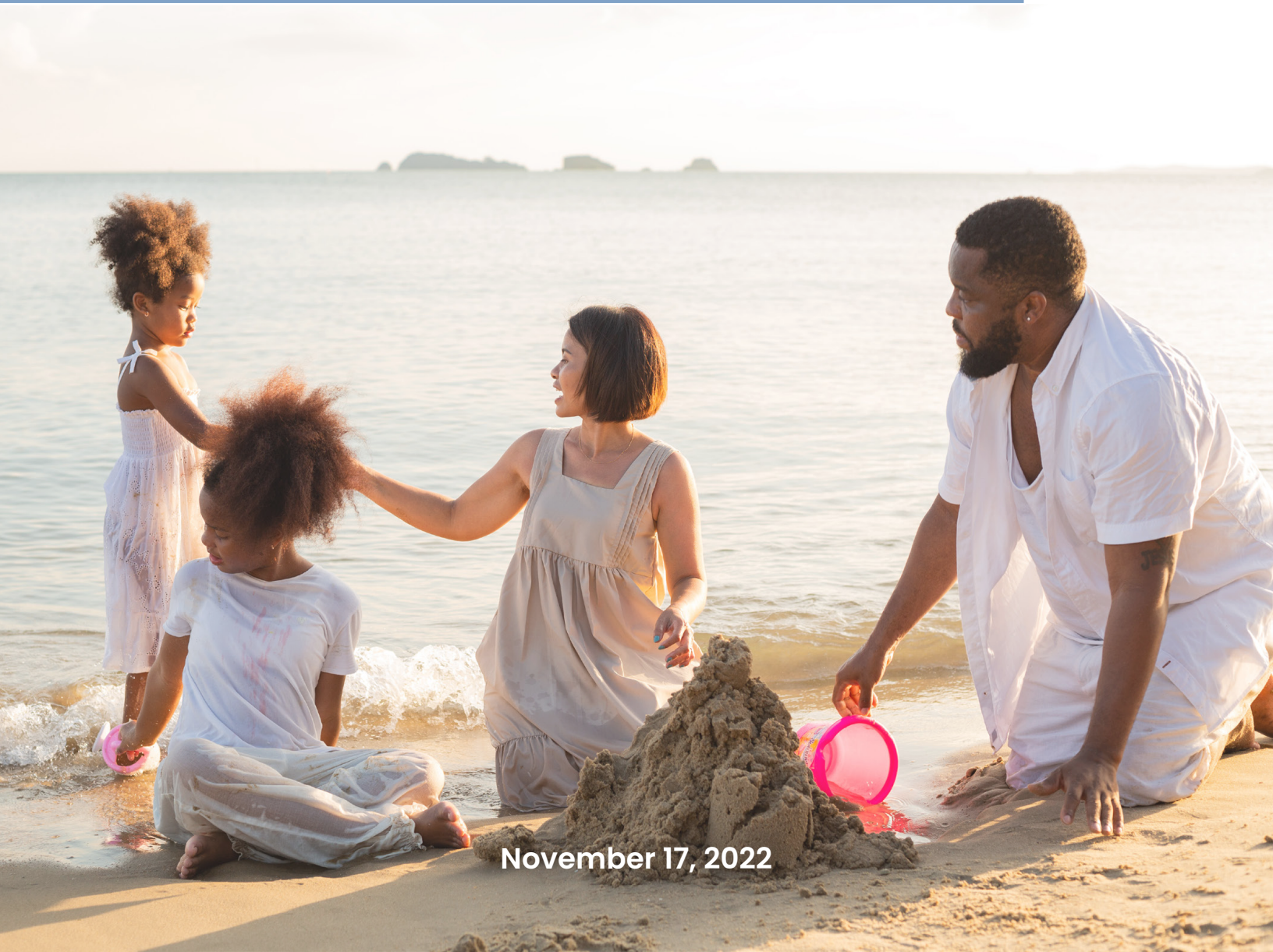




2022-2027 Report



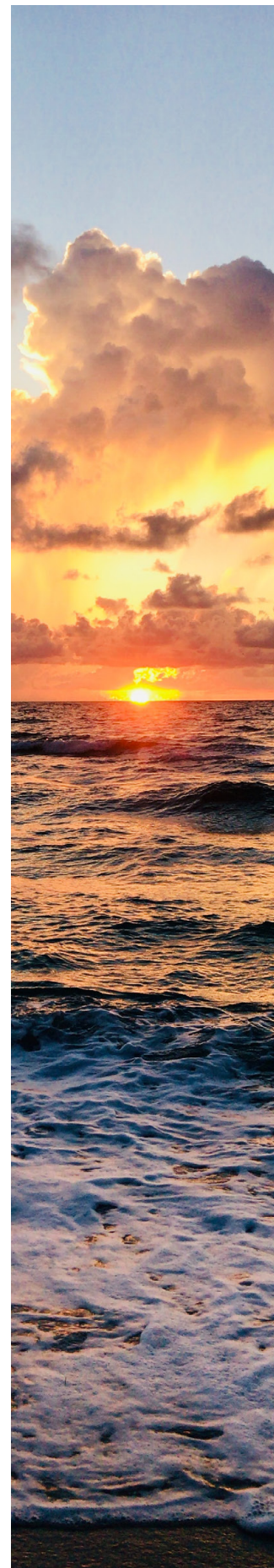
November 17, 2022

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Executive Summary

All Florida residents deserve the opportunity to live in an environment that supports good health, free from the harm that commercial tobacco can cause.

Due to the combined efforts of tobacco control partners across the state, Florida has witnessed a decrease in adult smoking. However, tobacco* use continues to be the leading cause of preventable death, disability, and disease in the state. Challenges continue to exist in reducing high tobacco use rates within and across specific population groups due to factors like tobacco industry influence, emerging and novel products, barriers in availability of and access to tobacco cessation treatments, and a lack of comprehensive tobacco control policies. To address these challenges and improve public health through tobacco control, the 2022-2027 Florida Tobacco Strategic Plan (“the Plan”) was developed. The Plan aligns with evidence-based practices outlined in the Centers for Disease Control and Prevention (CDC) *Best Practices for Comprehensive Tobacco Control Programs*. To ensure the unique needs of Florida residents remain at the forefront, the Plan leverages a data-driven approach to expand the reach of Florida’s tobacco control efforts.

