



# Tobacco Prevention & Control

## Region 1 Health Services

**Over 400,000 Americans die each year due to tobacco related diseases. Together, we can help stop the epidemic.**



## **RESOURCE GUIDE INTRODUCTION**

Thank you for your interest in tobacco prevention and control. We hope that this booklet will be a valuable resource for you, your loved ones, and your community. Enclosed, you will find facts related to tobacco's role on ones health, secondhand smoke information, financial costs of tobacco and gains from cessation, help for cessation, and lists of resources available within your local community.

The Texas Department of State Health Services is committed to serving you. If you or your organization is interested in learning more about tobacco prevention or cessation, please contact our regional coordinator:

Jennifer Hasty  
jennifer.hasty@dshs.state.tx.us  
(806) 783-6470

We are available to speak at on-site trainings for you and your employees, or for general education sessions for your community and school staff.

We also offer resources to coalitions and health care providers in order to better serve your stakeholder populations and clients.

**Thank you!**

## **TABLE OF CONTENTS**

- 4) Tobacco Trivia**
- 5) What's in Cigarettes?**
- 6) Why Are Chemicals Added?**
- 7) Tobacco Abuse Hurts More Than the Smoker**
- 8) Tobacco Use in Texas**
- 9) Preventable Hospitalizations**
- 10) Risk Factor for Preventable Illness**
- 12) FDA Tobacco Regulations**
  
- Media campaigns that support tobacco prevention  
and cessation efforts in Texas:**
  - 14) WorthIt?**
  - 15) Duck: Tobacco is Foul**
  - 16) Spit It Out**
  - 17) Share Air**
  - 18) Yes You Can!**
  
- 19) Health Provider Toolkit**
- 22) New Tobacco Products for Children**
- 23) World No-Tobacco Day**
- 24) Great American Smokeout**
- 25) Tar Wars**
- 26) Tobacco Prevention Information**
- 27) More Websites**

## **GENERAL TOBACCO TRIVIA**

- ◆ The average age a person first starts using tobacco is 12 to 13 years old.
- ◆ Almost 9 out of 10 adults who smoke started before they were 18.
- ◆ A person who smokes 1 pack a day for a year spends approx. \$2184.00 on cigarettes (at an average of \$6.00 a pack).
- ◆ Chewing tobacco, snuff and other forms of smokeless tobacco can cause gum disease and cancer of the mouth, pharynx and esophagus. It may also increase the risk of heart disease and stroke.
- ◆ Studies show nicotine is more addictive than heroin, cocaine and alcohol.
- ◆ Around 3 out of 4 daily cigarette smokers and smokeless tobacco users under age 18 say they keep using tobacco because it is really hard for them to quit.
- ◆ In 2001, the tobacco industry spent a combined \$719.2 million advertising tobacco in Texas. Tobacco is one of the most heavily advertised and promoted products in the U.S.
- ◆ Starting smoking when you're young greatly increases your risk of getting lung cancer. The longer you smoke, the greater your risk for other smoking-related cancers.

Statistics come from the Texas Department of State Health Services; Centers for Disease Control and Prevention; U.S. Surgeon General; Journal of the American Medical Association; American Journal of Health Promotion; and the Campaign for Tobacco-Free Kids.

## WHAT'S IN CIGARETTES?

There is a lot more than just tobacco in cigarettes. Industry documents mention 599 other ingredients added in the manufacturing process. When ignited and combined, the chemical compounds inhaled with each puff come out to more than 4,000.

- **Ammonia:** Used for cleaning floors and toilets
- **Arsenic:** Used in rat poisons
- **Butane:** AKA lighter fluid
- **Carbon Monoxide:** Also found in car exhaust
- **Cadmium:** Used in batteries
- **Cyanide:** Deadly poison
- **DDT:** A banned insecticide
- **Ethyl Furoate:** Causes liver damage in animals
- **Formaldehyde:** Used to preserve carcasses
- **Hydrazine:** Rocket fuel
- **Hydrogen Cyanide:** Rat poison
- **Lead:** Leads to lead poisoning
- **Methyl isocyanate:** An accidental leak of this substance killed 2,000 people in Bhopal, India in 1984
- **Napthalene:** Ingredient in mothballs
- **Polonium:** Cancer-causing radioactive element
- **Tar:** The sticky goo used on roads

At least 69 of the ingredients are proven to cause cancer.

You can see 599 other ingredients at

[www.smokefreedom.net/articles/ingredients.htm](http://www.smokefreedom.net/articles/ingredients.htm)

Don't be fooled. Companies offering "organic" or "all natural" tobacco products are misleading. These are **NOT** better for you. "Organic" just means that the tobacco is farmed without using herbicides and chemical fertilizers. Tobacco companies **STILL** add all the above ingredients to the original organic tobacco in order to produce their products.

