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FY2021 Annual Evaluation Report

PREPARED FOR THE

Office of Tobacco Control
Mississippi State Department of Health

REPORT BY

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Introduction

The Mississippi State Department of Health (MSDH) Office of Tobacco Control (OTC) is responsible for promoting and protecting the health of Mississippians through community programs and cessation interventions focused on educating and garnering community support and involvement to influence policies that discourage tobacco use and encourage individual behavior change. OTC contracts with and oversees the work of thirty-four Mississippi Tobacco-Free Coalitions (MTFCs), four statewide partners, four statewide youth programs, and two cessation intervention programs, who are tasked with carrying out this important work. Annually, OTC develops and approves the scope of work (SOW) requirements grantees must achieve by the end of the fiscal year.

While grantees are regularly monitored by fiscal agents and OTC branch directors, they are also evaluated semi-annually by researchers located at Mississippi State University's Social Science Research Center (SSRC). The fiscal year (FY) 2021 marks the sixth year that evaluation services have been provided. As with previous years, the current report provides updated data submitted by OTC grantees through the Tobacco Reporting and Progress System (TRAPS). MSU Evaluators and the TRAPS software analyst conduct on-going activities each month on TRAPS, and with staff from the Office of Tobacco Control. The following items capture some of those activities:

TRAPS Maintenance & Other Activities:

1. Maintain user directory, update/add users to the system
2. Training for new users
3. Trouble shooting, hands-on training/assistance as issues arise for users
4. Supply monthly reports to OTC on TIPS reporting and Catch My Breath sessions.
5. Conduct TRAPS overview at annual & quarterly meetings
6. Participated in Scope of Work planning sessions
7. Worked with Vickie Tucker to develop the evaluation plan for Cooperative Agreement DP20-2001
8. Provided feedback on all program scopes of work prior to their finalization
9. Post bi-annual report meetings with each program's Branch Director to go over report findings
10. Annual general training on TRAPS inputs (as relates to SOW), and updates, per program
11. Annual rollover - new SOW deliverables entered in the system, per program
12. Perform recovery, usability, and functionality testing for all programs
13. Create user roles based on assigned tasks as needed
14. Perform database backup operations
15. Perform code refactoring as part of preventive maintenance
16. Perform adaptive maintenance by including software library fixes without affecting software functionality



Introduction

FY21 TRAPS Updates

In addition to regular maintenance, several new features were added to TRAPS FY21.

The following system upgrades were implemented:

- Incorporated demographic variables into maps.
- Included TIPS purpose in communication activities.
- Extended Social media types.
- Extended communication to all programs in TRAPS.
- Redesigned the Media outlet section and extended it to Communication activities for MTFC's.
- Built separate communications report modules for each program.
- Included Global announcements for TRAPS admin to broadcast announcements to TRAPS users across all programs.

Program Evaluation

Process Evaluation

The focus of process, or implementation, evaluations is to assess the degree to which programs were implemented with fidelity. For grantees, this translates as their ability to complete SOW requirements. Process measures include, among others, the number/type of events held, the number of people reached, and the number of materials distributed.

Statewide Reach FY21			
Programs	Events	Reach	Distribution
MTFC	5,179	72,433	272,003
Youth	450	31,694	32,631
Cessation	233	2,640	2,234
Statewides	185	2,246	46,554
Total	6,047	109,013	353,422

Statewide Social Media		
Programs	Events	Audience
Youth	1,403	178,097
Statewides	953	291,510
Total	2,356	469,607



Program Evaluation

MTFC: Communciation		
Activity Type	Events	Audience
Published	169	(40,425,786)*
Unduplicated Audience**	(63)*	315,103
Radio	3	13,254,800
Submitted (unpub.)	424	-
Total	596	13,569,903

* Not included in total

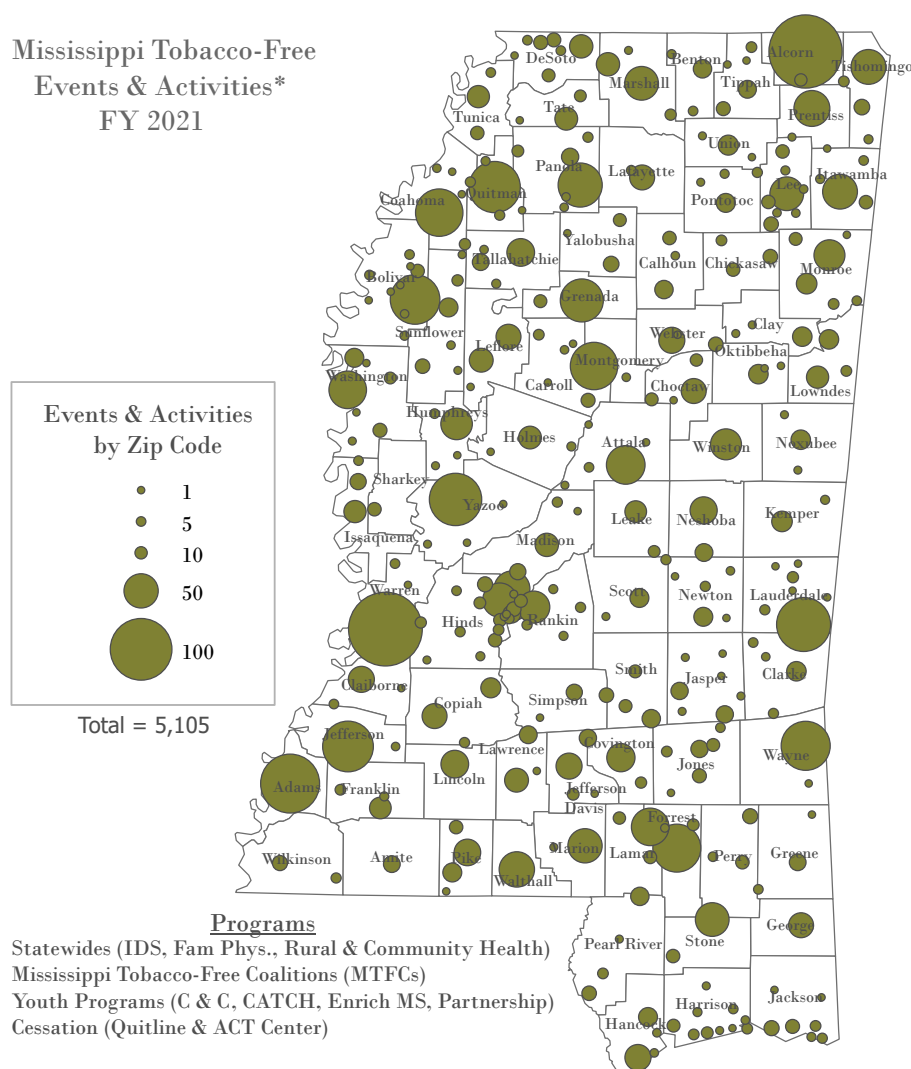
**Audience numbers counted once for multiple publications

Cessation: Communication	
	Audience
Optum Quitline: Online & Website	31,640
ACT Center: Social Media	0
Total	31,640

Passage of Smoke-Free Ordinances						
	2016	2017	2018	2019	2020	2021
Smoke-Free Counties	0	0	0	1	5	3
Smoke-Free Municipalities	19	15	17	11	12	2
Smoke-Free Amendments	9	2	1	4	2	0
Total	28	17	18	16	19	5

Program Evaluation

Mississippi Tobacco-Free Events & Activities* FY 2021



* includes virtual

Methodology

Data used to evaluate grantees' progress towards completing SOW requirements were pulled from TRAPS after close of business on June 30, 2021. After creating an initial evaluation report for individual grantees, evaluators conducted phone interviews with grantees to discuss SOW deliverables before finalizing the data populated into the weighted measurement tool. The weighted measurement tool provides a nuanced view of grantee activity to measure the progress grantees have made towards completing SOW requirements. In previous years, SOW requirements were classified as either "met" or "not met," disregarding varying levels of complexity present across the activities (e.g. the number of events that must be held, locations, the type of people or organizations that should be reached, etc.). With that approach, a grantee holding 6 of the 8 required events would receive a "not met" for that activity. The weighted measurement tool, on the other hand, rates the activity as being 75% complete.



Mississippi Tobacco-Free Coalitions (MTFCs)

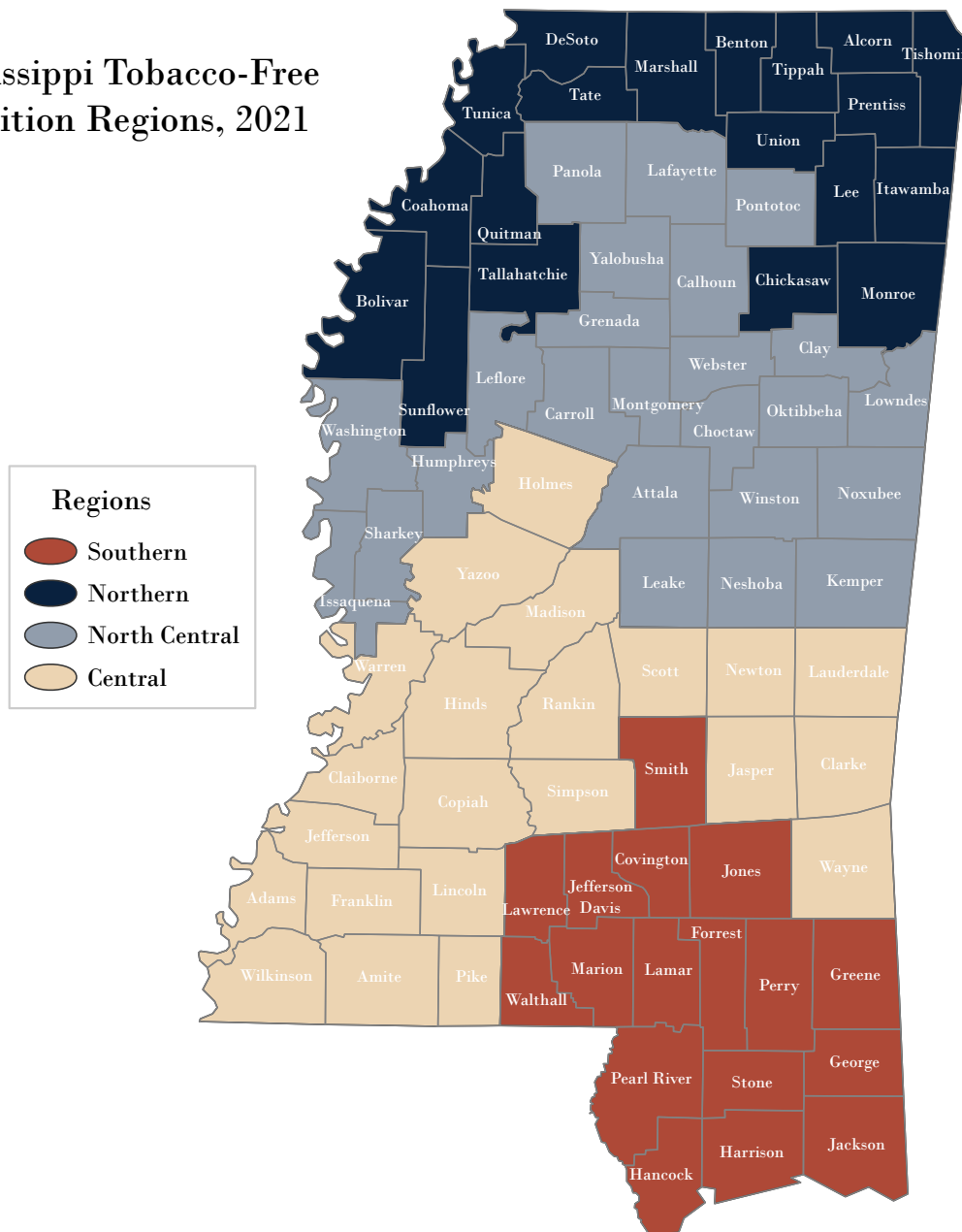
MTFCs are community-based coalitions that implement tobacco control programs that work to prevent tobacco initiation among youth, reduce secondhand smoke exposure, promote smoking cessation services, and reduce tobacco-related disparities. Depending on its location, MTFCs report to one of four regional branch directors (for a regional breakdown of MTFC directors, see the table below). Branch directors provide MTFC directors technical assistance and monitor MTFC activities.

During FY2021, the process of training MTFC regional/branch directors began the training process to conduct semi-annual process evaluations of their grantees. There were two major reasons for this shift. First, much of the work of the MTFC regional/branch directors overlapped with the process evaluation process. Second, there has been a shift in interest in having the MSU evaluation team conduct an increasingly outcomes-based evaluation based on population-level data. MTFC regional/branch directors were trained to use evaluation templates. They were asked to conduct the semi-annual evaluations independently before convening with the MSU evaluation team to discuss the results and/or get additional clarification on the evaluation process. Overall, the transition of this task to MTFC regional/branch directors has reduced the burden on the MSU evaluation team. After reviewing the evaluations conducted by the MTFC regional/branch directors, the MSU evaluation team recommends further collaboration to ensure the quality of the semi-annual reports.



Mississippi Tobacco-Free Coalitions

Mississippi Tobacco-Free Coalition Regions, 2021



Mississippi Tobacco-Free Coalitions

Region	County(ies)	Director
NORTHERN Courtney Johnson	Alcorn & Tippah	Abbey Enlow
	Bolivar & Sunflower	Beverly Johnson
	Chickasaw & Lee	Shatara Agnew
	Coahoma & Tunica	Concetta Thompson
	Desoto & Tate	Marcus Ross
	Itawamba & Monroe	Janet Turman
	Prentiss & Tishomingo	Sonya Sanderson
	Tallahatchie & Quitman	Pearl Watts
	Union, Benton & Marshall	Lora Austin
NORTH CENTRAL Jermellody Christian	Attala, Leake & Winston	Lynn McCafferty
	Grenada, Yalobusha & Calhoun	Sue Mashburne
	Issaquena, Sharkey & Washington	Tasha Bailey
	Leflore, Humphreys & Carroll	Desiree Norwood
	Montgomery, Webster & Choctaw	Kathryn Allman
	Noxubee, Kemper & Neshoba	Beverly Knox
	Oktibbeha, Clay & Lowndes	Yolanda Pruitt
	Panola, Lafayette & Pontotoc	Martha Johnson
CENTRAL Denise Diaz	Adams, Jefferson & Franklin	Shirley Brown
	Amite, Pike & Wilkinson	Shanna Barrett
	Copiah & Lincoln	Meishia Smith
	Hinds County	Andre Nathaniel
	Lauderdale & Newton	Pamela Edwards
	Madison, Yazoo & Holmes	Sharon Nettles
	Rankin, Scott & Simpson	Sherron Day
	Warren & Claiborne	Kimberly Dawson
SOUTHERN Ashley McKenzie	Clarke, Jasper & Wayne	Pamela Lang-Prestage
	Covington & Smith	Jasmine Johnson
	Forrest, Jones & Perry	Denoshia O'Quinn
	Greene, George & Stone	Stephanie Mayfield
	Hancock & Pearl River	Brittney Johnson
	Harrison County	Aleshia Jones
	Jackson County	Vacant
	Jeff Davis, Lawrence & Walthall	Casey Hamilton
	Lamar & Marion	Ashlee Lewis

Mississippi Tobacco-Free Coalitions

Compared to the previous year in which three branch and/or MTFC directors left their position, six individuals departed during FY21. During this period, six individuals, all MTFC directors, were added to the staff.

