

2010 Needs Assessment for Selected Tobacco-free North Texas Communities



**TOBACCO-FREE
NORTH TEXAS**

The Five Needs Assessment Communities

Tobacco-free North Texas (TNT) is dedicated to reducing the burden and impact of tobacco use through education, action, and smoke-free initiatives in Collin, Dallas, Denton, Ellis, and Tarrant counties. This needs assessment focuses on selected communities from those counties. In Carrollton, Denton, Grand Prairie, Irving, and Lewisville, TNT engages in environmental strategies aimed at population level change. The coalition advocacy goals are to educate North Texas cities about the benefits of being 100% smoke-free in public places. The needs assessment was conducted in the fall of 2010 to determine the tobacco use, related health consequences, tobacco-related morbidity and mortality, and analyze the current smoke-free ordinances within the selected communities.

Several of these communities are located in multiple North Texas counties. Please take this into consideration when reviewing the data for each community. A majority of the data collected are only available at the county level.

Figure 1

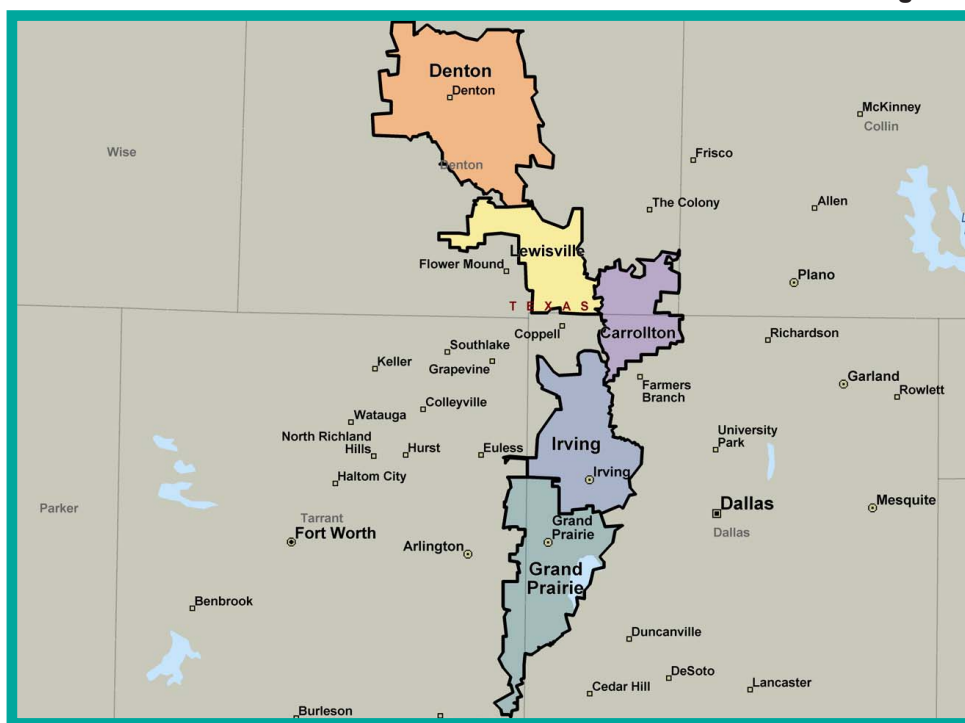


Figure 2 shows the estimated adult population of each city. The adult population is shown because the rest of the data in this assessment address adult smoking behaviors and issues.