The development of the Plan was facilitated by ISF, Inc. and represents a coordinated effort between the Bureau of Tobacco Free Florida, key partners, and other stakeholders in tobacco prevention and control in Florida. For a full list of partners and contributors, please see pages 29-30. Contributing partners participated and collaborated in strategic planning meetings and in the development and refinement of priority areas, goals, objectives, strategies, and activities.

Thank you to all our national, statewide, and community partners for their valuable contributions. As we move forward, we encourage new partners to join us in focusing on the shared goals of this plan.

** For purposes of this Plan, the term “tobacco” is used to reference commercial tobacco, which is manufactured and sold by the commercial tobacco industry.*



Introduction



Introduction

The mission of the Plan is to improve public health in Florida through tobacco control efforts that reduce tobacco use and eliminate exposure to secondhand smoke and electronic vapor product aerosol.

Florida's tobacco control efforts have evolved to include more comprehensive and proactive approaches to fighting tobacco industry tactics that drive product-related disparities. However, as the tobacco landscape changes, state and local policy makers will need to respond to public health issues in ways that work for their communities. The next five years offer an opportunity to support meaningful actions at the state and local level related to clean air and the sale and marketing of tobacco products. Without the protections offered by comprehensive tobacco control policies, many communities are at a greater risk of tobacco-related disparities, tobacco industry influence, and tobacco-related diseases and illnesses.

This underscores the need for planned, measured steps toward achieving a tobacco free Florida. The Plan serves as a tool to guide tobacco control partners in their decision-making and to help evaluate their progress toward this goal. The Plan is founded in public health principals. This means that all Floridians, in all communities, have the opportunity to live a healthy life free of the harms of commercial tobacco use.

Mission:

The mission of the Florida Tobacco Strategic Plan is to improve public health in Florida through tobacco control efforts that reduce tobacco use and eliminate exposure to secondhand smoke and electronic vapor product aerosol.

Tobacco Use Data in Florida



Commercial Tobacco Use Statistics



The tobacco industry spends **\$614.3 million** per year on marketing in Florida²

Note: State total is a prorated estimate based on cigarette pack sales in the state.

\$10.04 billion

Annual health care costs in Florida directly caused by smoking²

\$1.62 billion

Medicaid costs caused by smoking in Florida²



Note: State Medicaid program expenditures are before any federal reimbursement. State and federal tax burden equals state residents' federal and state tax payments necessary to cover all state government tobacco-caused costs plus the residents' pro-rated share, based on state populations, of all federal tobacco-caused costs.

32,300

Florida adult deaths from smoking-related illnesses each year²

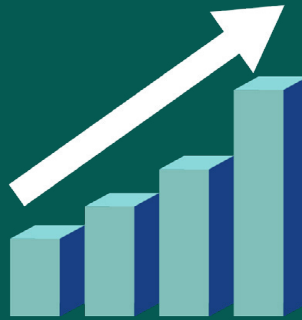
10.6%

of Florida adults currently smoke cigarettes

Youth Tobacco Use

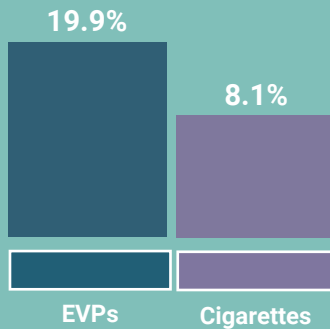


According to the CDC, nearly 9 out of 10 smokers start by age 18

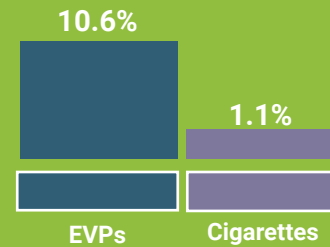


Evidence presented by the CDC suggests that teens who use electronic vapor products may be at greater risk of starting to smoke regular cigarettes

Percentage of youth (11-17) who have ever tried EVPs compared to cigarettes³



Percentage of youth (11-17) who currently use EVPs compared to cigarettes³



Why are youth choosing EVPs?