## **WHY ARE CHEMICALS ADDED?**

Chemicals are added to tobacco products for many different reasons, mostly to “improve” the quality of the product. What sort of improvements are tobacco companies making and why?

- Nicotine is added to tobacco products (both in cigarettes and smokeless) in order to boost the addictive qualities. Tobacco companies WANT to get people addicted to their product.
- Natural, uncured tobacco is quite harsh on the lungs. Many chemicals are added to cigarettes order to improve the quality and the smoothness of the smoke inhaled, allowing for a user to breathe in smoke more deeply (which contains nicotine and toxins). More nicotine = more chances at addiction.
- The paper and tobacco itself in cigarettes are chemically treated to give an even burn. If you were to light raw tobacco, it would go out without a constant stream of puffing and burn unevenly. Cigarettes are designed to stay lit and burn at a rapid pace in order to get the user to use more.
- Alkaline and pH enhancers are added to smokeless tobacco in order to ensure that more nicotine is absorbed through the bloodstream and to aid in making the chew or dip taste more appealing.
- Sugar and other sweeteners are often added to smokeless tobacco. This is particularly bad for the gums, teeth, and lining of the mouth as it leads to the decay and erosion of both flesh and calcium (gums, cheek lining, and bones).

## **TOBACCO USE HURTS MORE THAN JUST THE SMOKER**

**Smoking is a health threat to nonsmokers. Sidestream (also known as secondhand) smoke is just as dangerous as inhaling a cigarette.**

- Secondhand smoke contains a complex mixture of over 4,000 chemicals, more than 50 of which are cancer-causing agents (carcinogens).
- More than 4,300 non-tobacco using Texans die each year due to problems associated to secondhand smoke exposure.
- Secondhand smoke is associated with an increased risk for lung cancer and coronary heart disease in non-smoking adults.
- Because their lungs are not fully developed, young children are particularly vulnerable to secondhand smoke. Exposure to secondhand smoke is associated with an increased risk for sudden infant death syndrome (SIDS), asthma, bronchitis and pneumonia in young children.

**Tobacco use COSTS Texas businesses and taxpayers money.**

- Tobacco-related disease cost the state approximately \$12.2 billion (\$5.8 billion in direct medical costs and an additional \$6.8 billion in lost worker productivity).
- In 2004, \$1.6 billion of all Medicaid expenditures were spent on smoking-related illnesses and diseases.

**For more information, please visit**

**<http://www.texasobaccolaw.org/facts.php>**

## **TOBACCO USE IN TEXAS (2010-2012)**

***\*Tobacco kills 24, 000 Texans each year\****

Texas has a higher rate of adult smokers and smokeless tobacco users than the national average.

Students who have used tobacco by their senior year	<b>42.8%</b>
High school students who have used smokeless or spit tobacco	<b>14.1% (male majority)</b>
Tried tobacco before age of 13	<b>15.1% of all Texas youth</b>
Kids exposed to secondhand smoke at home	<b>995,000</b>
Packs of cigarettes bought or smoked by kids each year	<b>70.4 million</b>
Adults in Texas who smoke	<b>18.3%</b>

**The West Texas region has a higher average use rate of tobacco, with 24.5% of the population regular users of either cigarettes or smokeless products. 36% of those users are under the age of 30.**

**Tobacco companies want to recruit young, new users to replace those who die from using their product.**

Data collected from the Texas Department of State Health Services Center for Health Statistics: <http://www.dshs.state.tx.us/chs/datalist.shtm> and the CDC: <http://www.cdc.gov/brfss/>

# POTENTIALLY PREVENTABLE HOSPITALIZATIONS (2006-2011)

**Red** = extremely higher than state rate (150%+ higher)  
**Orange** = higher than state rate (100%+ higher)  
**Yellow** = slightly higher than state rate (50% to 99% higher)  
**Green** = similar to state rate (49% more to 49% less)  
**Light Blue** = slightly lower than state rate (50% to 99% lower)  
**Blue** = lower than state rate (100% - 149% lower)  
**Dark Blue** = extremely lower than state rate (150%+ lower)  
 White = rate not determined; residents had less than 20 hospitalizations

*Dallam	*Sherman	*Hansford	*Ochiltree	*Lipscomb
*Hartley	*Moore	*Hutchinson	*Roberts	*Hemphill
*Oldham	Potter	*Carson	Gray	*Wheeler
*Deaf Smith	Randall	*Armstrong	*Donley	Collingsworth
*Parker	*Castro	*Swisher	*Briscoe	Hall *Childress
*Bailey	*Lamb	Hale	*Floyd	*Motley
*Cochran	Hockley	Lubbock	*Crosby	*Dickens *King
*Yoakum	*Terry	*Lynn	*Garza	

## Congestive Heart Failure

*Dallam	*Sherman	*Hansford	*Ochiltree	*Lipscomb
*Hartley	*Moore	*Hutchinson	*Roberts	*Hemphill
*Oldham	Potter	*Carson	Gray	*Wheeler
*Deaf Smith	Randall	*Armstrong	*Donley	Collingsworth
*Parker	*Castro	*Swisher	*Briscoe	Hall *Childress
*Bailey	*Lamb	Hale	*Floyd	*Motley
*Cochran	Hockley	Lubbock	*Crosby	*Dickens *King
*Yoakum	*Terry	*Lynn	*Garza	

## Chronic Obstructive Pulmonary Disease

**TOBACCO ABUSE** is a risk factor for multiple preventable illnesses including Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, Asthma, and Cancer.

