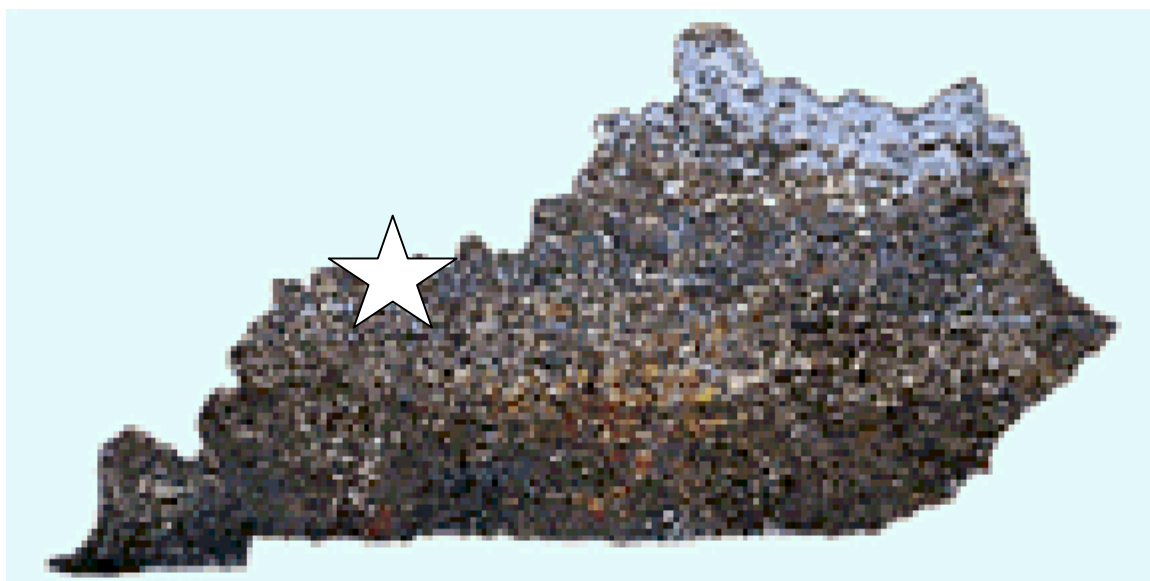


# Owensboro-Daviess County

## S.T.O.P. Smoking/Tobacco Opinion Project

April 2001



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### **Acknowledgements**

The opinion poll of Owensboro-Daviess County was conducted by youth volunteers from Owensboro Catholic and Owensboro High School, adult volunteers from Champions for a Drug Free Owensboro-Daviess County, and staff from the RiverValley Behavioral Health Regional Prevention Center. Chad M. Gesser served as the project director.

This opinion poll was conducted to build upon the local tobacco control efforts in Owensboro-Daviess County. This project would not have been possible without the leadership and dedication of the following individuals: Stephanie Bumm, Michael Buntin, Brittany Cole, Sarah Danhauer, Chase Edge, Ginny Grant, Beverly Howard, Seth Hulsey, Lisa Jarboe, Aaron McNulty, Jo Etta Mayfield, Pratik Prajapati, Tara Robertson, Andrew Thompson, Coulter Wickerham, and Cheyenne Winstead. These are primarily students from Owensboro Catholic and Owensboro High School. These youth are a vital component in local alcohol, tobacco, and other drug efforts.

We also would like to thank the 761 persons that we reached via telephone, and especially the 474 persons who took the time to speak with us regarding these issues. Communities must have the support and vision of its citizens to enhance its quality of life.

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### **S.T.O.P.: Smoking/Tobacco Opinion Project**

Tobacco and smoking is now looked upon as an individual and public health issue in Owensboro-Daviess County. Largely fueled by local/regional agencies and a groundbreaking needs assessment (the Green River Area Development District [GRADD] Health 2000 Report released August 2000), a variety of local and regional groups are beginning to examine the negative impact that tobacco and smoking has on the community.

The Centers for Disease Control (CDC) and the Department of Health and Human Services have led the nationwide tobacco control effort by focusing and promoting practices that effectively reduce smoking and smokeless tobacco use. The premise behind these efforts is to change the culture of smoking and smokeless tobacco use in the community. The effective components are: 1) economic interventions (i.e. raising the excise tax on cigarettes); 2) retailer-directed interventions; 3) tobacco-free environment policies; 4) restriction of advertising and promotion; 5) chronic disease programs to reduce the burden of tobacco-related diseases; 6) school programs; 7) enforcement; 8) counteradvertising; and 9) smoking cessation programs (CDC; PEPS).

Tobacco has cultural significance in the history of western Kentucky. While this may certainly be true, it does not necessarily signify that tobacco control initiatives cannot be accomplished in Owensboro. This project was designed to examine how local residents felt about particular tobacco control initiatives. It can be said that the common, general stereotypical perception in Owensboro-Daviess County is that tobacco is more important than any public health initiative designed to curb youth and adult smoking. The truth, however, revealed from this research project is that community citizens recognize the individual and public health hazards of tobacco use and do support changing the cultural meaning of tobacco and smoking in Owensboro-Daviess County.

While opinion polls regarding a wide range of issues are prevalent on the national level, opinion polls regarding tobacco and smoking on the local level have been limited at best. This research is meant to enhance the efforts of local and regional group efforts and their tobacco control initiatives. We hope that many myths and false preconceptions are set aside with this research and that the real task of addressing and implementing effective tobacco control measures can be undertaken in Owensboro-Daviess County with good conscience.

#### ***Purpose of this project***

The primary focus of this project was to gauge community perceptions from adult citizens of smoking control efforts in Owensboro-Daviess County. General discussions with community professionals have revealed the fear and skepticism of accomplishing real change regarding the youth and adult smoking rates in the community. A large part of this fear is based on what now appears to be an irrational assumption that the larger population is not prepared, or ready to take such stances on smoking. The purpose of this project then was to examine community perceptions regarding smoking control efforts that are deemed to be effective. We hope that this

research can serve as a type of platform for public health professionals, and community

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volunteers, to address the smoking issue with demonstrable public opinion support.

The information presented in this report allows the reader to examine the overall community rate, and the nonsmoker and smoker rates for each item of analysis. It is important to state at this point that the “all respondents” rate presented in most of these tables can also be viewed as the community rate. The format of this project enables us to equate presented percentages as representative of the overall community rate. For example, the “all respondents” percentages should be looked at as the overall community rate. This rate represents how our entire community feels about that particular issue. The “nonsmokers” and the “smokers” percentages should also be viewed in the same manner. Percentages presented for those categories represent the rates for all “nonsmokers” or “smokers” in Owensboro-Daviess County. When comparing the “nonsmokers” and “smokers” percentages, it is extremely important to realize that there are approximately three times as many adult nonsmokers as smokers in Owensboro-Daviess County. While the percentages for these two categories may appear numerically similar, they are very different in terms of hard numbers of residents that fit into one of these two categories.