Delivers high levels of nicotine



Comes in a variety of flavors that appeal to teens

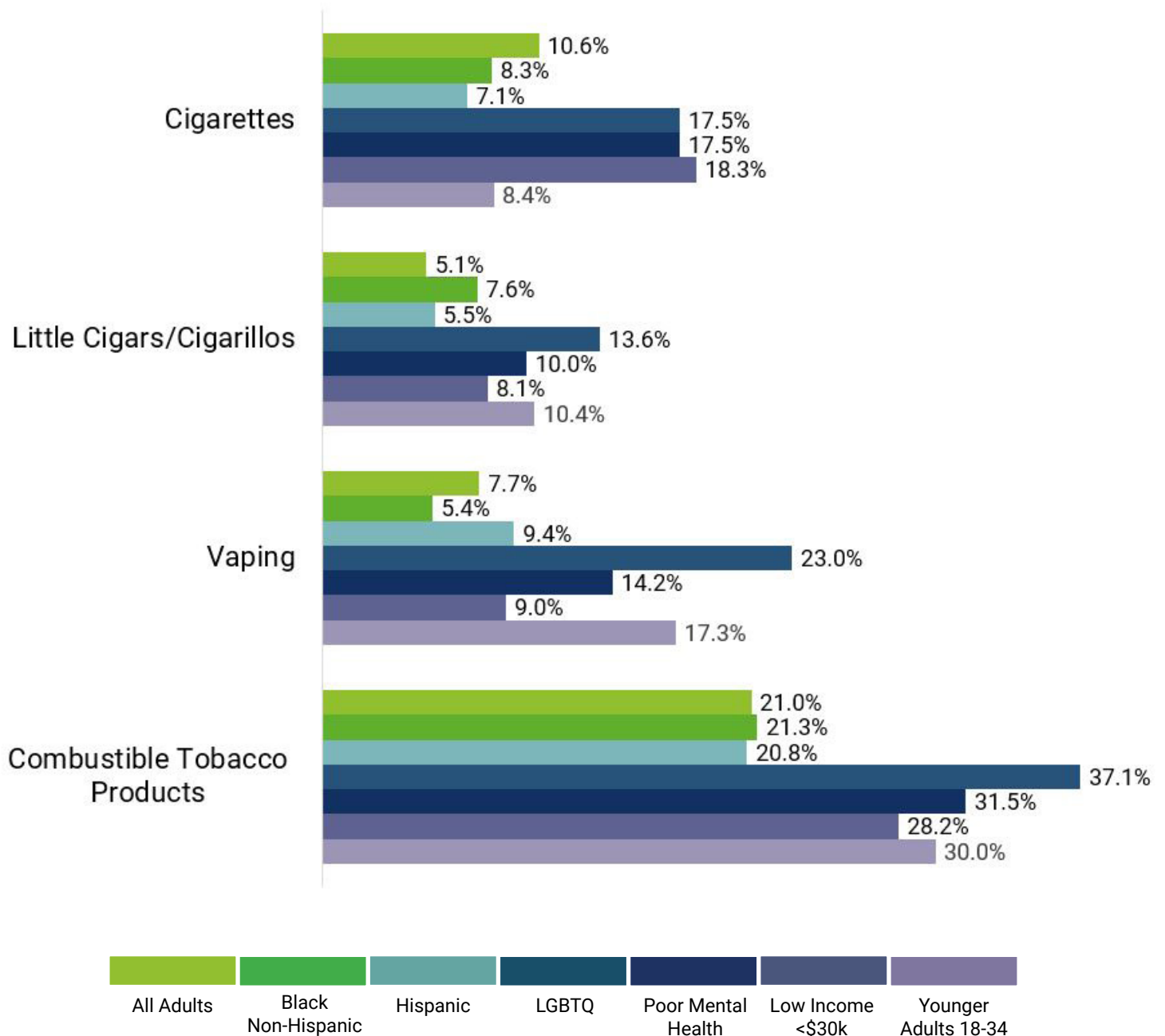


Easy to conceal and are even being used in schools

Differences in Current Adult Tobacco Use

Tobacco use disparities exist across Florida communities. The tobacco industry has targeted vulnerable populations such as younger adults and those with mental health conditions. This targeting, along with factors like financial stress or inadequate access to health care, increases commercial tobacco use and can make health problems worse.

Percentage of Each Population Who Currently Uses Tobacco Products⁴



Tobacco Control Landscape



Tobacco Control Landscape



1985

The Florida Clean Indoor Air Act (FCIAA) is enacted to protect citizens from the health hazards of secondhand tobacco smoke in workplaces through the implementation of smokefree polices.

1997

Florida is one of 4 states to independently reach a settlement with the major tobacco manufacturers prior to the Master Settlement Agreement to reimburse state governments for tobacco-related healthcare costs.

1998

The Florida Tobacco Pilot Program is established and funded as a result of the settlement in 1997.

2002

71% of Florida voters approve a change to the Florida Constitution, effective July 1, 2003, prohibiting smoking in enclosed indoor workplaces.

2006

U.S. District Judge Gladys Kessler found the major U.S. tobacco companies had violated civil racketeering laws (RICO) and engaged in a decades-long conspiracy to deceive the American public about the health effects of smoking and their marketing to children.

2007

Tobacco Free Florida is formed in response to Florida voters overwhelmingly approving the Florida Constitution to establish a comprehensive tobacco education and use prevention program using a portion of the state's tobacco settlement fund.

Tobacco Control Landscape



2009

The Family Smoking Prevention and Tobacco Control Act, giving the Food and Drug Administration the power to regulate tobacco, is signed into law by President Barack Obama on June 22, 2009.

2011

Florida school districts are authorized to restrict smoking on school district property effective as of July 1, 2011.

2018

In response to the staggering increase in e-cigarette use among youth from 2017 to 2018, U.S. Surgeon General Jerome Adams declares youth use of e-cigarettes to be an epidemic.

2019

69% of Florida voters approve a change to the Florida Constitution, effective July 1, 2019, prohibiting vaping in enclosed indoor workplaces.

2021

Florida implements a new statewide law raising the minimum age to purchase tobacco and nicotine products from 18 to 21 years of age effective October 1, 2021.

2022

In June 2022, Florida House Bill 105 is signed, giving authority to cities and counties to restrict smoking, exempting unfiltered cigars, at beaches and parks that they own.

Strategic Plan Development



Planning Process

In November of 2021, tobacco control partners across the state of Florida committed to developing a five-year Florida Tobacco Strategic Plan. This stand-alone plan builds on Florida’s long history of evidence-based tobacco control efforts.

The development of the Plan was a collaborative effort guided by strong leadership and a commitment to reducing tobacco use across all populations. Several stakeholders, groups, and community leaders across Florida were engaged throughout the Plan’s development. Table 1 identifies key engagement strategies used to develop the Plan. This approach provided valuable information with which recommendations were made to guide the Plan’s strategic direction and create a shared sense of commitment among individuals and groups.