**Current Tobacco Users 2010-2011**

Region 1	Texas
24.5%	18.3%

**Cardiovascular Health Facts 2010-2011**

Prevalence of Cardiovascular Disease (CVD)					
CVD		Heart Disease		Stroke	
Region 1	Texas	Region 1	Texas	Region 1	Texas
8.6%	8.6%	7.6%	6.7%	2.0%	2.8%

**Asthma 2010-2011**

Prevalence ( ≥ 18 yrs)		Hospitalization Rates (per 10,000)	
Region 1	State	Region 1	State
7.4%	10.3%	10.4	10.4

Source: DSHS Texas Asthma Control Program, Behavioral Risk Factor Surveillance System

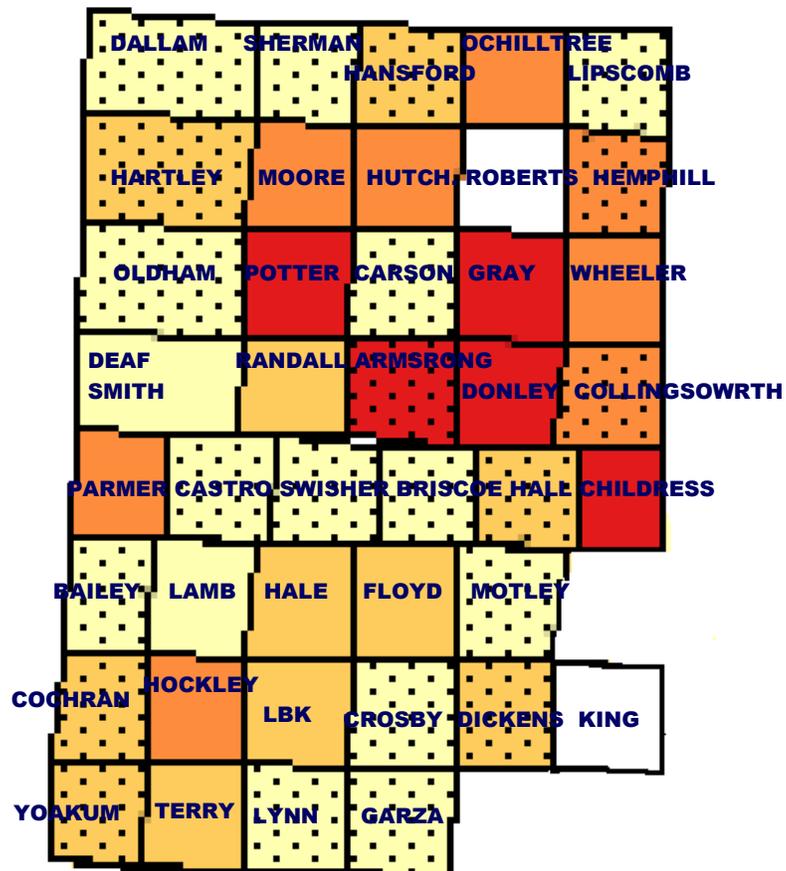
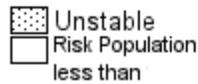
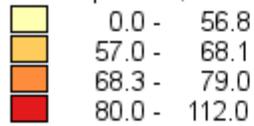
# Respiratory Cancer Rates in Region 1 Counties ~ Above State Rates

## Age-Adjusted Invasive Cancer Incidence Rates in Texas Respiratory System, 2008-2010 By County

Age-Adjusted to the 2000 U.S. Standard Population

Texas Rate: 64.1

Rate per 100,000



## **TEXAS TOBACCO REGULATIONS**

### **The Tobacco Law Summary**

The Tobacco Law is a comprehensive approach to reducing children's access to tobacco products.

Specifically, the law:

- Makes an employee who sells tobacco to a minor criminally responsible for the violation, a Class C misdemeanor.
- Requires tobacco retailers to verify the age of purchasers appearing to be younger than 27 years of age through the use of photo identification.
- All tobacco retailers must post a warning sign required by law and provided by the Texas Comptroller's office.