MTFC FY21 Staff Departures		
Director	Coalition	Date
Jennifer Palmer	Prentiss & Tishomingo	10/28/2020
Melissa Nash	Alcorn & Tippah	10/30/2020
Linda Turner	Benton, Marshall & Union	10/30/2020
Tabitha Wilson	Amite, Wilkinson & Pike	10/30/2020
Jamara Dunn	Lauderdale & Newton	12/31/2020
Kayleigh Shorter	Jackson	2/12/2021

MTFC FY21 New Staff		
Director	Coalition	Date
Janet Turman	Itawamba & Monroe	7/1/2020
Lora Austin	Benton, Marshall & Union	10/19/2020
Sonya Sanderson	Prentiss & Tishomingo	11/1/2020
Abby Enlow	Alcorn & Tippah	11/15/2020
Shanna Barrett	Amite, Wilkinson & Pike	11/16/2020
Pamela Edwards	Lauderdale & Newton	1/4/2021

The following tables give an overview of the advocacy/policy, cessation, awareness, and programmatic activities completed during the fiscal year.

MTFC: Activity Summary			
Activity Type	Events	Reach	Distribution
Programmatic	884	4,957	11,387
General Awareness	2,148	61,751	75,421
Advocacy/Policy	855	3,484	8,636
Cessation	1,292	2,241	176,559
Total	5,179	72,433	272,003

Mississippi Tobacco-Free Coalitions

MTFC: Programmatic			
Activity Type	Events	Reach	Distribution
Coalition Quarterly Meetings	112	1,403	1,219
Summer Youth Programs	106	767	4,573
Trainings Attended	240	2,110	-
Other Activities (+ internal)	426	677	5,595
Total	884	4,957	11,387

MTFC: General Awareness			
Activity Type	Events	Reach	Distribution
High Level Presentations	766	19,328	23,720
Disparate Populations (HL)	147	3,006	5,909
Catch My Breath Sessions	491	14,624	7,691
Educate a Business	134	1,949	3,468
Educate a Faith-Based Org.	133	2,705	4,929
Parent/Student Education	124	5,432	8,440
E-Cig/Vaping Presentations	107	3,208	3,312
Present @ School Council	107	1,368	3,033
School Spirit Nights	60	3,722	6,530
Take Down Tobacco Day	46	5,350	6,646
Great American Smokeout	33	1,059	1,743
Total	2,148	61,751	75,421

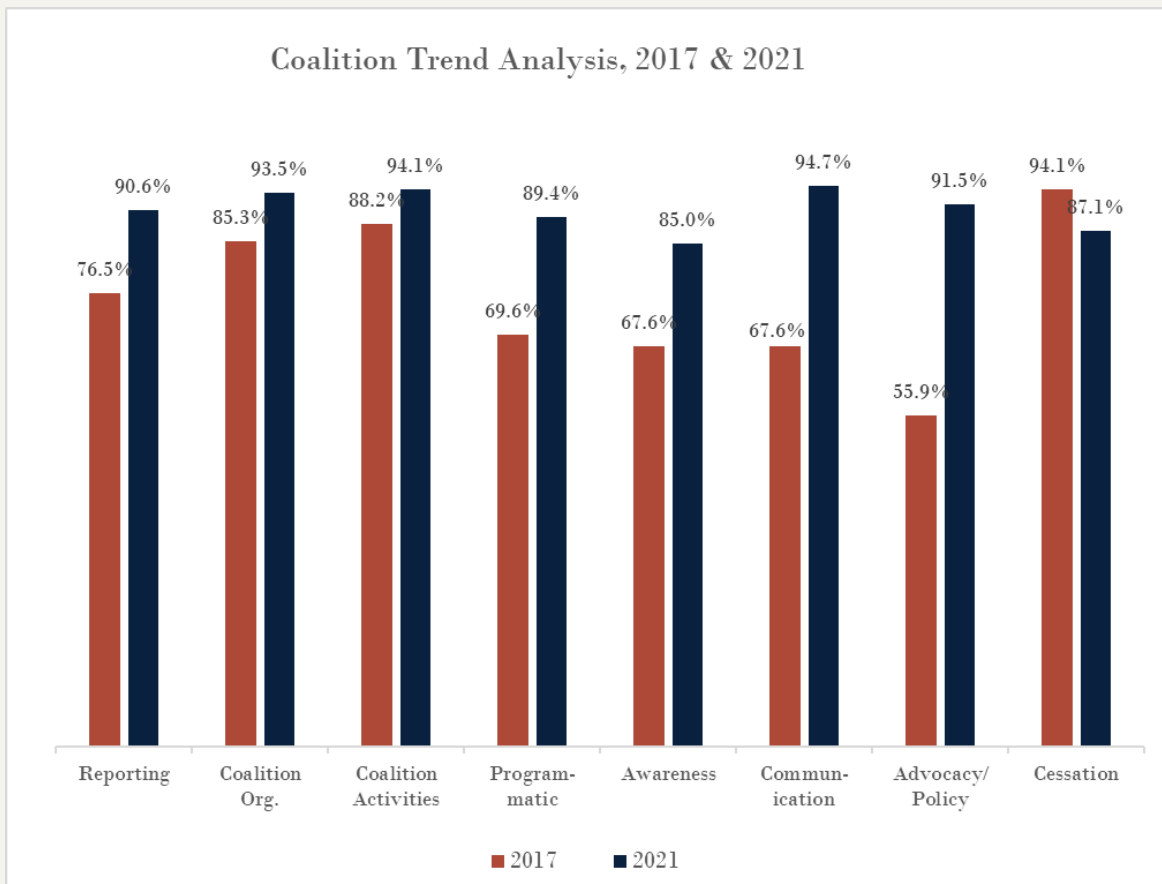
MTFC: Advocacy/Policy			
Activity Type	Events	Reach	Distribution
Ordinance Work/Research	292	721	404
School PSAs	148	-	750
Merchant Training	122	167	973
Multi-Unit Housing	97	1,480	4,456
Present/Assist RFP	82	312	276
City Council Attendance	51	359	328
Develop Ordinance Packets	49	324	1,424
Success Story Presentations	14	121	25
Total	855	3,484	8,636

Mississippi Tobacco-Free Coalitions

MTFC: Cessation			
Activity Type	Events	Reach	Distribution
Educational Materials	237	-	19,157
Freedom from Smoking	226	1,001	1,243
Occupational Training	57	1,240	6,184
TIPS Posters*	772	-	149,975
Total	1,292	2,241	176,559

* hard copy & electronic posters

The following chart compares the rate at which MTFC directors used TRAPS for reporting program activities and the extent to which directors were able to complete components of the SOW. In 2017, 76.5% of the coalition directors entered or tracked their activities in the TRAPS reporting system, compared to 90.6% in 2021. With the exception of cessation-related activities, SOW components were completed at a higher rate in 2021 relative to 2017.



Mississippi Tobacco-Free Coalitions

Ten coalition directors completed 100% of the SOW in fiscal year 2021.

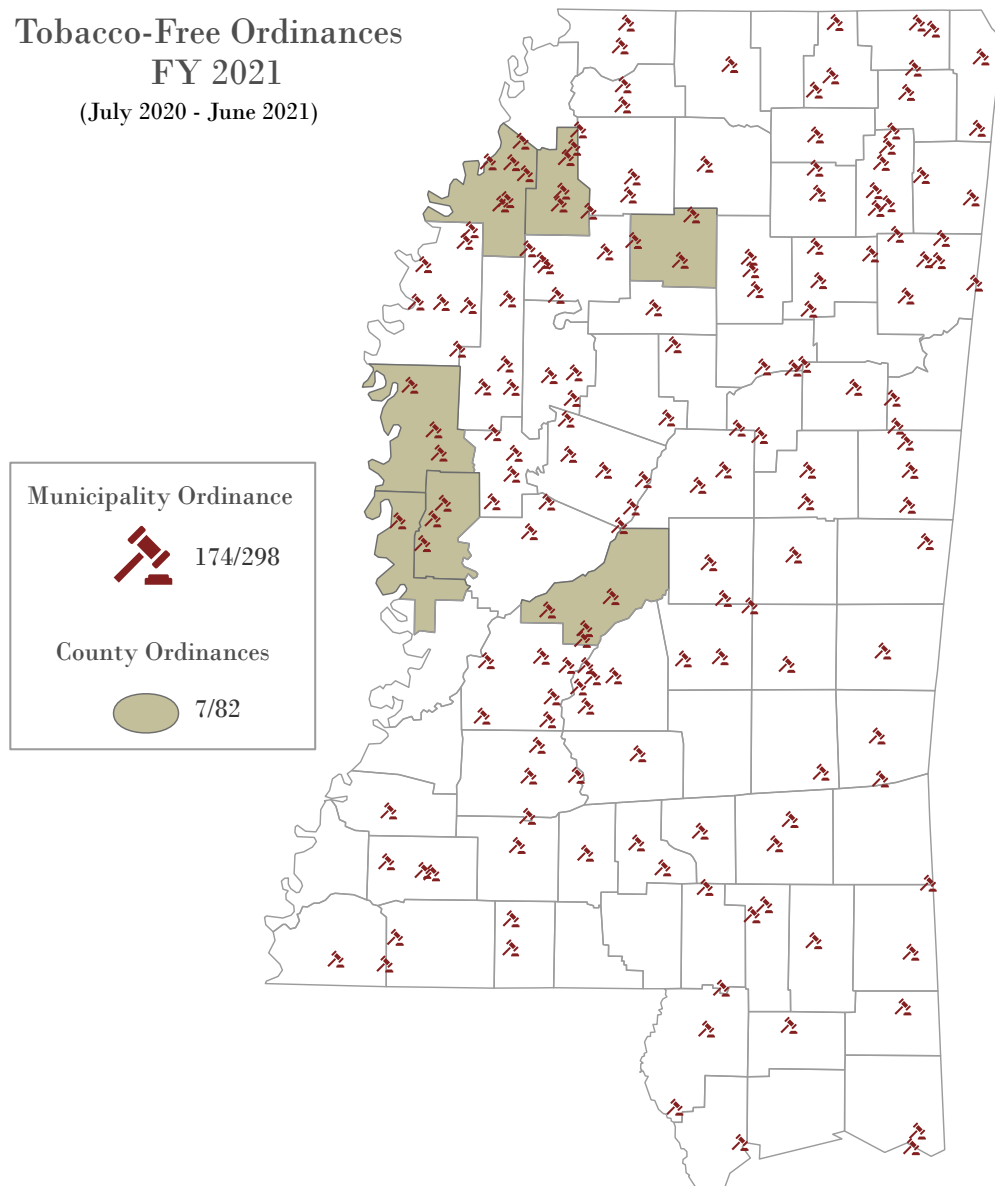
Met 100% SOW
Andre' Nathaniel
Ashlee Lewis
Beverly Johnson
Concetta Thompson
Desiree Norwood
Jasmine Johnson
Lynn McCafferty
Pearl Watts
Sharon Nettles
Shirley Brown

During FY21, MTFCs assisted in passing 5 comprehensive smoke-free ordinances, bringing the total number of smoke-free municipalities to 174.

Passage of Smoke-Free Ordinances (FY)				
Place	Pop.	Director	Date	Type
Quitman County	2,894	Pearl Watts	7/31/2020	C
Guntown	2,792	Shatara Agnew	10/23/2020	C
Washington County	7,468	Tasha Bailey	11/1/2020	C
Maben	840	Yolanda Pruitt	11/6/2020	C
New Houlka	607	Shatara Agnew	2/4/2021	C

Mississippi Tobacco-Free Coalitions

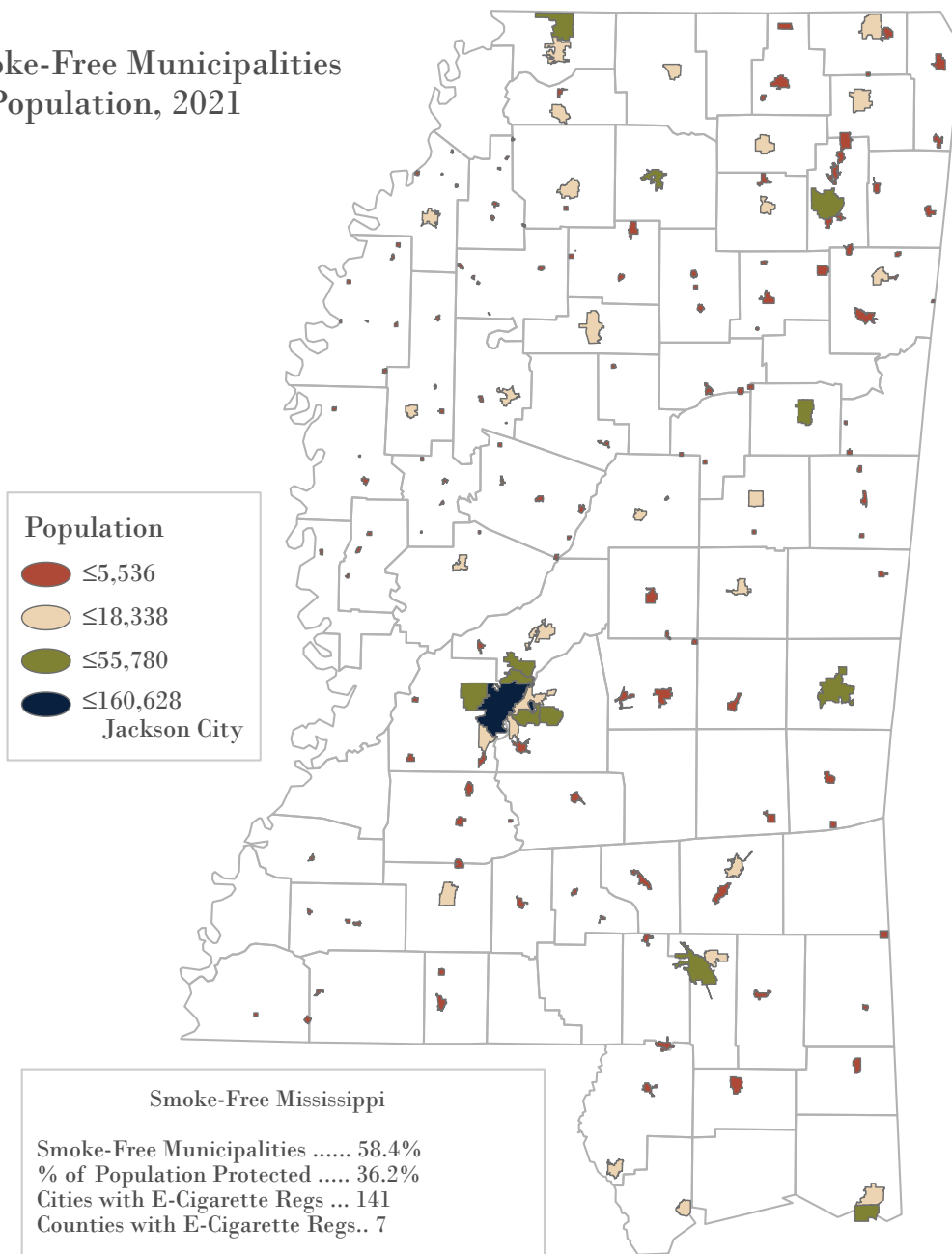
Tobacco-Free Ordinances FY 2021 (July 2020 - June 2021)



