Introduction

Local health departments (LHDs) play a crucial role in strengthening tobacco control efforts in areas of the U.S. with the highest tobacco use prevalence within rural America. According to the U.S. Census, the total population of rural counties stood at 46.2 million in 2015, representing 15% of U.S. residents living in 72% of the country’s land area. Rural populations report more health-related disparities than those in urban areas, including poorer health, more health risk behaviors, and less access to health resources.

To this end, NACCHO’s tobacco program works with LHDs throughout the U.S. to build capacity for local-level tobacco prevention and control. Because of the influential contribution of rural LHDs, NACCHO conducted an environmental scan to better understand the facilitators, challenges, lessons learned, and resource needs of these health departments that are engaged in this work.

To further assist LHDs in their implementation of rural tobacco prevention and cessation programs, NACCHO asked three LHD survey respondents to share a more in-depth overview of their innovative projects. The following three LHD stories highlight successes and challenges in areas including rural health, sustainability, policy development, media campaigns, and more.

Livingston County Department of Health, New York

Livingston County is a rural county located in western New York. The geography of Livingston County has influenced agriculture in the area, creating a substantial migrant labor force. The population of Livingston County is 63,227, per the 2018 Census. The population is widely scattered over the 631.76 square miles, with an average population density of approximately 103.5 persons per square mile. The population has been slightly declining; however, the most populous communities are Dansville, Geneseo, and Mt. Morris. The Livingston County Department of Health works with the community to assure the availability and accessibility of health services, to promote healthy living, and to ensure a safe environment for today and tomorrow.

The Livingston County Department of Health, Noyes Health (the local hospital) and community partners identified the following prevention agenda priorities: prevention of chronic diseases, promoting a healthy and safe environment, promoting mental health, and preventing substance abuse. Tobacco use is an ongoing issue for Livingston County and smoking rates among adults continue to be higher than the state and national average, 16.9 percent. (See the dashboard at https://on.ny.gov/2LP8rhg.)

Project Overview

Chronic diseases are leading causes of death, disability and rising healthcare costs throughout New York State. Specifically, they account for more than 60 percent of all deaths and affect the quality of life for millions of New Yorkers.
Chronic diseases are also preventable. Three modifiable risk behaviors – unhealthy nutrition, lack of physical activity, and tobacco use – are largely responsible for the incidence, severity, and adverse outcomes of chronic disease. For tobacco use, we know that many adolescents try their first cigarette by the age of 13. In addition, the primary source for tobacco products are their 18-20 year old peers. Smoking has also had a detrimental impact on mental health in adolescents. Brain development continues through adulthood, making young people highly susceptible to nicotine addiction. Interventions such as raising the age for purchasing alcohol, seatbelts, and vaccinations prove that public health laws work. Massachusetts, Chicago, and California have decreased smoking rates by enhancing public health laws. Passing the Tobacco 21 (T21) law would reduce youth tobacco use and save lives. Per Institute of Medicine, “It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”

Solution

As detailed in the Community Health Improvement Plan (CHIP), strategies to address chronic diseases include evidence-based activities such as Stanford approved curriculums, and policy/practice implementation to include working with schools to strengthen local school wellness policies, and collaborating with worksites to implement health policies. Looking at the regulatory aspects, the success of the indoor air act, as well as the outdoor air law, we realized additional work must be done. The regulatory aspect of Tobacco 21 is the implementation of a county law. This law would raise the minimum age of sale for tobacco products from 18 to 21, thus limiting the availability of nicotine and tobacco among youth. To do this, we collaborated with NYSACHO to learn about T21 laws. We also conducted outreach to garner public support. From there, we presented our findings with local data to our Board of Health. Our Board of Health was supportive and recommended pursuing approval from the Board of Supervisors. During this time, our environmental health team partnered with our county attorney to draft local legislation. We presented to our home committee, which asked for additional data. Supplementary data was given to the home committee and we continue to advocate for a full Board of Supervisors vote.

