 16, 2018: AmeriCorps Week in Long Beach
- June 2, 2018: Family Fun Day in Yazoo City

The IDS technology specialist did an exceptional job of sharing education materials and promoting the initiative to reduce tobacco use among mental and behavioral health consumers through social media. Because the IDS Facebook page had more followers than the TCS tobacco page, it was decided in September to close the latter and post only on the IDS page. In October, “Wellness Wednesday” became a new feature on the Facebook page in which some kind of tobacco item was posted weekly. As mentioned before, links to the quarterly newsletters were uploaded to the Facebook page.

The “Chit Chat with Taylor” video segments continued during the fiscal year. A November 14, 2017 interview featured Leonard Ealy, an individual with disabilities who discussed his cessation journey and continued on May 16, 2018 with Pamela Luckett, on tobacco cessation. Links to the interviews were posted on the Mississippi Leadership Academy for Wellness and Cessation website as well as the IDS website. A poster focusing on opioids and smoking cessation was developed by IDS staff along with a 15 second public service announcement (PSA). The PSA started on March 13th and ran through April 2nd and reached 29,000 individuals.



Table 22.

IDS Website & Media	2017	2018
IDS/TCS Page views	353	204
IDS/TCS Unique	274	163
Leadership Page views	58,519	790
Leadership Unique	16,171	455
Facebook Page views	4700	731,741
Facebook Unique	809	199,433
Totals	80,826	932,786

During the six month reporting period, evaluators noted the large numbers reported for the Facebook page views and Facebook unique columns. Alma Ellis, project director reported that the technology specialist is continually working on the reporting system to ensure that the numbers are reflected correctly. For future reference, IDS will be using the following procedure to obtain the numbers:

1. FB Page, Insights
2. Export Data
3. Post Data
4. Date Range (set)
5. Export Data
6. Open in Excel
7. Select the entire sheet
8. [Data], [Filter]
9. Select the down arrow in the Post Message column, and select [Text Filters], then [Contains...]
10. Type a desired word such as “tobacco” in the second blank
11. Click the Or option and use the dropdown to select another “Contains” option; type in another word like smok* to cover smoking and smoke.
12. Total up the appropriate columns
Pageviews = Column L – Lifetime Post Total Impressions
Unique = Column I – Lifetime Post Total Reach

A total of 8,074 were reached during the year through social media posts.



The Mississippi Primary Health Care Association (MPHCA)

The Mississippi Primary Health Care Association (MPHCA), a non-profit membership organization is made up of 21 community health centers around the state which provide health care to underserved communities. (Note: MPHCA is transitioning to a new name, Community Health Center Association of Mississippi. For this report, the association will be referred to as MPHCA.) MPHCA became an OTC statewide partner in 2014 with a commitment to offering evidence-based best practices for treating tobacco use and dependence in the community health centers. The FY 2018 scope of work included two Capacity Building component, four Lunch and Learn presentations to Mississippi Community Health Centers and the continued coordination and integration of the Baby and Me program into six federally qualified health centers. The Lunch and Learn presentations were held in centers across the state rather than one concentrated area. A total of 72 individuals heard the presentations from MPHCA staff and Bonnie Mangum from the Tobacco Quitline. Agendas, sign-in sheets, and evaluations for each presentation were uploaded in TRAPS. The presentations took place in the following areas:

- September 12, 2017: Mantachie Rural Health Care, Marietta (20 participants)
- February 9, 2018: Claiborne County Family Health Center, Port Gibson (20 participants)
- March 6, 2018: Mississippi Care, Pontotoc (12 participants)
- June 8, 2018: G.A. Carmichael Family Health Center, Canton (18 participants)

Table 23.

Primary Health	Events	Impact	Distribution
Lunch n Learn	7	70	150
Baby n Me	78	1,492	1,675
Promote Edu	7	120	203
Rounds 1, 2, & 3 Reports	6	156	156
Disseminate Edu	48	65	763
TOTALS	146	1,903	2,947

Evaluations of the Lunch and Learn presentations were extremely positive. It is to be noted that at the six month report, only one Lunch and Learn presentation had been conducted. A concerted effort to reach out to centers across the state yielded the completion of this scope of work requirement.

Fiscal Year 2018 marked the first full year implementation of the Baby and Me Tobacco Free Program. Service agreements were signed May 30, 2017 for six federally qualified health centers to be identified and recruited for participation.



On June 16, 2017, a modified contract was signed with OTC. Participating centers for the 2017-2018 year were: North Mississippi Primary Health Care, Ashland; Coastal Family Health Center, Biloxi; G.A. Carmichael Family Health Center, Canton; Aaron Henry Community Health Services Center, Clarksdale; Central Mississippi Health Services, Jackson; and Delta Health Center, Mound Bayou. The scope of work required monthly reports to be uploaded to the TRAPS system; however there were only three in the system at the end of the fiscal year (August, September and November). A total of 146 activities were documented in the TRAPS activity reports and were also described in the monthly reporting template. At least 1,492 people received information about the Baby and Me program through direct presentations, webinars, and community events. Monthly conference calls also provided technical assistance. Examples of outreach included:

- July 26, 2017: Baby and Me Webinar conducted by national trainers for new staff and refresher for existing staff.
- October 12, 2017: Mississippi Public Health Annual Conference/Social Worker Section Meeting
- October 14, 2017: Health Fairs and New Mt. Zion Community Health Fair in Jackson and the Baby and Me Health Fair at G.A. Carmichael Center in Canton
- October 17, 2017: Community Baby Shower, Delta Health Center, Mound Bayou
- February 8, 2018: COC Homeless Coalition
- March 2, 2018: Tullos Symposium at Delta State University, Cleveland for social work students, social work instructors, and community providers
- March 20, 2018: WIC maternity patients and staff at Jackson-Hinds Comprehensive
- March 28, 2018: Community Providers Breakfast sponsored by Help Me Grow, Jackson
- May 8, 2018: Community Mental Health Integration at Community Health Centers (CHC)'s.

Recruiting for Year Two was also conducted with visits to Greater Meridian Health Clinic and Jackson-Hinds Comprehensive Health Center.

According to the June 2018 report from Mike Ball, the Data Manager at the Baby and Me Tobacco free Program, 38 women participated in the program during Fiscal Year 2018. They enrolled at four of the centers: G.A. Carmichael Family Health Center, Central Mississippi Health Services, Aaron Henry Community Health Services, and Coastal Family Health Services. All but one reported having an income less than \$25,000 annually. Twenty-three did have Medicaid coverage, seven were not insured but were applying, and two had health insurance through a job or family member. The average number of years of tobacco use among the group was just over nine (9.47%).



“Supported by funds from the Office of Tobacco Control, the Baby and Me Tobacco Free Program is an excellent opportunity for Mississippi to improve the birth outcomes for pregnant women and their babies and save the state millions of dollars in health care costs due to pre-term deliveries. The program seeks to identify and support smoking, pregnant women and co-habiting smokers to stop smoking. The participants are routinely tested and can receive up to 26 diaper vouchers (\$25 each) per baby, if they stay quit up to a year post-partum. During the first year of the program, the Mississippi Primary Health Care Association recruited six community health centers to implement the pilot; six of 38 who were enrolled in the program delivered at or greater than 36 weeks gestation. Five of the six infants (83%) weighed 5.5 pounds or greater. This is great success for the first year!”

*Maria Morris
Program Coordinator*

Maintenance requirements for the year included communication with Round 1, 2 and 3 Community Health Centers through the development of quarterly newsletters. The four newsletters were uploaded to the TRAPS system, and data indicated that they were distributed to all CHCs. An added note of observance is that the newsletters were much improved in design and content. Additionally, the scope of work required updates to web-based trainings as deemed necessary. In August 2017, videos were reviewed and were considered current. All CHCs were notified in August that a Substance Abuse and Mental Health Services Administration (SAMSHA) webinar link to “Tobacco use and Treatment for Smokers with Mental Health Diagnoses” had been added to the MPHCA website.

