Bureau of Tobacco and Chronic Disease

Snapshot - 2012
Core Public Health Concern

Too many Arizonans are impaired by diseases that are preventable and manageable!
Vision

To positively impact the health and well-being of all Arizonans by reducing the health burdens and cost burdens of chronic disease!
Mission

Working together to build an integrated network of individuals, organizations and communities to prevent and reduce commercial tobacco use and chronic disease!
**Major Goals**

- Prevent Initiation of Tobacco Use among Youth
- Eliminate Exposure to Secondhand Smoke
- Promote Cessation among Youth and Adults to Help Arizonans Quit Tobacco Use
- Identify and Eliminate Disparities in Specific Population Groups with regards to Tobacco Use, Chronic Disease, and HIV Infection.
Major Goals

• Assist in the Prevention and Early Detection of the Four Leading Disease-Related Causes of Death, as well as HIV, in Arizona

• Develop and Implement a Comprehensive Communications and Social Marketing Plan

• Conduct Surveillance and Evaluation

• Advance Policies that Address the Impact of Commercial Tobacco Use, the Risk Factors of Chronic Disease, and the Prevention and Spread of HIV Infection.
Arizona is in the “Top Ten”

#1  Lowest overall cancer rates (men/women)
#1  Lowest overall cancer rates among men
#1  Lowest rate of breast cancer
#1  Lowest rate of prostate cancer
#1  Lowest exposure to SHS in home (3%)
#1  Lowest exposure to SHS in workplace
#1  Lowest tobacco use among pregnant women (4.9%)
#1  Highest drop in tobacco use since 2007
#1  Highest drop in heavy tobacco use among youth
Arizona is in the “Top Ten”

#2  Lowest overall cancer rates among women
#2  Lowest overall colon cancer rates (men/women)
#5  Lowest tobacco use among women (13.7%)
#7  Lowest overall tobacco use (men/women)
#7  Lowest overall lung cancer rates (men/women)
Core Value

Make a Difference – Leave a Legacy!

- Evidence-Based and Science-Based
- Sustainable
- Systems Linkages
- High ROI (Return on investment)
- Lazer beam focus – Measured Impact!
- Strong public and private partnerships
Tobacco Youth Prevention

• Youth Coalition
  – Students Taking a New Direction (STAND)
  – Partner with Pima Prevention Partnership (PPP) to work with 14 county partners, 1 community based organization, 2 Urban Indian Centers and 3 tribal partners on youth coalition efforts providing technical assistance.
  – Trainings have taken place for adult youth coordinators and youth participants and additional trainings are scheduled for Spring 2013
  – Youth conferences scheduled for January 2013 and June 2013
  – Groundwork for the coalition development continues at community level with the creation of a communication hub (website STAND) and statewide prevention policy (Retailer Education/POS campaign “License to Ill”)

• Youth Prevention/Outreach
  – Venomocity targets 12-17 year olds
  – Focus is on addiction/control
  – Primary messaging via social media (FaceBook & YouTube)
  – Engage youth where they live/congregate – online
Tobacco Cessation

• Arizona Smokers’ Helpine (ASHLIne)
  – Free services in English and Spanish.
  – Arizona based quit coaches
  – Most are former smokers
  – WebQuit available for online services
  – Call it Quit V1.0 app available for iPhone, iPad & iPod touch
    • V2.0 for Droid-based systems in development

• Behavioral Health (They said it couldn’t be done!)
  – Increase utilization of quitline services among people with mental health diagnoses to close the gap of early mortality related to tobacco use.
  – Targeted two RBHAs and utilized ASHLIne’s technical assistance intervention (referral development team) for increasing quitline referrals from behavioral health locations during the Communities Putting Prevention to Work grant period.
  – Clients with mental health diagnoses enroll in quit tobacco services and quit at the same rate as those within the general population.
Tobacco Cessation

• Bold Marketing!

• Nicotine Replacement/Medications
  – Free access for AHCCCS members

• CMS/AHCCCS
  – Partner with AHCCCS to secure federal Medicaid matching funds for the cost of telephone quitline services provided to Medicaid beneficiaries per the Affordable Care Act.

• Asian Pacific Quitline Pilot
  – Partnering with CA to direct Asian language speakers (Chinese, Korean and Vietnamese) in AZ to quitline services
  – Partner with Asian Pacific Community in Action (APCA) to spread the word
  – Goal to determine viability of similar service in AZ
Tobacco Policy

• Tobacco Retailer Licensing
  – Estimated $70 million is lost in uncollected tobacco taxes in the State of Arizona each year.
  – *Tobacco Tax Evasion Work Group* formed to further assess the effects of tobacco tax evasion and avoidance in Arizona
  – Three recommendations have been established by the workgroup to address this issue:
    • Licensing the sale of tobacco products: Impose a license on all tobacco retailers, similar to the license that is required to sell liquor in the State of Arizona
    • Create stricter enforcement on current tobacco tax laws
    • Increase the tax on OTP and thoroughly define OTP in state legislation

• Smoke-Free Multi-Housing
  – Maricopa County, TCDC, APCA and ITCA are working on the multi-housing initiative.
  – Workshop conducted in March to bring all stakeholders involved together to discuss designing a strategy for implementation.
  – Data collected from targeted multi-housing complexes to support the need/desire to push policy in Maricopa County.
Chronic Disease

• Population Health Policy IGA (Health In Arizona Policy)
  – Three-year collaborative between ADHS Div. Public Health Preventive Services and Local Health Departments to create capacity in the areas of procurement policies, worksite wellness, school health, clinical care, and community design by promoting healthy lifestyles.