Source: Mississippi Tobacco Data, Mississippi State University; 2019 U.S. Census Population
For more details: <http://mstobaccodata.org>

Mississippi Tobacco-Free Coalitions

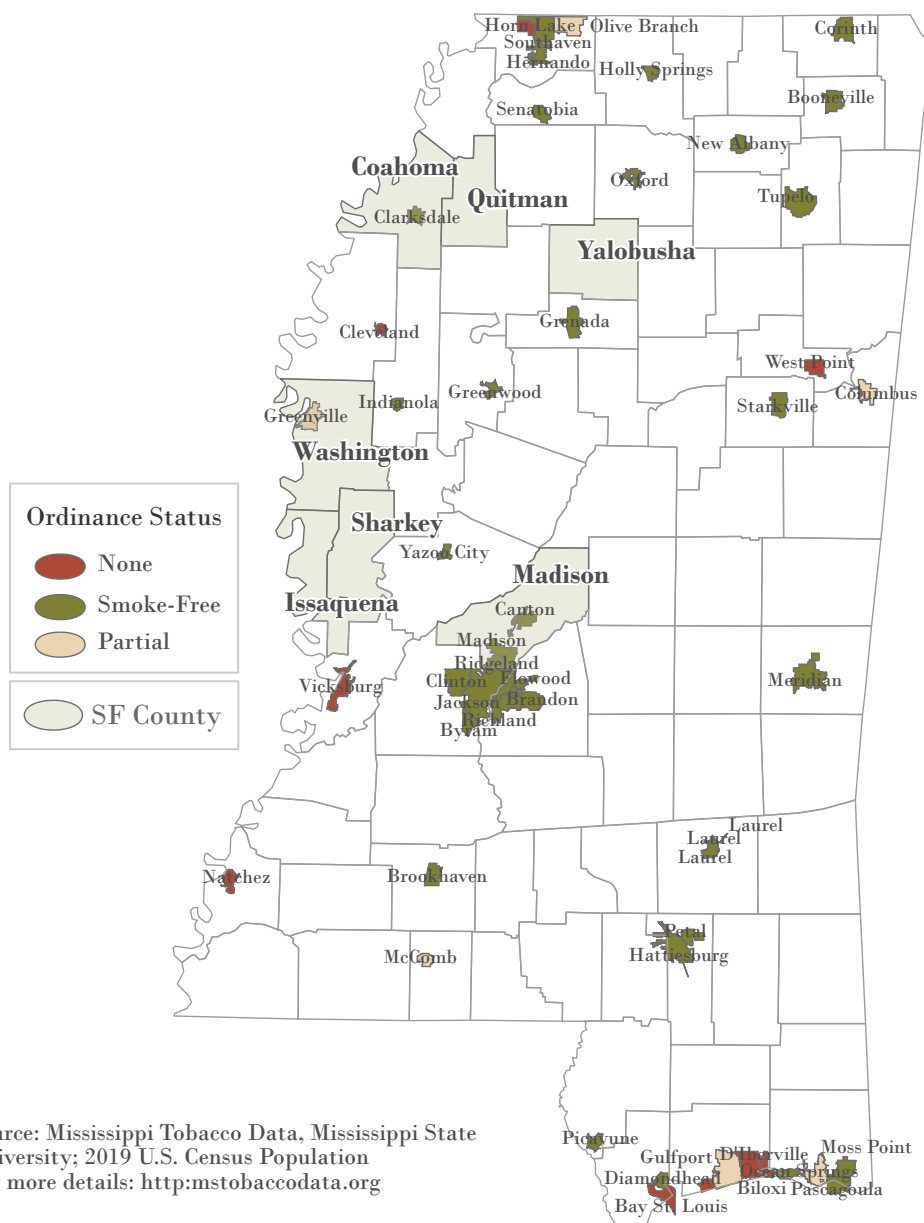
Smoke-Free Municipalities
by Population, 2021



Source: Mississippi Tobacco Data, Mississippi State University; 2019 U.S. Census Population
For more details: <http://mstobaccodata.org>

Mississippi Tobacco-Free Coalitions

Ordinance Status of Mississippi's 50 Largest Cities, 2021

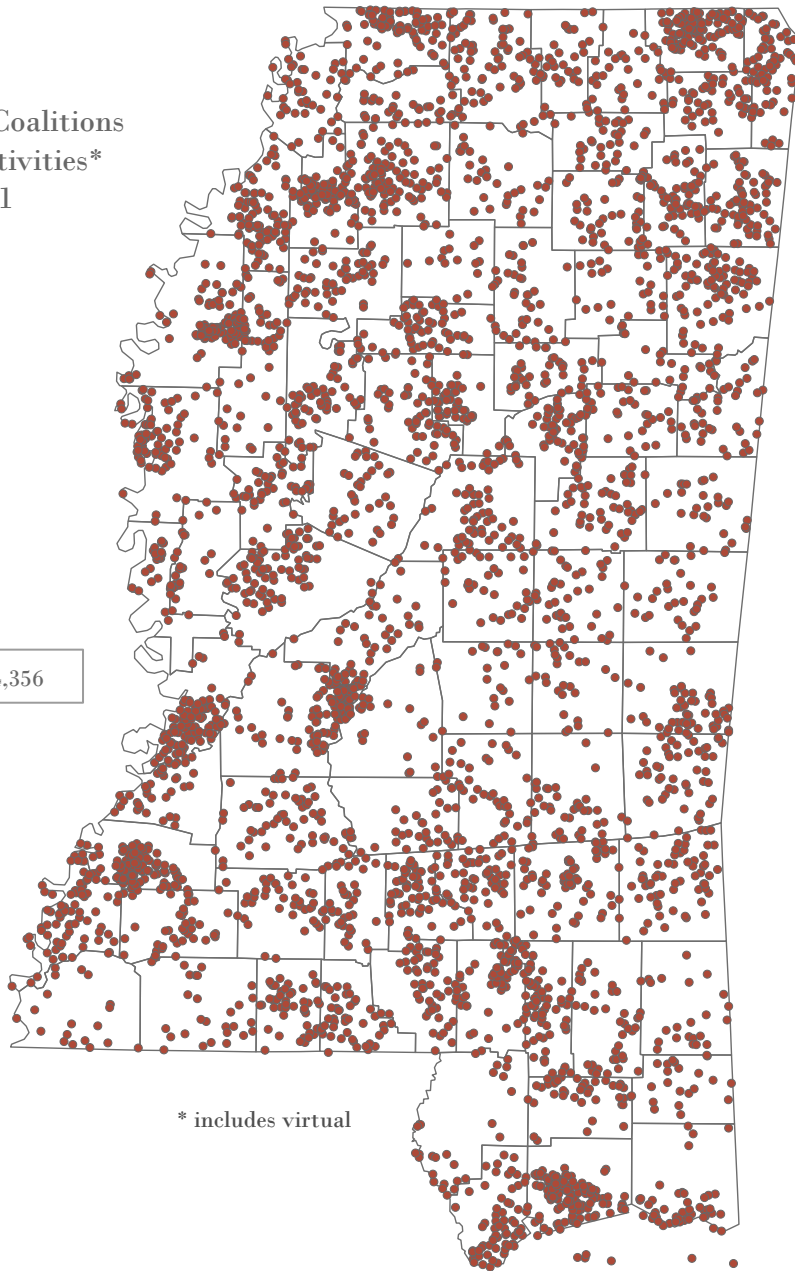


Mississippi Tobacco-Free Coalitions

Tobacco-Free Coalitions
Events & Activities*
FY 2021

● MTFCs = 4,356

* includes virtual



Youth Programming

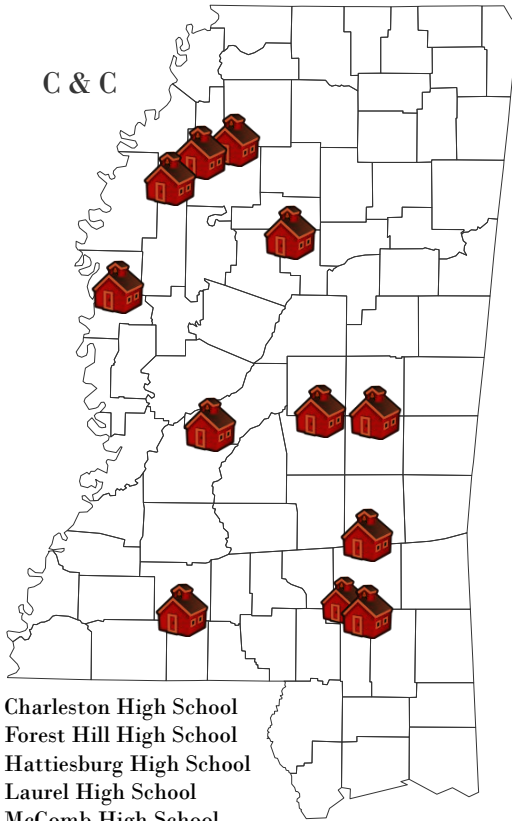
Youth programming was provided by the Partnership for a Healthy Mississippi (PHM), Caffee, Caffee, & Associates Public Health Foundation (CCA), Enrich MS, and CATCH My Breath. Much of the work done by PHM involved the development and distribution of quarterly newsletters and management of Generation FREE, a youth-led tobacco prevention program for youth ages 12-18. CCA's Youth Empowered Solutions (YES!) program targeted high poverty, high-risk secondary schools across the state to reduce tobacco initiation among youth and eliminate tobacco-related disparities. Enrich MS, a nonprofit organization based out of central Mississippi, provides community supported youth enrichment education on issues impacting youth today, including vaping prevention. CATCH My Breath is a peer-reviewed, evidence-based youth vaping prevention program. The following tables give an overview of the reach of programmatic activities and social media reach of youth programs during the fiscal year.

Youth Programs			
Program	Events	Reach	Distribution
C & C	356	11,086	10,595
PHM	52	639	18,900
Enrich MS	23	1,044	1,102
CATCH	19	19,797	1,976
Total	450	32,566	32,573

Youth Programs: Social Media		
Social Media	Posts	Views
PHM	810	5,163
C & C	321	9,968
Enrich MS	246	123,431
CATCH	26	39,535
Total	1,403	178,097

Youth Programming

C & C

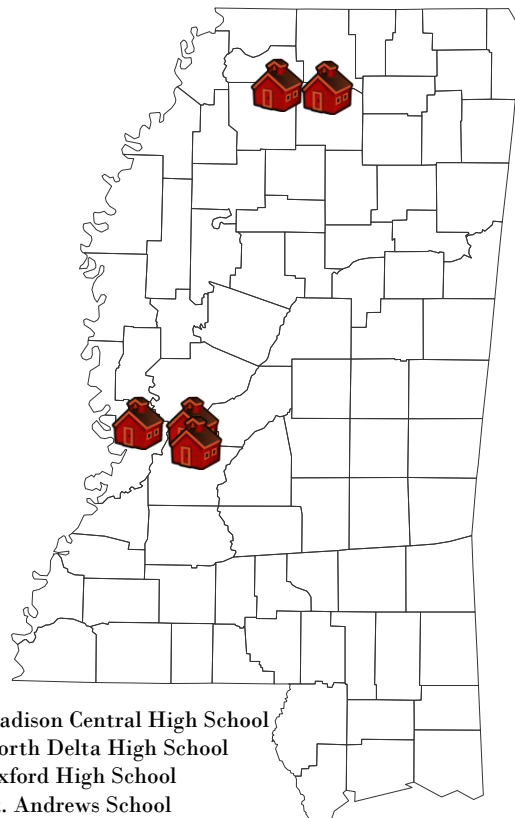


Charleston High School
Forest Hill High School
Hattiesburg High School
Laurel High School
McComb High School
Newton High School
Petal High School
Provine High School
Simmons High School
Thomas Edwards High School
West Tallahatchie High School
Winona Secondary School

Youth Year 2 Pilot Schools

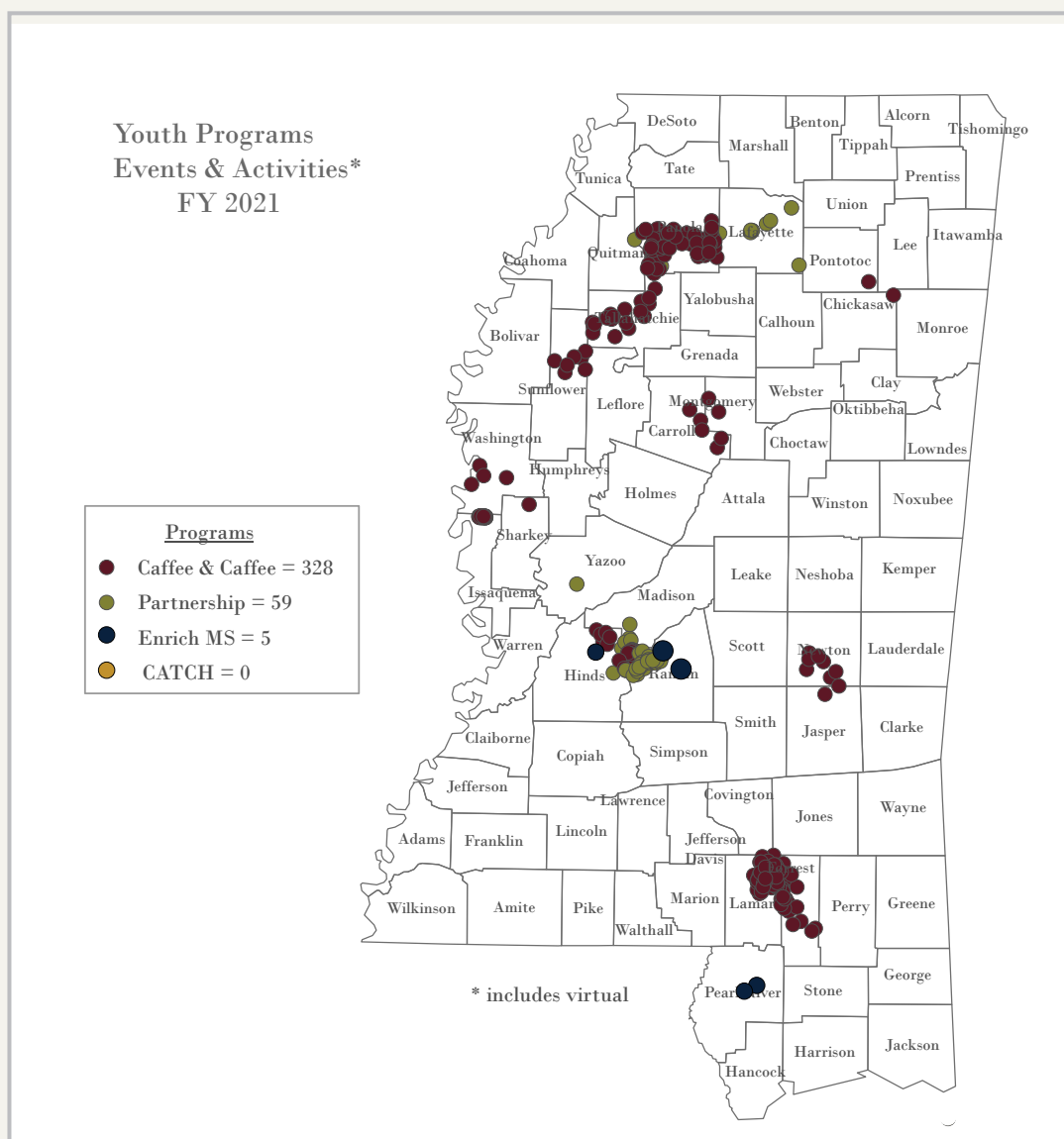
Coffee & Coffee (C & C)
&
Partnership for a Health Mississippi (PHM)

PHM



Madison Central High School
North Delta High School
Oxford High School
St. Andrews School

Youth Programming



Partnership for a Healthy Mississippi (PHM)

Generation FREE, a program focused on reducing tobacco use among teens, was launched at four high schools across the state. To measure the effectiveness of their program in changing students' knowledge and attitudes towards tobacco as well as tobacco-related behaviors, PHM planned to implement a pretest-posttest comparison group design to compare data from participating schools to data collected from a school serving as a comparison group. The survey fielded by PHM combined elements of the evidence-based CATCH MY BREATH pre/post-test and questions developed in-house. Although PHM fielded the pre-test in participating schools, they did not complete the intervention (i.e., CATCH MY BREATH). Therefore, no pre/post-test analyses could be conducted. Descriptive analyses, which offer a snapshot of student demographics, current use of cigarettes and vaping products, and vaping knowledge are displayed in the following tables and charts.