Table 1: Engagement Strategies Used to Develop the Florida Tobacco Strategic Plan

Engagement Strategy	Purpose
Environmental Scan	<p>The creation of the Plan began with an environmental scan to understand the current state of tobacco control across Florida. Tobacco control partners were engaged to participate in a survey and SWOT analysis to:</p> <ul style="list-style-type: none"> • Identify statewide tobacco control strengths, weaknesses, opportunities, and threats. • Identify and understand current priorities of tobacco control partners. • Identify common themes among tobacco control partners. • Identify best practices to support equitable tobacco control and prevention efforts.
Community Strategic Planning Meetings	<p>Six virtual meetings were conducted with regional and community partners to solicit feedback and recommendations on the proposed strategic direction of the Plan. Regional and community partners were engaged in listening and breakout sessions to further understand the needs and current activities among tobacco control partners at the local level.</p>
Strategic Planning Workshops	<p>Four in-person and virtual workshops were conducted with national, state, and local partners to review and utilize relevant data, research findings, and regional and community feedback in the development of goals, objectives, and strategies.</p>
Strategic Planning Steering Committee Meetings	<p>Seven virtual meetings were conducted with the Strategic Planning Steering Committee to:</p> <ul style="list-style-type: none"> • Oversee the planning process. • Act on recommendations from the Strategic Planning Workshops. • Prioritize, refine, and select priority areas, goals, objectives, and strategies.

How to Read This Document

It is recommended one read through the full Florida Tobacco Strategic Plan report first. An [Appendix](#) is provided at the end of the report to include a [Glossary of Terms](#) and [References](#) which support the facts identified in this document. When you encounter a fact, there will be a notation with a clickable link which will take you to the supporting evidence in the Appendix. Clickable links are marked with blue underlined text.

The following concepts should be considered when reading.

- For purposes of the Plan, the term “tobacco” is used to reference commercial tobacco, which is manufactured and sold by the commercial tobacco industry.
- The Plan is organized by Priority Area, Goal, Objective, and Strategy. This organization structure should be read in the following manner:
 - Priority Area: The pillars for the future strategy. Priority Areas within this plan serve to organize our developed goals and objectives and guide us to success.
 - Goals: Broad statements of what we intend to accomplish related to the priority area. Goals express aspirations or intended effect on one or more health problems, often stated without time limits.
 - Objectives: The targets for achievement through interventions. Objectives can be expressed in terms of changes in behavior, norms, knowledge, attitudes, capacities, and conditions. Objectives within this plan are timebound and measurable. They also include outcome, impact, and process oriented items.
 - Strategies: Strategies are the approaches we are taking to achieve our objectives and meet our goals.
 - For purposes of this plan, EVPs include all electronic nicotine delivery devices and combustible products include cigarettes, cigars, and cigarillos.

Plan Implementation

To implement the Plan, collaboration will be required at all levels, from community-based organizations and coalitions to state partners, to prioritize and execute the strategies and activities outlined in the five-year plan. The collaboration of key partners and community members will be pivotal to successful adoption of the Plan. The collective effort by partners across the state can help shape tobacco free norms and significantly impact the tobacco control landscape—altering public attitudes and changing the way tobacco is viewed, promoted, and used.

The development of an implementation plan will be necessary to accomplish each area of the Plan. Implementation plans prioritize areas of focus and identify activities to be carried out to meet the defined strategies and objectives. When identifying activities and tasks, careful planning should take place to assign owners, identify partners, and establish timelines for completion. Consider the following factors when formulating the next steps:

- **The Florida Tobacco Strategic Plan is a living document.** It is important to consider flexibility in strategic planning. As Florida evolves, the tobacco control landscape shifts, and environmental and economic considerations arise, implementation teams will need the ability to adapt. Creating pathways to amend or revise the strategic plan to remain proactive when presented with new challenges from the tobacco industry, for instance, is a step toward sustainability and resilience.

- **The Plan was developed with a focus on community collaboration.** As such, the Plan’s strategies encourage the identification of new and innovative partnerships across the public and private sectors, including, but not limited to, organizations working to address poverty, health disparities, and chronic disease. To effectively reach all populations, community level partnerships and relationships will be required to coordinate efforts and develop programming that meets the needs of the population.
- **Promotion of the Plan is vital to its success, longevity, and relevance.** The promotion of the Plan requires the efforts of all state and community level tobacco control partners. Tobacco control partners should reference this plan as part of their education, outreach, and collaboration activities to increase awareness and excitement for initiatives that are shaping Florida’s future in tobacco control.