Awareness and communication activities comprised much of the scope of work for the fiscal year. Monthly updates regarding the dissemination of tobacco cessation information, health education resources, and related trainings were required. The majority of months had more than one update documented in the TRAPS system with the exception of May which had no updates. MPHCA also provided information about secondhand smoke and the benefits of smoke-free environments by presenting at the Affordable Care Act Market Place Summit in July, forwarding a link to information on the dangers of secondhand smoke in public places to CEO’s, executive directors, and Tobacco Champions in August, and forwarding a notice to all CHCs that Trustmark Park was going smoke-free (April). MPHCA also promoted the Tobacco free Mississippi: Engaging Mississippi’s Federally Qualified Health Centers with an exhibit at the MPHCA Legislative Event at the State Capitol and at the Annual MPHCA conference in Jackson on January 16, 2018.



At least two scope of work deliverables were not met during the fiscal year. MPHCA is required to facilitate a training on tobacco prevention in women of child bearing age targeting OB/GYN, pediatricians or any other services providing women's health at one MPHCA conference or meeting. There is no evidence in TRAPS that this measure was met. No Success Story was uploaded into the database either, although it was noted that email requests had been sent to centers and tobacco champions asking them to share success stories.

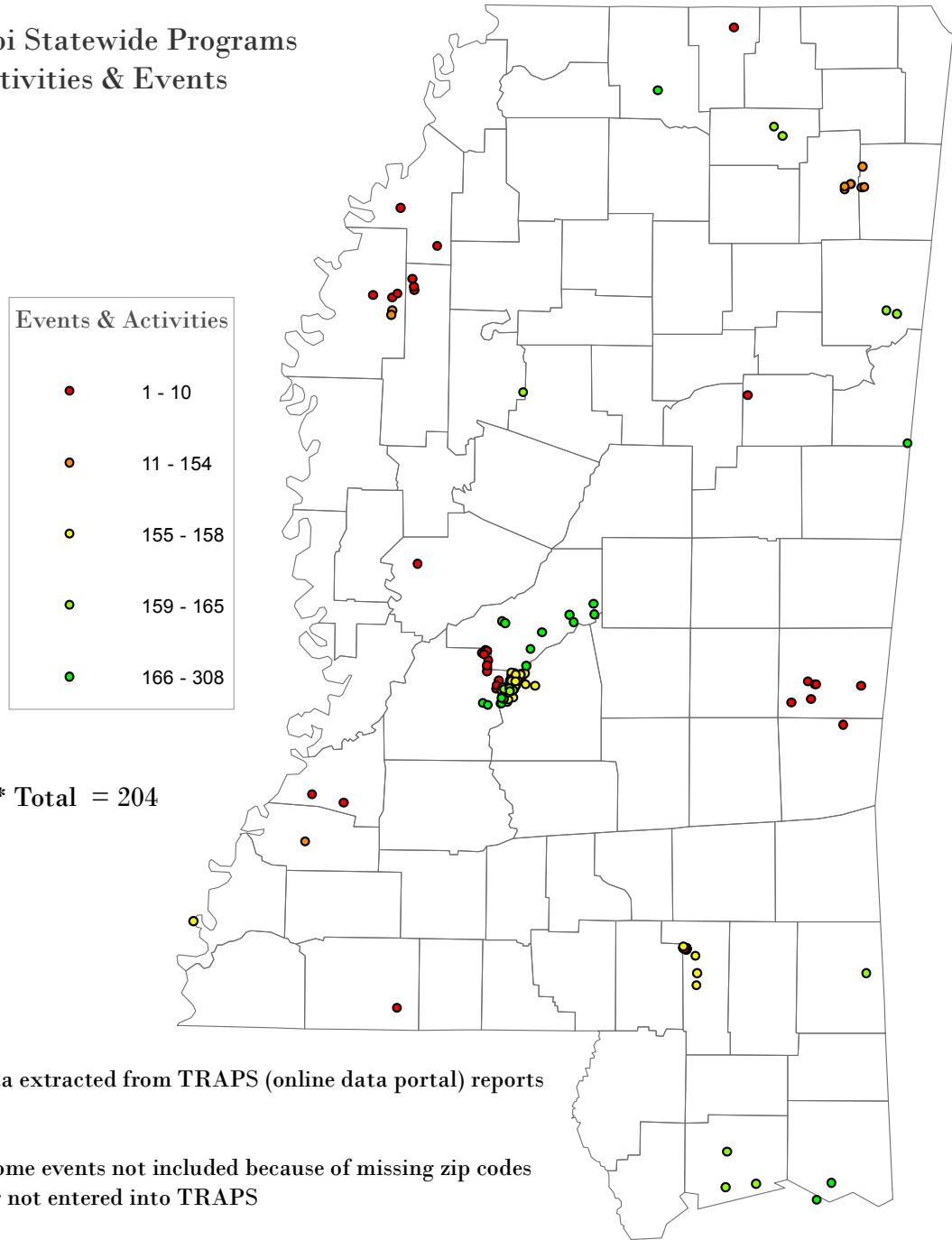
MPHCA is also required to provide OTC with annual tobacco use and treatment reports based on UDS data related to CHC patients self-identified as tobacco product users. In December 2017, Joseph Grice, the MPHCA Director of Technical Assistance and Training submitted data reporting the number of patients diagnosed with tobacco use disorder (15,545), the number who received smoke and tobacco use cessation counseling (33,848), and the number who were screened for tobacco use at least once within 24 months of the most recent visit and who received tobacco cessation intervention if identified as a tobacco user (119,565).

Overall, MPHCA has done a good job of reporting data in TRAPS and has steadily improved in recent years. It is to be noted that although monthly calendars were uploaded in TRAPS, the majority were not done so by the first of every month. In fact, some were uploaded a month later. The calendars serve as an itinerary for the upcoming month and do not serve their purpose if they are late.