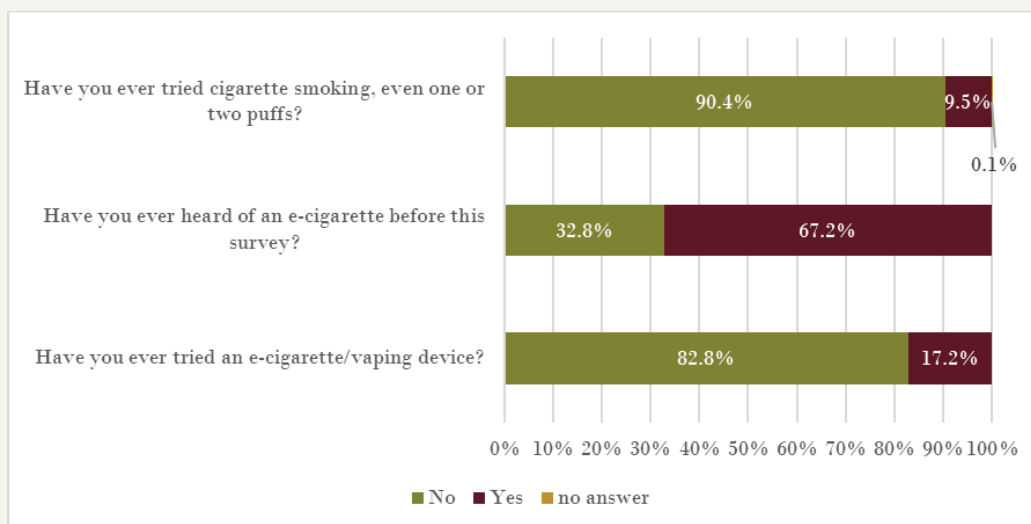
Youth Programming

	Madison Central High School	North Delta High School	Oxford High School	St. Andrew's Episcopal School	Vicksburg High School	Total
Grade						
9th	0 (0%)	3 (1.5%)	19 (9.7%)	55 (28.2%)	118 (60.5%)	195 (100%)
10th	14 (8.9%)	1 (0.6%)	21 (13.3%)	54 (34.2%)	68 (43.0%)	158 (100%)
11th	41 (24.0%)	3 (1.8%)	15 (8.8%)	37 (21.6%)	75 (43.9%)	171 (100%)
12th	28 (16.4%)	2 (1.2%)	8 (4.7%)	43 (25.1%)	90 (52.6%)	171 (100%)
Total	83 (11.9%)	9 (1.3%)	63 (9.1%)	189 (27.2%)	351 (50.5%)	695 ¹ (100%)
Race						
White	47 (19.7%)	9 (3.8%)	41 (17.2%)	106 (44.5%)	35 (14.7%)	238 (100%)
Black	19 (5.1%)	0 (0%)	10 (2.7%)	41 (10.9%)	305 (81.3%)	375 (100%)
Asian	3 (9.1%)	0 (0%)	5 (15.2%)	23 (69.7%)	2 (6.1%)	33 (100%)
Two+	7 (29.2%)	0 (0%)	2 (8.3%)	10 (41.7%)	5 (20.8%)	24 (100%)
Total	76 (11.3%)	9 (1.3%)	58 (8.7%)	180 (26.9%)	347 (51.8%)	670 ² (100%)

¹ three cases missing either grade or school removed from table

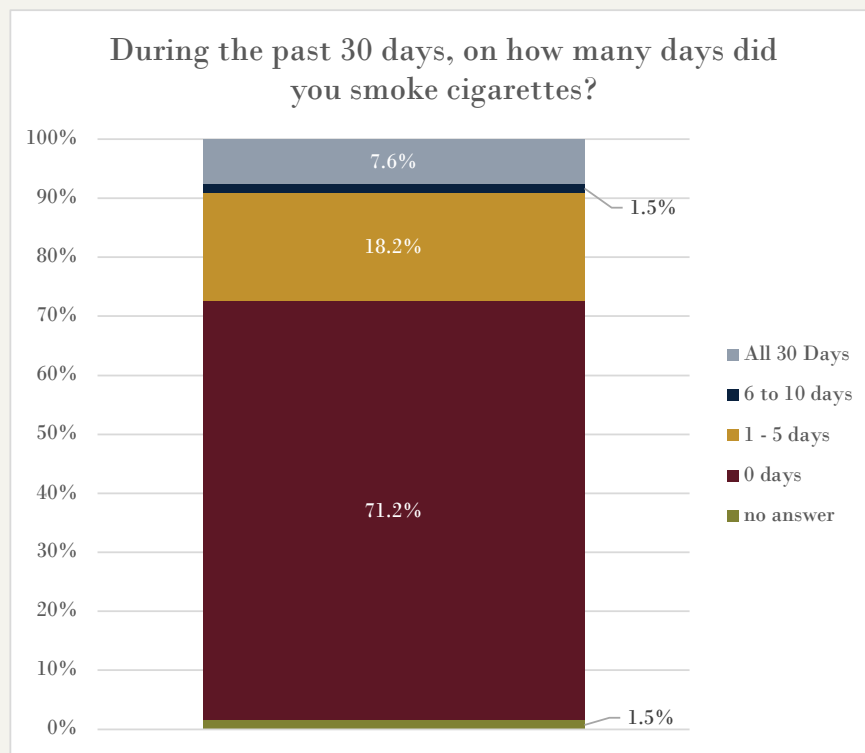
² 28 cases missing school and/or race

Although more than 80% of youth report having never smoked a cigarette or tried an electronic cigarette or vaping device, a higher proportion of youth report having used an electronic cigarette (n=120, 17.2%) or vaping device compared to those reporting cigarette use (n=66, 9.5%).



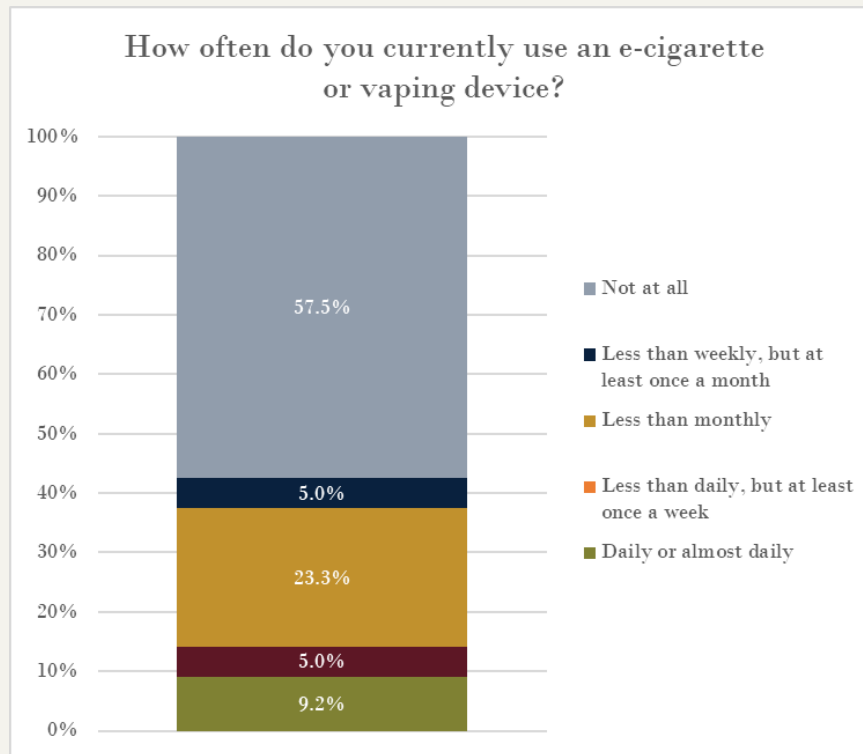
Youth Programming

Among youth who reported they have smoked cigarettes at least once (n=66), more than two-third reported they were not currently smoking (n=47, 71.2%). Less than 10% reported daily use (n=5, 7.6%).

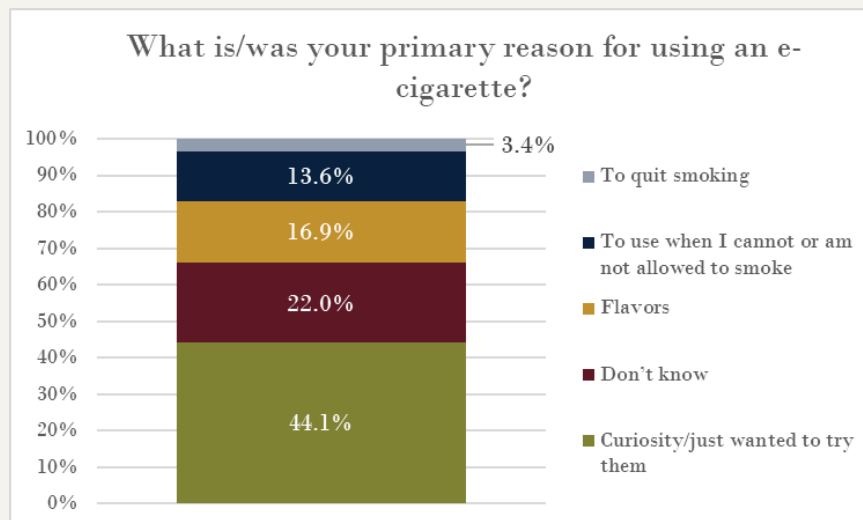


Youth Programming

Among youth who reported they have tried an electronic cigarette or vaping device (n=120), a little over half reported they were not currently using any products. Almost 10% reported daily use (n=11, 9.2%).

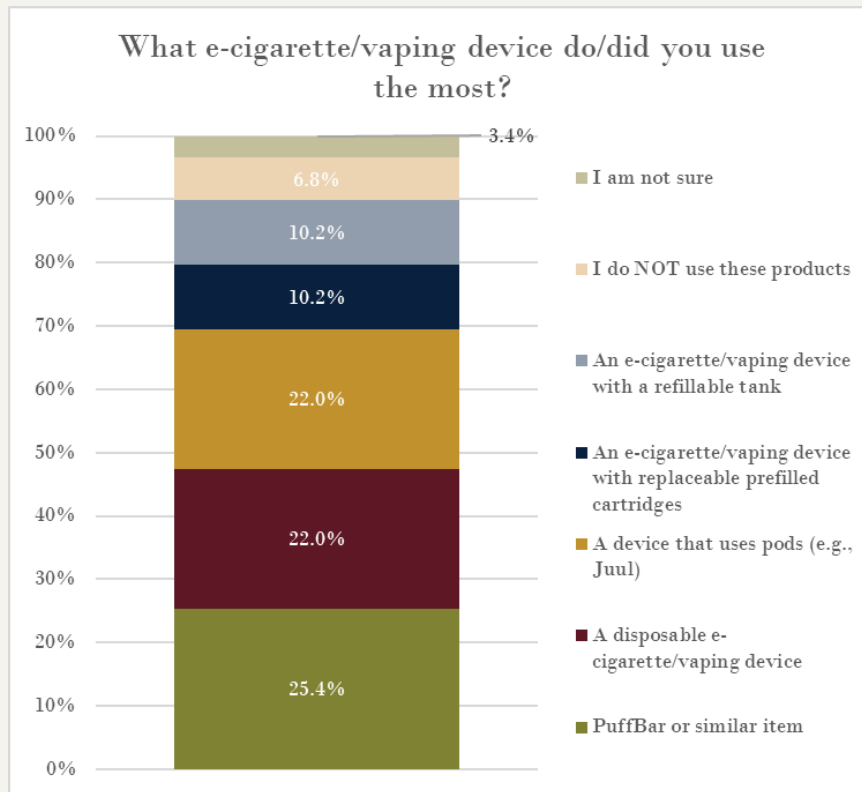


Among those who report that they are currently using an electronic cigarette or vaping device (n=59), the primary reason reported for trying the product was curiosity (n=26, 44.1%). A surprising large proportion of youth (n=13, 22.0%), said they were unsure why they decided to use electronic cigarettes.

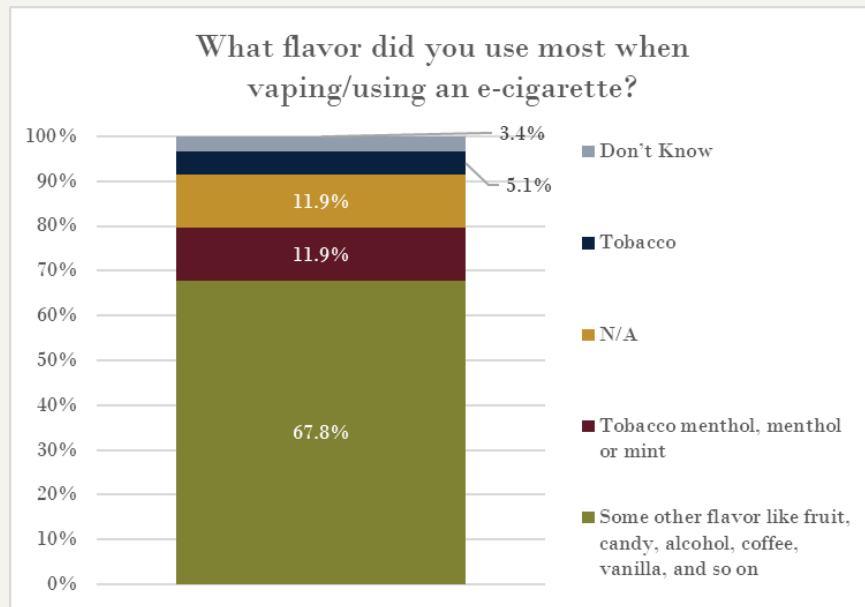


Youth Programming

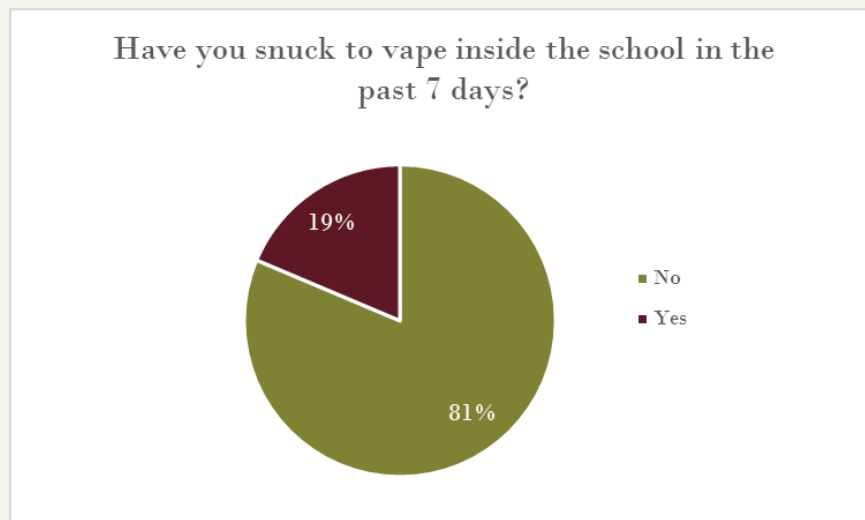
The three most commonly reported electronic cigarette devices used among those who report current use (n=59) were the PuffBar or other similar device (n=15, 25.4%), a disposable device (n=13, 22.0%), and devices that use pods, such as the Juul (n=13, 22.0%). The most commonly used flavor includes those that taste like items such as fruit, candy, alcohol, coffee, and vanilla (n=40, 67.8%).



