### The Wyoming Department of Health Mental Health and Substance Abuse Services Division Report to the Joint Labor, Health, and Social Services Interim Committee

Report on Tobacco Settlement Funds Tobacco Prevention and Control Program

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#### 1. General Comments/Overview/Executive Summary

The Wyoming Department of Health (WDH) supports community and statewide science-based and experience-based practices to protect residents and visitors from environmental tobacco smoke in areas where children are exposed, indoor workplaces and public areas, and all government facilities and vehicles; reduce youth tobacco use rates; increase tobacco quit attempts and successes; and identify and eliminate the disparities experienced by population groups relative to tobacco use and its effects.

This report summarizes accomplishments for State Fiscal Year 2007 and describes current projects. The WDH's Mental Health and Substance Abuse Services Division (MHSASD) utilizes the Tobacco Settlement Funds to enhance Tobacco-Free Wyoming Community Prevention contracts in nineteen counties and the Wind River Indian Reservation; maintenance of the "Through With Chew" program to address spit tobacco use; to provide public information via media and social marketing; and to reduce the rate of illegal tobacco sales to children. State General Funds are utilized to provide tobacco cessation services through the Wyoming Quit Tobacco Program (WQTP). The WQTP consists of QuitLine telephone-based counseling services, QuitNet web-based counseling services, and nicotine replacement therapy reimbursement funded by the Wyoming Quit Tobacco Program. Data and reports are available at http://tobaccofreewyoming.net.

#### 2. Specific Requirements of the Statute

Wyoming State Statutes 9-4-1203 and 1204 require the WDH to improve the health of Wyoming's residents, including prevention of tobacco use through school and community-based programs. The statutes require a science-based approach to developing comprehensive tobacco prevention, cessation, and treatment programs and direct cost-effective reduction of tobacco-related problems based on appropriated funds. The statutes also require collaboration with other efforts of the MHSASD. The Centers for Disease Control and Prevention (CDC) annual grant prioritizes community environmental change, evaluation, and program administration.

The identified programmatic activities for funding are: 1) community programs; 2) youth leadership and involvement; 3) enforcement of laws related illegal purchase of tobacco products by minors; 4) statewide efforts that fund specific, focused intervention strategies; 5) public education and media; 6) cessation efforts; 7) coordination with tobacco-related disease programs; 8) administration, management, and collaboration; 9) accountability, evaluation, and data collection; and 10) policies.

#### 3. Impact/Consequences/and Outcomes

Tobacco is the leading cause of preventable death and chronic disease in the United States, leading to more than 676 Wyoming deaths annually and contributing to more than \$106 million in annual direct healthcare costs. Secondhand tobacco smoke is a cause of illness and premature death. States with comprehensive tobacco prevention and control programs have seen significant reductions in tobacco use.

A. Tobacco-Free Wyoming Community Programs (TFWC): Community-based prevention programs, operating in 19 counties and on the Wind River Indian Reservation, utilize an evidence-based planning process to prioritize actions. The TFWC programs work with volunteer networks to implement the following nationally recognized goals: eliminate exposure to environmental tobacco smoke, reduce tobacco initiation among youth, promote cessation programs, and address populations that suffer disparately from the health or economic effects from tobacco. The MHSASD blends settlement funds with CDC funds for the 2006-2007 TFWC allocations.

Beginning in July 2007, the MHSASD has contracted with Community Resource Center of Johnson County for the Wyoming Prevention Technical Assistance Consortium (WyPTAC) which provides technical assistance to community projects, contract and project monitoring, ensures project certification, and coordinates efforts statewide and trainings.

B. Coordinated Cessation Services Efforts. The following cessation programs are provided:

Wyoming Quit Tobacco Program (WQTP) expanded statewide during October 2005. The WQTP provides tobacco users access to free counseling services, as well as free or reduced price cessation medications. Beginning July 1, 2006, the WQTP was managed through a contract with the American Cancer Society (ACS). This contractor was selected via a competative request for proposal process. The project coordinates with local hospitals, health care providers, and pharmacies. Participants receive cessation counseling through the QuitLine (1-800-Quit-Now) or QuitNet (<a href="http://wy.quitnet.com">http://wy.quitnet.com</a>). Upon enrollment in cessation counseling services, clients will recieve a voucher from ACS for free or low-cost nicotine replacement therapy. As part of the enrollment and intake process, clients are asked questions that are used as a medical screening. For the WQTP, many additional people call/log-in to the services to receive information without formally enrolling.