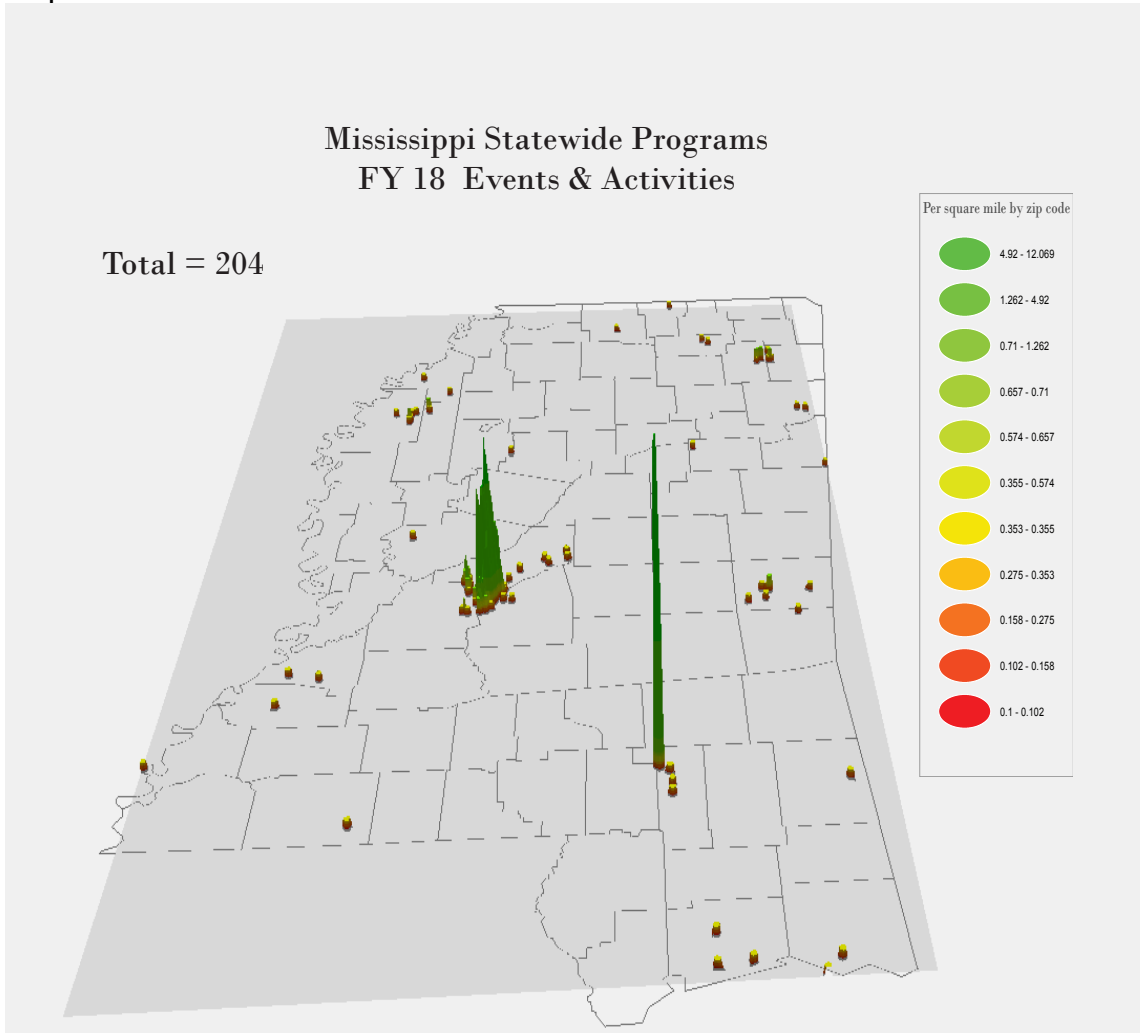


Map 19.

Mississippi Statewide Programs FY 18 Activities & Events



Map 20.

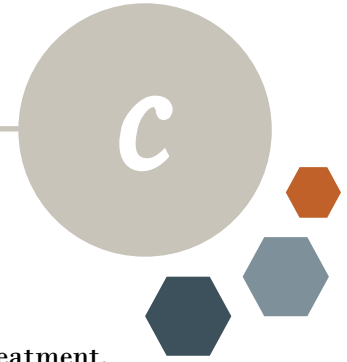


Maps 19 and 20 visualize the concentrated amounts of the statewide program activities and events. The data representation is determined by location (zip code) data, entered into TRAPS by program directors. These total 204 and include presentations, medical student and physician trainings, community outreach and communications. The point density (map 19) shows the least amount of activity (reds) and the highest density of activity (greens).

Map 20 is a three-dimensional “heat map” that also displays all statewide program activities and events. The map reveals a high level of convergence between the activities and the geographic areas around the state using a diverging color ramp. The red color represents the fewest activities and events per square mile, while the green color represents the most activity per square mile.

Maps 19 and 20 are virtually representative of the same data but are visualized differently with geographic point density and the ratio of activities per square mile.

cessation services



The Office of Tobacco Control contracts with the ACT Center for Tobacco Treatment, Education and Research and the Mississippi Tobacco Quitline to provide cessation services as well as educational and awareness activities to promote cessation. Their specific contractual obligations are different but complement each other in an effort to increase cessation in the state. The ACT Center and the Quitline are required to self-report scope of work deliverables and upload the template in TRAPS Operations. For a look at these reports, see Appendix E.

ACT Center

With an overall objective of helping people quit using tobacco and stay quit, the ACT Center provides evidence-based treatment for individuals who are working to achieve long-term abstinence. Since 1999, the ACT Center has been providing treatment services free or at little cost to state residents, as well as education trainings and presentations for healthcare providers to learn more about promoting cessation among tobacco users and topics related to tobacco use. Certification trainings for tobacco treatment specialists, and a broad research agenda are also part of the center’s agenda. The ACT Center operates under the umbrella of the University of Mississippi School of Medicine Department of Otolaryngology and Communicative Sciences and is located at the Jackson Medical Mall Thad Cochran Center in Jackson, Mississippi.

Table 24.

ACT by the Numbers	Events	Impact	Distribution
Develop & Implement	7	99	368
Presentations	13	329	379
Trainings	6	138	356
Total	26	566	1,103
Communication			
Television/Radio	3	63,500	

The scope of work objectives are divided into numerous categories with the main focus on education and training and data reporting of treatment services. Evaluations also play an important role in assessing the impact and outcomes of treatment as well as trainings. Part of the scope of work requires the ACT Center to continue to develop strategies for the implementation of a comprehensive Tobacco free Initiative within UMMC hospitals and clinics to facilitate the adoption of Best Practices for Tobacco Cessation and to promote UMMC’s tobacco free campus status. According to the ACT Center TRAPS reporting, UMMC includes ACT Center information in all new-hire orientation packets; however no numbers were recorded in TRAPS.



In addition to the ACT Center’s website, information about the center’s work can be found under the UMMC Cancer Institute Cancer Support Services at <https://www.umc.edu/healthcare/cancer>. In February, UMMC leadership sent reminders to all faculty, staff and students regarding the no smoking policy on all UMMC campuses, and two monitors patrolled the campus to advise the visitors, employees and patients not to smoke. According to the ACT Center monthly template report, ACT Center brochures were given to every spinal surgery patient as part of their pre-op packet and all dental patients in the School of Dentistry were given brochures. No numbers were reported in TRAPS to verify this.

In order to address sustainability, the ACT Center has worked across the fiscal year to develop a billing practice model. In December 2017, a billing plan was submitted to UMMC for consideration, followed by continued talks with the UMMC Cancer Institute on billing procedures. To date, a model has not been identified. No updates on the work towards developing a billing plan were uploaded into the “plan for billing” folder in Operations. The scope of work objective indicated a plan should be in place by September 30, 2017. To generate revenue, the ACT Center conducted five certified tobacco treatment specialist workshops to out-of-state organizations, universities and medical centers, an increase from the preceding fiscal year when just one out-of-state workshop was held. A total of 140 people participated in the workshops:

- August 7-11, 2017: Ochsner Foundation, New Orleans, Louisiana (35 attendees)
- August 21-25, 2017: U.S. Army, San Antonio, Texas (29 attendees)
- September 11-15, 2017: U.S. Army, San Antonio, Texas (28 attendees)
- June 11-15, 2018: Florida Parishes Human Services Authority, Louisiana Behavioral Health, Hammond, Louisiana (27 attendees)
- June 25-29, 2018: Ochsner Foundation, New Orleans, Louisiana (21 attendees)

The Education and Training component of the scope of work includes a minimum of two Tobacco Treatment Specialist Trainings (TTS) to be held in-state. These were in Flowood, Mississippi on October (14 attendees) and again in February (18 attendees) making the total number of TTS workshops at seven (in-state and out-of-state) with 172 attending. These numbers are reflected in the TRAPS Activities Report; however, reports in Operations indicate 196 people participated. The accreditation of the Tobacco Treatment Specialist training program was maintained in the fiscal year. There were uploaded sign in sheets for the October 2nd TTS workshop in Flowood, Mississippi and a sign-in sheet for the workshop on February 26 and one agenda. However the other sign-in sheets were missing. Evaluations were also found in the TRAPS operations folder.



What TTS Participants Had to Say

“Great presentation!”

“One of the best trainings I’ve ever been to.”

“The speakers were great at answering questions and bringing in extra resources.”

“Both trainers were very knowledgeable.”

“The training was incredibly valuable. I’ve already started implementing the techniques in my session and hope to develop a more structured tobacco treatment program in the near future.”

Maintenance objectives were mostly answered in the monthly scope of work reporting template with “availability to participate” but no concrete action reported. The ACT Center staff reports they are available to meet with OTC to develop a statewide healthcare provider survey. An in depth look at TTS workshop survey results can also be helpful. There were no efforts to collaborate with the Department of Mental Health to develop trainings to support cessation efforts, although there was a presentation to Family Medicine Residents on tobacco use and mental health.