Youth Programming

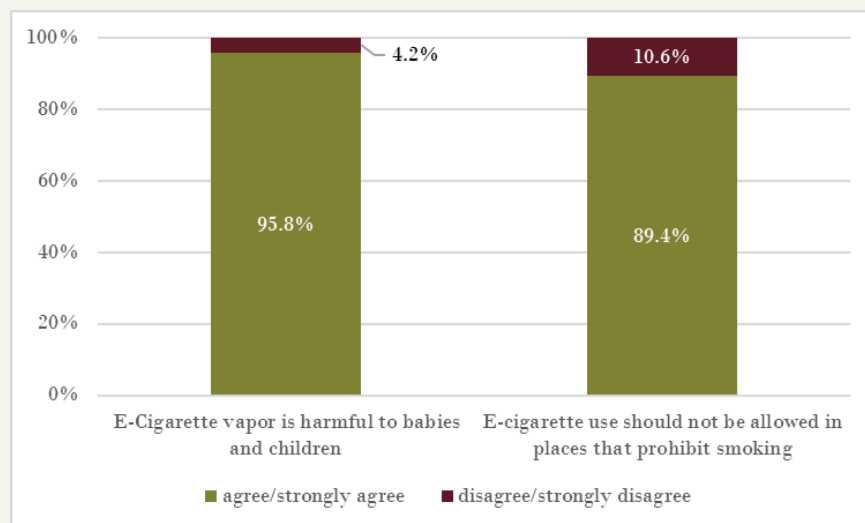
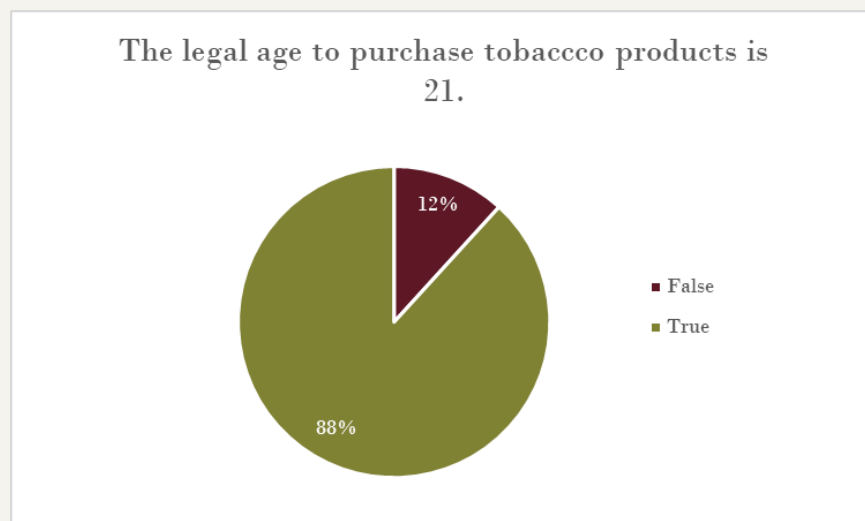


Among those who report that they are currently using an electronic cigarette or vaping device (n=59), almost 20% reported they have snuck to vape during school (n=11, 18.6%).

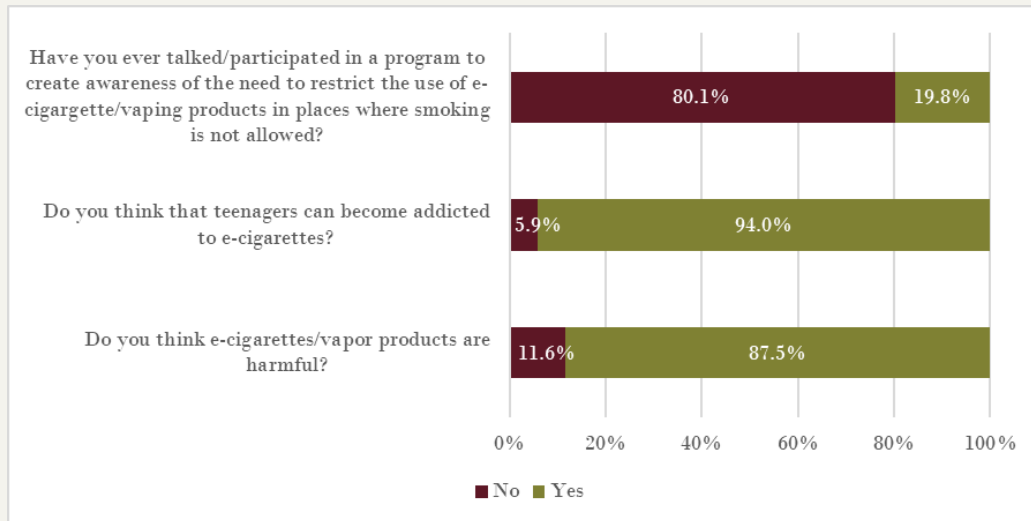


Youth Programming

In terms of smoking and electronic cigarette knowledge, surveyed youth (n=698) report understanding the dangers of cigarette and electronic cigarette use to themselves and others and are knowledgeable about tobacco laws. The majority of students stated that they have not been involved with a program that creates awareness of the need to restrict the use of electronic cigarettes in places where smoking is prohibited.



Youth Programming



The tables that follow provide an overview of the number of events, individuals reached, and materials distributed during the fiscal year.

PHM by the Numbers			
Activity Type	Events	Reach	Distribution
Newsletters (4)	3	-	13,363
Influencers* & Youth Leaders			
Recruit (4+4)	4	9	650
Training Sessions	9	18	17
Informational Table	7	-	2,380
Activities (13)	2	612	770
Internal Activities	21	-	111
Cessation Materials	6	-	1,609
Total	52	639	18,900

Youth Programming

PHM: Social Media*		
Activity Type	Posts	Views
PHM Posts (96)		
~ Facebook	139	537
~ Instagram	118	1,875
~ Twitter	41	1,430
~ SnapChat	150	n/a
Youth Leader Posts (12)		
~ Facebook	12	n/a
~ Instagram	27	n/a
~ Twitter	6	n/a
PHM & Influencer Videos		
~ Branded Videos (20)	9	300
~ CMB Videos (4)	4	n/a
Youth Leader Videos		
~ You Tube (8)	6	n/a
~ TikTok (16)	26	n/a
GenFree Website		
Edits/Updates (96)	125	
Posts (200)	147	1,021
Total	810	5,163

Caffee, Caffee, & Associates Public Health Foundation (CCA)

The focus of CCA for FY20 is youth engagement and brand affinity. Although the primary evaluation is being conducted by another organization, data entered into TRAPS are reported. The total number of events, the number of individuals reached, and the distribution of materials can be located in the table below.

Youth Programming

C & C by the Numbers			
Activity Type	Events	Reach	Distribution
Logo Messaging	12	2,150	1,998
Educate 1,000 Youth	19	2,196	2,037
Tobacco/Vaping Edu.	35	4,169	4,041
Workshops/Trainings	14	907	871
Newsletters (4)	4	-	304
YES! & NAATPN	10	84	64
Educate Retailers	12	36	24
Focus Group	2	35	24
Disseminate Materials	12	-	1,176
Other (+ Internal)	236	1,509	56
Total	356	11,086	10,595

C & C: Social Media		
Activity Type	Posts	Views
Social Media Posts		
~Facebook	81	6,495
~Instagram	43	244
~Twitter	133	184
~Snapchat	30	307
~ Website	-	730
~YouTube Videos	34	2,008
Total	321	9,968

Enrich MS

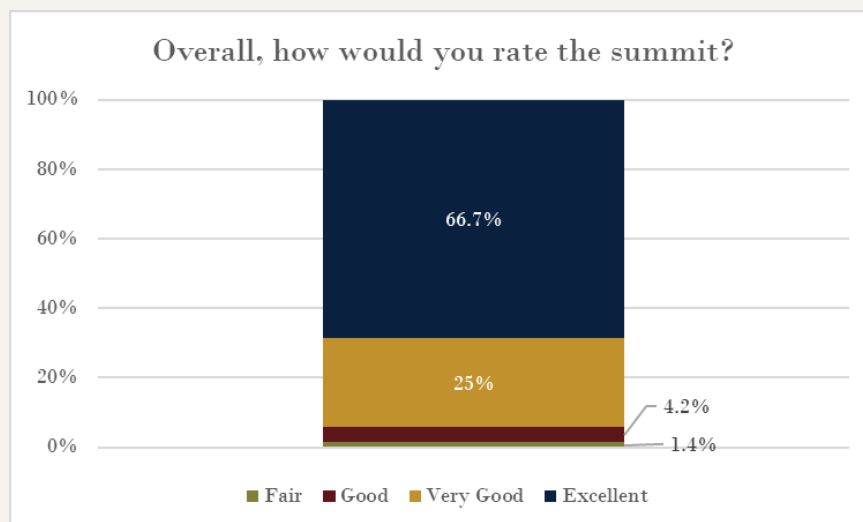
Enrich MS utilizes a peer-to-peer prevention model and was tasked with hosting the 2nd annual Virtual Vaping Summit. The total number of events, the number of individuals reached, and the distribution of materials can be located in the table below.

Enrich MS by the Numbers			
Activity Type	Events	Reach	Distribution
Virtual Vaping Summit	1	424	-
Summit Prep/Promotion	17	-	1,044
Youth Recruit/Train	2	23	-
Newsletters	2	-	116
Vaping Video	1	597	-
Total	23	1,044	1,160

Youth Programming

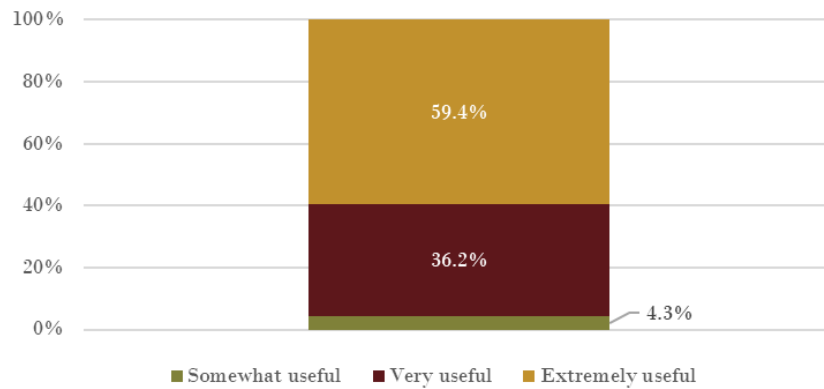
Enrich MS: Social Media		
Activity Type	Posts	Views
Social Media Posts		
~ Facebook	128	105,865
~ Instagram	45	248
~ TikTok	23	14,565
~ YouTube Videos	14	384
~ Website	36	2,369
Total	246	123,431

Enrich MS held a summit on February 4, 2021, to provide education and resources related to electronic cigarette use and youth vaping in the state. The summit included educational presentations, testimonials, youth (peer-to-peer) sessions, panel discussions, and breakout sessions. Among the 424 in attendance, 72 completed the post summit survey. Feedback regarding the quality of the summit, usefulness of the information presented, reasons for attending, and future plans are displayed below.

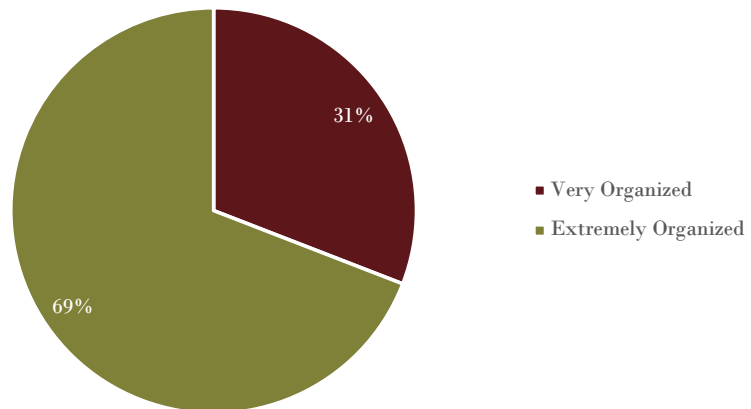


Youth Programming

How useful was the information presented at the professional event?



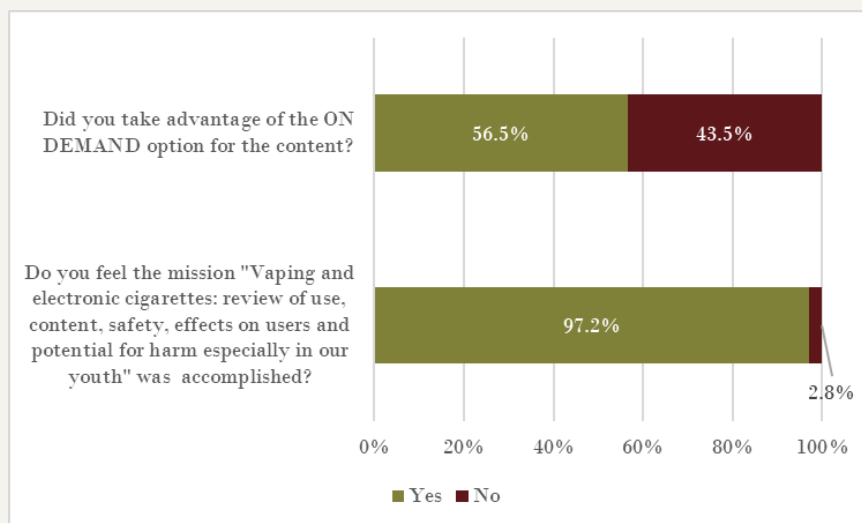
How organized was the event?



Youth Programming

Respondents were given the opportunity to elaborate on what they like most about the event (similar responses were grouped/aggregated):

- All of it was very informative; Great information; New information; Learning
- All presenters were engaging, and the information was new and pertinent to me and my school.
- Breakouts!
- Teen round table discussion; Student perspectives; Teen panel members
- Current information on Vaping that applies to my job as a Middle School Nurse.
- Gaining more knowledge about vaping
- Information and the testimonials
- Is it possible to say I like it all how informal; it was yet very interesting.
- It was well done full of great information on the latest trends and prevention strategies that are working in different parts of our great nation!
- Listening to all the interesting perspectives on vaping especially from students.
- Personal experiences with vaping crisis; loved the actual "real life stories"; personal testimonies/stories
- The 360-degree perspective as well as the scientific information that was provided.
- The ability to start and stop sessions throughout watching all the segments
- The new vaping products and how dangerous they are
- Variety of speakers; I liked the varied professions, areas of expertise, and ages
- The vaping summit had great information for school nurses and the data of the increase of vaping was alarming. Every presenter was authentic and passionate on this growing problem in our society.