Results

The CHIP Leadership Team meets a minimum of two times per year to review updated data and progress on the CHIP, as well as to identify gaps. The Chronic Disease Committee meets a minimum of nine times per year. The agenda for the Chronic Disease Committee meetings is focused on tracking progress, identifying barriers, strategizing how to overcome barriers, and measuring progress. Health in All Policies, which includes tobacco issues, remains a focus. Four chronic disease self-management classes were held in Wayland, Dansville, Nunda, and York in 2016; 49 participants registered and 36 completed the classes. Living Healthy with Chronic Pain was the newest program added to align with current Living Healthy classes.

Tobacco 21 has had some success. Every Board of Health member has voted for and advocated for this law to move forward at a county wide level. Ongoing education advocacy efforts and data are provided to ensure that the governing bodies are making informed decisions and we
continue to have T21 as a regular agenda item. We use personal as well as professional connections to move our initiative forward. This includes diversified partners in the small business community, as well as colleagues from other departments, friends, and family.

Lessons Learned

One lesson learned included not only focusing on the regulatory impact and cessation services, as we also need to be mindful of the minimal economic impact that tobacco sales would have if the Tobacco 21 law was passed. Recognizing that several of our legislators are in the economic industry or own small businesses, it is important that we share the impact from each lens: medical, cultural, regulatory, and economic. Developing key messages is also important. Many state, “if my child can fight in the military, they should be able to smoke.” It is important to share consistent key messages through education, such as “the military is reducing access to tobacco.” Another lesson learned is that even if we can’t adopt a county-wide law, we can still have impact by passing individual municipality ordinances. This proved to be very successful in our social host ordinance. Although it did not pass county-wide, it did pass in the village of Geneseo, which is where our largest college is located. This was a great public health success.
Three Rivers District Health Department

Three Rivers District Health Department (TRDHD) is a collaboration of four rural counties in Kentucky: Carroll, Gallatin, Owen, and Pendleton, created in 1975. With a population of approximately 45,122, the residents are primarily Caucasian with a per capita income of $22,033. The actual service area covers 861.4 square miles, which is large, considering the population that resides in each county.

Three Rivers District Health Department offers programs and services aligned with the Public Health Foundational Capabilities. TRDHD was accredited in the first cohort of health departments by the Public Health Accreditation Board in February 2013.

Our Tobacco Cessation and Prevention activities include:

- Freedom from Smoking Cessation Classes;
- Quit Now Kentucky Cessation Referrals. TRDHD obtained a grant to provide up to eight weeks of free nicotine replacement products for any resident living or working in one of the counties served;
- Three of the four school districts within Three Rivers District Health Department have comprehensive tobacco-free policies in place; and
- Each county’s health and safety partnerships continue to advocate for indoor smoke-free policies for all public places and workplaces.

Gallatin County is participating in the BUILD Health Challenge to reduce the adult smoking rate in Gallatin County. The project is detailed below.

Project Overview

Kentucky ranks amongst the nation’s highest for adults who smoke. According to the Truth Initiative, in 2015, the prevalence of cigarette smoking among adults in Kentucky was 26.0%. Nationally, the prevalence of cigarette smoking among adults was 17.5%.

Gallatin County has a higher smoking rate than both the state and the nation. Thanks to the tobacco industry’s targeted marketing efforts, lower income and less educated populations are particularly burdened by tobacco use; low income people smoke more, suffer more, spend more, and die from tobacco use. Through market research and aggressive promotions, the industry has successfully penetrated these communities, and the industry’s “investment” in these communities has had a destructive impact. Adverse Childhood Experiences (ACEs) can be considered early health determinants of adult smoking.

Three Rivers District Health Department partnered with the Northern Kentucky Health Department, St. Elizabeth Healthcare, Northern Kentucky Regional Alliance, and Center for Great Neighborhoods to reduce the adult smoking rates in the city of Covington and Gallatin County, taking a rural and urban approach to combat this health concern. This partnership was selected and funded through a coalition of 12 funding organizations to participate in the BUILD Health Challenge. BUILD stands for Bold, Upstream, Integrated, Local and Data driven.
“Quit for Good” Community Grants

Seeking Creative Ideas to Reduce & Prevent Tobacco Use in Gallatin County

We are offering community members $250 - $500 to experiment with creative ideas that reduce and prevent tobacco usage in Gallatin County. Do you have a creative idea to help others quit smoking? We want to support you!