PURCHASING OR ATTEMPTING TO PURCHASE TOBACCO PRODUCTS BY A MINOR UNDER 18 YEARS OF AGE IS PROHIBITED BY LAW. SALE OR PROVISION OF TOBACCO PRODUCTS TO A MINOR UNDER 18 YEARS OF AGE IS PROHIBITED BY LAW. UPON CONVICTION, A CLASS C MISDEMEANOR, INCLUDING A FINE OF UP TO \$500, MAY BE IMPOSED. VIOLATIONS MAY BE REPORTED TO THE TEXAS COMPTROLLER'S OFFICE BY CALLING 1-800-345-8647.

To view the complete version of the Texas Tobacco Law (Senate Bill 55) visit the Comptroller's Web site:

[www.statutes.legis.state.tx.us/Docs/HS/htm/HS.161.htm#H](http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.161.htm#H)

Retailers must inform employees that **tobacco sales to minors are illegal**. Retailers are subject to a fine and/or permit suspension or revocation upon failure to adequately supervise or train employee. All offenses must be within a 12-month period.

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Minors are penalized for purchasing or possessing tobacco products and must attend a tobacco awareness program or do community service. Failure to attend the tobacco awareness program or do the community service may result in a suspension of the minor's driver's license. A violation is punishable by a fine not to exceed \$250. Upon producing evidence of attending a tobacco awareness program or doing the community service, the charge may be dismissed except in the case of repeated offenses.

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- ▶ Vending machine and self-service sales are restricted except in places not open to those under 18 years of age.
- ▶ Giveaways of free samples and coupons to anyone under 18 are prohibited.
- ▶ Sales of cigarettes of less than 20 per pack (Kiddie Packs) are prohibited.
- ▶ Outdoor advertising is prohibited within 1,000 feet of a church or school.

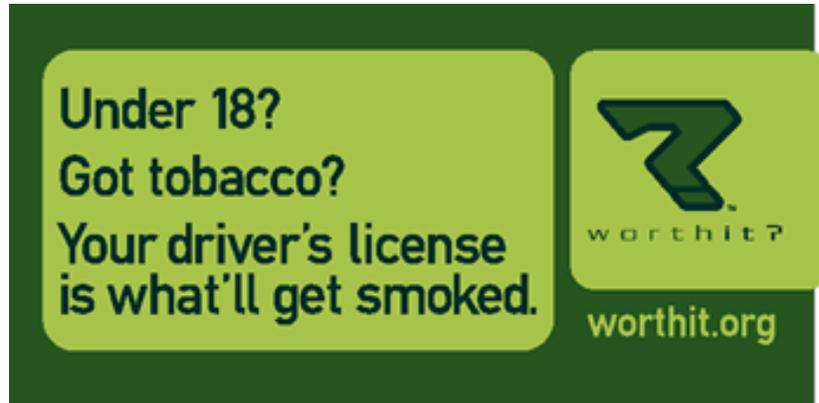
#### **Texas Education Code Sec. 38.006. Tobacco on School Property**

##### **School district shall:**

- ◆ Prohibit smoking or using tobacco products at a school-related or school-sanctioned activity on or off school property;
- ◆ Prohibit students from possessing tobacco products at a school-related or school-sanctioned activity on or off school property;
- ◆ Ensure that school personnel enforce the policies on school property.

## **MEDIA CAMPAIGNS**

DSHS is spearheading several media and cessation campaign initiatives to counteract the tobacco industry's own media initiatives. Our programs are free and open to any Texas resident.



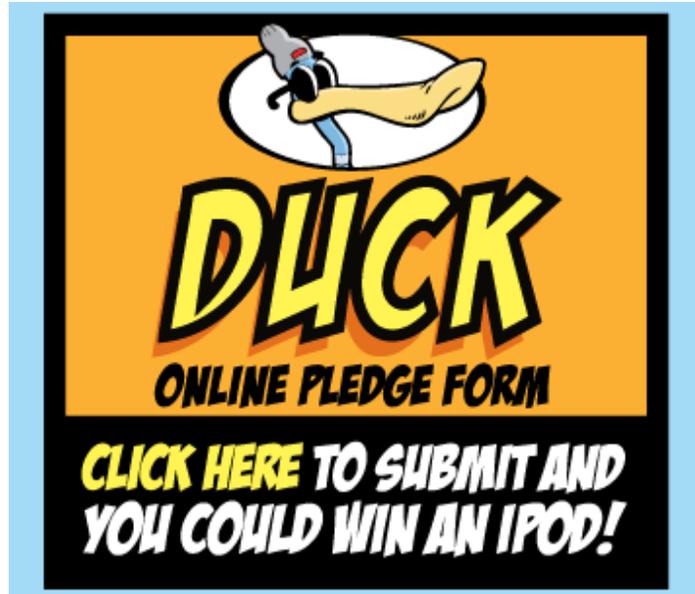
The *Worthit?* campaign targets teenagers 13-17, with a secondary audience of adults. *Worth It?* presents the facts about tobacco use and its consequences and challenges teens to decide for themselves.