### ***Research Methodology***

The interview schedule was developed by Chad M. Gesser. The schedule was derived by a synthesis of the research regarding effective strategies for reducing the rate of smoking and smokeless tobacco use (CDC; PEPS). A series of questions were also reviewed from telephone interviews/surveys conducted by Dr. Ellen Hahn at the University of Kentucky. This survey in large part centers around questions devised using a Likert scale. This type of format asks respondents to indicate whether they Strongly Agree, Agree, Disagree, or Strongly Disagree with the presented statement.

To our knowledge, this current method of gathering data regarding tobacco use perceptions on the local level is the first of its kind. There is no standard telephone survey for public use to gather perceptions and opinions from local residents regarding tobacco control initiatives.

Space to conduct the interviews was donated by the offices of RiverValley Behavioral Health. Volunteers (primarily local high school students) conducted the telephone interviews after receiving mandatory training from the project director regarding the interview process. Over 761 telephone calls were made over a four day period from March 27, 2001 through April 3, 2001. The response rate for this survey was approximately 62%, allowing us 476 survey respondents. In social science this is categorized as a “good” response rate (Babbie 1992).

Respondents for the survey were randomly selected from the Owensboro-Daviess County telephone directory. Interviewers first randomly selected a letter from the alphabet. They then found last names beginning with that letter in the telephone directory. Interviewers then randomly selected a name within their designated section in the phone book. Each telephone survey was considered a “no answer” or “answered” survey if someone answered the phone and participated in the survey or declined to respond. The interviewer then counted down four names and phoned the fifth name for their next potential respondent. They continued this

process throughout each evening of interviews. If a business or similar phone number was selected, interviewers then counted down four and selected the fifth person in efforts to phone only local

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residents.

This sampling technique ensures that this research project can be inferred to the larger population. In statistical social science, a minimum of 120 randomly selected respondents is necessary to ensure the potential for a statistically significant sample size in making inferences to the larger population. As previously mentioned, we garnered approximately 476 partial or completed surveys through a random process. The data presented in this report is examined as it refers to the population of Owensboro-Daviess County residents.

The data was analyzed using SYSTAT 10 software. SYSTAT is a computer software program used for analyzing marketing, social science, and other forms of data. Data was coded using standard coding techniques.

## **Results**

The results of this survey will be presented primarily in table format. Discussion of the results will precede each table.

Data presented in Table 1 enables us to examine the rate of smoking in Owensboro-Daviess County. While this survey was not designed to measure the rate of smoking, we did find it necessary to assess the rate of smoking for purposes of comparisons to other regional and state reports. Our results indicate that the adult nonsmoking rate for Owensboro-Daviess County is 75%, with the adult smoking rate being 25%. By our counts, this rate of smoking is considerably lower than the regional adult rate provided by the GRADD Health 2000 Report of 34.5% for adults. The state adult smoking rate, as provided by the Centers for Disease Control, is 30%. It is possible that the rate as we determined by our research is lower based on how the question was worded. In this survey we asked, "Do you currently smoke cigarettes?" This question as posed in the GRADD report and similar state level research poses the question by asking whether respondents have ever smoked 100 cigarettes and currently smoke. While the wording is very similar, it still is somewhat different. Despite the differences, however, we still feel that the rate of adult smoking established by this study (25%) is a closer representation of the Owensboro-Daviess County adult smoking rate based on the methods and focus of this local opinion poll.

Another possible explanation of this lower rate is that the number of female respondents in this study is nearly three times the number of male respondents. To control for this discrepancy we examined the rate of smoking within gender categories and examined the total number of respondents. Because the number of male respondents was higher than the statistical threshold for making inferences to the general community population, we still feel that the rate of 25% is valid for Owensboro-Daviess County.

The regional adult smoking rate has been determined to be 34.5%. A closer examination of health problems related to smoking tells us that Owensboro-Daviess County ranks near fifth in most categories in the region (of seven counties) regarding the more severe rates of smoking

related illnesses. The 34.5% rate could be the result of higher rates in most of the counties coupled with lower rates in just a few of the regional counties.

We are able to examine the rate of attempts to quit smoking by looking at the data presented in Table 2. The question we posed for this item was, "Have you ever smoked and tried to