Youth Programming

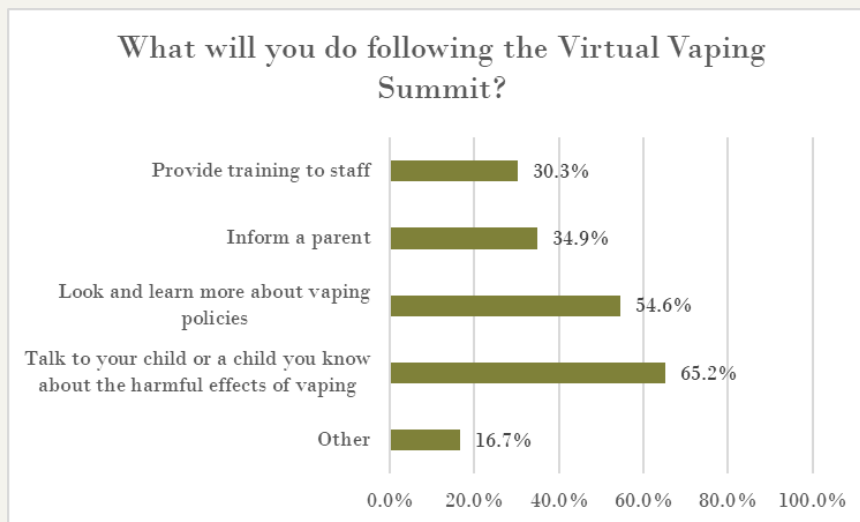


Respondents were also given the chance to elaborate on why they decided to attend the Virtual Vaping Summit (similar responses were grouped/aggregated):

- Anti-vaping marketing techniques for small neighborhood schools.
- I will use the information to educate physicians and medical students.
- Networking partners to collaborate and share prevention techniques to bring more buy-in towards successful progress to build coalitions statewide!!
- Effects in pregnancy
- Law Enforcement perspective; Engage community support
- lobbying against vaping; Efforts for more restrictions on vape product producers.
- Focus on ways that adults can spot teens and young people vaping, and ways to intervene in a helpful way.
- More stories from students who have used but then quit. Or students who had adverse reactions.
- More views of what vaping can do to the lungs and complications
- How easily they are hidden such as examples of different vapes and where parents, coaches, teachers should be aware of looking
- Diversity of participants from the state of MS. This did not seem inclusive or mention the social justice issues in connection with marketing of vaping paraphernalia to minorities or LGBTQ communities.
- What new research uncovers about the effects of use; More views of what vaping can do to the lungs and complications
- Resources School Nurses could use to teach students and staff about vaping.
- More of the cutting edge information; More real life stories to share with students
- Hearing from young people as to just how vaping has affected them and how they see their peers facing the temptation that vaping offers.
- More student input; Student testimonials; More stories from students who have used but then quit. Or students who had adverse reactions.
- More panel discussions

Youth Programming

- implement discussion on the dangers of vaping in assessments on students that come to the nurses office
- Trying to get a county ordinance.
- Continue work on surveillance of tobacco use; More of the same information



Youth Programming

CATCH My Breath

The CATCH My Breath program is designed for youth in grades 5-12. The knowledge provided through the program equips youth the knowledge and skills to make informed decisions about the use of electronic cigarettes. The total number of events, the number of individuals reached, and the distribution of materials can be located in the table below.

CATCH by the Numbers			
Activity Type	Events	Reach	Distribution
Newsletters (4)	4	-	1,752
Virtual Field Trip	2	19,736	-
Video Topic Series	1	58	-
Other (+ Internal)	12	3	224
Total	19	19,797	1,976

CATCH: Social Media		
Activity Type	Posts	Views
Social Media Posts		
~ Facebook	13	32,673
~ Twitter	13	6,862
Total	26	39,535

Cessation Intervention

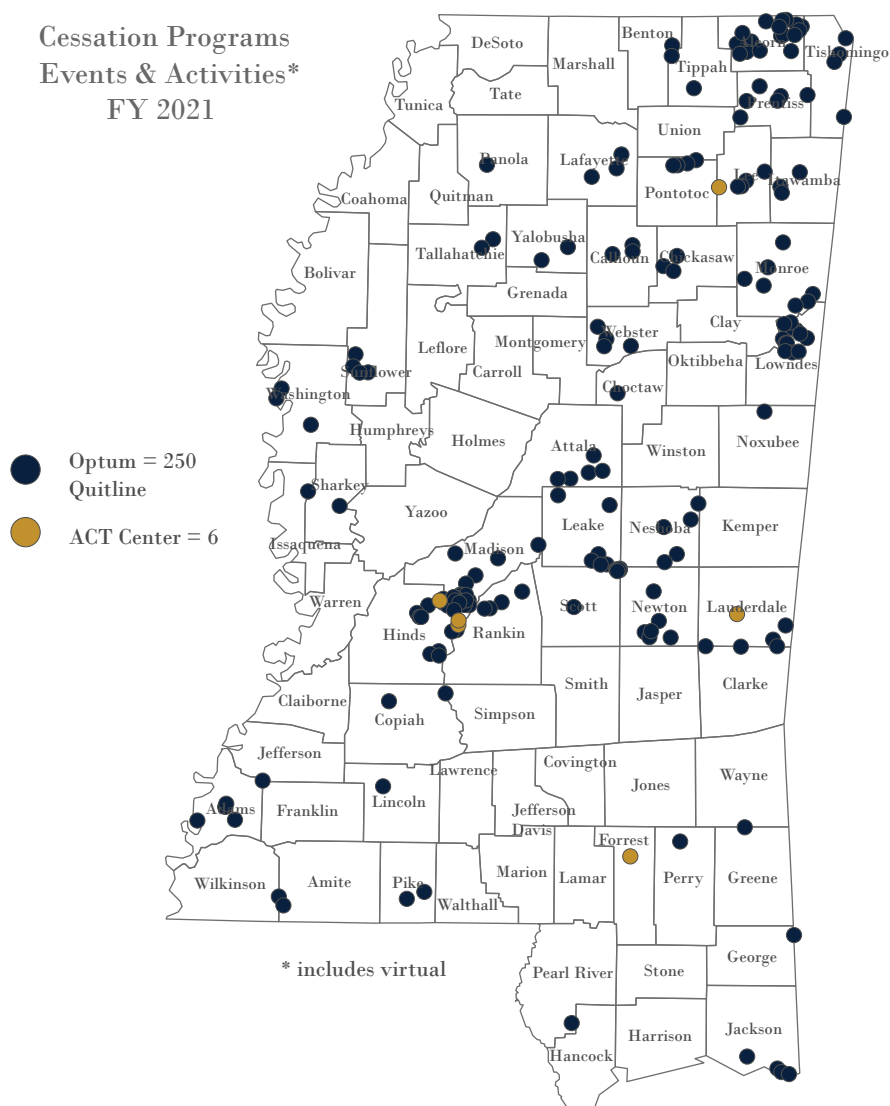
OTC supports two cessation intervention programs: the ACT Center for Tobacco Treatment, Education, and Research, and the Mississippi Tobacco Quitline (Optum). The ACT Center supports tobacco cessation through three primary methods: the provision of in-person evidence-based treatment for tobacco users, training physicians to promote cessation among their patients, and research. The Mississippi Tobacco Quitline offers evidence-based cessation treatment via telephone or web to Mississippi residents. Both services provide participants with nicotine replacement therapy at no cost to participants.

Cessation Programs			
Program	Events	Reach	Distribution
ACT Center	9	292	164
Optum Quitline	224	2,348	2,070
Total	233	2,640	2,234



Cessation Intervention

Cessation Programs
Events & Activities*
FY 2021



ACT Center

Presentations, communications, training, and educational activities are combined in the table below.

ACT Center by the Numbers			
Activity Type	Events	Reach	Distribution
Presentations & Trainings	9	292	164

Cessation Intervention

Tables detailing participant satisfaction survey results for the Tobacco Treatment Specialist (TTS) Training Program are presented below.

TTS Program Evaluations						
	FY 17	FY 18	FY 19	FY 20	FY 20	FY 21
Patient Satisfaction (1 = Very Low, 5 = Very High)						
Survey Count	209	61	N/A	34	34	48
Average Totals						
General Organization of the Program	4.8	4.8	4.9	4.8	4.8	4.8
Quality of the Facilities (meeting rooms, etc)	4.8	4.7	4.8	5.0	5.0	4.9
Appointment & Scheduling Services	4.9	4.8	4.9	5.0	5.0	4.9
General Clinic Features (on time, smooth operation)	4.9	4.9	4.9	4.8	4.8	4.9
Quality of the Workbook and other Materials	4.8	4.6	4.8	4.5	4.5	4.7
Staff Helpfulness, Friendliness & Flexibility	5.0	4.9	4.9	4.8	4.8	4.9
Staff Skillfulness in Providing Treatment	4.9	5.0	4.9	5.0	5.0	4.9
Overall Quality of the Program	4.9	4.9	5.0	5.0	5.0	4.9
Overall Effectiveness of the Program	4.9	4.9	4.9	3.7	3.7	4.8

Source: Annual Reports

Mississippi Tobacco Quitline

Presentations, communications, training events, and educational activities are detailed in the table below.

Optum by the Numbers			
Activity Type	Events	Reach	Distribution
Clinical & Provider Activities	125	317	238
Promote Cessation Services	89	1,751	1,684
Education/Collaboration	3	30	30
Training/Conferences	7	250	118
Total	224	2,348	2,070

Optum: Online & Website	
Activity Type	Audience
Website Traffic (page hits)	26,031
Online Counseling Tx Completers	156
Text2Quit & Email Contacts	5,003
Online Enrollments via Web-Based Services	450
Total	31,640

Service Delivery	2021
Calls received during business hours	6,012
% calls answered live	95%
% calls abandoned	0
% calls abandoned after 30 seconds	0
Average wait time before abandoned	35 sec
Average wait time before answered	21 sec

Cessation Intervention

Caller demographics, call volume, call rate, service delivery, tobacco behaviors, and counseling services for FY21 are presented in the following tables.

Caller Demographics	2016	2017	2018	2019	2020	2021
Male	1,395	1,594	1,844	1,904	1,426	1,502
Female	3,032	3,315	3,480	3,609	2,564	2,966
Other	32	44	40	36	21	11
Unknown/Refused	1,065	1,041	991	1,328	811	108
18-24	196	188	183	143	104	84
25-30	759	714	816	732	502	246
31-40	908	1,057	1,223	1,149	864	596
41-50	1,377	1,490	1,500	1,536	1,033	761
51-60	1,425	1,692	1,741	2,026	1,445	1,323
61-70						1,161
71+	529	630	649	921	690	409
Unknown/Refused	292	178	202	331	162	108
Black or African American	1,645	1,768	1,658	1,781	1,325	1,148
White	2,668	3,025	3,436	3,405	2,503	1,756
Asian	6	21	6	6	8	3
Native American/Alaskan Native	29	22	1	46	28	28
Other	45	61	96	94	56	56
Hispanic/Latino		68	69	78	72	75
Not Collected/Unknown	n/a	n/a	n/a	n/a	n/a	1,528

Web-Based Services	2021
Website hits	26,031
Enrollments	450
Treatment completers	156
Avg. bounce rate	56%
Avg. time (minutes) spent on site	20

Counseling Services	2021
Enrollments via Web-based Services	450
Web-based Program Completers	150

Cessation Intervention

Method of Registration	2021
Phone	92.45% (4,350)
Web	7.55% (355)
Services Provided	
Phone calls	47.42% (11,655)
Pharm shipments	22.45% (5,517)
Email subscript	5.99% (1,471)
Text2Quit enroll	9.66% (2,375)
Materials sent	14.48% (3,558)

Call Volume Status	2021
Incoming calls (English)	10,832
Early abandoned calls	1,617
Direct to Quit Coach Calls	3,238
Calls answered live	5,658 (95%)
Calls handled by Spanish QL/Dejelo Ya	40
Incoming calls during TIPS	2,082

Tobacco Behavior	2020	2021
Cigarettes	3,586	4,239
Smokeless tobacco	111	172
Cigars	74	127
Pipe	4	10
E-cigarette/Vaping	351	402
Other	18	462
Totals	4,144	5,412

Statewide Partners

OTC contracts with four organizations to provide tobacco cessation and awareness presentations and education to a range of stakeholders such as healthcare providers, medical residents, individuals with disabilities, and others. The Community Health Center Association of Mississippi provides training and technical support to federally qualified health centers across the state and oversees the Baby and Me initiative. The Mississippi Academy of Family Physicians Foundation trains staff located in family physician clinics to refer tobacco users to appropriate treatment. With an eye on decreasing tobacco-related disparities, the University of Southern Mississippi's Institute for Disability Studies works to reduce use, promote cessation, and reduce exposure to secondhand smoke among Mississippians with disabilities. The Mississippi Rural Health Association provides resources, education, and advocacy to professionals and advocates in support of rural health-related matters. The following table presents the number of events, individuals reached at events, distribution of materials, and audience reached through media campaigns.

Statewide Programs			
Program	Events	Reach	Distribution
Community Health Center	104	1,752	10,626
Inst. for Disability Studies	21	68	5,254
Family Physicians	39	337	10,584
Rural Health	21	89	20,090
Total	185	2,246	46,554

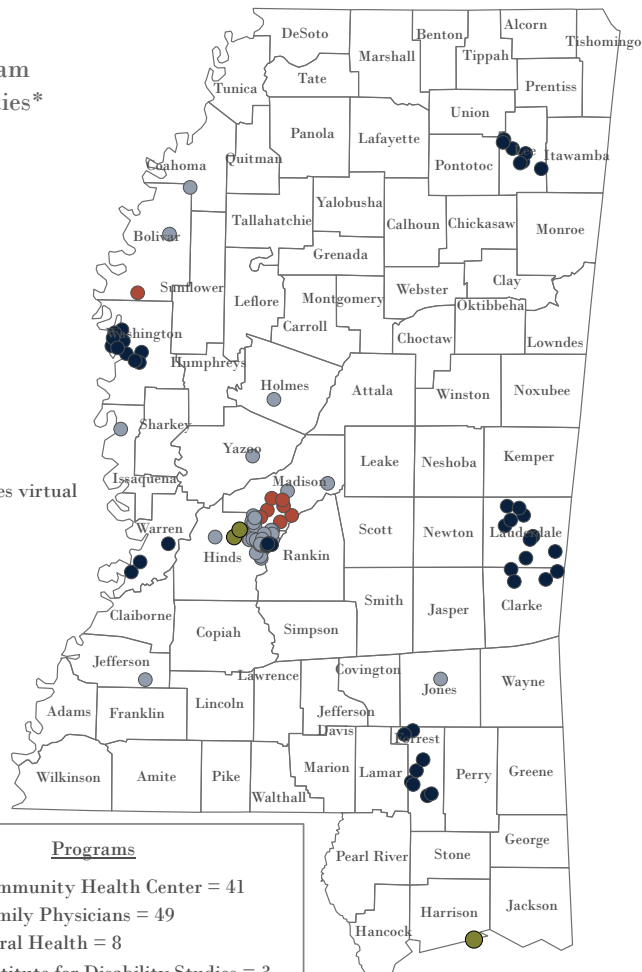
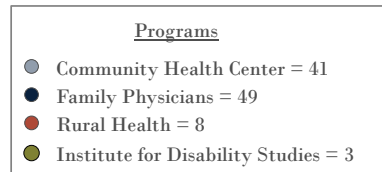
Statewides: Communication		
Social Media	Posts	Audience
Community Health Center	47	1,776
Inst. for Disability Studies	828	236,833
Family Physicians	58	40,040
Rural Health	20	12,861
Total	953	291,510



Statewide Partners

Statewide Program
Events & Activities*
FY 2021

* includes virtual



Statewide Partners

The Community Health Center Association of Mississippi

The primary activities of the Community Health Center Association of Mississippi (CHCAM) are the management of two programs, Baby and Me and Lunch and Learns. CHCAM also disseminates educational materials. Tables detailing the Baby and Me program, Lunch and Learns, and dissemination of materials are presented below.