Population and Location

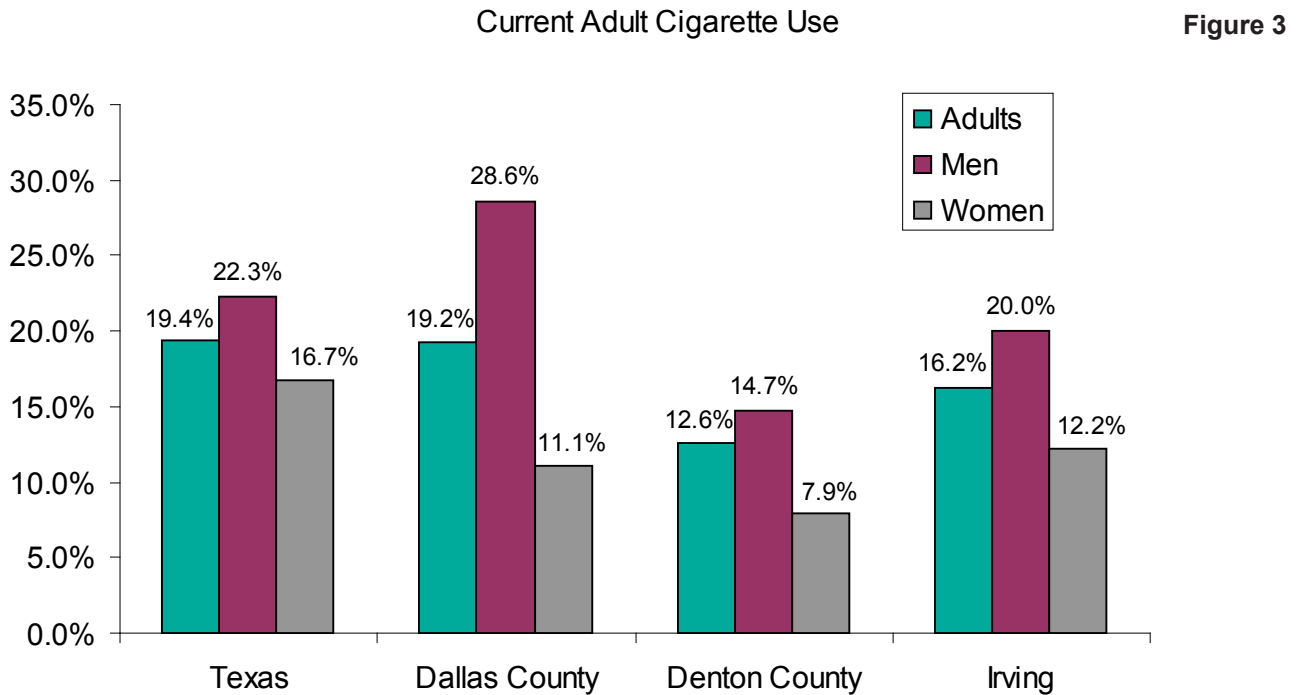
Figure 2

City	Population (18+)	Counties
Carrollton	86,713	Dallas, Denton
Denton	86,325	Denton
Grand Prairie	113,977	Dallas, Ellis, Tarrant
Irving	150,899	Dallas
Lewisville	65,200	Denton

Population data based on 2006-2008 US Census Data.

How Prevalent is Tobacco Use?

Figure 3 shows the most recent available rates for current cigarette use by adults in the five communities. For the purposes of this chart, current use is defined as having at least 100 cigarettes in one's lifetime and still smoking some or every day. The data from Irving were retrieved from a different survey with a very similar question. The Irving survey participants were considered to be current cigarette users if they smoked either regularly (8.7% every day) or occasionally (7.5% on some days).



2004-2007 Adult Behavioral Risk Factor Surveillance Survey (BRFSS), Current Cigarette Use, Texas, June 12, 2009 Handout Michelle Cook, <http://apps.nccd.cdc.gov/brfss>
 2007 PRC Community Health Survey, Professional Research Consultants, City of Irving

Current Smokers by Site

Figure 4 illustrates the number of people who consider themselves to be smokers in each community.

Figure 4

Site	Total Population 2006-08 3 yr Estimate	Estimated Number of Current Smokers
Texas	23,845,989	4,626,122
Carrollton*	86,713	13,834
Denton	86,325	10,877
Grand Prairie	113,977	21,884
Lewisville	65,200	8,215
Irving	150,899	24,446