As of June 30, 2007, more than 5,500 people have enrolled in the program. Of the 5,500 enrollees, 4,500 have recieved free or low-cost cessation medications, 57% of those receiving vouchers for free nicotine replacement therapy medications. During the past year, an average of more than 460 people have enrolled per month. Beginning in January 2007, enrollment jumped to an average of 581 per month. Medication costs are averaging about \$131 per client served. Surveys conducted by the Wyoming Survey and Analysis Center (WYSAC) found that nearly half of the enrollees were smokefree or tobacco-free six months post enrollment date. More than 75% of enrollees report that they have recommended the program to others. Over time, the rates will be analyzed to determine the separate components that contribute to quitting. While more than half of all smokers try to quit once or more during the year, studies have shown

that only 7% of the people who try to quit without assistance succeed in stopping for one year or longer.

C. In support of the MHSASD's youth access and enforcement efforts, the Wyoming Legislature amended W.S. 14-3-302 to allow for enforcement of the law prohibiting tobacco sales to minors. The Synar Amendment (Section 1926 of the United States Public Health Act) requires the State to enforce the State law prohibiting tobacco sales to minors. States which do not reach a "buy rate" of less than 20 percent through these inspections risk losing up to 40 percent of the Substance Abuse and Mental Health Services Administration (SAMHSA) Prevention and Treatment Block Grant funds.

The comprehensive approach resulted in the eighth year of positive results. Tobacco sales to minors fell from a 55% noncompliance rate in 1999 to less than a 10% non-compliance rate every year 2000 - 2007. Analysis of costs for the program showed that fewer funds than anticipated were required to meet these outcomes.

• 1996: 42%	• 1997: 28%	• 1998: 46%	• 1999: 55%
• 2000: 8.9%	• 2001: 9.4%	• 2002: 8.4%	• 2003: 8.0%
• 2004: 9.4%	• 2005: 6.9%	• 2006: 6.4%	• 2007: 6.8%

(Synar Compliance Study)

The program combines the following science-based approaches:

- 1) Synar Compliance Checks: The MHSASD contracts with the University of Wyoming Survey and Analysis Center (WYSAC) to establish statistical compliance data via random, unannounced inspections. This contract is the mechanism by which WYSAC is able validate the "buy rate." W.S. 14-3-302 requires law enforcement participation. Because of this, the MHSASD has contracted with the Wyoming Association of Sheriff's and Chiefs of Police (WASCOP) to form a partnership with WYSAC to gain local law enforcement escorts for these inspections.
- 2) Got I.D.?: This educational program mobilizes community support for not selling tobacco to kids. The Tobacco-Free Wyoming Community (TFWC) Programs develop adult and youth teams that visit stores in the area to inform the merchants about the Wyoming law. This effort is also necessary to maintain an accurate list of retailers that are accessible to minors.
- 3) "Got I.D.?" Packets: The TFWC programs and local law enforcement agencies that are conducting compliance inspections distribute Wyoming specific educational packets to nearly every youth accessible tobacco retailer in the state.

4) Law Enforcement Support: In partnership with WASCOP, grants were awarded to thirty law enforcement agencies. These agencies cover approximately 85% of Wyoming's population. The increase of citation driven compliance checks, involvement of police departments, and support from WASCOP are the most significant factors influencing Wyoming's low buy-rate. Following are the number of compliance checks conducted for the past five years with the enforcement compliance rates:

	Number of retailer's checked	Compliance rate
2003	339	85%
2004	618	88%
2005	754	85%
2006	760	89%
2007	1025	88%