Community Health Center			
Activity Type	Events	Reach	Distribution
Lunch and Learn	1	17	500
Baby and Me	49	1,661	8,966
Newsletter	4	-	153
Presentation/Training	2	66	-
Other (+ Internal)	15	8	76
Disseminate Edu Materials	33	-	931
Total	104	1,752	10,626

Community Health Center: Communication			
Social Media	Posts	Clicks	Impressions
Facebook	30	923	-
Twitter	10	332	232,159
Hootsuite	3	47	-
TIPS Campaign	4	474	255,114
Total	47	1,776	487,273

Mississippi is one of 18 states participating in the nationally renowned National Baby and Me Tobacco Free Program (BMTFP). Currently, this program has been implemented in 11 CHCAM participating community health centers.

Baby and Me Program** Enrollees						
Agency	n	Age (avg)	Race (white)	Race (black)	Gestation (avg weeks)	Yrs Smoked (avg)
Aaron Henry Community Health Services*	*	*	*	*	*	*
Central MS Health Services	6	23	17%	83%	18	6.5
Coastal Family Health Services	36	26	70%	30%	17	9.5
Family Health Center	17	27	24%	76%	8	9
GA Carmichael Family Health Center	80	28	15%	85%	20	9.8
Greater Meridian Health Clinic*	*	*	*	*	*	*
Jackson-Hinds Comprehensive Health Center	9	27	0%	100%	23	8
Jefferson Comprehensive Health Center	5	29	40%	60%	19	5
Southeast Mississippi Women's Health Center	7	26	29%	71%	26	5.4
Total	160	27	28%	72%	19	7.6

*Suppressed; Less than 5 participants

**Program's Inception 2017-2021

Statewide Partners

The Mississippi Academy of Family Physicians Foundation

The Mississippi Academy of Family Physicians Foundation (MAFPF) engaged in communication rounds, newsletters, Tar Wars presentations, and social media analytics. Information about the number of events, individuals reached, and distribution of materials is presented in the table below.

Family Physicians by the Numbers			
Activity Type	Events	Reach	Distribution
Planning & Training	4	98	906
Communication Rounds 1-5	4	-	229
Lunch n Learn	2	17	713
Promoting & Engaging MS	8	144	584
Newsletters	4	-	1,372
Other	13	-	1,508
Tar Wars to Med Students	4	78	5,272
Total	39	337	10,584

Family Physicians: Communication		
Social Media	Posts	Audience
Facebook	23	2,539
Twitter	6	81
TIPS Campaign	29	37,420
Total	58	40,040

Tar Wars

To learn more about the experiences of medical students conducting Tar Wars, interviews were conducted with three medical students from William Carey's Osteopathic Medicine program to solicit feedback about the Tar Wars training program and learn about their experiences presenting the program to 4th and 5th graders across the state. When asked to provide an overall rating of the Tar Wars training program conducted by Mississippi Association of Family Physicians (MAFP) using a scale from 1 (bad) to 5 (good), two of the three medical student provided ratings of 4.5 and 5. The third medical student reported that he did not attend the training conducted by MAFP, "I'm sorry, I didn't really get that sort of training, I guess. It was just kind of something that we, through William Carey, that we kind of, with Dr. Stevens, that we kind of did." When asked how he prepared for the Tar Wars presentation, he stated that he reviewed the presentation material. While it appeared that the medical student was thoughtful in his preparation, it is unclear if MAFP is aware that some subset of medical students from William Carey may be conducting Tar Wars without formal training.

The medical students were complimentary of the content included in Tar Wars, particularly the information about vaping and marijuana use,

I think that the addition recently of the issues with, from what I remember, there's new additions that include info about marijuana, which I think is very useful cause that's also kind of an issue alongside the vaping issue where, um people kind of assume that, because it's not tobacco that it's not dangerous to smoke it.

Statewide Partners

When asked if they learned anything new about tobacco use as a result of participating in Tar Wars, one medical student highlighted the value of learning various tobacco use statistics. Another student reported their surprise in learning how old cigarette advertising techniques are being re-used to market vaping and other alternative tobacco products,

I didn't realize how similar advertising was between, you know, the old market of advertising I guess Camel cigarettes, Marlboro, or anything like that and the new market of advertising Blue or the Blue e-cigarette and things like that. I also, I guess didn't realize how. So, I knew vaping was a big issue. And I knew that, obviously, cigarettes and smokeless tobacco were a big issue. I wasn't really aware of some of the issues like hookah and those types of methods of smoking...I was under the impression for a long time that hookah was water vapor and so I didn't know that it involved so much smoke inhalation. So, that was actually a little bit of an eye opener for me.

With the exception of one medical student who helped create a video for schools that were not allowing guest speakers due to COVID-19 restrictions, each student presented to at least one elementary school class in person. Although designed for 4th and 5th grade students, one medical student also reported presenting Tar Wars to 8th, 9th, and 10th graders. It is unclear if there are strict restrictions with regard to grade level, MAFP should be made aware that this is occurring.

The medical students described the children as incredibly engaged: "definitely. I actually had a lot of fun. The kids had lots of questions were ready to participate with the activities that we had planned. So, it went really well." But the students also noted the need for medical students to be prepared to keep the elementary students on task,

The things that I've mostly like found were when we, when we talked to our students, they had a...They were very energetic which is great. They're very excited to learn which is really great. Um, what we needed to make sure to do was engage the students without getting off the rails, you know, without kind of like getting off on tangents.

To close out the interview, the medical students were asked whether they planned to incorporate the information they learned from Tar Wars once they become practicing physicians. Each stated they planned to continue sharing information and carrying the message of the importance of a tobacco-free lifestyle in their individual practice.

- I think as DOs were taught, you know, to look at things holistically and to try to educate the patients and help them and have an open discussion and so I think the things presented in this, in Tar Wars, are important things for us to discuss with our patients.
- I beat [patients] up when it comes to cigarettes. When they come in and they smoke, I tell them, "I am fixing to beat you up on this." ...and so with the vaping incorporated, you know, if I have a patient say "Well you know I stopped smoking. Now I vape." So, now I have the information to beat them up on that to say, "Hey, you know, I'm glad you quit smoking, but, you know, this, this, this and this."

Statewide Partners

- I definitely would try to incorporate, like, my communication skills that developed through Tar Wars with how I communicate with patients. I mean, one of the biggest questions that we tend to make sure to ask whenever we see a patient is ask about, um, tobacco use and that's smoking in general. We want to make sure that we ask that question because it's such a big risk factor for so many diseases. And I would like to continue to have that conversation with patients in a way that makes sure to communicate about the dangers of smoking. And also, um, kind of give that back and forth talk because at the end of the day, like Tar Wars...just like Tar Wars, communicating with patients is not a lecture. It's instead one of those things that is a give and take. It's a conversation. And, um, it really relies on the physician making sure to have the patient involved in decision making and have the patient involved in devising a plan. And I think is a great 1st step to that. You get a chance to finally or to kind of interact with patients and Um, with most of being kids at this age...at this stage, but still, um really kind of see, what did they understand. What's their understanding of this issue? And then how can we come up with a solution together? How can we make this something that we are both on board with? Because otherwise, communication...communicating through a lecture is not going to do anything.

The University of Southern Mississippi's Institute for Disability Studies

Tables detailing wellness events, chit chat videos, and website analytics are presented below.

IDS by the Numbers			
Activity Type	Events	Reach	Distribution
Annual Wellness Events	1	27	108
Survey Listserv	2	-	381
Newsletters	3	-	364
Disseminate Edu/Incentives	15	41	4,401
Total	21	68	5,254

IDS: Communication		
Social Media	Posts	Audience
Leadership /TCS Websites	703	1,258
Facebook	72	121,134
ChitChat w Taylor	1	19
TIPS Campaign	45	220
Paid PSAs	2	114,111
YouTube Videos	5	91
Total	828	236,833

Statewide Partners

The University of Southern Mississippi's Institute for Disability Studies conducted a survey to better understand the needs of their listserv members. Surveys were fielded twice, once in October and once in June. Because respondents were not tracked, changes in percentages do not reflect changes in use or member characteristics.

Material Utilization	Time 1	Time 2
1. Which of our materials have you seen?		
TCS News newsletters	12%	22%
Posters	32%	5%
Public Service Announcements (YouTube)	4%	5%
Television PSAs	14%	3%
Chit Chat Thursday with Taylor	0%	2%
IDS Website	4%	5%
MS Leadership Academy Website	0%	3%
Brochures	21%	3%
Backpack	0%	5%
Umbrella	0%	6%
Sorry, Haven't seen a thing	14%	43%
2. How did you learn about the materials?		
Email	10%	38%
Newsletter	2%	5%
Conference display	18%	3%
Facebook	1%	2%
This is the first I've heard of the materials	2%	4%
3. How have you used the materials?		
Shared social media	n/a	1%
Shared internet links	n/a	1%
Printed and handed out paper materials	n/a	5%
Emailed electronic materials	n/a	8%
Sorry, Haven't shared them yet	n/a	35%

Statewide Partners

Member Characteristics	Time 1	Time 2
4. Check all that apply.		
I smoke cigarettes	17%	7%
I don't use tobacco	65%	89%
I use smokeless tobacco	9%	0%
I vape	4%	4%
I use tobacco in another form	4%	0%
5. If you are a former tobacco user, why did you quit?		
Health concerns	n/a	83.3%
Expensive	n/a	8.3%
Tired of having to go outside	n/a	8.3%
6. If you are a current tobacco user, what made you start?		
Peer pressure	39%	63%
Helped with nerves	39%	25%
Curbed my appetite	0%	13%
Other	23%	0%
7. Are you currently, or have you been, exposed to secondhand smoke in your home?		
Yes	53%	41%
8. Would you want your children or parents to start using tobacco?		
No	97.1%	97.8%
9. Does anyone in your household use tobacco?		
No	85.3%	74.0%
10. Do you have a diagnosed disability?		
No	85.3%	94.0%
11. Does anyone in your household have a diagnosed disability?		
Yes	21%	17.4%

The Mississippi Rural Health Association

The Mississippi Rural Health Association engaged in trainings; presentations developed articles, newsletters, and posters; and communication activities.

Rural Health by the Numbers			
Activity Type	Events	Reach	Distribution
Rural Clinic Training	6	49	0
Design/Disseminate Poster	1	0	0
Conference Presentation	1	40	40
Articles & Newsletters	11	0	20,050
Other	2	44	0
Total	21	89	20,090

Rural Health: Communication		
Social Media	Posts	Audience
Facebook	4	10,750
Website	7	n/a
Videos	7	91
TIPS Campaign	2	2,020
Total	20	12,861

Outcome Evaluation

In October 2020, OTC submitted an evaluation plan to the CDC outlining their approach for evaluating program performance in the following areas: statewide disparities, community-based disparities, prevention of youth initiation, and mass-reach health communication.

Statewide Requirement

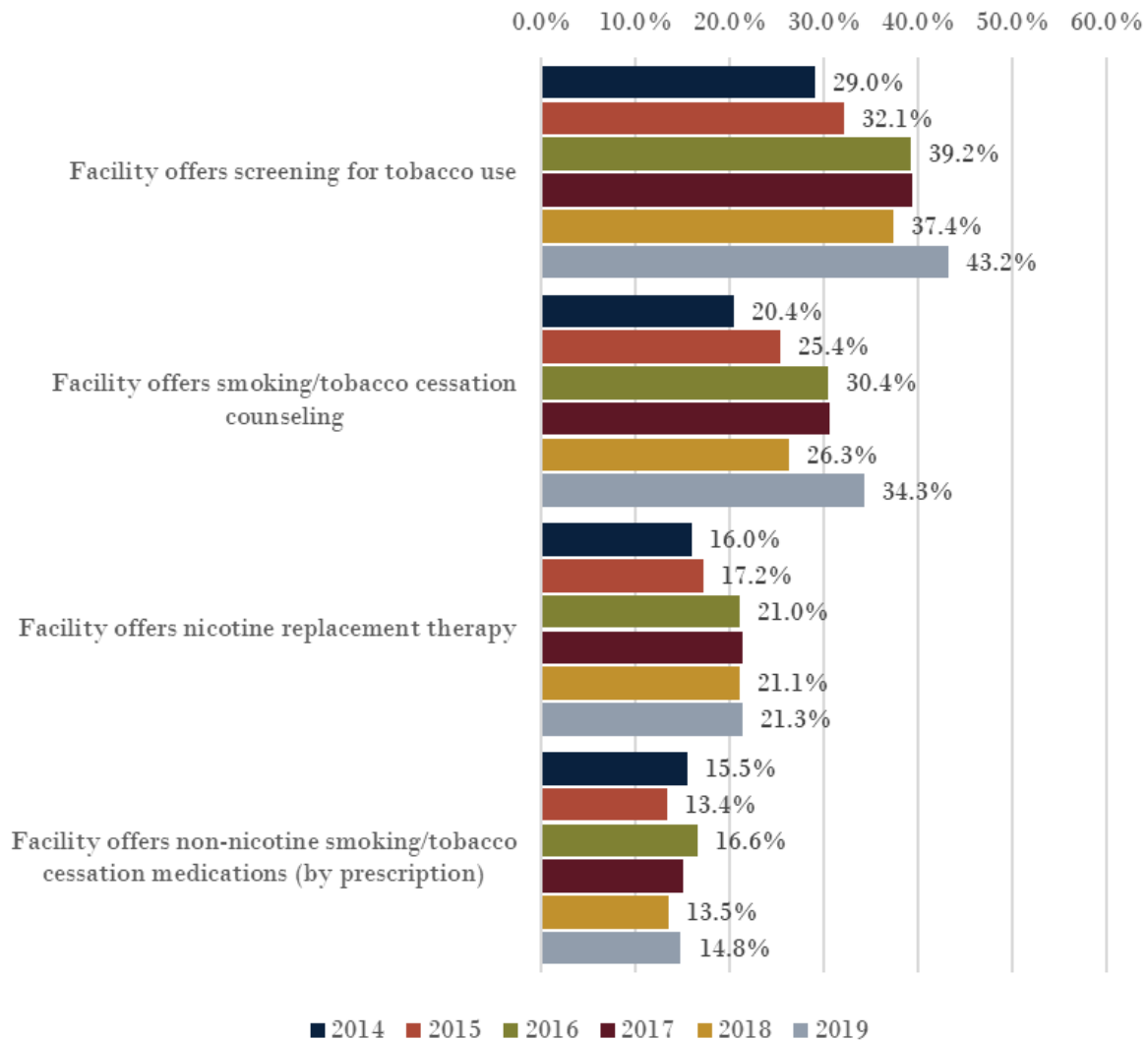
For this component, OTC will focus specifically on increasing tobacco-free policies in behavioral health (BH) treatment facilities and campuses. The Mississippi Public Health Institute will serve as the lead grantee responsible for collecting data on indicators such as the proportion of BH treatment facilities with 100% tobacco-free policies, the proportion of BH treatment facilities that have implemented changes to support cessation, the proportion who have been screened for tobacco use, etc. to gauge the impact on individual tobacco use behaviors.