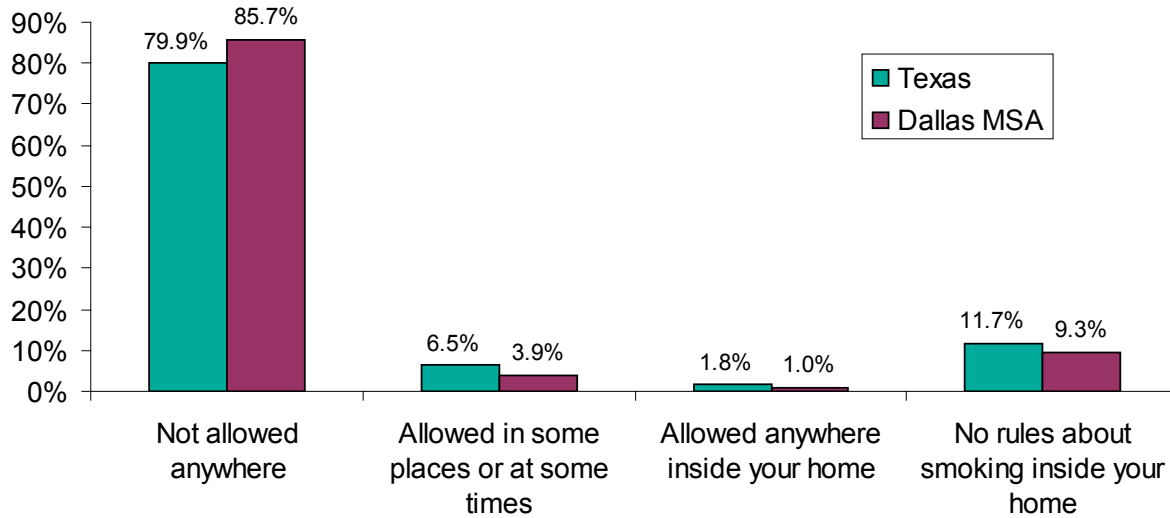
*Carrollton includes the averaged number of smokers from both Denton and Dallas counties

Prevalence of Rules for Smoking

Figures 5 and 6 illustrate how many homes and workplaces have rules or policies in place related to smoking. Residents were asked about smoking rules in their own homes, and about policies where they worked. The Dallas Metropolitan Statistical Area (MSA) is a large area comprised of 8 counties. All five assessment communities fall within the Dallas MSA, but only make up a small portion of the total population represented in these data.

Prevalence of Rules for Smoking in the Home

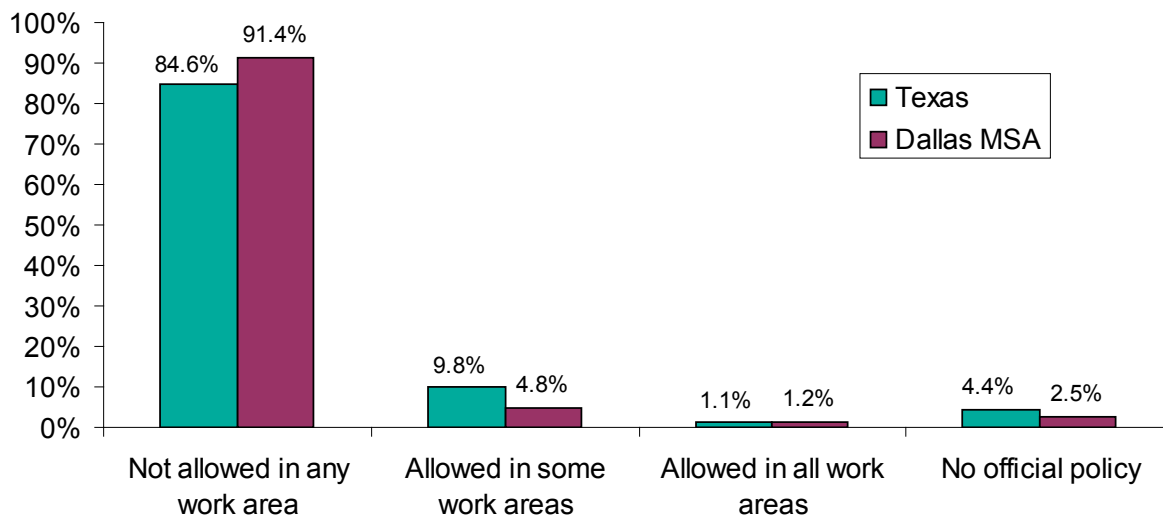
Figure 5



2004, 2005 & 2007 combined Adult Behavioral Risk Factor Surveillance Survey (BRFSS), Current Cigarette Use, Texas, Request from Michelle Cook, <http://apps.nccd.cdc.gov/brfss>
 2009 Adult Behavioral Risk Factor Surveillance Survey (BRFSS), Current Cigarette Use, Dallas-Plano-Irving MSA, Request from Michelle Cook