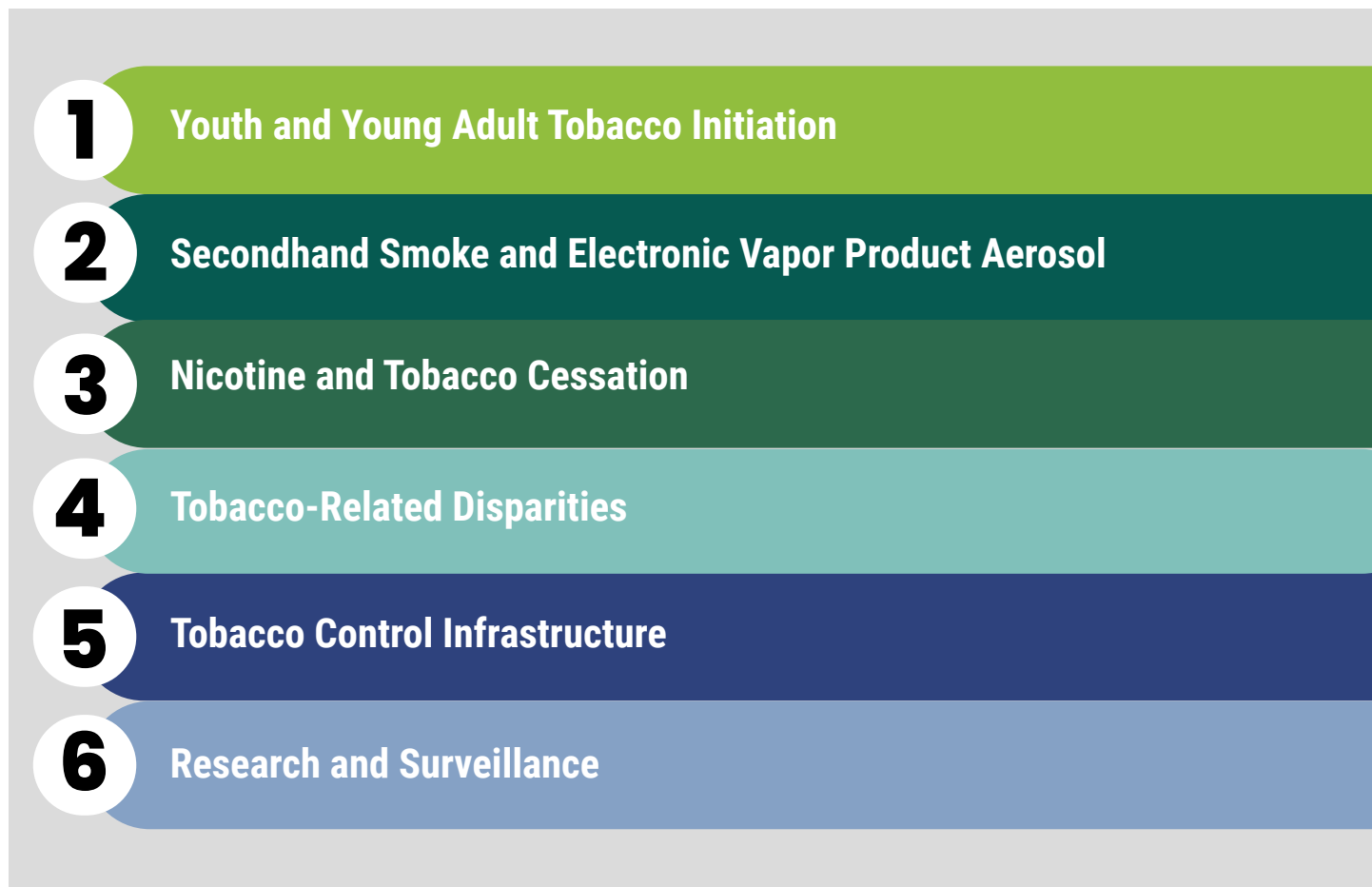


Florida Tobacco Strategic Plan



Priority Areas

The Plan adopts six primary areas for Florida tobacco control efforts, which are supported by the CDC to guide comprehensive tobacco control programs. Within each priority area are goals, objectives, and strategies developed using evidence-based policies and systems.



#1 Youth and Young Adult Tobacco Initiation

This priority area focuses on preventing the initiation of tobacco use among Florida’s youth and young adults and ultimately decreasing the prevalence of combustible tobacco and electronic vapor product use. Partners will collaborate with youth, young adults, higher education institutions, and K-12 schools to conduct evidence-based prevention activities within their communities.

GOAL: Prevent tobacco and nicotine use among Florida’s youth and young adults

Objectives	Strategies
1.1: By November 2027, decrease the prevalence of combustible tobacco use among youth ages 11-17 from 2.1% to 1.7%. ³	<ol style="list-style-type: none">1. Conduct comprehensive media campaigns tailored to youth.2. Increase support for evidence-based, best practices for preventing tobacco and nicotine use among youth.3. Recruit and engage youth in tobacco prevention and control efforts.4. Collaborate with schools to establish comprehensive tobacco free school policies at K-12 schools.
1.2: By November 2027, decrease the prevalence of electronic vapor product use among youth ages 11-17 from 10.6% to 8.5%. ³	
1.3: By November 2027, increase the percentage of youth ages 11-17 who are committed to never using electronic vapor products from 69.4% to 83.3%. ³	
1.4: By November 2027, decrease the prevalence of combustible tobacco use among young adults ages 18-24 from 25.8% to 24.5%. ⁴	<ol style="list-style-type: none">1. Conduct comprehensive media campaigns tailored to young adults.2. Increase support for evidence-based, best practices for preventing tobacco and nicotine use among young adults.3. Recruit and engage young adults in tobacco prevention and control efforts.4. Collaborate with schools to establish comprehensive tobacco free higher education institution policies.
1.5: By November 2027, decrease the prevalence of electronic vapor product use among young adults ages 18-24 from 22.3% to 19%. ³	

#2 Secondhand Smoke and Electronic Vapor Product Aerosol

This priority area focuses on eliminating exposure to secondhand smoke and EVP aerosol. Partners will collaborate with housing entities, employers, and local jurisdictions to decrease the rates of adults and youth reporting such exposure through the development and dissemination of educational materials and implementation of tobacco free policies.

GOAL: Eliminate Floridians' exposure to secondhand smoke and electronic vapor product aerosol

Objectives	Strategies
2.1: By November 2027, decrease the percentage of adults reporting exposure* to secondhand smoke from 5.6% to 5.3%. ⁴	<ol style="list-style-type: none"> 1. Conduct comprehensive media campaigns to educate the public about secondhand smoke and electronic vapor product aerosol. 2. Increase support for evidence-based, best practices for reducing exposure to secondhand smoke and electronic vapor product aerosol across all populations. 3. Collaborate with housing entities to establish policies for multi-unit housing facilities, including federally assisted and market rate, multi-family properties. 4. Collaborate with employers to establish policies for comprehensive tobacco free worksites including casinos, bars, and membership organizations. 5. Collaborate with local jurisdictions to establish policies for outdoor tobacco free public spaces including public beaches and parks.
2.2: By November 2027, decrease the percentage of adults reporting exposure* to electronic vapor product aerosol from 6.6% to 6.3%. ⁴	
2.3: By November 2027, decrease the percentage of youth ages 11-17 reporting exposure** to secondhand smoke or electronic vapor product aerosol from 57.5% to 54.6%. ³	

*Exposure is defined as during the past 7 days, did anyone smoke cigarettes, cigars, or pipes anywhere inside your home and during the past 7 days, did anyone vape anywhere inside your home.

**Exposure is defined as during the past 30 days, when you were in the following locations (At home; At school; At work; In another public place like a mall; At someone else's home; In your parent's vehicle; In someone else's vehicle; At some other place;) did someone smoke or vape around you.

#3 Nicotine and Tobacco Cessation

This priority area focuses on increasing quit attempts among smokers. Partners will collaborate with health care systems and social service providers to reduce barriers to the availability and accessibility of cessation services, expand access to cessation treatments, advance health systems changes, and promote awareness of cessation services.