The ACT Center did conduct 5A’s-based tobacco cessation intervention presentations to the following UMMC schools:

- September 2017: Internal Medicine Residents, “General Smoking Cessation” (50 attendees)
- December 2017: Family Medicine Residents, “Pharmacology Interventions” (15 attendees)

Other educational events include:

- North Mississippi Medical Center, APC Fellows, Tupelo, Mississippi (25)
- IQH, Quitline Counselors, Ridgeland, Mississippi (10)
- United Church Homes, Tenants, Jackson, Mississippi
- Forest General Hospital, Family Medicine Residents, Hattiesburg (20)
- NMMC Family Medicine Residents, Tupelo
- Jackson Run Assisted Living, Tenants, Jackson (20)
- Indian Run Assisted Living, Tenants, Jackson (10)
- OTC, Prevention Staff, Ridgeland (5)
- EC Healthnet, Family Medicine Residents, Meridian (25)



Interviews included:

August 15, 2017: Eddie Jean Carr Show, WMPR Radio, Jackson (25,000 circulation)

December 4, 2017: Medical Monday, WLBT-TV (13,035 circulation)

March 5, 2018: “Tobacco and Heart Health” Mississippi Public Radio, Jackson (25,000 circulation)

May 21, 2018: “Southern Remedy: Tobacco and Health” MPR Interview, Jackson (4000)

Health Fairs: (3 events with 301 participants)

August 22, 2017: American Lung Association Expo, Pearl (71)

November 1, 2017: Mississippi Department of Human Services Annual Health Fair, Jackson (150)

April 11, 2017: Mississippi State Capitol, Oral Head and Neck Cancer Screenings, Jackson (80)

Last year, 10 events were held with 1,520 participants. Although the ACT Center reports that 301 people attended the three events, it is likely that those numbers are indicative of the overall attendance of each event rather than the number of actual people the ACT Center representatives interacted with at the events. All grantees have been instructed during the year to count only the people they talk to or provide materials to.

The scope of work calls for interaction with the UMMC School of Medicine, School of Dentistry, School of Pharmacy, School of Nursing, and the School of Allied Health. The monthly reporting template states that the ACT Center would contact UMMC schools for opportunities to present to residents and students, but there is no recorded evidence of this. It would be helpful to document such requests. Of course, the 5A’s trainings to Family Medicine Residents and Internal Medicine Residents are evidence of collaboration with the School of Medicine. The five-year plan was re-uploaded into TRAPS and did not reflect any changes of updates from last year. No meetings were scheduled between OTC and the ACT Center for discussion.

The quarterly characteristics reports as well as quarter quit stats were uploaded into TRAPS in a timely manner. All objectives were met including the 50% or above contact rate of all participants at all evaluation points. The data are reflective of one intake visit (face-to-face), followed by six primary treatment sessions, and one follow-up contact through one year. The ACT Center reported that patient enrollments and total visits were down this year compared to previous years which they attributed to budget reductions. Of the 775 enrolled during the fiscal year, 741 participated at the ACT Center Campus. Two were enrolled at Southwest Mississippi Regional Medical Center in McComb, 27 at North Mississippi Medical Center in Tupelo, and five at Merit Health; Tri Lakes, Batesville.

It is to be noted that although services were free to clients during the fiscal year, the ACT Center will probably be moving to a fee-for-service model in FY 2019.



What do ACT Center Treatment Program Participants Have to Say?

“It gives you the will to help you stop smoking.”

“The group sessions are wonderful!”

“Very informative, really enjoyed it. Helped a whole lot. Loved it.”

“Very helpful. Love the group meetings. Everybody helps each other and motivates each other. This facility is really helpful.”

“Helped me find out my triggers and how to deal with them. Helped me understand I need to change my lifestyle.”

Although most of the scope of work deliverables were met for the year, there are still inconsistencies in the recording of data in TRAPS. Sometimes the information uploaded in the TRAPS Operations folders does not correspond with what is recorded in the activity reports, which is where numbers of people and activities are generated for evaluation reports. The material presented by the ACT Center in its year-end report is excellent, but again it often does not correspond with the information recorded in TRAPS. There were only 29 activities recorded in the Activities Report in TRAPS for the entire year. Some deliverables were put in the wrong place within TRAPS. For example, three of the five out-of-state TTS training workshops were reported in the Sustainability section (D1) while the other two were reported under the section dedicated to TTS training (G1). While the evaluation team recognizes that the out-of-state opportunities do serve as sustainability activities, it could have been noted that these activities occurred. Some of these inconsistencies could be managed with close quarterly reviews by the ACT Center’s project officer.



Table 25.

TTS Program	FY 17	FY 18
Characteristics (totals)		
Gender		
Male	536	322
Female	871	453
Race	0	
Black	599	414
White	792	351
Other	10	10
Hispanic Ethnicity	9	0
Averages		
Age	52.2	52.0
Years Smoked	30.7	29.3
Yes Smokeless Tobacco	17.6	20.7
FTND Score	5.3	5.0
CESD Score	23.4	22.8
PSS Score	6.7	6.5

Source: Annual Report

Table 26.

Patient Satisfaction Surveys	FY 17	FY 18
Patient Satisfaction (1 = Very Low, 5 = Very High)		
Survey Count	209	61
Average Totals		
General Organization of the Program	4.8	4.8
Quality of the Facilities (meeting rooms, etc)	4.8	4.7
Appointment & Scheduling Services	4.9	4.8
General Clinic Features (on time, smooth operation)	4.9	4.9
Quality of the Workbook and other Materials	4.8	4.6
Staff Helpfulness, Friendliness & Flexibility	5.0	4.9
Staff Skillfulness in Providing Treatment	4.9	5.0
Overall Quality of the Program	4.9	4.9
Overall Effectiveness of the Program	4.9	4.9

Source: Annual Report

Table 27.

Annual Report - TTS Program		
Participants and Treatment Completers	FY 2017	FY 2018
End of Treatment (EOT)		
Number and Percent Quit (#quit / #contacted)	28.8%	27.9%
Contacted Rate (#contacted / #eligible for contact)	66.9%	65.4%
Treatment Completers		
Number and Percent Quit (#quit / #contacted)	33.6%	36.4%
Contacted Rate (#contacted/total)	66.4%	63.6%
Follow-Up: 1-Month		
Number and Percent Quit (#quit / #contacted)	35.4%	36.7%
Contacted Rate (#contacted / #eligible for contact)	54.8%	56.1%
Treatment Completers		
Number and Percent Quit (#quit / #contacted)	43.1%	43.5%
Contacted Rate (#contacted / #eligible for contact)	68.4%	62.5%
Follow-Up: 3-Month		
Number and Percent Quit (#quit / #contacted)	35.1%	33.1%
Contacted Rate (#contacted / #eligible for contact)	62.5%	66.6%
Treatment Completers		
Number and Percent Quit (#quit / #contacted)	46.9%	42.9%
Contacted Rate (#contacted / #eligible for contact)	59.9%	63.0%
Follow-Up: 6-Month		
Number and Percent Quit (#quit / #contacted)	34.1%	29.6%
Contacted Rate (#contacted / #eligible for contact)	71.6%	65.7%
Treatment Completers		
Number and Percent Quit (#quit / #contacted)	41.4%	31.7%
Contacted Rate (#contacted / #eligible for contact)	73.7%	64.3%
Follow-Up: 12-Month		
Number and Percent Quit (#quit / #contacted)	36.5%	33.4%
Contacted Rate (#contacted / #eligible for contact)	62.8%	58.3%
Treatment Completers		
Number and Percent Quit (#quit / #contacted)	39.6%	36.1%
Contacted Rate (#contacted / #eligible for contact)	61.7%	54.0%

IQH: Tobacco Quitline

Like the ACT Center, the Mississippi Tobacco Quitline services were begun in 1999. They provide telephone counseling and web-based cessation services free of charge to any Mississippian who expresses a desire to quit smoking. The Quitline can provide assistance with up to eight weeks of nicotine replacement therapy (NRT) to eligible callers. Additionally in order to increase awareness of the Quitline services, community outreach services are offered across the state throughout the year.