Prevalence of Rules for Smoking in the Work Area

Figure 6



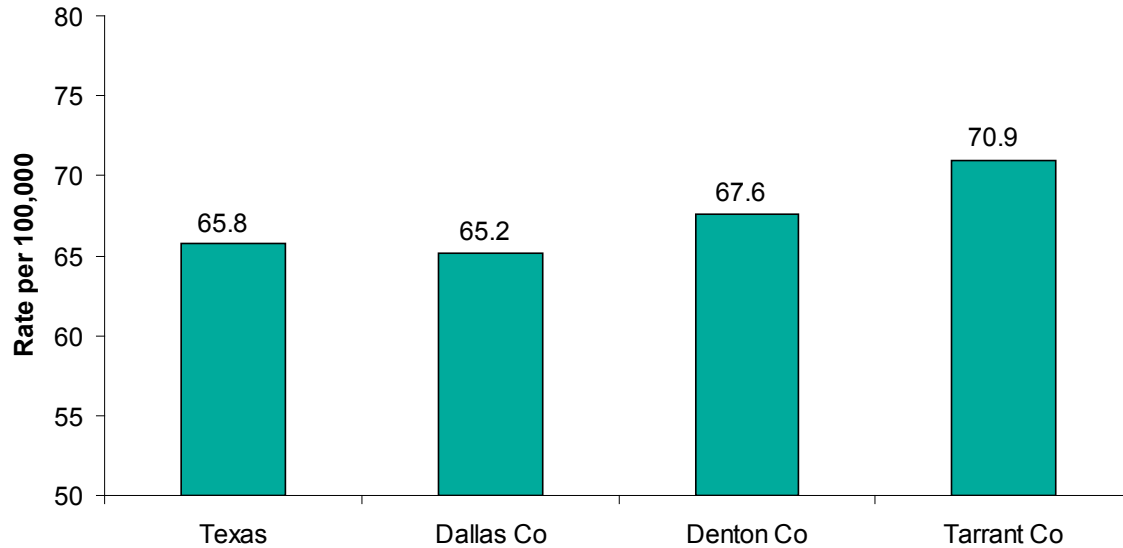
2004, 2005 & 2007 combined Adult Behavioral Risk Factor Surveillance Survey (BRFSS), Current Cigarette Use, Texas, Request from Michelle Cook, <http://apps.nccd.cdc.gov/brfss>
 2009 Adult Behavioral Risk Factor Surveillance Survey (BRFSS), Current Cigarette Use, Dallas-Plano-Irving MSA, Request from Michelle Cook

Tobacco-Related Morbidity & Mortality

The following charts show data related to the consequences and costs of smoking tobacco. Figure 7 shows the estimated rate of new respiratory cancers based on averaged data from the past several years. Figure 8 shows the estimated rate of lung cancer deaths.

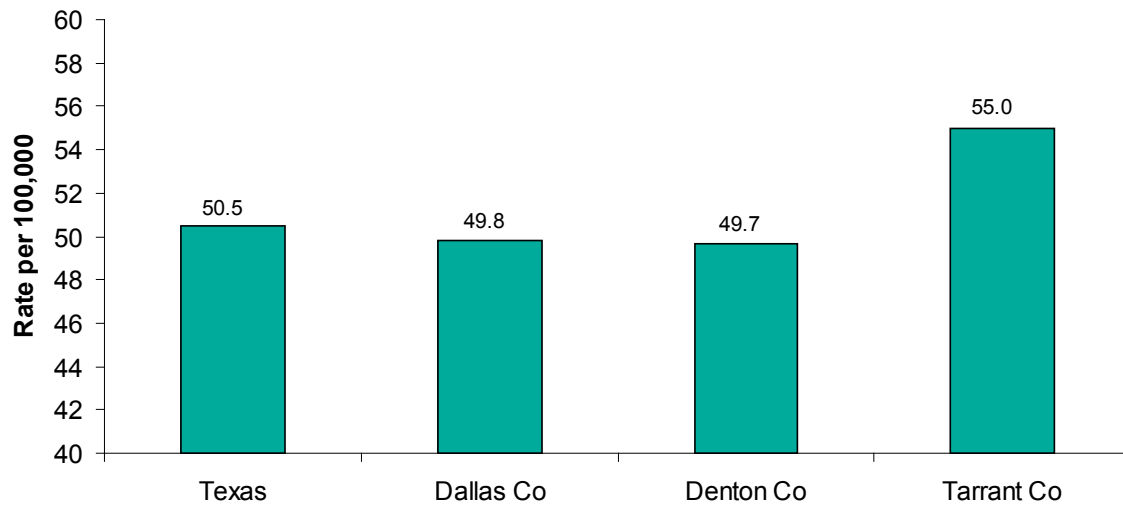
Compared to nonsmokers, men who smoke are about 23 times more likely to develop lung cancer and women who smoke are about 13 times more likely. Smoking causes about 90% of lung cancer deaths in men and almost 80% in women (U.S. Department of Health and Human Services).