GOAL: Promote quitting among Floridians

Objectives	Strategies
3.1: By November 2027, increase quit attempts among smokers using evidence-based cessation treatments from 40% to 42%. ⁴	<ol style="list-style-type: none">1. Conduct comprehensive media campaigns to promote quitting and generate awareness of evidence-based cessation services.2. Reduce barriers to the availability and accessibility of evidence-based cessation services.3. Expand access to evidence-based cessation treatments in community settings.4. Advance health care systems changes through the adoption of institutional policies that increase tobacco use screenings and the delivery of cessation services.
3.2: By November 2027, increase the quit attempts among smokers from 52.5% to 55.1%. ⁴	

#4 Tobacco-Related Disparities

This priority area focuses on identifying and eliminating tobacco-related disparities to decrease the prevalence of combustible tobacco and electronic vapor product use among adult subpopulations. Partners will collaborate with communities and local leaders to build support for tobacco prevention and control strategies through the development of media campaigns and educational materials, capacity building, and the implementation of tobacco free policies.

Subpopulations were identified based upon tobacco product consumption prevalence and other social and economic barriers that impact health. For instance, since 2017 the prevalence of little cigar use has decreased among the general population by 22.7% but has not decreased among Black and Hispanic populations. Black (65%) and Hispanic (59.5%) smokers report making an annual quit attempt at higher rates compared to the general population (52.5%). However, only about half of Black (51.7%) and a third of Hispanic (30.7%) smokers utilize evidenced-based cessation aids when quitting. In addition, among Florida adult smokers, Black and Hispanic smokers are more likely to use menthol cigarettes which make smoking easier to start and harder to quit.

GOAL: Identify and eliminate tobacco-related disparities

Objectives	Strategies
4.1: By November 2027, decrease the prevalence of combustible tobacco product use among Florida's Priority Populations as noted in Table 2 below. ⁴	<ol style="list-style-type: none"> 1. Systematically review activities within the strategic plan to determine their impact on sub-populations. 2. Conduct comprehensive media campaigns tailored for populations experiencing health disparities. 3. Increase support for the use of evidence-based, best practices for reducing tobacco and nicotine use across all populations. 4. Invest in diverse communities and reduce tobacco impacts.
4.2: By November 2027, decrease the prevalence of electronic vapor product use among Florida's Priority Populations as noted in Table 3 below. ⁴	

Table 2:
Objective 4.1 Baseline and Targets by Adult Priority Population

Table 3:
Objective 4.2 Baseline and Targets by Adult Priority Population

Priority Populations	Baseline	2027 Target
Black Non-Hispanic	21.3%	20.2%
Hispanic	20.8%	19.8%
LGBTQ	37.1%	35.2%
Low Income <30k	28.2%	26.8%
Poor Mental Health*	31.5%	29.9%

Priority Populations	Baseline	2027 Target
LGBTQ	23%	21.9%
Low Income <30k	9%	8.6%
Poor Mental Health*	14.2%	13.5%
Younger Adults <34	17.3%	16.4%

*14+ days (out of the past 30) of "not good" mental health (stress, depression, problems with emotions, etc.)

#5 Tobacco Control Infrastructure

This priority area focuses on establishing a statewide tobacco control leadership framework that will be used to identify, implement, and coordinate tobacco prevention and control activities that drive policy change. Partners will collaborate with tobacco control advocates to create a statewide tobacco control coalition consisting of national, state, and local tobacco control advocates.

GOAL: Establish and enhance statewide tobacco control leadership to identify, implement, and coordinate tobacco prevention and control activities that drive effective policy change

Objectives	Strategies
5.1: By November 2023, develop membership for a statewide tobacco control coalition consisting of national, state, and local tobacco control advocates.	1. Build a comprehensive coalition membership.
5.2: By November 2024, develop a coalition structure that supports shared leadership and decision making.	1. Develop a coalition structure that supports shared leadership and decision making.
5.3: By November 2025, implement activities to support the statewide tobacco control coalition's goals and objectives.	1. Systematically review activities within the strategic plan to identify opportunities for increased coordination between state and local tobacco control advocates. 2. Invest in coalition capacity building.

#6 Research and Surveillance

This priority area focuses on identifying emerging tobacco products and industry tactics through new and existing surveillance and monitoring systems. Additionally, this includes identifying evidence-based and promising practices for tobacco prevention and control through research partnerships. Partners will develop new research partnerships with state, local, and academic communities to share research and to promote innovations in tobacco surveillance, programs, treatments, and policies.

GOAL: Increase research and monitoring of emerging tobacco products and industry tactics in order to initiate the adoption of effective tobacco control policies

Objectives	Strategies
6.1: By November 2023, develop 1 consortium of emerging and established academic-based tobacco control research programs to promote innovations in tobacco education programs, treatments, and policies.	<ol style="list-style-type: none">1. Develop a working group to guide partners through the initial stages of the consortium’s development.2. Invest in strengthening practice-based research competency among partners.
6.2: By November 2027, monitor retail markets and media channels quarterly to identify new and emerging tobacco and nicotine products, and industry marketing strategies targeting priority populations.	<ol style="list-style-type: none">1. Build research partnerships with Florida’s public and private universities, and research institutions.2. Monitor and evaluate tobacco use among Floridians through existing population-based surveillance systems (e.g., FYTS, BRFSS, FLATS).3. Monitor and evaluate emerging tobacco products in the United States and Florida.
6.3: By November 2027, communicate surveillance and research findings by priority population at least annually to state and community partners.	<ol style="list-style-type: none">1. Develop and promote opportunities for Florida’s tobacco control research, surveillance, and evaluation partners including students to share data, research priorities, and findings.2. Educate partners, policy makers, and the public on evidence-based, and promising practices for preventing and treating tobacco and nicotine use.

Aligning Strategies for Tobacco Prevention and Control



Aligning Strategies for Tobacco Prevention and Control



Tobacco is a risk factor for chronic illnesses, including asthma, cancer, cardiovascular diseases, diabetes, and stroke. The Plan presents comprehensive approaches to tobacco control through coordinated efforts between public, private, and non-profit organizations, community members, providers, advocates, and policy makers.