D. Wyoming Through With Chew (WTWC) is a statewide campaign to promote awareness of the issues surrounding Wyoming's high spit tobacco use rate. WTWC monitored over fifty fair/rodeo/racing community events for tobacco sponsorship statewide and educated the public about the provisions of the Spit Tobacco Master Settlement Agreement. Included in this campaign is "Through With Chew Week," which takes place the third full week of February. Through Wyoming's leadership, this special week became a national phenomenon with over 26 states participating in February 2007. All twenty TFWC programs also participated by partnering with over forty local and statewide businesses, particularly the energy industry, by offering cessation resources to their employees. Over fifteen statewide healthcare provider organizations and the Wyoming Church Coalition endorsed this special week. The Adult Tobacco Survey, 2004-2006, shows an increase from 25.3% to 29% of chewers were asked if they used spit tobacco by healthcare providers. The Through With Chew Campaign has seen an increase in enrollment in the Wyoming Ouit Tobacco Program for smokeless tobacco quit attempts.

WTWC launched <a href="www.ThroughWithChew">www.ThroughWithChew</a>.com in January 2005 to serve as a resource for professionals and tobacco users. In 2006, 44,361 people visited the site. In January and February 2007 respectfully, the Through With Chew toolkit received 11,500 and 8,100 visits. Innovative materials and resources have been developed for American Indian populations for use on the Wind River Indian Reservation or any other American Indian community.

- E. Counteradvertising, Public Education, and Media: Four coordinated efforts are underway:
  - 1) Wyoming Quit Tobacco Program promotions: About one-fourth of people who enroll in these services heard about them via a media source. About 75% are referred by a healthcare professional or medical facility which is

up significantly from ten percent last year. The project is also promoted through partnerships with the Department of Corrections, the Department of Employment, the Medicaid Program, APS Services, Mountain-Pacific Health Quality, Wyoming Health Resources Network, and the Tobacco-Free Wyoming Communities. The Wyoming Adult Tobacco Survey found a significant increase in awareness among smokers that these Statesponsored cessation services are available (73% in 2002; 80.1% in 2004; 85% in 2006).

- The Wyoming Through With Chew program is promoted through media and community efforts. Wyoming's campaign is a national model in raising awareness about this issue. The WDH released four spit tobacco news articles and several newspaper advertisements including those directed towards rural populations. The Through With Chew contractor produces a quarterly newsletter available at <a href="https://www.throughwithchew.com">www.throughwithchew.com</a>.
- 3) Tobacco Free Wyoming is a public information and media campaign designed to share factual information about environmental tobacco smoke (ETS). The media campaign launched in January 2007 and is supported with web-based fact sheets and other research based information on tobaccofreewyoming.net. Additional social marketing information is available through the University of Wyoming's CARE office (WyoCARE).

The MHSASD's website—http://wdh.state.wy.us/mhsa/index.html—contains extensive information on this issue including a comprehensive list of 100% smokefree Wyoming restaurants. The Adult Tobacco Survey found significant increases in workplace policies that protect workers from exposure to secondhand smoke, increase in awareness of the smokefree workplace campaign, and increase in awareness of the health affects from secondhand smoke.

F. Evaluation and Surveillance: The University of Wyoming Survey and Analysis Center (WYSAC) issued several studies, evaluation publications, and issue briefs.

These reports are available at www.uwyo.edu/wysac/HealthEducation/Tobacco/.

#### 4. Statistics

Protect Residents from Secondhand Smoke Exposure

• Adults who work most of the time indoors who benefit from a smokefree policy at work. Wyoming Behavior Risk Factor Survelliance System (BRFSS)

• 1998: 72% • 1999: 76% • 2000: 79% • 2004: 78% • 2001: 77% • 2002: 81% • 2003: 78% • 2005: 84%

• 2006: 82%

Goal: Protect all workers from exposure to secondhand smoke.

Percentage of Wyoming restaurants that are 100% smokefree (WySAC)

• 2000: 45%

• 2002: 56%

• 2004: 68%

• 2006: 76%

Goal: Protect all workers and customers from exposure to secondhand smoke.