Table 1. Owensboro-Daviess County Rate of Smoking

## Owensboro-Daviess County Rate of Smoking

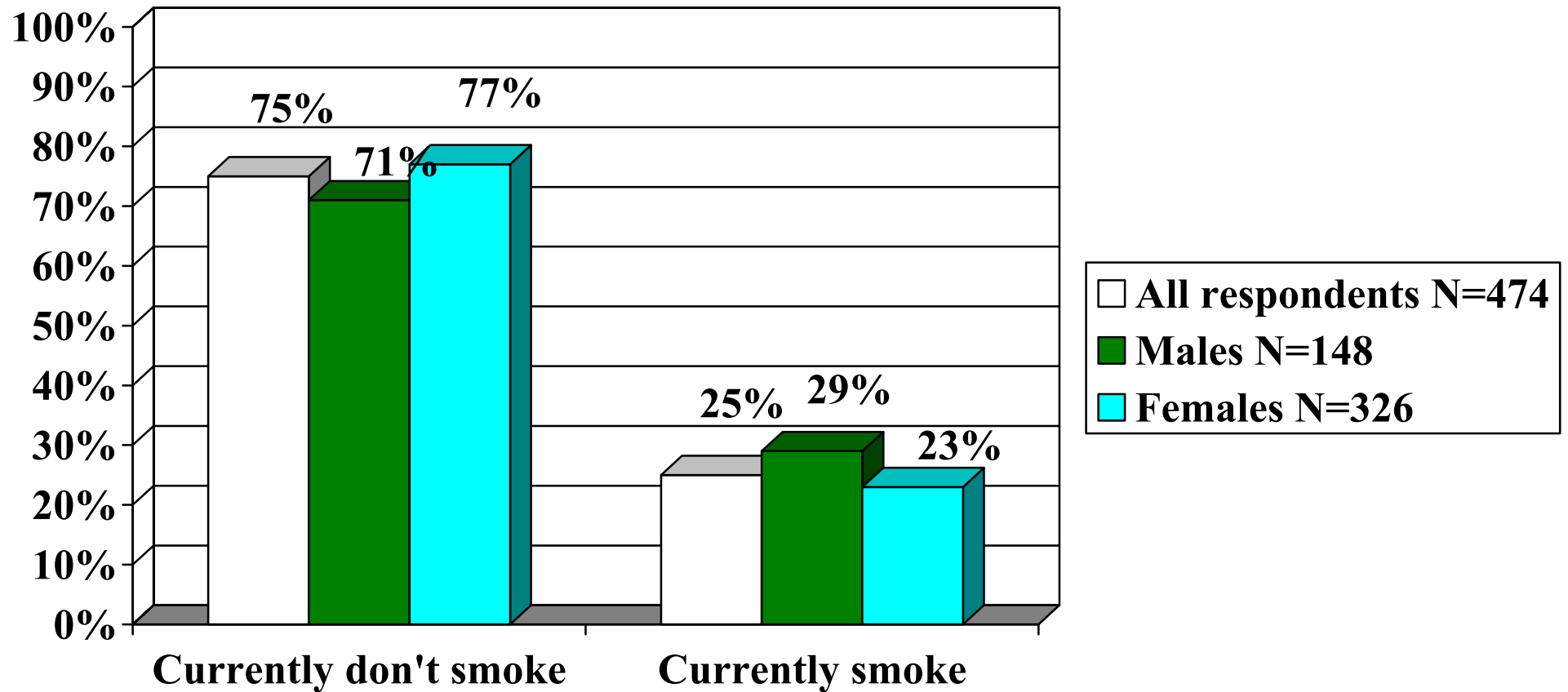
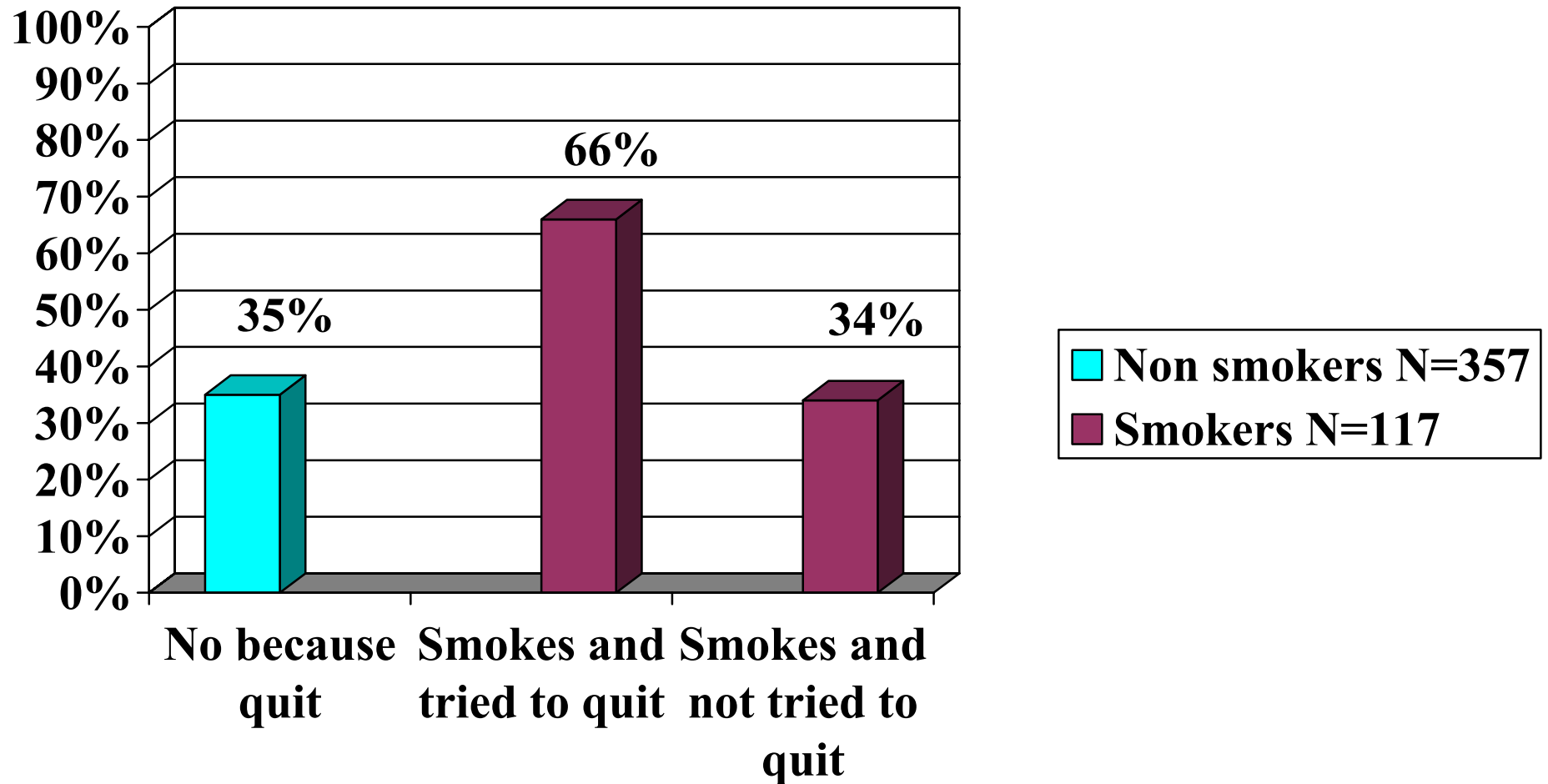


Table 2. Quitting Behavior

# Quitting Behavior



quit?” State level research conducted by University of Kentucky’s Dr. Ellen Hahn suggests that 78% of smokers have attempted to quit smoking. This current local level project indicates that 66% of our smokers have tried to quit smoking. In addition, 35% of current nonsmokers are former smokers that have kicked the habit. Only 34% of current smokers have not tried to quit.

Information in Table 3 allows us to examine the community perception that smoking is not bad for you. It is apparent that nationwide attempts at educating the public on the dangers of smoking have been worthwhile. Some 91% of Owensboro-Daviess County residents disagree or strongly disagree with the statement, “For the most part, smoking is not bad for you.”