To impact social norms and foster action for tobacco control strategies, the Plan was developed to align with national guidelines and recommendations as well as with the activities of other state chronic disease and cancer strategic plans, including the following:

- [2022-2027 Florida State Health Improvement Plan](#)
- [2019-2024 Florida Asthma State Plan](#)
- [2020-2025 Florida Cancer Plan](#)

With an emphasis in statewide collaboration to encourage and promote tobacco control activities, a greater focus includes working across health sectors. Working across sectors increases opportunities to improve health outcomes through further alignment with public health programs engaged in community prevention and education efforts. Table 4 below shows the linkages between tobacco control and other health issues and opportunities for coordination.

Table 4 Links Between Tobacco Control and Priority Health Issues

Health Issues	Link to Tobacco Control	Opportunities for Coordination
<p>Behavioral Health</p> 	<p>Smoking is more common among adults with mental health conditions, such as depression and anxiety. The current cigarette smoking rate among those with behavioral health conditions is 17.8% as compared to 10.6% among - the general population.¹ Quitting tobacco promotes abstinence from other substances, lowers the risk for relapse, reduces overall substance abuse, and lowers the chances of developing serious diseases.</p>	<ul style="list-style-type: none"> • Provide education to behavioral health partners on the link between tobacco use and a person’s mental health. • Encourage health care providers to screen for tobacco use and promote evidence-based cessation treatments for clients with behavioral health and/or mental health conditions. • Promote comprehensive tobacco free policies at substance use treatment and recovery facilities.
<p>Asthma</p> 	<p>Tobacco smoke is a common trigger for asthma and is especially unhealthy for people with asthma. In Florida, 8.4% of all adults currently have asthma¹ and 9.3% of students currently have asthma.³ Comprehensive tobacco free policies protect people with asthma from unnecessary exposure to secondhand smoke.</p>	<ul style="list-style-type: none"> • Provide education to parents/caregivers, school organizations, and asthma advocacy groups on the link between secondhand smoke and asthma. • Collaborate with the Florida Asthma Coalition, and other state and local partners to support comprehensive tobacco free policies. • Collaborate with the Florida Asthma Program to promote access to evidence-based cessation treatments.

Health Issues	Link to Tobacco Control	Opportunities for Coordination
<p>Diabetes</p> 	<p>In Florida, 11% of adults have ever been told they have diabetes.¹ When people with type 2 diabetes are exposed to high levels of nicotine, their insulin is less effective. Quitting tobacco reduces the chances of having type 2 diabetes.</p>	<ul style="list-style-type: none"> • Encourage health care and social service providers to screen for tobacco use and promote evidence-based cessation treatments for clients with diabetes and prediabetes. • Partner with the Diabetes Prevention Program and local health associations to promote access to evidence-based cessation treatments and comprehensive tobacco free policies.
<p>Cancer</p> 	<p>9 out of 10 lung cancer deaths are connected to smoking and more women die from lung cancer each year than from breast cancer.⁵ Smoking cigarettes weakens the body's immune system, making it harder to kill cancer cells. Reducing exposure to secondhand smoke and quitting tobacco lowers the risk for cancer.</p>	<ul style="list-style-type: none"> • Encourage health care providers to promote evidence-based cessation treatments for cancer patients who continue to use tobacco at any stage during and after cancer diagnosis. • Partner with cancer advocacy and survivor groups to promote access to evidence-based cessation treatments and comprehensive tobacco free policies.
<p>Heart Disease/ Stroke</p> 	<p>9.7% of Florida adults have been told they had coronary heart disease, a heart attack, or a stroke.¹ Breathing in secondhand smoke can cause a heart attack or stroke.⁶ Quitting tobacco reduces the risk for heart disease and stroke.</p>	<ul style="list-style-type: none"> • Encourage health care providers to screen for tobacco use and promote evidence-based cessation services to patients who suffer from or are at risk for cardiovascular disease. • Partner with Heart Health Plus, WISEWOMAN, and other programs to support tobacco cessation and promote access to evidence-based cessation treatments and comprehensive tobacco free policies.



Statewide Partner Agencies and Programs



Statewide Partner Agencies and Programs

Throughout the strategic planning process, statewide partner agencies and programs came together to participate in and lead strategic planning efforts. In addition, they developed a statewide plan setting forth initiatives to reduce tobacco use and eliminate exposure to secondhand smoke and electronic vapor product aerosol. The following are key groups that are necessary for the success of the Florida Tobacco Strategic Plan.



American Cancer Society

The American Cancer Society (ACS) is a nationwide, community-based voluntary health organization dedicated to eliminating cancer as a major health problem. The ACS's mission is to save lives, celebrate lives, and lead the fight for a world without cancer. ACS promotes healthy lifestyles to help prevent cancer, advocate for lifesaving policy changes, and provide resources from emotional support to the latest cancer information for those who have been touched by cancer.



American Cancer Society Cancer Action Network

The American Cancer Society Cancer Action Network (ACS CAN) is a nonprofit, nonpartisan advocacy affiliate of the American Cancer Society. ACS CAN advocates for better access to care, cancer prevention and early detection programs, cancer research funding, regulation of tobacco by the U.S. Food and Drug Administration, better quality of life for cancer patients, and attempts to raise awareness of and reduce cancer disparities. Members of ACS CAN include cancer survivors, caregivers, patients, volunteers, and students, including Colleges Against Cancer.



American Heart Association

The American Heart Association (AHA) is a national, non-profit, voluntary health agency funded by private contributions, is dedicated to the reduction of death and disability from cardiovascular diseases including heart diseases and stroke. AHA's mission is to advance the health of all individuals and communities.



American Lung Association

The American Lung Association's (ALA) mission is to save lives by improving lung health and preventing lung disease through education, advocacy, and research. The ALA is focused on defeating lung cancer, creating a tobacco free future, championing clean air for all, and improving the quality of life for those with lung disease and their families.