Fiscal Year 2018 saw an increase over the last two years in the number of registered clients despite a decrease in incoming calls. Over six thousand (6,376) Mississippians were registered in telephone or web-based counseling services compared to 6,064 in FY 2017 and 5,207 in FY 2016. Yet the total number of incoming calls for the year (12,675) was down from 13,577 in FY2017 and 13,211 in FY2016.

Table 28.

IQH by the Numbers	Events	Impact	Distribution
Clinical Activities	168	79	9,467
Online Counseling	53	706	763
Promotion/Collaboration	55	429	1,520
Training/Conferences	95	1,031	1,955
Calls/Enrollments	72	23,209	61
Distribution Materials	39	0	6,430
Total	482	25,454	20,196
Communication	Events	Impact	Distribution
Website Traffic	25	304,306	
Media/Newsletter	17	46,185	
Total	42	350,491	0

Table 29.

Quitline Key Measures			
	FY16	FY17	FY18
Incoming Calls	13,211	13,577	12,675
# Referrals (fax + online + EHR)	4,098	4,794	4,092
# Registered (phone + web)	5,207	6,064	6,376
# Materials Provided	5,445	5,784	6,259
# NRT Provided	5,728	6,014	8,849
Quit Rate	46%	40%	40%
Satisfaction Rate	98%	96%	93%

Source: Annual Report

Of particular note, is the 93% live call answer rate that exceeds the SCOPE OF WORK goal of 85%. This is the highest in the last three years of evaluations conducted by the present team. Interestingly, the rate never fell below 87% throughout the entire fiscal year.



Table 30.

Mississippi	2015 - 2016	2016 - 2017	2017 - 2018
Live answer rate	85%	84.3%	93%

Table 31.

Call Volume/Status	FY 17	FY 18
Calls received	17,292	12,675
Calls accepted	12,751	11,696
Calls answered	11,242	10,433
Calls abandoned	3,838	987
Calls sent to voicemail	2,376	1,271
Calls handled by provider line	1,302	317
Calls handled by Spanish QL	126	40
Calls handled by TIP line	1,504	463
(Calls Received + TIP Line)	10,365	13,138
Total	60,796	51,020
Outgoing Calls	N/A	32,685

Table 32.

State-Wide Services	FY 2016	FY 2017	FY 2018
Phone Counseling	4,239	5,004	5,322
Online Counseling	486	499	638
Information Only	575	217	301
Proxies/Calling for Someone Else	9	10	8
Referred to a Local Resource	183	223	46
Total Services Provided	5,492	5,953	6,315
Total Quit plans Completed	2,683	N/A	4,390
Completed Intake	4,453	N/A	5,505
Incomplete/Declined Intake	1,030	N/A	887
Counseling Sessions Completed	5,016	N/A	7,353
Fax Referrals	4,091	N/A	1,449
EHR Referrals	N/A	N/A	2,453
Other Referrals	3,676	N/A	4,299
Referrals Unable to Reach	2,397	N/A	1,032
Quit Kit Materials	4,197	N/A	5,247
Flyer/Brochure Sent	1,249	N/A	1,012

Source: Annual Report



Website traffic yielded 304,306 website “hits” or total number of visits to www.quitlinems.com, and 9,838 “chats” resulted in 1,054 enrollments in online counseling for the year. The Quitline is responsible for handling of the website. An average of four targeted promotions per month were recorded in the TRAPS system with locations and specific dates noted. Online counseling services information was provided 52 times through the IQH newsletter as well as in presentations and collaboration with health care providers across the state. The Quitline also promoted cessation services through a series of 19 unpaid media opportunities throughout the year, 13 more than required for the year. The Quitline database manager provided monthly reports with numbers of referrals and intakes compiled.

Table 33.

Website Statistics	FY 17	FY 18
Website hits	302,694	311,506
Number of online enrollments	1,060	1,054
Number of online chat sessions	8,873	9,838
Total	312,627	322,398

Table 34.

Referral Sources	FY 16	FY 17	FY 18
Website	67	82	72
Newspaper	8	9	3
Billboard	19	25	14
Employer	35	25	24
Community Organization	45	21	67
Unknown TV Source	71	195	183
Radio	88	25	16
Flyers	142	108	127
Health Insurance	310	277	1,030
Hospital/clinic	363	202	297
Family/friends	493	436	681
Healthcare Professional	1,100	1,140	1,116
TV 1-800-QUITNOW	1,727	1,915	1,343
Total	4,468	4,460	4,973



Table 35.

Caller Demographics	FY 2016	FY 2017	FY 2018
Male	1,395	1,594	1,844
Female	3,032	3,315	3,480
Pregnant Participants	32	44	40
Unknown/Refused	1,065	1,041	991
12-17	6	4	1
18-24	196	188	183
25-34	759	714	816
35-44	908	1,057	1,223
45-54	1,377	1,490	1,500
55-64	1,425	1,692	1,741
65+	529	630	649
Unknown/Refused	292	178	202
Average Age	47	49	48
Black or African American	1,645	1,768	1,658
White	2,668	3,025	3,436
Asian	6	21	6
Native American or Alaskan Native	29	22	1
Other	45	61	96
Unknown/Refused	1,099	1,056	1,089

Source: Annual Report

The Quitline met or exceeded all programmatic activities with one exception for the fiscal year. Bonnie Mangum, Quitline Community Outreach Coordinator continues to do an exceptional job in providing outreach, promotion, education and collaboration with other statewide partners. Her work resulted in meeting or exceeding every objective this year with the exception of the full promotion of the eReferral project which was paused during the fiscal year for MSDH identification of a new hospital system or clinic. Efforts to strategically expand the eReferral project will resume in FY 2019. Even so, the eReferral project with the Coastal Family Health Center resulted in 91 referrals to the Quitline with 86 progress reports sent back to referring providers approximately 30 days after receipt of the eReferral. Eight monthly presentations (in-person, web conference, webinar etc) to healthcare administrators in clinic-based health systems across the state were required. The Quitline exceeded this measurement. The Quitline staff also partnered with the four statewide grantees, (Mississippi Academy of Family Physicians, Mississippi Primary Health Care Association, Mississippi Chapter of American Academy of Pediatrics, and Institute for Disability Studies) to promote the Quitline services in a series of seven presentations plus one to the Department of Mental Health, Bureau of Alcohol and Drug Services, one to the Holmes County Central High School, and two to the Mississippi Tobacco Free Coalitions.



Twelve colleges or universities were engaged in learning about cessation services available to them (minimum of 10 required).

“Outreach work is important because it is one of the connections for a nicotine dependent person to obtain resources to quit tobacco. Furthermore, outreach work allows the opportunity for the public to become more educated on the dangers of tobacco use.”

Bonnie Mangum

Community Outreach Coordinator/Tobacco Counselor

New to the scope this year was an effort to reach disparate populations to provide awareness, education, training and resources to them. Twenty-three presentations were conducted (four required) to Hispanic groups, pregnant women, LGBTQ, African Americans, Native Americans, and smokeless tobacco users. Protocols were uploaded to TRAPS in the Operations folder. Six interactions with healthcare provider systems resulted in Lunch and Learn 5A trainings (five minimum). The Quitline presence at conferences, health fairs and other community events was notable as 36 varied exhibits were on display for the year, far above the three required. Some of the conferences attended were the Mississippi Athletic Administrators, the Mississippi Academy of Nutrition and Dietetics, Kappa Alpha Psi Fraternity Health Fair, National Alliance on Mental Health, Mississippi Braves baseball game, Excel by 5 Summit, Mississippi Public Health Association, the Mississippi Black Cardiologist Association, the Senior Health Fair, the Delta Health Collaborative, and the Mississippi Association of Professionals in Corrections.

Table 36.

Disparate Populations	Presentations
Pregnant Women	7
Hispanic/Latino	7
African American	1
Native American	1
LGBTQ	1
Smokeless Tobacco Users	5
Total	22

Table 36.