Data presented in Table 4 allows us to examine community perception what might be the youth smoking rate. It has been our feeling for quite sometime that the community perceives the rate of smoking to be much larger than it actually is. We do know that based on data from the Centers for Disease Control that the youth smoking rate in the state of Kentucky is 47%. This is the highest youth smoking rate in the country. When we look at what our community thinks the local rate is, we see a wide range of perceptions. Approximately 14% of Owensboro-Daviess County believes the youth smoking rate is between 0-25%, 47% believe the rate falls between 26-50%, 25% believe the rate is closer to the 51-75% range, and 18% believe the rate is between 76-100%. Interestingly enough, nonsmokers were closer to the actual rate than smokers. Smokers were more likely to believe the rate is higher than it actually is.

In table 5 we posed the similar question regarding the perception of what might be the adult smoking rate. As previously discussed, the regional adult smoking rate has been determined to be 34.5%, and we have verified the local rate as being closer to 25%. Nearly 5% of local residents believe the local rate to be between 0-25%, 42% believe the rate to be between 26-50%, 36% believe the rate to be between 51-75%, and 16% believe the adult rate to be between 76-100%. Again, smokers were more likely to have the impression that the smoking rate was higher than it actually is. When we examine this data regarding the perception of the youth and adult rates, we found that all respondents tended to believe the adult smoking rate was higher than the youth rate. However, as we now know, the state youth smoking rate is actually almost double the local adult smoking rate. (We will continue using the state youth smoking rate until we are able to establish the local youth smoking rate.)

Information in Table 6 assists us in assessing local opinion regarding the best practices set forth by the Centers for Disease Control and the United States Department of Health and Human Services regarding tobacco control efforts. We posed the statement, “Our local schools should help teens to stop smoking.” Over 94% of Owensboro-Daviess County agrees or strongly agrees with this statement. What we began noticing with this question is that smokers do support smoking control efforts. Over 91% of smokers agree or strongly agree with this statement. Couple this data with that regarding the perception of smoking being a health issue, and we can see that smokers are indeed concerned about the health and welfare of young and beginning smokers. It should be no surprise that smokers are very much in favor of smoke free environments and smoking cessation programs. As indicated earlier, 66% of current smokers have tried to quit. The data presented in Table 6 should be an indicator to Owensboro-Daviess County schools that the larger community would like to see much more being done in efforts to

assist teens to stop smoking.