Includes a calculator to determine the "Price of Smoking" and the "Life You'll Lose." Also includes videos and the option to Send a Tombstone to someone you love.

**[www.worthit.org](http://www.worthit.org)**

The *Worthit?* website also includes a link for more information on the Texas Youth Tobacco Awareness Program (TYTAP). This program is an evidence based model adopted by DSHS' Youth Offender Program to offer education and cessation classes to teens in lieu of community service if they are caught with tobacco.

You can visit <http://www.worthit.org/instructors> for more information on how to become a licensed TYTAP instructor, as well as a full list of instructors in your area.



### ***DUCK – Tobacco is Foul***

This campaign targets 9-12 year olds through out-reach activities; a web site; and television, radio, Internet, and theater advertisements. The campaign's goal is to prevent youth from experimenting with tobacco and to motivate those who are already experimenting to quit.

Messages emphasize tobacco's negative consequences on appearance, social life, and health.

[www.ducktexas.com](http://www.ducktexas.com)

## ***Spit It Out***

This educational campaign was designed to prevent smokeless tobacco use by Texas youth in rural areas. The campaign consists of youth-oriented outreach, a web resource for teens, and television, radio, and online advertising.

[www.spititouttexas.org](http://www.spititouttexas.org)

### **Nicotine and Smokeless Tobacco Facts**



- ◇ The average starting age for a Texas teen using smokeless tobacco is 13. *Source: Texas School Survey of Substance Using Among Students*
- ◇ Four percent of Texas adults use smokeless tobacco, yet 8 percent of Texas youth use it. *Source: BRFSS Survey; 2006 Youth Tobacco Survey*
- ◇ Adolescents who use smokeless tobacco are more likely to become cigarette smokers. *Source: U.S. Department of Health and Human Services*
- ◇ Dippers may be exposed to more cancer-causing chemicals than a one-pack-a-day cigarette smoker, based on the higher nicotine levels per serving in smokeless tobacco. *Source: American Legacy Foundation*
- ◇ Regardless of its form — whether smokeless or cigarettes — all tobacco contains nicotine, which is highly addictive. *Source: Centers for Disease Control and Prevention*
- ◇ Nicotine continues to be absorbed in the bloodstream, even after the smokeless tobacco has been removed from the mouth. *Source: American Legacy Foundation*
- ◇ Smokeless tobacco is not a safe substitute for smoking cigarettes. It can cause cancer and a number of non-cancerous oral conditions. *Source: U.S. Surgeon General*



The *Share Air* media campaign educates the public about dangers of secondhand smoke.

**Clean air is not an extravagance. It's essential.**

Secondhand smoke is a health risk for everyone — you, your coworkers, and your loved ones. Exposure to secondhand smoke occurs in the workplace and public places such as restaurants and bars. There is no safe level of exposure to secondhand smoke. Tobacco smoke contains more than 4,000 chemical compounds, more than 50 of which are known to cause lung and other cancers. Many of these chemicals have also been proven to cause emphysema, premature death, and heart disease — even among nonsmokers. In adults, secondhand smoke exposure causes approximately 50,000 deaths each year.

You can help bring awareness to this issue in your community and help promote the principle that everyone has the right to breathe clean air. The only way to fully protect anyone from secondhand smoke exposure is to completely eliminate smoking in indoor spaces.

**Elimination of Exposure to Secondhand Smoke**

Studies continue to demonstrate that exposure to secondhand smoke is linked to cancer and other serious health consequences. Placing restrictions on smoking in public places is an effective strategy to limit the public's exposure to secondhand smoke. DSHS maintains a website designed to track the state's progress toward a smoke-free Texas.

<http://txshsord.coe.uh.edu/>.



***Yes You Can! ¡Sí Se Puede!***

This statewide campaign encourages Texas adults to take the first steps to quit tobacco by seeking the support and information they need through family, health care providers, and the American Cancer Society's toll-free Quitline.

Through the Quitline, callers have access to tobacco cessation counselors and nicotine replacement therapy (such as patches, gum, etc.). The Quitline provides these services at no charge to all Texans throughout all counties.

**1-877-YES-QUIT**

**Yes You Can Quit**

## **HEALTH PROVIDER TOOLKIT**

DSHS has compiled a kit of clinic resources for health care providers and educators. The Healthcare Provider Toolkit is an evidence-based resource for clinicians to help their patients quit tobacco. The influence a clinician's advice can have on a patient's tobacco use is enormous. In fact, in less than three minutes of counseling, you can double a patient's success in quitting. The toolkit is designed to provide that 3 minutes of counseling to all patients who use tobacco. Within each toolkit, we provide:

- Intro guide to the "Ask, Advise, Assess, Assist, Arrange" module
- Patient information brochures
- Billing guides for your patient referrals and counseling
- Instructions on how to incorporate tobacco cessation into your electronic health records program
- Pharmacotherapy quick reference guide
- Resources for healthcare practitioners

**More information can be found at:**

**<http://qa.yesquit.com/healthcare-providers>**

The Quitline is designed with both the clinician and the patient in mind. Patients get the intervention they require, while the process for billing and referrals for the clinician has been streamlined to take a minimum amount of your time.