Contact Dianne Coleman at The Three Rivers District Health Department at (859) 567-2844 or DianneM.Coleman@ky.gov
For more information or to apply, visit https://tinyurl.com/GCsmokefree

HELP GALLATIN COUNTY QUIT FOR GOOD!
Solution

The Quit for Good project’s goal is to reduce the rate of smokers in Gallatin County by 1% and 2% in Covington within a two-year period. This project will improve data-driven decisionmaking while softening residents’ perceptions about tobacco-free environments. The short-term impacts include healthier residents, increased use of data to plan and evaluate complex health programs, and collaboration across sectors to address our health problems in Northern Kentucky. The desired long-term impact is that fewer people will experience tobacco-related chronic diseases, respiratory complications, and cancer. Those exposed to secondhand smoke will have improved outcomes, and fewer children will start smoking.

The strategies used include: free two-week supply of nicotine replacement vouchers offered throughout Gallatin County redeemed at the local pharmacy; data sharing agreement with St. Elizabeth Healthcare to obtain agreed upon tobacco-related ICD-10 codes; heat maps providing street-level data for disease codes; voucher redemption; and domestic violence calls. Gallatin County community residents are offered the chance to apply and receive mini-grants for designing and implementing creative ways to reduce and prevent tobacco usage throughout Gallatin County (the same is offered in Covington).

Our partnership continues to work and advocate for county-wide indoor smoke-free policies.

Results

The project has exceeded our initial proposal in many ways. A data-sharing agreement was made with the community partners to track smoking status, secondhand smoke exposure, and smoking-related diseases, such as asthma, COPD, cardiac events, and lung cancer. Data related to domestic violence calls were tracked as part of evaluating ACEs. This data was then incorporated into a GIS mapping system to determine hotspots of high potential for tobacco use, helping to target interventions. The data will also help determine if the interventions are successful in increasing the number of non-smokers, decreasing secondhand tobacco exposure and reducing tobacco-related disease.

To support residents to quit smoking, a referral system for cessation products was implemented. The residents have access to two weeks of nicotine replacement patches, which are available locally. The goal for Gallatin County was 160 voucher redemptions, and to date, we have redeemed 230 vouchers.

Quit for Good community grants have been awarded to our local residents for their creative ideas to help others quit smoking. These include yoga classes as a method to relieve stress instead of smoking, cessation crave kits, and a walking group for those trying to quit. These activities are all free to the community.

Lessons Learned

It took longer than anticipated to obtain the data-sharing agreement, because of the review by the hospital’s legal team. This was groundbreaking for us. We were able to contract with a professional marketing company and that helped craft our theme, Quit for Good Gallatin County. Our postcard mailings informing the residents of the voucher program was very successful in how people learned about the program.

The mini community grants showed people that we were “investing” in them for their creative ideas to help others quit. I’m not sure why we did not get more applications for these grants and that was disappointing.

I think the collaboration with the partners we had for this project was important. It is great to reach out and work together whenever possible. Our health department did not have the GIS software to develop hot-spot maps but by working with another, we were able to. The other community partner had a proven track record with successful community mini grants and the project was able to replicate it for our goal of reducing tobacco use.

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Sequatchie County Health Department

Background

Sequatchie County Health Department (SCHD) is located in Dunlap, Tennessee, a small, rural community of around 14,000 citizens. The health department proudly serves individuals of all races, nationalities, ethnicities, sexes, origins, religions, and creeds. SCHD is involved in many anti-tobacco efforts. The Baby and Me Tobacco Free Program is for pregnant mothers and their partners who smoke, offering free diapers and wipes after quitting smoking. Anti-vaping efforts in the schools have received increased attention and will continue to be a priority for the county’s health educator. The annual Healthy Horizons event gave 4th grade students lessons on the dangers of tobacco. A booth with visual aids that focused on the negative health consequences of smoking, in addition to the impact secondhand smoking can have, was set up at the middle school’s carnival. Additionally, anti-vaping posters were hung in the schools, and announcements were made during February’s Tennessee Quit Week, both over the intercom and/or displayed on TV monitors for students to view. The health educator is also working to implement the Tennessee Teens Talk Tobacco (T4) Group in Sequatchie County High School for 2019-2020 school year. This group will focus on ENDS (electronic nicotine delivery system) as well as tobacco cessation and avoidance.
Project Overview