Table 3. Perception that smoking is not bad for you

## Perception that smoking is not bad for you

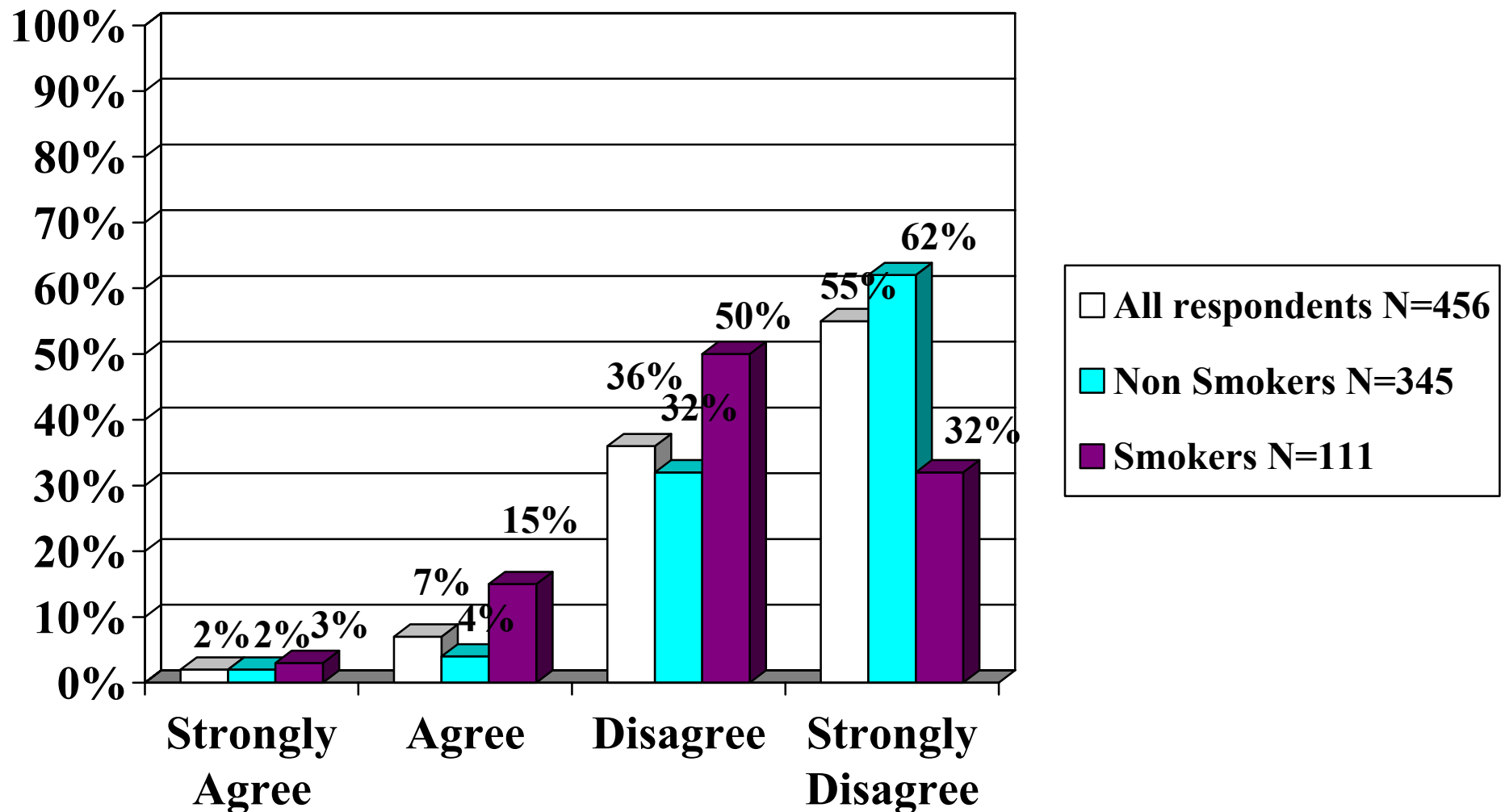


Table 4. Perception of what is the youth smoking rate

## Perception of what is the youth smoking rate

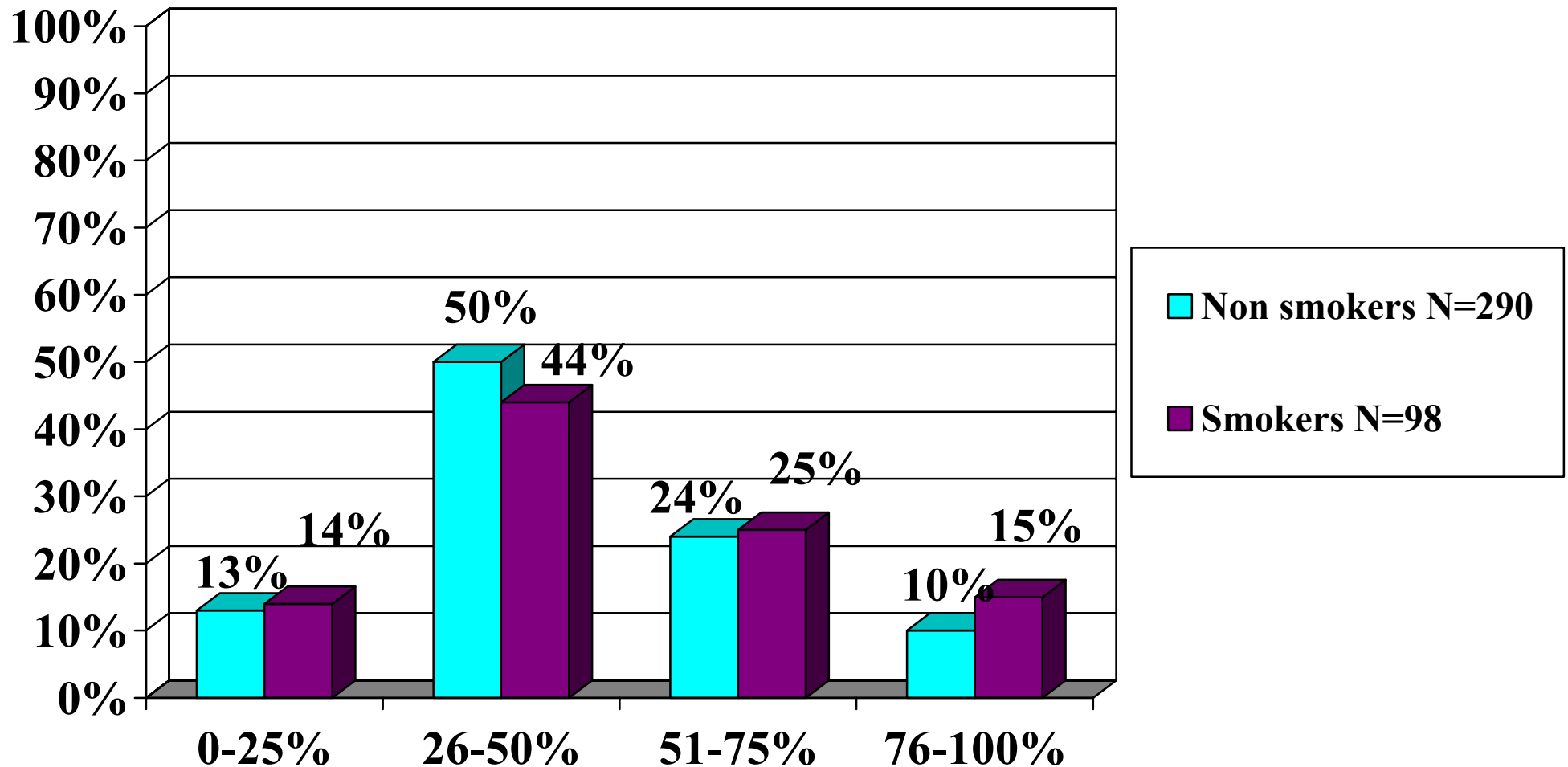


Table 5. Perception of what is the adult smoking rate

# Perception of what is the adult smoking rate

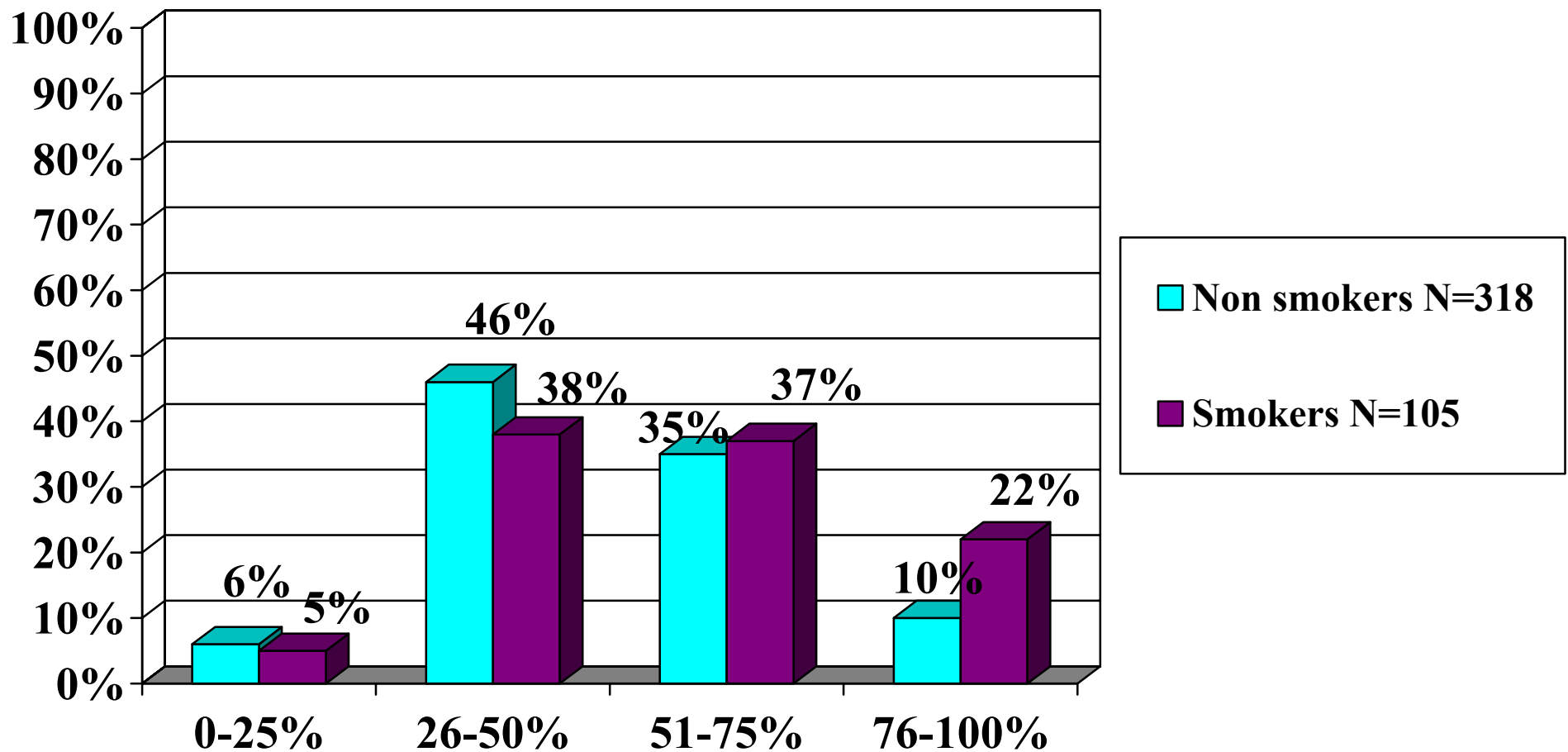
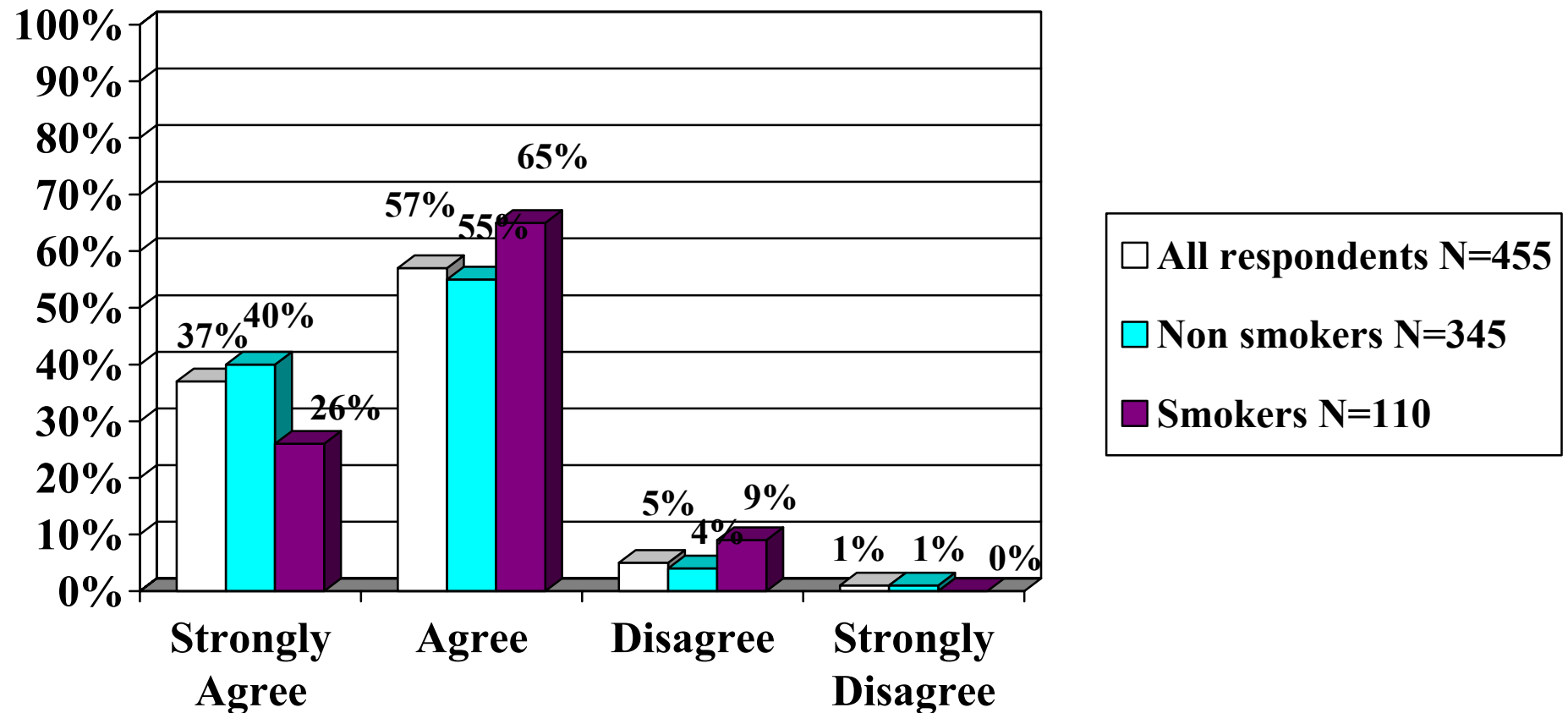


Table 6. Belief that local schools should help teens to stop smoking

## Belief that local schools should help teens to stop smoking



Data in Table 7 enables us to assess the statement, “Youth that violate a smoking law should be required to go through a quit smoking program to help them to stop smoking at an earlier age.” Over 82% of Owensboro-Daviess County agrees or strongly agrees with this statement. Currently, youth cited for underage possession of tobacco at most are being fined \$50 with community service. Unfortunately, by examining the literature of effective programs to enhance smoking cessation, this practice is simply not effective. Staff at the RiverValley Regional Prevention Center are aware of the consideration of alternative sentencing guidelines for youth tobacco possession offenders but are not aware of any change to this current policy for punishing, or in this case rehabilitating these offenders in Owensboro-Daviess County.

Data in Table 8 helps us to begin examining the perception of second hand smoke being a public health issue. Efforts to educate the public on the hazards of second hand smoke have been minimal in Owensboro-Daviess County. On the survey we posed the question, “Breathing second hand tobacco smoke is just as harmful as smoking from a cigarette.” Breathing second hand tobacco smoke is not as harmful as smoking but contains health risks similar to that of smoking. Still, 83% of Owensboro-Daviess County agrees or strongly agrees with this statement. Dr. Hahn’s 1999 work indicated that 74% of state legislators believed that second hand smoke is harmful to children’s health. We are encouraged about local efforts for smoke free environments based on these findings. Interestingly enough from our local survey, 35% of nonsmokers and 19% of smokers strongly agree with this statement, while 52% of both nonsmokers and smokers agree with the statement.