The Quitline will call the patient at a time of their choosing, if they request further cessation guidance.

The Texas YesQuit Website also offers an online referral form for health care providers that may be accessed through a phone or tablet.

**<http://www.yesquit.org/referral-form/>**



### Quitline FAX Referral Form

Fax Number: 1-800-483-3114

**PROVIDER INFORMATION:**

Fax Sent Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Clinic Name: \_\_\_\_\_

Health Care Provider: \_\_\_\_\_

Contact Name: \_\_\_\_\_

I am a HIPAA-Covered Entity (Please check one)  Yes  No  I Don't Know

Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Comments: \_\_\_\_\_

**PATIENT INFORMATION:**

Gender: male / female Pregnant? Y N

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary #:(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Type:  HM  WK  CELL  OTHER

Secondary #:(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Type:  HM  WK  CELL  OTHER

Language Preference (check one):  English  Spanish  Other - \_\_\_\_\_

Tobacco Type (check ALL that apply):  Cigarettes  Smokeless Tobacco  Cigar  Pipe

\_\_\_\_ I am ready to quit tobacco and request the Quitline contact me to help me with my quit plan.  
(Initial)

\_\_\_\_ I DO NOT give my permission to the Quitline to leave a message when contacting me.  
(Initial)

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

The Quitline will call you. Please check the BEST 3-hour time frame for them to reach you. NOTE: The Quitline is open 7 days a week; call attempts over a weekend may be made at times other than during this 3-hour time frame.

6am - 9am  9am - 12pm  12pm - 3pm  3pm - 6pm  6pm - 9pm

Within this 3-hour time frame, please contact me at (check one):  Primary  Secondary

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Confidentiality Notice: This facsimile contains confidential information. If you have received this facsimile in error, please notify the sender immediately by telephone and confidentially dispose of the material. Do not review, disclose, copy, or distribute.

## **HHS ENTERPRISE EMPLOYEES**

**HHS Enterprise Employees Smoking Cessation Benefit offers a prescription medication to current HHS Enterprise employees.**

**Health and Human Services Enterprise employees, with Caremark/HealthSelect benefits, who also enroll in free Quitline tobacco cessation counseling, are eligible for up to three months of prescription medication depending on the treatment protocol. Employees who are interested in taking advantage of this limited benefit simply call the Quitline at 1-877-YES-QUIT (1-877-937-7848).**

## NEW TOBACCO PRODUCTS MARKETED TO CHILDREN

503,000 kids now under 18 and alive in Texas will ultimately die prematurely from smoking.



The Camel dissolvable products appeal to children in that they are easily concealed and colorfully packaged, shaped and flavored to resemble mints or gum.

Electronic cigarettes pose a possible emerging threat. There have been no definitive studies done on the health of e-cigarette users after extended usage. The FDA has no formal restrictions on the use of electronic cigarettes, including **no age limit legislation** as of 2013. The CDC reports that e-cigarette usage in youth ages 12-17 has doubled since 2011. There are also currently no advertisement restrictions on this product as well, so companies are able to create advertisements specifically tailored to target youth.

Electronic cigarettes encompass a wide variety of flavoring that appeal to children, including flavors such as vanilla, chocolate, bubble-gum, cola, lemonade, and brand name candies.



This year thousands of youth in every state and around the world will **STAND OUT ... SPEAK UP ... and SEIZE CONTROL AGAINST BIG TOBACCO.**

Check it out at [www.kickbuttsday.org/](http://www.kickbuttsday.org/)

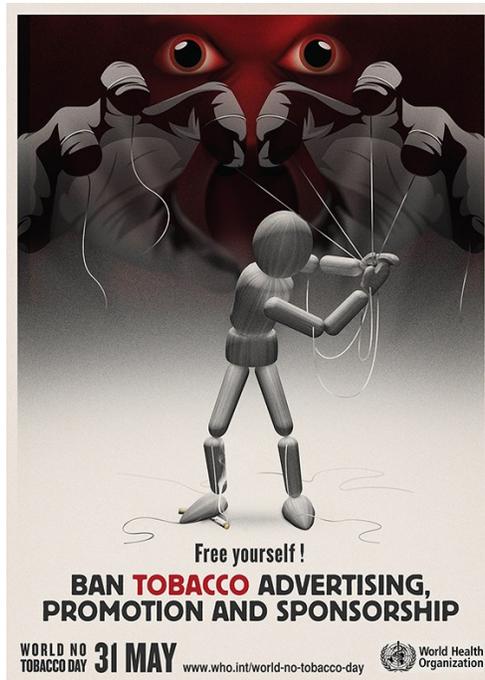
# World No-Tobacco Day

World No Tobacco Day is a global event promoted by the World Health Organization and takes place every year on May 31st. It aims to promote awareness on of tobacco issues on both a local and an international stage. Each year, the message of World No Tobacco Day shifts to focus on the most relevant emerging threat relating to tobacco usage.

