

N.C. Tobacco Prevention and Control Branch

www.tobaccopreventionandcontrol.ncdhhs.gov



TOBACCO PREVENTION AND CONTROL BRANCH

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Mission

The North Carolina Tobacco Prevention and Control Branch works to improve the health of North Carolina residents by promoting tobacco-free environments and tobacco-free lifestyles. Our goal is to build capacity of diverse organizations and communities to implement and carry out effective, culturally appropriate strategies to reduce deaths and health problems due to tobacco use and secondhand smoke.

Program Goals

Tobacco use remains the number one preventable cause of early death and disease in the United States and North Carolina. It is responsible for 14,200 deaths in North Carolina, and for each death 30 more are sick or disabled due to tobacco use. Tobacco affects nearly every organ in the body and is a major risk for heart disease, many cancers, diabetes and asthma. Direct medical costs alone from smoking are estimated at \$3.8 billion each year (\$931 million is Medicaid's cost); plus \$4.24 billion in lost productivity. The good news is that there are evidence-based strategies to prevent and reduce tobacco use. The Tobacco Prevention and Control Branch (TPCB) has worked with many partners since 1990 to make steady progress on population health in tobacco control. Our aim is to spread and scale evidence-based interventions in order to reduce these burdens and costs by implementing proven strategies addressing four goals:

- Eliminate exposure to secondhand smoke;
- Help tobacco-users who want to quit;
- Prevent the initiation of smoking and other tobacco use; and
- Identify and eliminate tobacco-related health disparities in populations by addressing health equity in each of the other three goal areas

Eliminate Exposure to Secondhand Smoke: Working closely with local health departments, NC TPCB has overseen the successful implementation of the 2010 N.C. smoke-free restaurants and bars law. With this law, N.C. documented a **21 percent decline in average weekly Emergency Department (ED) visits for heart attacks**; and North Carolinians with asthma were 7 percent less likely to have an ED visit.

Building on these recent successes, local governments are increasingly adopting smoke-free regulations in government buildings, on government grounds, and in indoor public places. Voluntary smoke-free policies in N.C. multi-unit residential housing are also increasing. As of February 2017:

- 81 counties & 228 municipalities had 100 percent smoke-free/tobacco free government buildings;
- 19 counties and 68 municipalities had 100 percent smoke-free/tobacco-free grounds.
- 62 counties and municipalities have added or adopted a ban on e-cigarette use;
- More than 28 percent of N.C. affordable housing properties have smoke-free residential units. NC requires properties receiving low-income tax credits to be smoke-free.

Help Tobacco Users Who Want to Quit: NC has a statewide QuitlineNC service at 1-800-QuitNow that is available 24/7 to all tobacco users who want to quit and to clinicians seeking assistance for their patients/clients who want to quit tobacco. While the majority of tobacco users want to quit, **QuitlineNC has capacity to reach only about 1-1.5% of those smokers. Those who quit with coaching plus NRT/tobacco treatment medications are 2-3 times more likely to quit and stay quit.** TPCB aims to increase reach of QuitlineNC services through contracts with private employers/payers in partnership with the NC Public Health Foundation. In the past fiscal year, two-thirds of the tobacco users enrolled in QuitlineNC were uninsured or Medicaid insured. **The return on investment (ROI) for the State Health Plan's investment in QuitlineNC services for its members has been \$4 for every \$1 invested.**

Prevent the initiation of smoking and other tobacco use: North Carolina recorded significant decreases in smoking by young people with the investment of Tobacco Master Settlement Agreement funding from 2003-2011. **North Carolina's middle school smoking rate decreased by more than half between 2003 and 2015, dropping from 9.3 percent to 2.3 percent.** Similarly, North Carolina's high school smoking rate decreased between 2003 and 2015, dropping from 27.3 percent to 9.3 percent. During this time, North Carolina's progress includes:

- 100% Tobacco-Free School Campuses for all 115 N.C. School districts. This policy does not allow use of any tobacco product, including e-cigarettes
- 100% Smoke-free/Tobacco-free Campuses currently in 39 of 58 N.C. community colleges

However, from 2011—2015, overall tobacco use among North Carolina high school students increased from 25.8 percent to 27.5 percent. **Use of electronic cigarettes by North Carolina high school students increased 888% between 2011 and 2015, from 1.7 percent to 16.8 percent.** Among high school tobacco users in North Carolina, 19.1 percent report using more than one tobacco product in 2013.