Table 9 also contains data illustrating local opinion regarding establishing local ordinances to protect the rights of nonsmokers. The statement posed was, “I would support our city enacting ordinances to protect nonsmokers from second hand smoke.” Some 84% of local citizens agree or strongly agree with this statement. Dr. Hahn’s 2000 work indicates that 70% of state citizens favor giving communities the option of enacting local laws aimed at curbing tobacco use by teenagers. These are consistent with the previous finding regarding the issue of second hand smoke. The response received regarding the local ordinances indicates to us that in theory local citizens favor local ordinances to reduce the rate of smoking and the presence of second hand smoke in public places. We are unable to effectively measure the degree of support to substantive local efforts to pass local ordinances addressing this issue. At the time of release of this report, efforts to pass a smoking ban at the Owensboro Sportscenter had not yet been achieved although local opinion to pass the ban has been documented.

We began examining what the community believes to be the percentage of smoke free public places, as presented in Table 10. We do not have a scientific study regarding the actual percentage of smoke free public places in Owensboro-Daviess County. The Green River District Health Department has determined that 20 restaurants are classified as completely smoke free. Approximately 38% of local citizens believe that 0-25% of public places are smoke free, 36% believe the rate is 26-50%, 15% believe the rate is 51-75%, and 13% believe the rate falls between 76-100%. Again, however, nonsmokers were more likely to believe the rate of smoke free public places is much lower than what smokers believe the percentage to be. Our general feeling is that this is expected: if you do not smoke you are likely to believe there are fewer

smoke free places because you are likely irritated by the tobacco smoke. If you do smoke, you

Table 7. Belief that youth violating law should attend a stop smoking program

# Belief that youth violating law should attend a stop smoking program

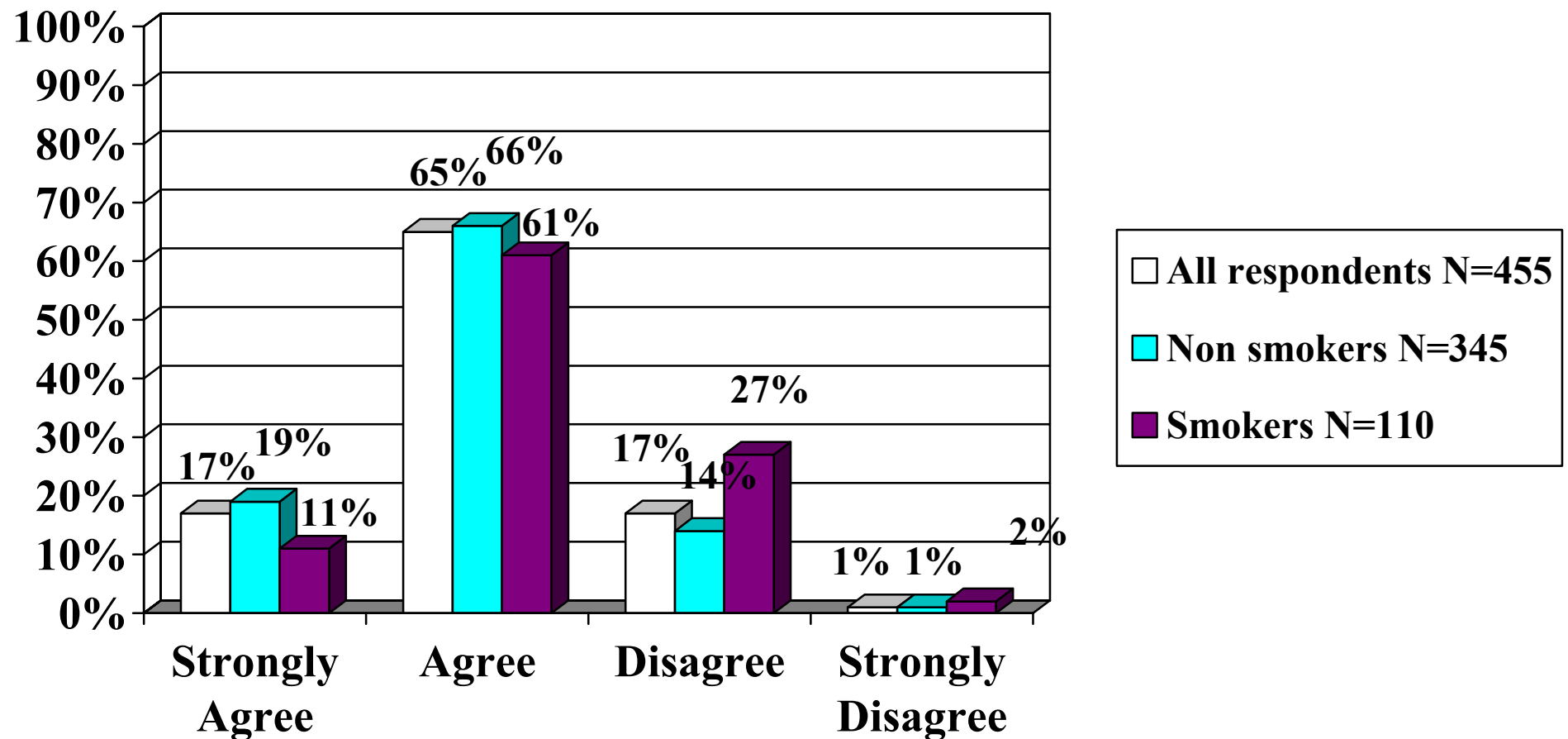


Table 8. Belief that second hand smoke is just as harmful as smoking from a cigarette