Percentage of BRFSS respondents who report that smoking is not allowed anywhere in the home (Wyoming BRFSS)

• 2001: 68.9% • 2002: 68.5% • 2003: 69.9%

• 2004: 71.9%

• 2006: 77.8%

Goal: Protect all Wyoming citizens from exposure to secondhand smoke

Reduce Youth Tobacco Use Rates

 Percentage of Wyoming High School Students Who Used Spit Tobacco During the Past Month – Wyoming Youth Risk Behavior Survey (YRBS)

• 1995: 25.1% • 1997: 22.5%

• 1999: 17.7%

• 2001: 18.1% • 2003: 13.3%

• 2005: 14.3%

Goal: Reduce to the nation's lowest

 Percentage of Wyoming High School Students Who Smoked Cigarettes During the Past Month – Wyoming YRBS

• 1995: 39.5%

• 1997: 37.5%

• 1999: 35.2%

• 2001: 28.4% • 2003: 26% • 2005: 22.5%

Goal: Reduce to the nation's lowest

Increase the Percentage of Adult and Youth Tobacco Users Who Attempt to Quit (and are successful through provided services)

 Percentage of Wyoming Adult Everyday Smokers Who Quit Smoking for One Day or Longer in the Past 12 Months – Wyoming BRFSS

• 1999: 48%

• 2001: 42.4% • 2002: 53.7% • 2003: 47.1%

• 2004: 48.5% • 2005: 52%

• 2006: 54%

Goal: 75% (HP 2010 Objective)

Percentage of Wyoming High School Students Who were Current Smokers and Tried to Quit Smoking During the Past 12 Months – Wyoming YRBS

• 2001: 58.2%

• 2003: 57.8%

• 2005: 57.4%

Goal: Increase to 75%.

#### Other Wyoming Information

Current Adult Smoking Rate (BRFSS)

• 2000: 23.8%

• 2001: 22.2%

• 2002: 23.7%

• 2003: 24.6%

• 2004: 21.7% • 2005: 16.3% • 2006: 16.4%

Goal: 12% (HP 2010 Objective)

• Current Adult Male Spit Tobacco Use Rate (BRFSS)

• 2000: 14.3% • 2001: 16% • 2002: 16.8% • 2003: 14.9%

• 2004: 17.7% • 2005: 14.8% • 2006: 17%

Goal: 7% (national average)

#### 5. Recommendations

A. The Mental Health and Substance Abuse Services Division (MHSASD), through its contracts with local communities and other contractors, is requiring the following research-based strategies for tobacco prevention and reducing tobacco use:

- 1. Increase number of smokefree workplaces
- 2. Increase education about harms of exposure to ETS through media resources
- 3. Establish community and school-based tobacco prevention policies, processes, and programs
- 4. Promote and provide accessible cessation assistance
- 5. Address populations that are affected more greatly, such as with the high spit tobacco use
- 6. Enforce reduced youth access through multiple activities.

Research supports integration of these individual elements into a comprehensive approach, which is the strategy Wyoming is taking with community-level tobacco programs and community involvement.

- B. The MHSASD will provide additional technical assistance for Tobacco-Free Wyoming Communities (TFWC) on the most effective methods for reducing tobacco use. Future funding allocations will be determined using historical trends and experience. The award amount will continue to be based on the number of full time staff needed to accomplish required activities and the infrastructure costs needed to complete tasks set forth in the TFWC grants applications. In contracting with the Wyoming Prevention Technical Assistance Consortium (WyPTAC), the MHSASD intends to maximize national and statewide resources, ensure compliance with standards, and ensure success in reaching program goals.
- C. The MHSASD is committed to continue to analyze the cessation service programs to best determine ways to recruit enrollees and to help people quit tobacco. Continuation of the Wyoming Quit Tobacco Program statewide is a cost effective strategy to reach out to residents of our frontier state. Services will be developed to improve the referral process and data sharing. We see a need to expand technical assistance to increase the percentage of tobacco users who are referred by a health care provider and will develop this program during FY 2008.