Although traditional tobacco usage (cigarettes/dip/chew/snuff/snus) continues in Sequatchie County, vaping has become the new fad. Many individuals who try to quit smoking resort to vaping and account for a high percentage of ENDS users. More alarming is the fact that children and adolescents across the valley are inundated with vaping ads on social media, radio advertisements, and peer pressure from friends. We have received reports from school administrators that students as young as fifth grade have been caught vaping. The youth are attracted to the flashy, colorful ads and the fruit and candy-flavored vape flavors. They believe that vaping cannot harm them, and they lack education on the health risks and addiction-forming habits vaping can cause. Youth are quick to believe products claiming to contain no nicotine are safe to use. However, they fail to realize many ENDS companies falsely advertise information and after laboratory testing, these “no-nicotine” products actually do contain nicotine. Furthermore, the flavorings in ENDS contain harmful chemicals that can be detrimental to a person’s health.

Solution

The new health educator for Sequatchie County, Tristi Bond, came aboard in late 2018. She worked with the SCHD Director, Charlene Nunley, and CSH Coordinator, Rolanda Green, and was asked what anti-tobacco initiatives should be implemented in the schools. It was decided that vaping would be the number-one target of educational endeavors involving tobacco use. The trio met with school administrators to explain their vision for the remainder of the school year. Tristi presented to all middle school students (5th-8th grade) and high school seniors about the dangers of vaping, giving students information about nicotine and its addictive properties, as well as how to break nicotine addiction. After each presentation, she allowed for an open question and answer session, in which students asked for specific information concerning smoking or vaping. Once the presentation ended, she allowed students to privately ask questions – many did. Some students requested additional resources, which were provided to them. All middle school students were given business cards Tristi created, including the Quit Line and JuulFree number, and the school distributed these to the students. During the parent session for the annual Healthy Horizons event at the elementary school, Tristi presented on vaping.

Results

Around 800 students were given a presentation on vaping. Without concrete data to determine the effectiveness of the presentation, it is tough to measure the impact of these efforts. However, it was very clear that students were concerned about their families’ health regarding cigarettes, chewing tobacco, and e-cigarettes. Many students came up to Tristi after her vaping presentation to ask for more information about the health effects of smoking, resources regarding secondhand smoke, and the QuitLine number to give to their loved ones. Many students also requested the JuulFree number. Due to the large response of students requesting these numbers, Tristi created a business card, including all of the information requested by students and parents. Responses from the students regarding smoking in their homes has prompted Tristi to initiate tobacco cessation efforts among the adults in Sequatchie County, especially those with school-aged children. Additionally, Tristi is working on developing a Tennessee Teens Talk Tobacco (T4) Group at the high school to promote anti-tobacco efforts.
Lessons Learned

A success from the program includes positive student engagement! Students interacted with Tristi both in the Q&A session and after the presentation. Allowing students to consistently have access and open communication with her builds trust and rapport. To better efforts in the county, a follow-up survey regarding the vaping presentation and habits changed might have been a useful tool to employ to track effectiveness of the program; perhaps this is something that needs to be instituted for the 2019-2020 school year. Content within the presentation should be tailored to answer common student questions; this is currently being modified. Anti-tobacco efforts like this one can be replicated anywhere! The key is to create visually appealing presentations that aim to educate rather than intimidate students. Building rapport with students is another key component in developing relationships and trust in order to initiate change. Rural communities are tight-knit; having a familiar face makes all the difference.

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About NACCHO

The National Association of County and City Health Officials is the voice of more than 3,000 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to ensure the safety of the water we drink, the food we eat, and the air we breathe.

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