Community Outreach Coordinator Objectives & Activities			
Scope of Work Objectives	Minimum Activities Required	FY 2017	FY 2018
B2a. Online Counseling (promotion)	2 per month/12 per year	44	52
B4. Promotion & Education	6 per year	9	17
B5a. eReferral Promotion	2 per month/12 per year	3	0
B5b. Clinic Visits	8 per month/96 per year	162	162
B5c. Collaboration w/ OTC grantees	7 per year	21	13
B5d. Promotion (colleges, etc.)	10 per year	18	12
B5e. Promotion (disparate populations)	No minimum	10	22
B5f. 5As Training Assessments	5 per year	31	6
B5g. Attend Conference/Exhibits	3 per year	31	36
B6. Trainings, Presentations and Technical Assistance	No minimum	18	35

Source: Annual Report

Presentations and trainings were given to healthcare providers statewide such as the Lauderdale County Health Department, the McCoy House for Sober Living, the Merit Health Medical Group Cardiology Clinic, the Singing River Behavioral Health, Care Time Medical Clinic, the Pioneer Community Hospital, and the Baptist Medical Group in Columbus.

A Quality Assurance and Improvement instrument was developed and implemented for Fiscal Year 2018. Quarterly reports were uploaded in TRAPS in a timely manner. The document not only monitors progress throughout the year as it relates to contract compliance, but it also is an excellent way to measure progress and inform future improvement efforts. It fosters communication among all departments of the Quitline staff to increase productivity. Measurable performance requirements were monitored and reported quarterly. Quantifiable measures were all met. They include but are not limited to:

- No more than one customer complaint per month: Average was .75 per quarter
- Initial call answer rate 85% in 30 seconds or less: Average was 93%
- Abandoned call rate of 10% or less: Average was 7.75%
- Satisfaction rates collected in surveys seven months after a caller registers is to be reviewed monthly: Average caller satisfaction rate is 93%

The Quitline Success Story is also an example of a quality product. Its design is crisp with an understandable message that follows the CDC guidelines in writing a Success Story. It is a product that can be easily shared with community organizations, healthcare providers, and other stakeholders.



According to IQH reports, 13 referrals were sent to the ACT Center for the year, and 42 were received from the ACT Center. This differs slightly from the ACT Center reporting that indicates 14 referrals were received from the ACT Center and 41 were sent to the Quitline.

Quitline staff uploaded the Sustainability Plan in the TRAPS Operations folder. Plans included the development of a plan for reimbursement for treatment services for public and private insurers as well as development of a fee payment system based on income levels of participants.

From Quitline Callers:

“The Quitline was a very good program. The counselor was a wonderful person and helped me quit for good.”

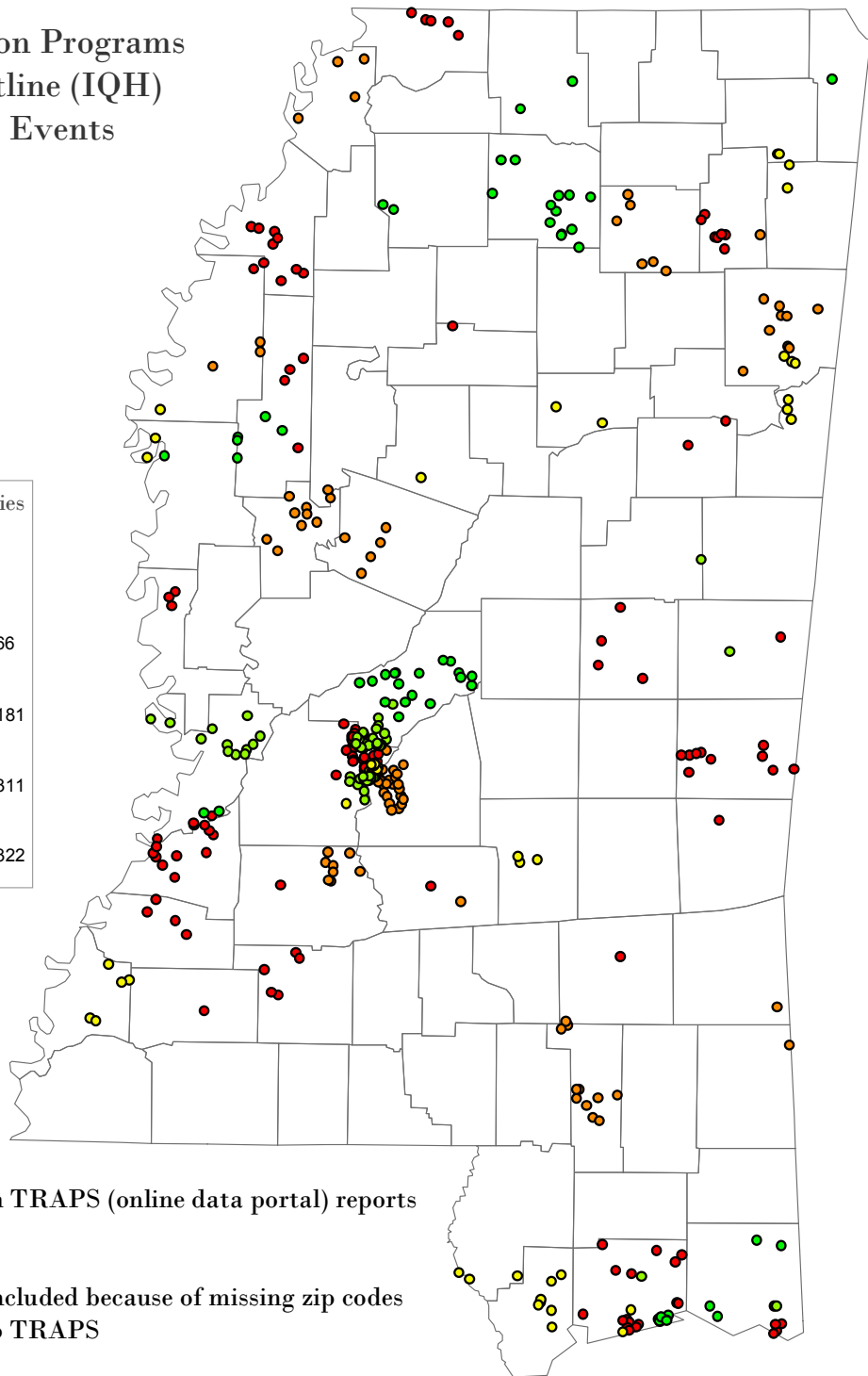
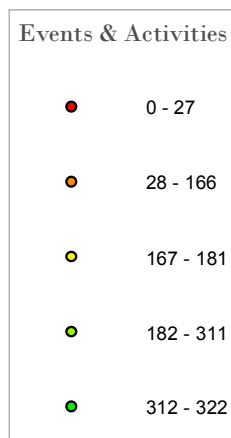
“I’m so happy to be free of cigarettes, and I was very pleased with the program. Y’all keep doing what you’re doing.”



Map 21.

Mississippi Cessation Programs ACT Center & Quitline (IQH) FY 18 Activities & Events