Bureau of Tobacco Free Florida

The State of Florida Constitution requires the funding of a statewide tobacco education and prevention program that follows the CDC's Best Practices for Comprehensive Tobacco Control Programs. The Bureau of Tobacco Free Florida was developed to administer the Tobacco Free Florida program through the Florida Department of Health (FDOH).

Acknowledgements

Thank you to the below contributing partners for your time and efforts to shape the 2022-2027 Florida Tobacco Strategic Plan. Contributing partners participated and collaborated in strategic planning meetings and in the development and refinement of priority areas, goals, objectives, strategies, and activities. We look forward to a continued partnership as we carry out the Plan.

Advent Health
American Cancer Society
American Heart Association
American Liver Foundation
American Lung Association
Be Free Lake, Inc.
Big Bend Area Health Education Center
Campaign for Tobacco-Free Kids
Career Source Florida
Central Florida Area Health Education Center
Chemical Addictions Recovery Effort, Inc.
Civic Communications
Community Coalition Alliance
Drug Free Punta Gorda
Englewood Community Coalition, Inc.
Florida Department of Children and Families
FDOH County Program Offices
Alachua County
Brevard County
Collier County
Franklin County and Gulf County
Gadsden County
Hardee County
Hendry County
Holmes County
Hillsborough County
Leon County
Madison County
Manatee County
Miami-Dade County
Monroe County
Okaloosa County
Orange County
Palm Beach County
St. Lucie County
Taylor County

FDOH Healthy Start
FDOH Office of Minority Health
Florida Office of the State Attorney
Florida State University Behavioral Health
Gang Alternative, Inc.
Gulf County School District
Gulfcoast North Area Health Education Center
Gulfcoast South Area Health Education Center
Hanley Foundation
Keys Area Health Education Center
Lee County School District
Live Tampa Bay
Manatee County Sheriff's Office
Moffitt Cancer Center
New Horizons of the Treasure Coast
Northeast Florida Area Health Education Center
Nova Southeastern University
Parents Against Vaping E-cigarettes
Quit Doc Research and Education Foundation, Inc.
Students Working Against Tobacco Citrus County Chapters
Suwannee River Area Health Education Center
Tobacco Education and Use Prevention Advisory Council Members
Truth Initiative
University of Florida
University of Miami Miller School of Medicine
University of Miami Area Health Education Center
University of South Florida
University of Tampa
Walton County Prevention Coalition
WellFlorida Council

Appendix

Acronyms

ACS	American Cancer Society
ACS CAN	American Cancer Society Cancer Action Network
ALA	American Lung Association
AHA	American Heart Association
BRFSS	Behavioral Risk Factor Surveillance System
CDC	Centers for Disease Control and Prevention
FDOH	Florida Department of Health
EVP	Electronic Vapor Product
FCIAA	Florida Clean Indoor Air Act
FLATS	Florida Adult Tobacco Survey
FYTS	Florida Youth Tobacco Survey

Glossary of Terms

BRFSS	A rolling telephone survey of Florida adults on a wide range of health issues including, but not limited to: physical activity, diet, tobacco and alcohol use, HIV/AIDS, asthma, diabetes, and cancer screenings.
Combustible Tobacco Product	Cigarettes, cigars, cigarillos, and hookah.
Commercial Tobacco	Tobacco manufactured and sold by the commercial tobacco industry. It does not include “traditional tobacco” used by Indigenous groups for religious or ceremonial purposes.
Commercial Tobacco-Related Disparities	Differences in: <ol style="list-style-type: none"> 1. Patterns, prevention, cessation, and treatment of commercial tobacco use and dependence 2. Commercial tobacco related risk, prevalence, morbidity, and mortality that exist among specific population groups in the United States, and globally 3. Related differences in health capacity and infrastructure, access to health resources, and exposure to secondhand smoke and aerosol emissions
EVP	E-vaporizers, or electronic nicotine delivery systems, are battery-operated devices that people use to inhale an aerosol, which typically contains nicotine (though not always), flavorings, and other chemicals.
Evidence Based Cessation Treatments	Evidence-based cessation treatments include products that are approved by the U.S. Food and Drug Administration to help people quit using tobacco. These products include nicotine patch, gum, inhaler, nasal spray, or lozenge; prescribed a prescription medication; help from a Quit line; counseling; and web-based quit smoking program.
FLATS	An annual cross-sectional survey that assesses tobacco use and behavior among adults aged 18 or older in Florida.
FYTS	A survey that tracks indicators of tobacco use and exposure to secondhand smoke among Florida public middle and high school students and provides data for monitoring and evaluating tobacco use among youth for the Florida Department of Health’s Bureau of Tobacco Prevention and Control.
Health Disparity	Differences in health outcomes and their determinants between segments of the population, as defined by social, demographic, environmental, and geographic attributes.

Priority Population	Population of particular focus for tobacco prevention and cessation because a tobacco-related health disparity exists and/or there is a potential for significant impact with this group.
Quitline	Telephone-based tobacco cessation services that help tobacco users quit. Services offered by quitlines include coaching and counseling, referrals, etc.
Secondhand Electronic Vapor Product Aerosol	Secondhand electronic vapor product aerosol is the aerosol exhaled by an e-cigarette user.
Secondhand Smoke	Substance produced from burning tobacco products (e.g., cigarettes, cigars, or pipes) and the substance exhaled by the person smoking.
Smokers	Smokers include the use of cigarettes, cigars, and cigarillos.
Tobacco	The term used to reference commercial tobacco, which is manufactured and sold by the commercial tobacco industry.
Tobacco Cessation	The process of quitting use of tobacco products.
Tobacco Control	A field dedicated to addressing tobacco use and thereby reducing the harms it causes.
Tobacco-Related Disparities	Differences among population groups with regard to key tobacco-related indicators, including patterns, prevention, and treatment of tobacco use; the risk, incidence, morbidity, mortality, and burden of tobacco-related illness; and capacity, infrastructure, and access to resources; and secondhand smoke exposure.

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