2007 Georgia Program and Data Summary:

TOBACCO USE



The health and economic burden of tobacco use in Georgia is high.

Tobacco use remains a leading preventable cause of death and disease in Georgia. A large majority of adult smokers (about 80%) begin smoking before the age of 18. Tobacco use is responsible for more than 10,000 deaths in Georgia every year and costs approximately \$5 billion in direct adult and infant medical expenditures and productivity losses.

Established in 2000, the Georgia Tobacco Use Prevention Program is a comprehensive program designed to meet the overall goal of reducing the health and economic burden associated with tobacco use. Every year, the Program plans, implements and evaluates activities designed to reduce tobacco-related illnesses and deaths. Best practice strategies are developed to focus on the following goal areas:

- Preventing the initiation of tobacco use among young people
- Promoting quitting among young people and adults
- Eliminating exposure to secondhand tobacco smoke
- > Identifying and eliminating the disparities related to tobacco use and its effects among various population groups

The Georgia Tobacco Use Prevention Program, the 18 public health districts, non-profit health agencies, and various partners and youth groups have successfully accomplished the following:

- > Creation of trained local multi-cultural, multi-ethnic coalitions, youth empowerment groups, and media campaigns
- > Passage of state, county, and city ordinances banning or restricting smoking in public places
- Increase in the tobacco excise tax from 24 cents per pack to 37 cents per pack
- > Implementation, promotion, and evaluation of the Georgia Tobacco Quit Line

The Georgia Tobacco Use Prevention Program is collaborating with the 18 public health districts, non-profit health agencies, and various partners and youth groups on the following activities:

- Reducing Teen Tobacco Use: "100% Tobacco Free Schools" The goal is to establish a comprehensive policy prohibiting tobacco use in school 24 hours a day, 7 days per week, by students, faculty, staff, and visitors. The policy applies to buildings, grounds, property, and vehicles used to transport students, and at off-campus school-sponsored events. Prevention and cessation programs for youth and adults, signage, and peer education are vital components of reducing teen tobacco use. Since the beginning of the program in 2005, three school districts have adopted the comprehensive policy.
- Treating Tobacco Use as a Vital Sign The goal is to work with public and private healthcare providers to assess
 tobacco use status at intake so that tobacco users may receive brief cessation counseling and be referred to the
 Georgia Tobacco Quit Line. The goal includes statewide training of physicians and support staff on the national
 cessation guidelines.
- Enforcement of the Georgia Smokefree Air Act of 2005 The goal is to develop an enforcement protocol that would
 include training for local staff, developing media campaigns, educating the public, business owners, and public health
 staff on the scope of the law, and establishing procedures for non-compliance.
- Sustaining the Georgia Tobacco Quit Line Since 2001, the Georgia Tobacco Quit Line has provided cessation services and resources to Georgians seeking to quit all tobacco products. The Quit Line provides services to tobacco users ages 13 and older, including the hearing impaired, in English or in Spanish. An independent evaluation of the Quit Line, conducted in 2006 by the Institute of Public Health at Georgia State University, concluded that it has been useful in helping Georgians quit using tobacco. The majority of the Quit Line users were satisfied with the services they received (85%), felt that the Quit Line was helpful in the cessation process (78%), and would recommend the Quit Line to others (87%). A preliminary report is available at: www.livehealthygeorgia.org.
- Developing local cessation programs The goal of such local programs is to reduce geographic, cultural, economic
 and ethnic barriers to quitting.

The burden of tobacco-related illness among adults in Georgia is high.

DEATHS

- Over 10,000 Georgians die every year from smoking-related illnesses – that is one out of every six adult Georgians who die.
- More adult males (6,700) than adult females (3,900) die from smoking-related illnesses.
- Cancer accounts for 40% of all adult deaths due to smoking, while cardiovascular diseases and respiratory diseases account for 35% and 25% of all adult deaths due to smoking, respectively.
- Adult smokers lose an average of 16 years of life compared to adult non-smokers.

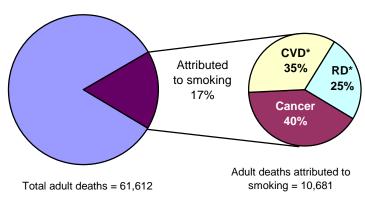
LUNG CANCER MORTALITY

- Lung cancer accounts for **79%** of all smoking-related cancer deaths in Georgia.
- Lung cancer is the principal cause of cancer deaths for males and females.

BEHAVIORS: YOUTH

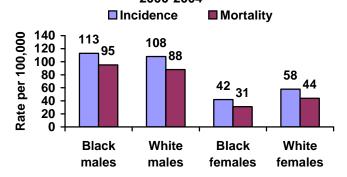
- Approximately 25,000 (7%) middle school students and 73,000 (17%) high school students in Georgia smoke cigarettes.
 - Among middle school students, nine in 100 boys and six in 100 girls are smokers.
 - Among high school students, one in five boys and nearly one in six girls are smokers.
- Approximately 18,000 (70%) middle school smokers and 41,000 (56%) high school smokers live with a smoker.
- Approximately 97,000 (29%) middle school nonsmokers and 110,000 (31%) high school nonsmokers live with a smoker.
- Approximately 9,000 (36%) middle school smokers and 53,000 (73%) high school smokers buy their cigarettes at gas stations or convenience stores.