Some of these key indicators are available through the National Mental Health Services Survey. Specifically, data are available regarding tobacco use screening and the availability of cessation counseling, nicotine replacement therapy, and non-nicotine cessation medications. With the exception of the availability of non-nicotine cessation medications, there has been an improvement of cessation screening and services between 2014 and 2019 among reporting facilities in Mississippi.



Outcome Evaluation

National Mental Health Services Survey, 2014-2019

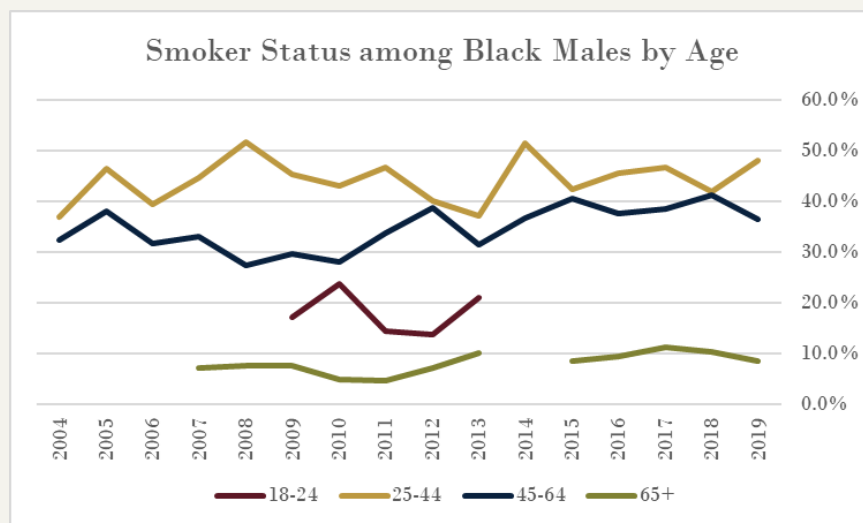
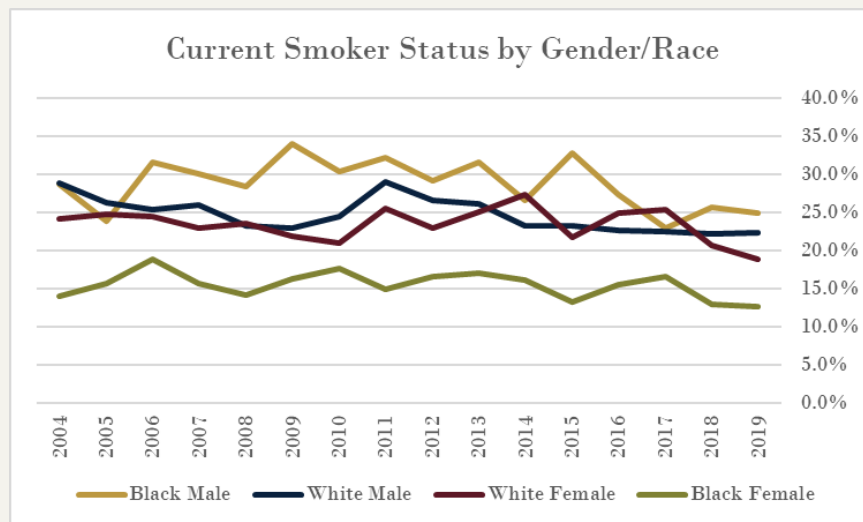


Outcome Evaluation

Community-Based Requirement

For this component, OTC will focus on decreasing disparities in the use of cessation treatments among populations experiencing tobacco-related disparities in a targeted community. Several datasets (e.g., BRFSS, MS Social Climate Survey) will be utilized to measure indicators related to tobacco screening, advisement to quit by health care professionals, etc. to gauge the impact on individual tobacco use behaviors.

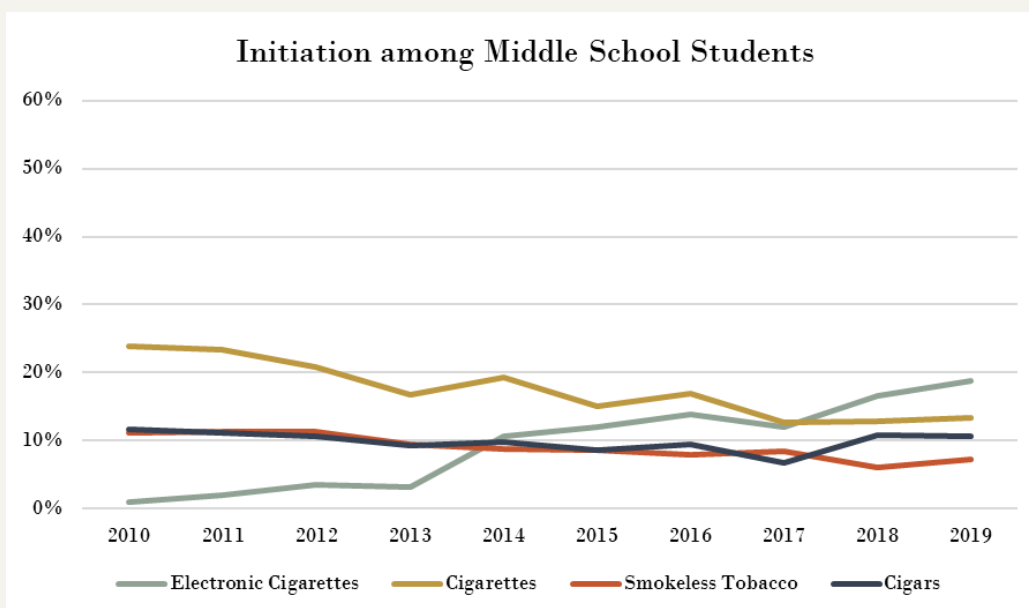
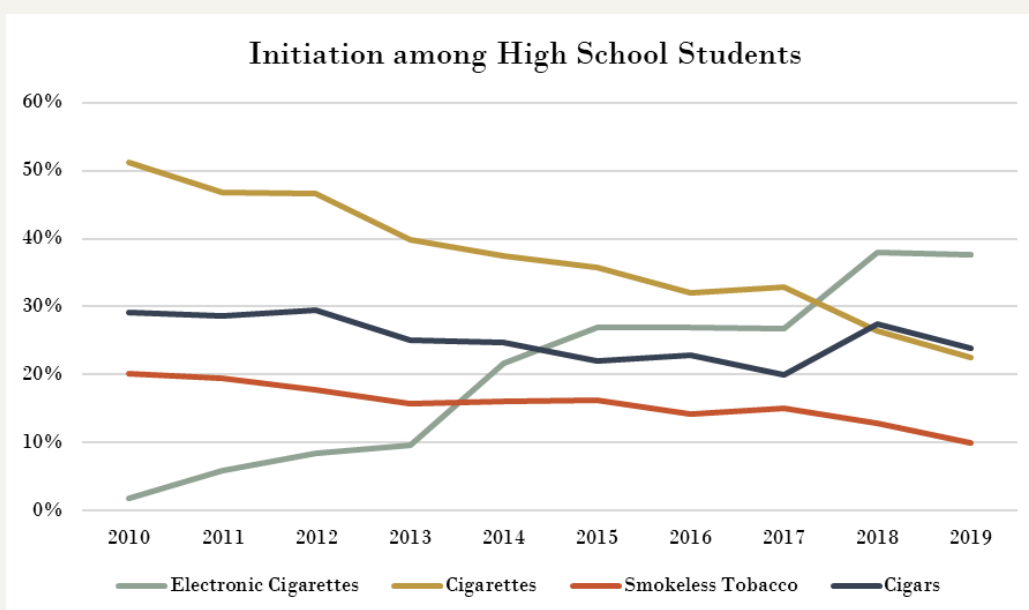
OTC grantee the Institute for the Advancement of Minority Health will carry out efforts for the community-based requirement, focusing on reducing prevalence rates among Black males in the Delta River region of the state. In eleven of the past fifteen years, Black males have had the highest proportion of individuals who identified as current smokers (Behavioral Risk Factor Surveillance System Web-Enabled Analysis Tool, 2021). Within this population, the largest proportion of current smokers resides in the 25-44 age group.



Outcome Evaluation

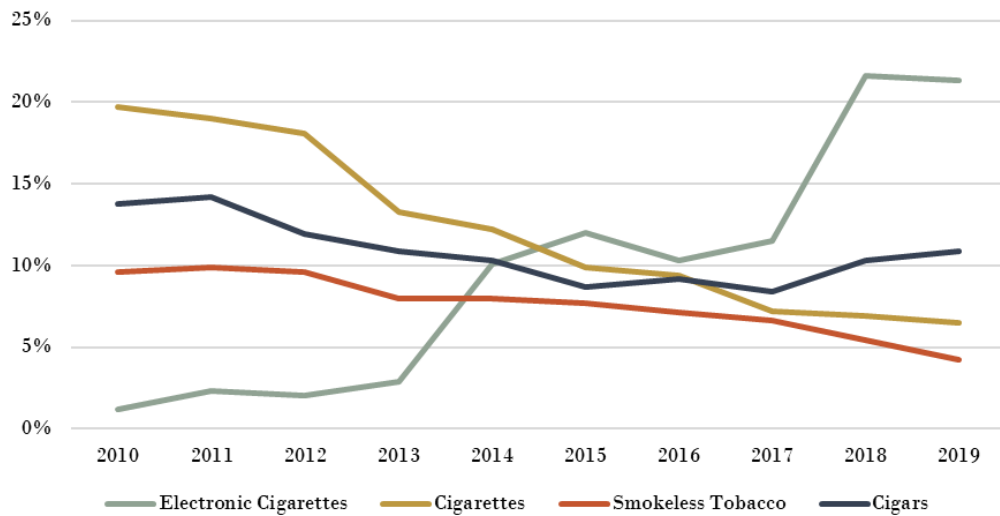
Policy/Health Systems Change Requirement

For this component, OTC will focus on restricting the location, number, type, or density of tobacco retailers through zoning, licensing requirements, or a stand-alone law. The MTFCs and youth programming grantees will combine their efforts to assess school vaping policies and conduct tobacco retailer training on tobacco and vaping laws and regulations. The long-term outcomes of these efforts are reduced youth initiation and prevalence rates, with an emphasis on electronic cigarettes. The following charts, display initiation and prevalence rates among middle and high school students (Mississippi Tobacco Data, 2020).

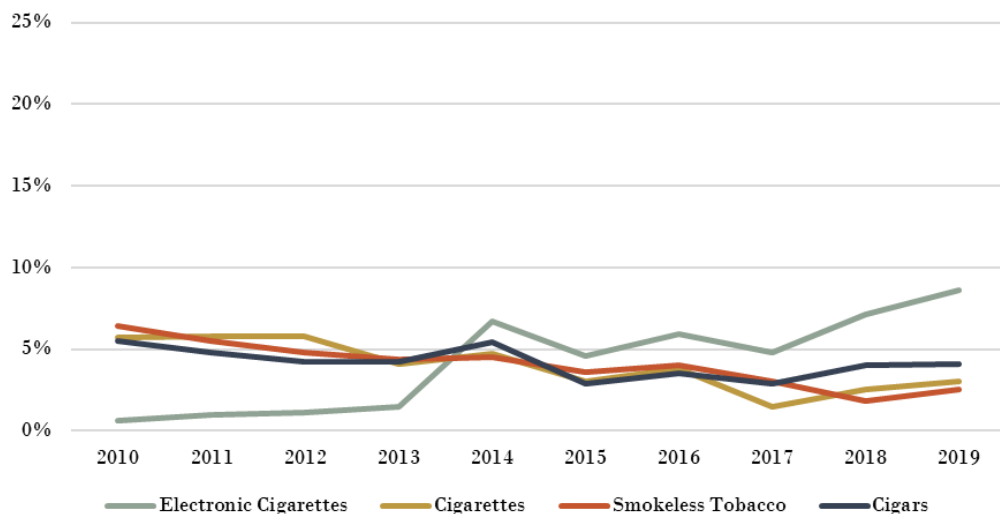


Outcome Evaluation

Prevalence Rates among High School Students



Prevalence Rates among Middle School Students



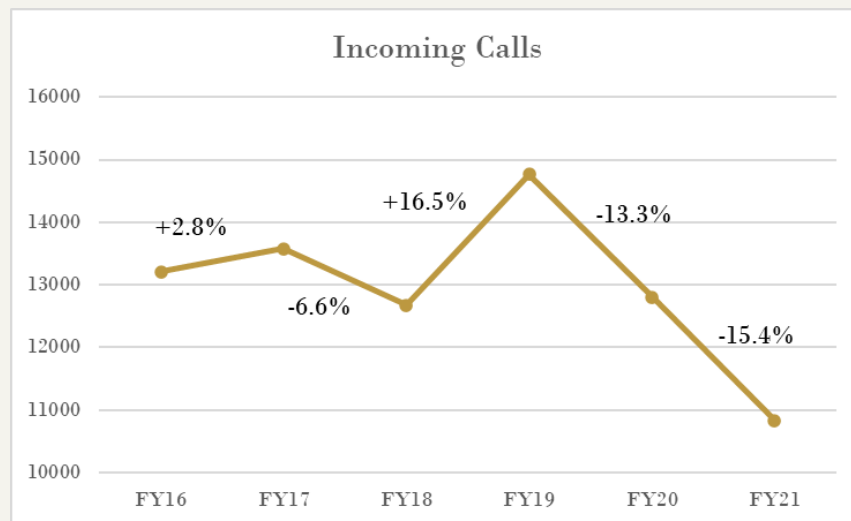
Outcome Evaluation

Mass-Reach Health Communications

There are two elements to this particular component OTC wants to address:

1. Implementing and expanding delivery of tobacco use and dependence treatment services, including quitline and digital-based technologies, such as text and/or web services
2. Implementing evidence-based paid and earned mass-reach health communication interventions to increase cessation and/or promote the quitline

Over the last six fiscal years, the number of calls received by the Quitline has varied widely. At its highest peak in FY19, the Quitline received 14,769 calls. The lowest number of calls occurred in FY21 (N=10,832). The widely fluctuating figures and lack of a clear upward or downward trend indicates the need to gather additional information to determine whether varying contextual factors (e.g. changes in outreach strategies, employee turnover, etc.) may be correlated.



Recommendations

- Continue to divide SOW deliverables due dates so progress can be measured throughout the year.
- Continue MTFC mentorship on process evaluation indicators as staff departures continue to be an issue.
- Encourage OTC branch directors to monitor grantees consistently and provide feedback to grantees during quarterly reviews to improve TRAPS reporting.
- Request website analytics from Enrich MS grantee.
- Request analytics from CATCH for newsletters and the virtual field day.
- Request any survey data from grantees to be entered into TRAPS as a raw data file.
- If SOW requires a pre/post-testing survey, insist grantee receives training from MSU evaluators to ensure valid methodology.
- OTC leadership should provide both branch directors and grantees the overall vision by reiterating the connections between individual program activities, theory of change models, and the state's overall evaluation plan.



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