The theme of this year's **World No Tobacco Day** is “**Ban Tobacco Advertising.**” Bans on advertising, promotion and sponsorship are one of the most effective ways of reducing tobacco consumption. As more countries make progress towards implementing complete bans, the tobacco industry is increasingly using tactics such as brand extension, product placement and stealth marketing to sell its products.

Tobacco companies spend millions each year on advertising their products, and much of that advertising is viewed by teenagers. In these marketing efforts, tobacco use is presented as sexy, cool, masculine, trendy, glamorous, and fun.

Since current legislation restricts how tobacco companies can advertise to youth, the tobacco industry is constantly trying new promotional tactics using nontraditional media to exploit advertising and promotion bans.



# Great American Smokeout



The American Cancer Society's **Great American Smokeout** on the third Tuesday in November encourages smokers to use the date to make a plan to quit, or to plan in advance and quit smoking that day. By doing so, smokers will be taking an important step towards a healthier life – one that can lead to reducing cancer risk. Quitting smoking is not easy, but it can be done. To have the best chance of quitting successfully, you need to know what you're up against, what your options are, and where to go for help.

[www.cancer.org/Healthy/StayAwayfromTobacco](http://www.cancer.org/Healthy/StayAwayfromTobacco)





## *Tar Wars: a tobacco-free education program for kids*

Tar Wars, led in Texas by the Texas Academy of Family Physicians, is a statewide education program to prevent tobacco use among children. Through in-class presentations to 4th and 5th graders and a subsequent poster contest, Tar Wars provides students with the tools to make positive health decisions and promote personal responsibility for their own well-being.

Goals of the Tar Wars program are to:

- Educate and motivate students to be tobacco-free,
- Mobilize health care professionals to become proactive in their community's health education, and
- Encourage community involvement in support of the Tar Wars program.

Participate in Texas Tar Wars:

- [Sign up](#) to be a presenter,
- [Register your school](#) to be a Tar Wars partner, or
- [Submit a poster](#) to the Texas Tar Wars Poster Contest.

Contact the Texas Academy of Family Physicians by phone at (512) 329-8666 or by [e-mail](#) with any questions about Texas Tar Wars.



## Tobacco Prevention Information ~ Websites ~

### Department of State Health Services / Health Service Region 1

Online Training Modules and PowerPoint Presentations

- ◆ Death in the Mailbox
- ◆ Smokeless Tobacco - CAST KIDS
- ◆ SnusOverview
- ◆ Texas Tobacco Laws
- ◆ The Truth and Health Effects of Tobacco
- ◆ Tobacco Advertising Presentation
- ◆ Tobacco Cessation Toolkit

[www.dshs.state.tx.us/region1/education.shtm](http://www.dshs.state.tx.us/region1/education.shtm)



<http://smokefreetexas.org/>



**Centers for Disease Control and  
Prevention Smoking & Tobacco Use**  
[www.cdc.gov/tobacco/](http://www.cdc.gov/tobacco/)

**Tobacco Free Initiative (TFI)**

[www.who.int/tobacco/en/](http://www.who.int/tobacco/en/)



**TOBACCO NEWS AND INFORMATION** [www.tobacco.org](http://www.tobacco.org)



<http://globalink.org>

## More Websites

### **The Tobacco Industry:**

- ◆ [www.library.ucsf.edu/tobacco](http://www.library.ucsf.edu/tobacco)
- ◆ [www.tobacco.neu.edu](http://www.tobacco.neu.edu)
- ◆ [www.no-smoke.org/getthefacts.php?id=59](http://www.no-smoke.org/getthefacts.php?id=59)
- ◆ <http://tobaccodocuments.org>

### **Tobacco and the Environment:**

- ◆ [www.cigarettelitter.org/](http://www.cigarettelitter.org/)
- ◆ [www.panna.org/legacy/panups/panup\\_20060512.dv.html](http://www.panna.org/legacy/panups/panup_20060512.dv.html)
- ◆ [www.corpwatch.org/article.php?id=3992](http://www.corpwatch.org/article.php?id=3992)