Average annual number of deaths among adults ages 35 and older, Georgia, 2000-2005



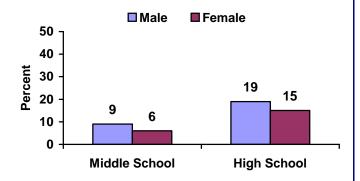
*CVD = Cardiovascular Diseases; RD= Respiratory Diseases

Average annual lung cancer incidence and mortality rates* by race and sex, Georgia, 2000-2004



^{*}Rates are age-adjusted to the 2000 US standard population

Percent of cigarette smokers by school type and sex, Georgia, 2005



Youth cigarette smokers are defined as those who have smoked at least one cigarette in the last 30 days.

BEHAVIORS: ADULTS

- Approximately 1,340,000 (20%) adults in Georgia smoke cigarettes.
 - 22% of adult males and 18% of adult females are smokers.
 - Adults with less than a high school education are more likely than adults with a high school education or above to smoke cigarettes.
- Rural counties in the northwest and southeast regions of the state have the highest adult smoking prevalence.

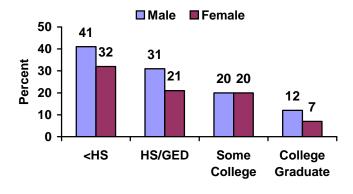
POLICY

- A majority (81%) of adult Georgians do not allow smoking anywhere inside their homes.
 - Adults with at least a high school education are more likely than adults who did not graduate high school to not allow smoking inside their homes.
- A majority (85%) of working adults indicate their worksite does not allow smoking at work.
- Almost all (99%) public schools in Georgia have policies prohibiting tobacco use.

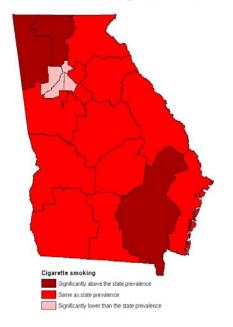
FINANCIAL IMPACT

- \$1.8 billion in healthcare costs among adults 18 years and older.
- **\$3.3 billion** in lost productivity costs among adults 35 years and older.

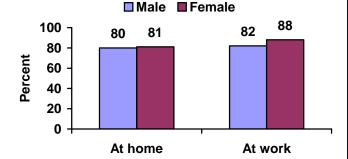
Percent of adults who smoke, by education and sex, Georgia, 2006



Percent of adults who smoke cigarettes by Health Disctrict, Georgia, 2000-2005



Percent of adults who indicate having a policy that does not allow smoking, by location and sex, Georgia, 2006



Adult cigarette smokers are defined as those who have smoked at least 100 cigarettes in their lifetime and are currently smoking.

QUITTING TAKES PRACTICE!

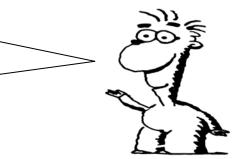
The Georgia Tobacco Quit Line is available for all Georgians 13 years of age and older who want to quit using tobacco. To receive free counseling, support, and referral services call:

1-877-270-STOP (English)

1-877-2NO-FUME (Spanish)

1-877-777-6534 (Hearing Impaired)

www.livehealthygeorgia.org/quitLine/index.shtml



Georgia Smokefree Air Act of 2005

A smoke free public place must prohibit smoking twenty-four hours per day in any area that does not meet the requirements pertaining to enclosed areas and smoking areas as specified in the Act. For more information on the law, visit our web sites:

http://dhr.Georgia.gov/gasmokefreeair



www.livehealthygeorgia.org





Reduce your risk of developing chronic conditions and diseases.

Eat healthy. A healthy eating plan is one that emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products; includes lean meats, poultry, fish, beans, eggs, and nuts; and is low in saturated fats, trans fats, cholesterol, salt (sodium), and added sugars.

Be active. Participating in regular physical activity can help to reduce many risk factors associated with chronic diseases, including obesity and high blood pressure.

Be smoke free. Quitting smoking lowers the chance of having cancer, heart attack, or stroke and improves overall health and well-being, regardless how long a person has been smoking.

Get checked. Undergoing routine physical check-ups and screenings can prevent some chronic diseases and detect other chronic diseases earlier when treatment may be more effective.

Be positive. A positive attitude contributes to your overall well-being.

Following these guidelines can greatly reduce the chances of developing a chronic disease, leading to an improved quality of life and reduced healthcare costs. For more information, visit www.livehealthygeorgia.org.

Data sources:

- 1. Georgia Vital Statistics, 2005; CDC SAMMEC web application (http://apps.nccd.cdc.gov/sammec/).
- 2. Georgia Comprehensive Cancer Registry.
- 3. 2006 Georgia Behavioral Risk Factor Surveillance System (BRFSS) (http://health.state.ga.us/epi/brfss/publications.asp).
- 4. 2005 Georgia Youth Risk Behavior Survey (YRBS) (http://health.state.ga.us/epi/cdiee/studenthealth.asp).
- 5. 2005 Georgia Youth Tobacco Survey (http://health.state.ga.us/epi/cdiee/tobaccouse.asp).
- 6. 2006 Georgia Student Health Education Profile Survey (http://health.state.ga.us/epi/cdiee/policy.asp).

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Visit http://www.health.state.ga.us/epi/cdiee/tobaccouse.asp for more information about tobacco use in Georgia.

Visit http://health.state.ga.us/programs/tobacco/index.asp for more information about the Georgia Tobacco Use Prevention Program.