Estimated Rate of New Cases of Lung & Bronchus Cancers Across Sites (2003-2007) **Figure 7**



Cancer data have been provided by the Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services, 1100 W. 49th Street, Austin, Texas, 78756, <http://www.dshs.state.tx.us/tcr/default.shtm>
Rates are Age-Adjusted for comparability. <http://www.health.state.ny.us/diseases/chronic/ageadj.htm>

Estimated Rate of Lung Cancer Deaths Across Sites (2003-2007) **Figure 8**



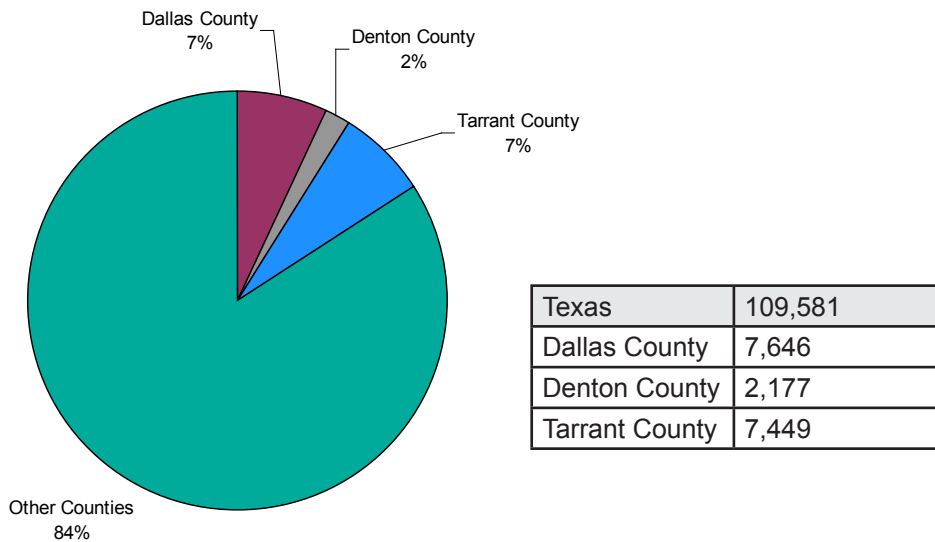
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Tobacco-Related Morbidity & Mortality