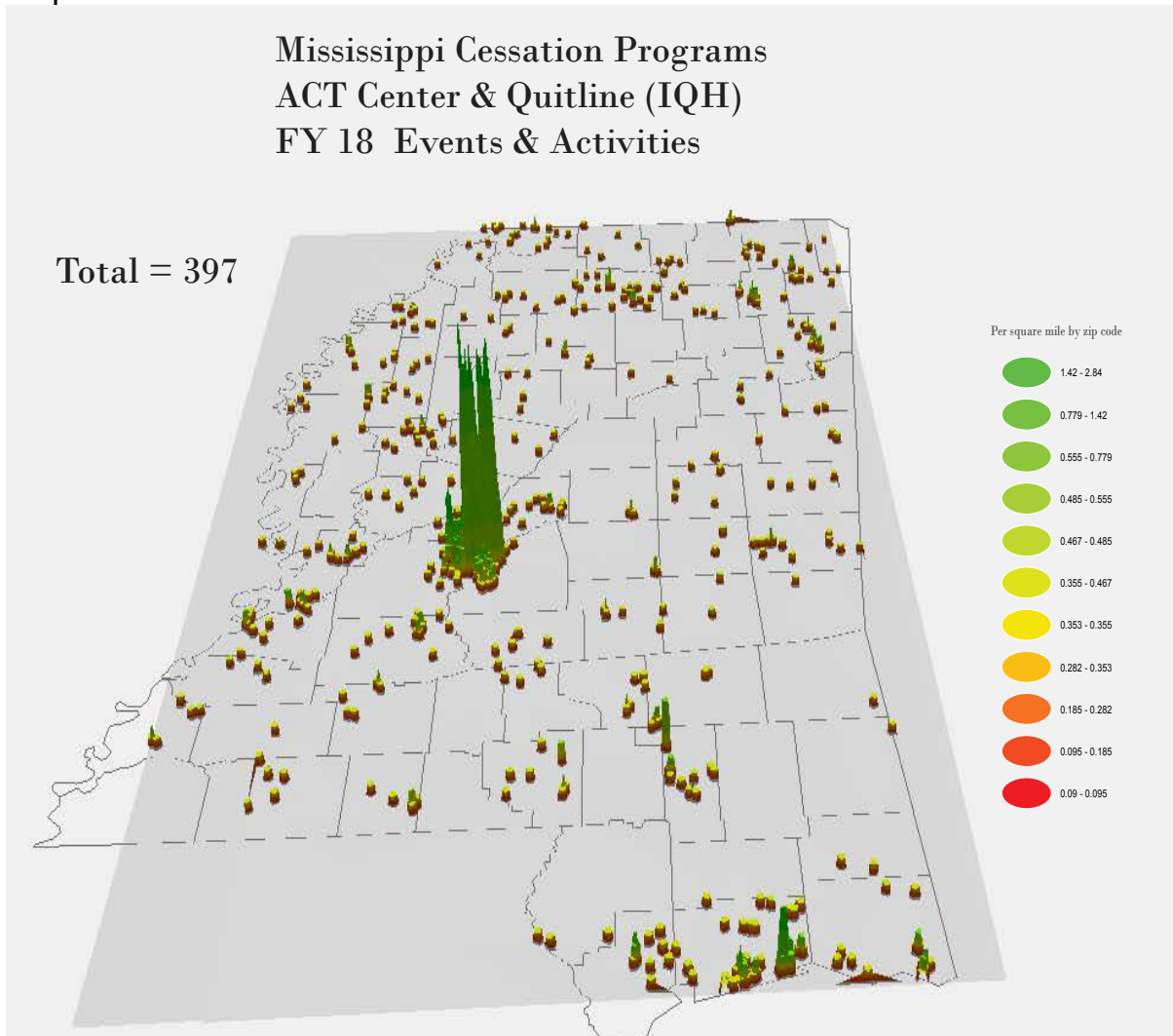
IQH = 375
ACT = 24
* Total = 397



Data extracted from TRAPS (online data portal) reports

* Some events not included because of missing zip codes
or not entered into TRAPS

Map 22.



Maps 21 and 22 visualize the concentrated amounts of cessation activity and is determined by location (zip code) data, entered into TRAPS by cessation directors. These total 397 and include presentations, online outreach, and research, cessation management of clients, intakes and counseling. The point density (map 21) shows the least amount of activity (reds) and the highest density of activity (greens).

Map 22 is a three-dimensional “heat map” that also displays all cessation activities and events. The map reveals a high level of visual convergence between the activities and the geographic areas around the state using a diverging color ramp. The red color represents the fewest activities and events per square mile, while the green color represents the most activity per square mile.

Maps 21 and 22 are virtually representative of the same data but are visualized differently with geographic point density and the ratio of activities per square mile.

qualitative



With the inclusion of Success Stories as part of the scope of work objectives, MTEC directors have been able to share progress in their communities in bringing awareness to the dangers of smoking and secondhand smoke, passing smoke-free ordinances, and providing information about cessation services. Some directors chose to share how an individual life was changed after giving up tobacco. Others focused on the collective impact of their coalition. In addition to the quantifiable data found in TRAPS, these success stories are another way to identify impact and are important because they are in the words of the grantees themselves. The following are just a few examples:

“I recruited seven youth from South Delta High School. These youth attended the Youth Advocacy workshop in Cleveland, MS at Delta State University. After this workshop, I asked them to come up with a project on policy. All of the municipalities in Sharkey County had passed 100% smoke-free ordinances (Anguilla, Rolling Fork, and Cary, MS). The youth came up with the idea to pass a county wide smoke-free ordinance.

The youth advocacy team met every Thursday at South Delta High School in Rolling Fork at 2 PM. The principal gave us this time and pulled the advocacy team out of class to meet. During our meetings I allowed the team to come up with how to educate. I also educated each week on tobacco 101 and the hazards of secondhand smoke and why smoke-free ordinances are important so the team could be knowledgeable.

I arranged a meeting at the school at 2 PM for all of the Sharkey County board of supervisors to come to school during our advocacy team meeting time and discuss about putting a county wide ordinance in place. During this meeting, the advocacy team put together their own PowerPoint. I introduced what we were trying to do to the board of supervisors, and the team took it from there. They did not read each slide like boring presenters do. Instead they made each slide personal and shared a family situation that was dealing with a consequence of smoking. These stories melted the board of supervisor’s hearts and mine too.

The Sharkey County board of supervisors then asked the youth advocacy team to get on the next board agenda so that a vote could take place. Four out of the five Sharkey County Board of Supervisors attended this meeting. I went myself to the courthouse to make sure that the smoke-free ordinance topic was added to the board agenda.

It was decided unanimously to pass the ordinance (February 5, 2018). The advocacy team was not able to attend this board meeting due to transportation problems. The following week the advocacy team held a reception at their school honoring the Sharkey County Board of Supervisors. The team also invited all the local mayors to come to celebrate this accomplishment (Anguilla, Rolling Fork, and Cary, MS.) All of Sharkey County municipalities have smoke-free ordinances. My coalition board chair, Mayor Linda Short (Mayersville) attended also. The students individually thanked the board members and, in their speeches, shared more personal stories with tobacco facts.



It has been an honor for me to work with these students. I enjoyed their passion, hard work, and dedication. The Partnership for a Healthy MS also assisted with this project.”

Tasha Bailey
MTFC Director
Issaquena, Sharkey and Washington





Pearl Watts, the MTFC director in Quitman and Tallahatchie Counties also utilized youth advocates to help with the passage of ordinances in Lambert, Crowder, and Falcon (located in Quitman County). Following their participation in the Youth Summit at Delta State and the Free Fest in Oxford, the students distributed materials on secondhand smoke in the communities, went door to door in Falcon to talk to residents about the benefit of being a smoke-free community, assisted with MTFC activities (Kick Butts day, summer youth activities), and met with school superintendents to ensure that ENDS products were included in school policies. The following are quotes from some of the youth advocates:

“Volunteering to be advocates for tobacco has taught us many things. To see our community grow and become more efficient motivates us to do this. Many of the youth in our environment are very easily influenced, so informing them about the use of tobacco helps not only them, but they can tell others about its harmful effects.”

Dasia Stewart

“I am a tobacco youth advocate because I want to set an example for my peers. I see every day that a lot of my peers are going down the wrong path. I volunteer as a youth advocate because I see the benefits in the program and see that they are trying to educate to make changes. Also, it really upsets me to see so many classmates killing themselves and not knowing.”

Reginald Wilborn

“Many teens do not know the danger in smoking. They do not know what they are smoking and do not know what they are putting into their body.”

De'Maya Thompson

“The MTFC of Copiah and Lincoln counties was introduced to a very gifted group of students. After learning the deadly effects of tobacco use, the students were inspired to create their own awareness project. They created a plan to warn the community about the danger of tobacco use by creating a “What’s in a Cigarette” display at the Brookhaven government complex on Kick Butts day. They shared their personal experiences with tobacco and the impact that it has had on their lives. The next goal is to allow the message to spread by using the display throughout different areas of the community.”