### **How to Quit Smoking:**

- ◆ [www.quitnet.com/qnhomepage.aspx](http://www.quitnet.com/qnhomepage.aspx)
- ◆ [www.makesmokinghistory.org/](http://www.makesmokinghistory.org/)
- ◆ [www.committedquitters.com/](http://www.committedquitters.com/)
- ◆ [www.becomeanex.org/](http://www.becomeanex.org/)
- ◆ [www.smokefree.gov/](http://www.smokefree.gov/)
- ◆ [www.smokefreekids.com/](http://www.smokefreekids.com/)

### **Products to Help Smokers Quit:**

- ◆ [www.nicodermcq.com/](http://www.nicodermcq.com/)
- ◆ [www.nicorette.com/](http://www.nicorette.com/)
- ◆ [www.pfizer.com/products/rx/rx\\_product\\_nicotrol.jsp](http://www.pfizer.com/products/rx/rx_product_nicotrol.jsp)
- ◆ <http://en.wikipedia.org/wiki/Bupropion>
- ◆ [www.smokesignals.net/](http://www.smokesignals.net/)

### **Tobacco Ads and Counter-ads:**

- ◆ [www.adbusters.org/spoofads](http://www.adbusters.org/spoofads)
- ◆ [www.badvertising.org/](http://www.badvertising.org/)
- ◆ <http://anti-smoking-ads.blogspot.com/>
- ◆ [www.tobacco.org/ads/?tdo\\_code=pollay\\_ads](http://www.tobacco.org/ads/?tdo_code=pollay_ads)
- ◆ <http://tobaccodocuments.org/youth/>

## More Websites

### Research Organizations:

- ◆ [www.cancer.org/](http://www.cancer.org/)
- ◆ [www.lungusa.org/](http://www.lungusa.org/)
- ◆ [www.cancer.gov/](http://www.cancer.gov/)
- ◆ [www.srnt.org/](http://www.srnt.org/)

### Research Reports:

- ◆ [www.cdc.gov/tobacco/data\\_statistics/sgr/](http://www.cdc.gov/tobacco/data_statistics/sgr/)
- ◆ [www.cdc.gov/TOBACCO/data\\_statistics/](http://www.cdc.gov/TOBACCO/data_statistics/)
- ◆ [www.who.int/tobacco/resources/publications/en/](http://www.who.int/tobacco/resources/publications/en/)
- ◆ [www.cdc.gov/mmwr/](http://www.cdc.gov/mmwr/)
- ◆ [www.socialclimate.org/](http://www.socialclimate.org/)
- ◆ [www.acsh.org/publications/pubID.188/pub\\_detail.asp](http://www.acsh.org/publications/pubID.188/pub_detail.asp)

### Other Resources and Groups:

- ◆ [www.acscan.org/](http://www.acscan.org/)
- ◆ [www.no-smoke.org/](http://www.no-smoke.org/)
- ◆ [www.cctc.ca/](http://www.cctc.ca/)
- ◆ [www.ash.org/](http://www.ash.org/)
- ◆ [www.anti-smoking.org/](http://www.anti-smoking.org/)
- ◆ [www.yourdiseaserisk.wustl.edu/](http://www.yourdiseaserisk.wustl.edu/)

### Teen Smoking:

- ◆ [www.tobaccofreekids.org/](http://www.tobaccofreekids.org/)
- ◆ [www.cdc.gov/Tobacco/data\\_statistics/surveys/](http://www.cdc.gov/Tobacco/data_statistics/surveys/)
- ◆ [www.legacyforhealth.org/](http://www.legacyforhealth.org/)
- ◆ [www.matchcoalition.com/](http://www.matchcoalition.com/)

### Prevention & Cessation Ad Videos:

- ◆ [www.youtube.com/watch?v=YSCeF6eoLZU](http://www.youtube.com/watch?v=YSCeF6eoLZU)
- ◆ [www.youtube.com/watch?v=6ilCZbTc18M](http://www.youtube.com/watch?v=6ilCZbTc18M)
- ◆ [www.youtube.com/watch?v=VpwcF3Malj8](http://www.youtube.com/watch?v=VpwcF3Malj8)
- ◆ [www.youtube.com/watch?v=t57X\\_y84qg0](http://www.youtube.com/watch?v=t57X_y84qg0)

**For More Information**

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Tobacco Prevention and Control Specialist

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(806) 783-6470

Lubbock, Texas

**Region 1 Coalitions working to prevent and control tobacco abuse:**

- ◆ **West Texas Tobacco Coalition**  
Texas Tech University Garrison Institute  
6601 S. Quaker, Lubbock, TX, 79413  
806-743-7821
- ◆ **Impact Futures (Youth Coalition)**  
2920 Duniven Circle, Amarillo TX, 79109  
806-353-6880
- ◆ **Tobacco Free Amarillo**  
3915 Bell Amarillo, Texas 79109  
806-353-4306

**You can also contact your regional AgriLife extension agent for specific programs in rural areas that may offer cessation and prevention.**

**<http://agriflifeextension.tamu.edu/>**