• Chronic Disease Strategic Plan
  – Statewide plan impacting Where We Live; Where We Learn; Where We Work; and Where We Receive Care.
  – Vision: Arizona Communities Coming Together to Address Chronic Disease
Chronic Disease

• Home Health Workers Demonstration Project
  – Build the capacity of home health workers to deliver and/or refer consumers to evidence-based interventions, including CDSMP and tobacco cessation.

• Cancer Prevention and Control Programs
  – Support BHSD HealthCheck services, surveillance and systems which decrease the incidence of late stage diagnosis of cancer.

• Proposition 303 Programs
  – Targets the prevention and early detection of the four leading causes of death in Arizona (e.g. CPR Dispatch, COPD Collaborative Activities, and the Population Health IGA’s)
Diabetes

• Worksite
  – Increase utilization of Diabetes Self-Management Training (DSMT) programs in Arizona
  – Raise awareness of pre-diabetes and support evidence based prevention programs
  – Participate in advocacy efforts to make DSMT available to all persons with diabetes
  – Incorporate the Electronic Health Record in all activities focusing on Patient Centered Care and quality improvement efforts in the care of people with diabetes

• Health Systems Change
  – The ADP promotes and facilitates training for the diabetes workforce in the U.S. Diabetes Conversation Maps
  – As a result of these training efforts El Rio Community Health Center in Tucson is the only Community Health Center/Federally Qualified Health Center in Arizona to have trained their Certified Diabetes Educators in the U.S. Diabetes Conversation Maps and applied and received AADE accreditation in April of 2010.
  – Northern Arizona Veterans Administration in Prescott and their Satellite Clinics staff trained in the U.S. Diabetes Conversation Maps and are now using the Diabetes Conversation Maps with their patients who have diabetes.
Cardiovascular Disease (CVD)

• CPR
  – Sudden Cardiac Arrest (SCA) is an acute outcome of long-term cardiovascular disease (to which smoking contributes)
  – 388,000 SCAs per year with less than an 8% chance of survival
  – Bystander CPR can double or triple the chance SCA victims survive
  – Telephone-assisted CPR program increases rates of bystander CPR
  – 7-10% increase in survival

• Get With the Guideline (GWTG)
  – Quality improvement program by the American Heart Association, utilizing national criteria for optimum treatment standards for heart disease and stroke management in the hospital setting
Cardiovascular Disease (CVD)

• Hypertension
  – The utilization of Community Health Workers, (or Promotoras) to act as the trusted messenger between the physician and the hypertension-diagnosed patient
  – Program proven to increase the patient’s ability to manage condition through education

• Health Services Advisory Group (HSAG)
  – Examining the capacity of Federally Qualified Health Centers to meet “meaningful use” basic requirements for patient management
  – Including ability to manage specific chronic disease performance indicators, such as hypertension management, diabetes screening and other preventive services designed to prevent an “acute event” such as a heart attack, stroke, cancer etc.

• Procurement Policy
  – Opportunity to take our own nutrition recommendations and put our “money where our mouth is” for a positive health change by looking at how government entities contract for food
Healthy Aging

• Multiple healthy aging projects, including:
  – Delivery of CDSMP in Arizona
  – Governor’s Council on Aging
  – Governor’s Taskforce on Alzheimer’s

• As Arizona’s population ages, steps need to be taken now to ensure that the systems in place are able to meet the forecasted high demand imposed by the “Baby Boomer Tsunami” for the next 20 years.
HIV/AIDS

• HIV Prevention Plan
  – Received $4.4M under a new cooperative agreement with CDC
  – Program elements are heavily focused on the National HIV/AIDS Strategy (NHAS)
  – Developing a jurisdictional HIV Plan, includes both internal and external stakeholders and will focus on how the NHAS is implemented in Arizona and how HIV is addressed throughout the state

• RFGA
  – Will focus on behavioral interventions targeted to Prevention with Positives and individuals at extremely high-risk of acquiring or transmitting HIV in the most heavily impacted areas of the jurisdiction

• IGA
  – Co-created during 2012 with County Health Departments to establish the best methods of addressing HIV Prevention and current state requirements in their individual counties

• NHAS Goals
  – Reduce new HIV infections
  – Increase access to care and to improve health outcome for people living with HIV
  – Reduce HIV-related health disparities
HIV/AIDS Testing

- Knowing one’s status is an important step in managing a person’s health

- All persons who test positive are linked to:
  - Medical care
  - Additional disease screening
  - Partner service activities

- 17,000 tests were conducted in programs funded by ADHS Prevention each year

- CDC Expanded Testing Initiative has increased testing by 10,000 due to Arizona’s participation
Thank you!

Wayne Tormala, Chief
Arizona Department of Health Services
Bureau of Tobacco and Chronic Disease

(602) 364-0834
wayne.tormala@azdhs.gov