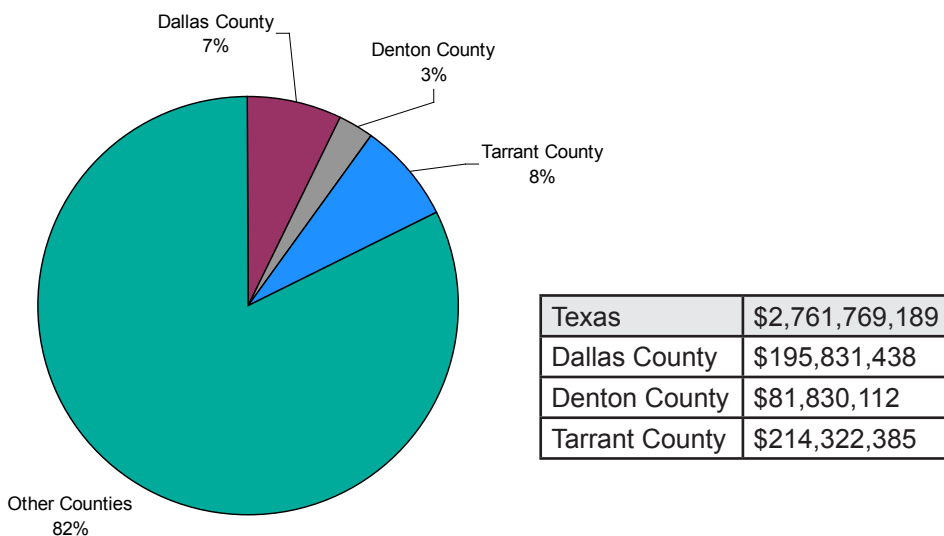
Chronic Obstructive Pulmonary Disease, one of the most preventable causes of hospitalization in Texas is characterized by decreased flow in the airways of the lungs. It consists of three related diseases: asthma, chronic bronchitis and emphysema. Existing medications cannot change the progressive decline in lung function. Communities can potentially prevent hospitalizations by encouraging education on smoking cessation. (Texas Department of State Health Services, Center for Health Statistics, Hospital Discharge Data, <http://www.dshs.state.tx.us/thcic/Hospitals/HospitalData.shtm>).

Figures 9 and 10 show the hospitalizations and costs due to Chronic Obstructive Lung Disease in local counties as they compare to the state-wide amounts.

Number of Potentially Preventable Hospitalizations due to Chronic Obstructive Lung Disease
 DSHS Center for Health Statistics Hospital Discharge Data 2005-2008 **Figure 9**



Total Hospital Charges for Hospitalizations due to Chronic Obstructive Lung Disease
 DSHS Center for Health Statistics Hospital Discharge Data 2005-2008 **Figure 10**



<http://www.dshs.state.tx.us/ph/state.sht>

Municipal Policy Strength

Each community has existing policies regarding smoking in some settings. However, the policies are not 100% comprehensive. Figure 11 shows the levels of protection in each city. The policies are rated on a scale of 1 to 5 with a score of 1 indicating no restrictions on smoking and 5 indicating no smoking is permitted in that setting.

Definitions of each rating:

- 5 - **100% Smoke Free**. No smoking allowed in a particular setting;
- 4 - **Moderate**. Designated smoking areas are allowed if separately ventilated;
- 3 - **Mixed**. Coverage is partial due to exceptions, ambiguities, or legal issues;
- 2 - **Limited**. Designated smoking areas allowed or required;
- 1 - **No Coverage**. No restrictions on smoking. Minor exceptions may exist.

Community Ordinance Strength Ratings

Figure 11

Municipality	Municipal Worksites	Private Worksites	Restaurants	Bars not in Restaurants	Bars in Restaurants
Carrollton	2	1	4	3	3
Denton	1	1	2	1	2
Grand Prairie	1	2	2	2	1
Irving	4	3	4	1	4
Lewisville	2	2	2	1	1

The University of Texas Medical Branch
<http://www.utmb.edu/shsordinances/>

The University of Texas Medical Branch has created a statewide database to keep track of all the ordinances related to smoking in every municipality in Texas. It provides the ratings for all municipal ordinances as well as original ordinance document text when available. To visit this resource, just visit <http://www.utmb.edu/shsordinances/>

Additional Data

Irving Community Health Needs Assessment

The City of Irving conducted a thorough Community Health Needs Assessment in 2007 that was sponsored by the Baylor Medical Center of Irving, the City of Irving, the Irving Healthcare Foundation, and the Parkland Health & Hospital System. Their assessment contains specific and useful health and behavior data relating to tobacco use in Irving. This survey can be downloaded for free on this site: <http://www.ahp.org/Resource/Pages/TaxonomyRollup.aspx?tid=209>.

Key Opinion Leader Survey

A seventeen question survey was sent to various community leaders in each of the five communities to gauge their thoughts and perceptions about the issues surrounding smoking in their cities. Initial response rates were very low, but recent efforts have increased the responses for each city. Data from the survey will be available by the end of February 2011.