TPCB works with national, local, and state partners to implement **evidence-based paid and earned media campaigns** that focus on these goal areas. CDC's media resource center holds all evidence-based media on tobacco prevention and cessation for partners working with their state programs to use.



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Staff Contacts

The TPCB has a “no wrong door” policy. Please feel free to contact the TPCB, state or regional staff for assistance.

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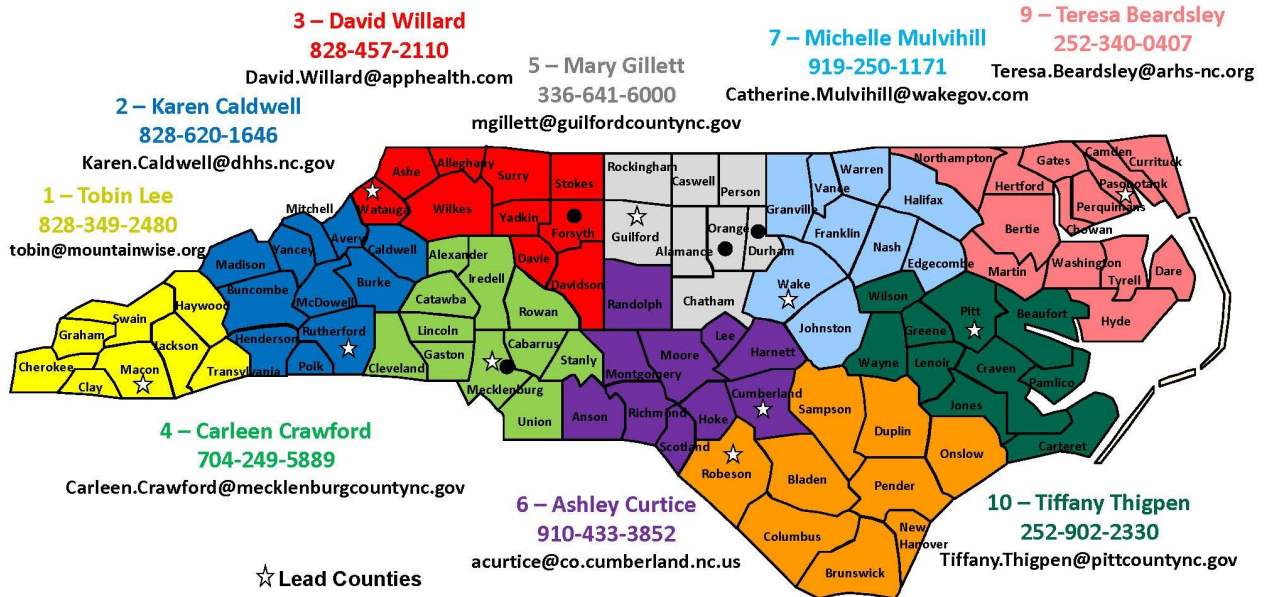
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Regional Staff

Tobacco Prevention and Control Branch (TPCB) Funding Regions 2015-2020



1. Macon County Public Health
2. Rutherford-Polk-McDowell District Health Department
3. Appalachian District Health Department
4. Mecklenburg County Health Department
5. Guilford County Department of Health and Human Services, Public Health Division

6. Cumberland County Public Health Department
7. Wake County Human Services
8. Robeson County Department of Public Health
9. Albemarle Regional Health Services
10. Pitt County Health Department

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