Continuation of promotion via newspapers, radio, and consideration of television promotions is integral. Continued coordination with Medicaid, as well as securing staff to manage these contracts, will ensure achievement of program outcomes.

- D. The *Tobacco Free Wyoming* social marketing campaign will be strengthened by utilizing Wyoming data and information. Continuing technical assistance efforts will address this leading cause of preventable disease and death. The MHSASD will continue to conduct a study of the health and economic impact from establishing 100% smokefree workplaces and of the strategies that would best facilitate a statewide initiative to protect residents from environmental tobacco smoke (ETS).
- E. Chew tobacco specific information, education, and media will be provided for the public and communities. The MHSASD will continue to provide technical assistance about policies, practices, and programs that will effectively reduce spit tobacco initiation and increase quit rates statewide. Staffing to lead this effort will continue through current personnel.
- F. Local police departments will remain vital to enforce the Wyoming tobacco youth access laws. In an effort to reduce costs, the MHSASD will continue to investigate options for modifying W.S. 14-3-307 to allow the WDH to conduct the Synar Compliance Checks without police escort. Increased staff to coordinate enforcement efforts, youth and school efforts will increase success in these efforts.
- G. The MHSASD will continue to conduct surveys and evaluation of the comprehensive tobacco prevention and control program to ensure that the program utilizes a science and experience based approach, gains the intended results, and is cost-effective.
- H. Continued partnerships with chronic disease programs, other state agencies, and supporting organizations will advance policies, practices, and programs to reduce the health burdens from tobacco and secondhand smoke.

#### 6. Summation and Conclusions

During the past few years, significant changes in Wyoming tobacco trends have occurred. Tobacco-Free Wyoming Community programs have enabled the MHSASD to maintain statewide partnerships with local communities. Wyoming now has more smokefree environments and youth tobacco use has declined. The WDH reports that less than 10% of Wyoming retailers are selling tobacco to minors. Cessation services are more available for Wyoming residents through the Wyoming Quit Tobacco Program because of statewide Quitline and Quitnet services. Overall, cigarette consumption decreased and excise tax revenue increased following the cigarette tax increase and there are more promotional and public education projects.

# 7. Appendices

Appendix A

Tobacco Settlement Trust Funds

# Agency Name: Mental Health and Substance Abuse Services

SFY 2007 Expenditures Tobacco Settlement Trust Funds

Salary		<b>Amount</b> \$131,837
Administrative Support Costs	Travel, Office Supplies, Equipment, Training Subtotal	\$41,309 <b>\$173,146</b>

## **Community Level Funding**

County	Service Type	Amount	
Campbell	Tobacco Free WY Communities	\$	21,668
Carbon	Tobacco Free WY Communities	\$	48,753
Crook	Tobacco Free WY Communities	\$	45,837
Hot Springs	Tobacco Free WY Communities	\$	45,837
Laramie	Tobacco Free WY Communities	\$	100,837
Natrona	Tobacco Free WY Communities	\$	100,837
Park	Tobacco Free WY Communities	\$	59,587
Platte	Tobacco Free WY Communities	\$	59,587
Sheridan	Tobacco Free WY Communities	\$	59,587
Sweetwater	Tobacco Free WY Communities	\$	59,587
Teton	Tobacco Free WY Communities	\$	59,857
Uinta	Tobacco Free WY Communities	\$	62,613
Washakie	Tobacco Free WY Communities	\$	59,587
Wind River	Tobacco Free WY Communities	\$	59,857
Statewide	Threw With Chew	\$	375,000
Statewide	SYNAR Compliance	\$	150,937
	Subtotal	\$	1.369.968

#### **Professional Contractual Services**

Program	Service Type	Amount		
Tobacco	Evaluation		\$	354,724
	Social Marketing		\$	699,788
	Consulting/TA		\$	595,751
	Quit Services		\$	88,830
		Subtotal	\$	1,739,093
	Subtotal for FY07		\$	3,282,207
Biennium 2007-2008 Appropriations			\$	8,251,019
Balance Appro	opriations for FY 2007-2008		\$	4.968.812

Appendix B

Tobacco Use: Youth and Adult Current Smokers