Mieshia Smith
MTFC Director
Copiah and Lincoln Counties



“Beginning mid-January of 2018, the Coalition experienced a change of project director. The role had previously been vacant since December of 2017, resulting in a loss of outreach, connection, and Coalition building and work throughout Jackson County. New leadership is often not an easy change for any organization, as it typically includes differing perspectives and expectations – the transition can take time and face its own set of challenges. However, you never know when one of those challenges can be a turning point for the Coalition.”

The Coalition is tasked with establishing a six-member youth advocate group and requires a certain number of meetings and a plan of action for the year. This proved to be a weaker area of the scope of work, as reaching out to the list of youth advocates at Ocean Springs High School initially resulted in no response. Not only had it been several months since they’d heard from the Coalition, but there was also now a change in the project director. After establishing a connection with the school health coordinator Cicely Wallis, a long-term partner for the Coalition, Mrs. Wallis worked to identify youth within Ocean Springs High School who would be interested in working toward a tobacco free Jackson County. Within a week, the first youth advocate meeting was set up – and the group has not stopped working since.

Four youth advocates attended the first meeting, all of whom were empowered to learn more about creating tobacco free communities. They came armed with statistics, activity ideas and a willingness to assist with multiple projects for the Coalition – the spirit of the group was upbeat, energetic and full of passion about the Coalition’s mission. Right away, the members decided they wanted to do a street cleanup along Government Street in Ocean Springs the morning following the Mardi Gras Night Parade to collect all tobacco litter they could find and fill a jar to show how tobacco affects the beautiful streets of Ocean Springs. That morning, youth members spent two hours collecting hundreds of cigarette butts and other forms of tobacco litter (cartons, etc.) as well as multiple trash bags of non-tobacco litter.

In addition, the group decided to spearhead the Kick Butts Day event set for March 21 at Ocean Springs High School. They are underway creating posters for the event, where they will focus on the ingredients inside of cigarettes and alternatives to smoking.

These youth advocates have ignited a flame in the Coalition’s mission and continue to bring in an energetic presence to the community – something of which the Coalition can be proud in 2018.”

Kristina Mullis
MTFC Director
Jackson County

“Beginning in July 2018, I began working alongside the EPA, My Brother’s Keeper and Gulf Coast Health Policy Coalition. After putting our heads together on the health needs of Harrison County, it was decided that we would work together on a push to get Biloxi Housing to go smoke-free. Biloxi is not covered under the new policy with HUD housing and, therefore, we wanted to work as a collaborative group to educate their staff and residents.”



Originally, we were told that they were not interested in any programs or information for either their staffs or residents. We have worked tirelessly with their community liaison and self-sufficiency coordinator to get our message out. I was able to have a RAT and FREE team within one of the housing communities and the youth were very engaged and excited. We worked on an initiative to “Take It Outside”.

In addition, we were allowed to hold a three-time event at Fernwood Apartments offering education and cessation. Although an ordinance or rule has not been passed to date, this was a huge success for us. They have agreed to let us continue to educate and advocate in all of their properties, and we are currently working on an initiative to hold a trial basis for one of their communities to be smoke-free with a grandfather clause.”

Kim Hart
Former MTFC Director
Harrison County

“The MTFC Youth Advocacy Team in Neshoba County visited the Chahta Immi Cultural Center in Choctaw, Mississippi. The team consisted of seven students in grades 7th through 12th. The trip to the cultural center started conversations about the history of tobacco use among the Choctaw Indian tribe. The Choctaw medicine people planted and tended tobacco plants before the 1700’s, Choctaw society considered smoking to be unladylike, and so men were the dominate smoking gender until the 1800’s. For Choctaw ancestors and many Choctaws today, tobacco smoking is approached in a spiritual way. Words or prayers are sent to the Creator by way of rising puffs of smoke. Traditionally, the Choctaw men smoke pipes at tribal council meetings, meetings with other tribes to establish peace, and several other events.

Today, the dangers of tobacco use are being taught at the Choctaw Health Center, Community Health Fairs, and Youth Leadership Conferences. The MTFC of Noxubee, Neshoba and Kemper Counties has been able to present to youth groups on the reservation such as the Boys and Girls Club, youth groups at the Choctaw Health Center, and youth leadership conferences. The Youth Leadership Conference at Bogue Chitto Elementary School in Neshoba County, held in June 2017, had more than 500 students in attendance.

The Youth Advocacy team members all live on the reservation. They presented the Secondhand Smoke Presentation at the Youth Leadership Conference. The conference also include a ¼ mile Tobacco Free Walk with Terrance the Rat.”

Beverly Knox
MTFC Director
Noxubee, Neshoba and Kemper Counties



“Last year, the advocates for Greene County got together and thought of all the ways we could make our school district a better place to be. We came up with the idea of presenting facts to the school district officials to show them the dangers of e-cigarettes, as well as showing them other ordinary everyday items they sometimes resemble. After this presentation, we had officially added e-cigarettes to the list of tobacco products banned from our district’s campuses. One thing that motivates me to be involved in a group like the youth advocates is knowing how these dangerous tobacco products affect the lives of everyone, even the non-users. I have seen first-hand what the dangers of tobacco use can do to the person using them as well as the family of that person.”

Stephanie Mayfield
MTFC Director
George, Greene, and Stone Counties

“What motivates me is my grandfather passing away from cancer. I don’t want that to happen to anyone. It is important to me because I don’t want to see any youth getting hooked on any type of tobacco product. Teens getting hooked is just giving in to the businesses’ little game. Youth can make a difference if we all gather together. If we have enough people against this, it could make a difference in who continues or starts using tobacco products.”

Darren Moody
Youth Advocate
Greene County

“I believe youth can make a difference if they stay hopeful and determined. The voice of youth is much stronger than some might think. We are the next generation to be in control, so our problems are going to be heard. Yes, struggles will come along with this work, but I truly believe that if we push hard enough, we can end Big Tobacco.”

Mason Smith
Youth Advocate
Stone County

“Just being known as a youth member for the MTFC of George, Greene, and Stone Counties is motivation in itself. Having the opportunity to possibly save lives by passing smoke-free ordinances and spreading awareness about secondhand smoke is definitely a privilege.”

Taylor Fayard
Youth Advocate
Stone County

recommendations



Recommendations

A number of recent recommendations have now become a part of the deliverables for many of the OTC grantees. For example, monthly conference calls with the Partnership staff, Billy Rucker, Kimberly Sampson and the evaluation team began in August and are proving to be helpful in assuring that scope of work requirements are being met and reported correctly in the online database. The calls are opportunities for everyone to voice opinions on how the programming and services can be produced in the most optimal manner. Beginning in November, the evaluation team will also participate in monthly conference calls with the three MTFC Project Officers in a similar format.

A mentor program pairing newly-hired MTFC directors with experienced ones is being considered for the coming months. Round table discussions at the September MTFC regional meetings provided interactive discussions throughout the day and allowed the MTFC directors some ownership in the program itself. Additionally as suggested in the March 2018 report, evaluators and OTC project officers and administrators met prior to the approval of scope of work to ensure that the evaluators grasped the content and that all agreed on how the data would be captured in TRAPS.

As the evaluation reports move forward to include more measurable outcomes, the following recommendations can serve as conversation starters prior to the next reporting period:

- Conduct focus groups with MTFC team sponsors and students to gauge their attitudes towards the effectiveness of the MTFC youth “team” model.
- Appoint a task force to study the MTFC “team” model and how it may be updated to create a bigger impact on students in the K-12 environment.
- Develop a survey instrument allowing MTFC directors to weigh in on the services they provide as well as the assistance they receive in administering their work.
- Conduct at least two focus groups with stakeholders who have recently passed smoke-free ordinances and amendments to assess their reasons for passage and to identify helpful tools used in the process.
- Design an evaluation instrument that focuses on evidence-based applications.
- Re-examine OTC communication efforts and scope of work deliverables to ensure that the efforts are meaningful and measurable.
- Continue to provide TRAPS training and orientation to all new MTFC directors and other new grantees to discuss the scope of work objectives.
- Work with OTC administrators to discuss evaluation process for statewide grantees and cessation partners.



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