## Belief that second hand tobacco smoke is just as harmful as smoking from a cigarette

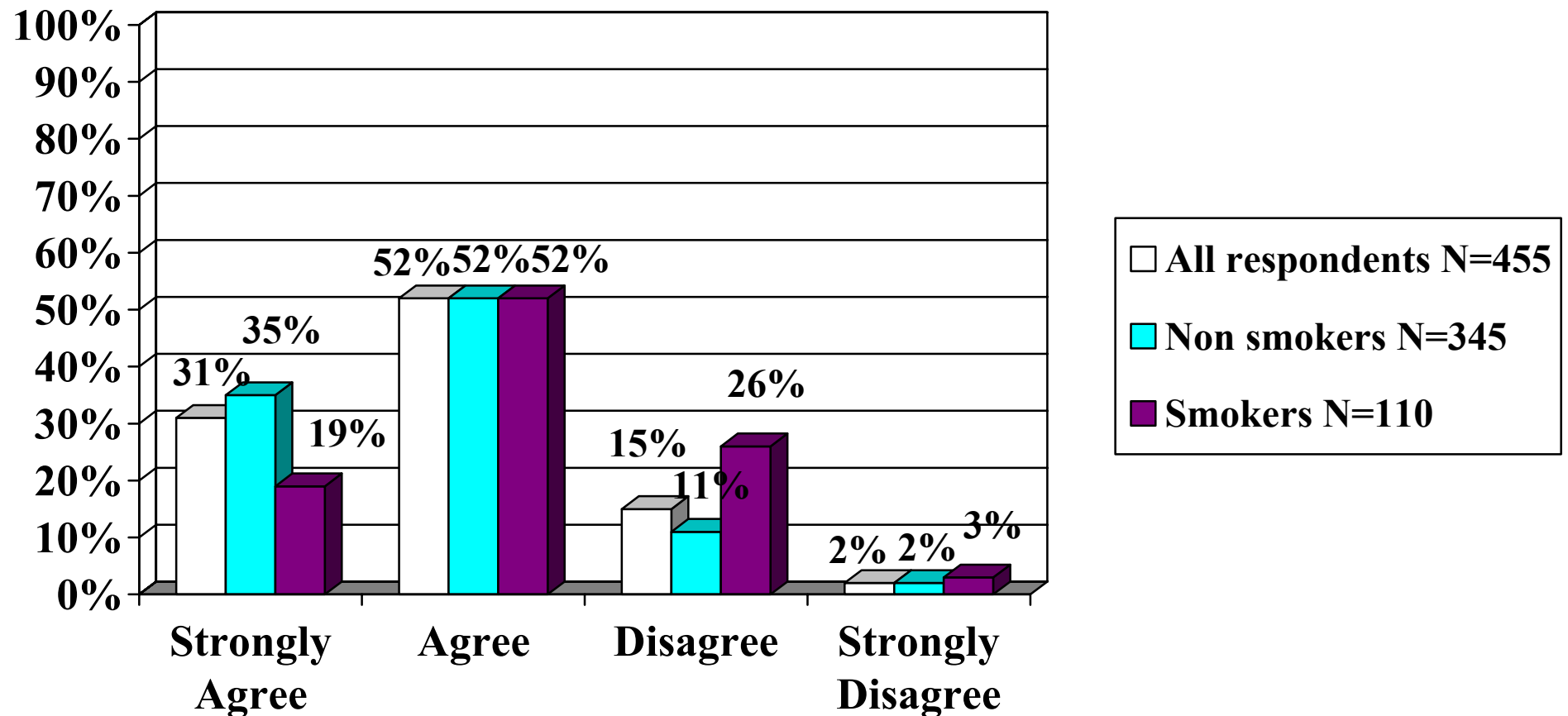


Table 9. Percentage supporting ordinances to protect nonsmokers from secondhand smoke

# Percentage supporting ordinances to protect nonsmokers from secondhand smoke

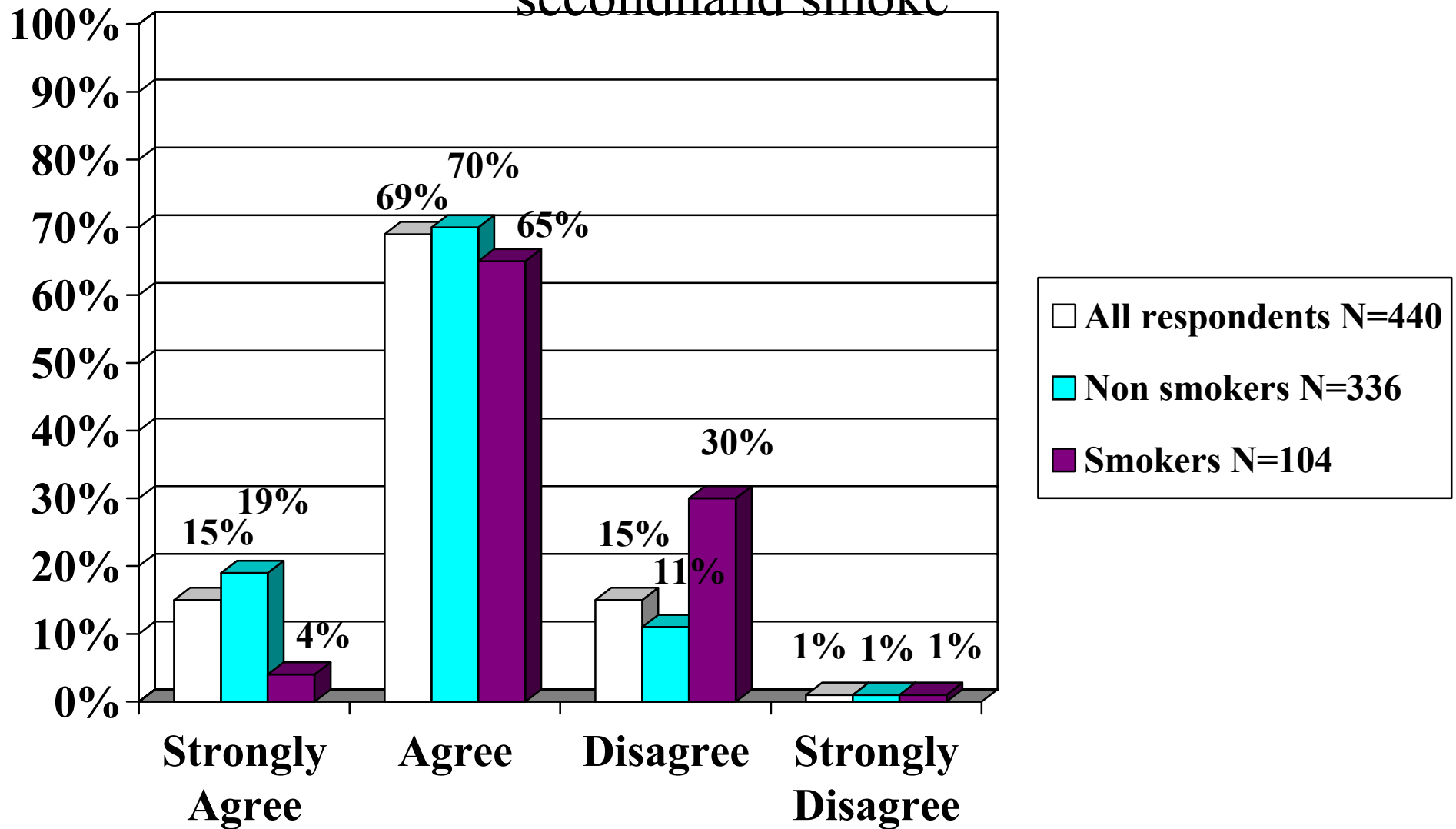
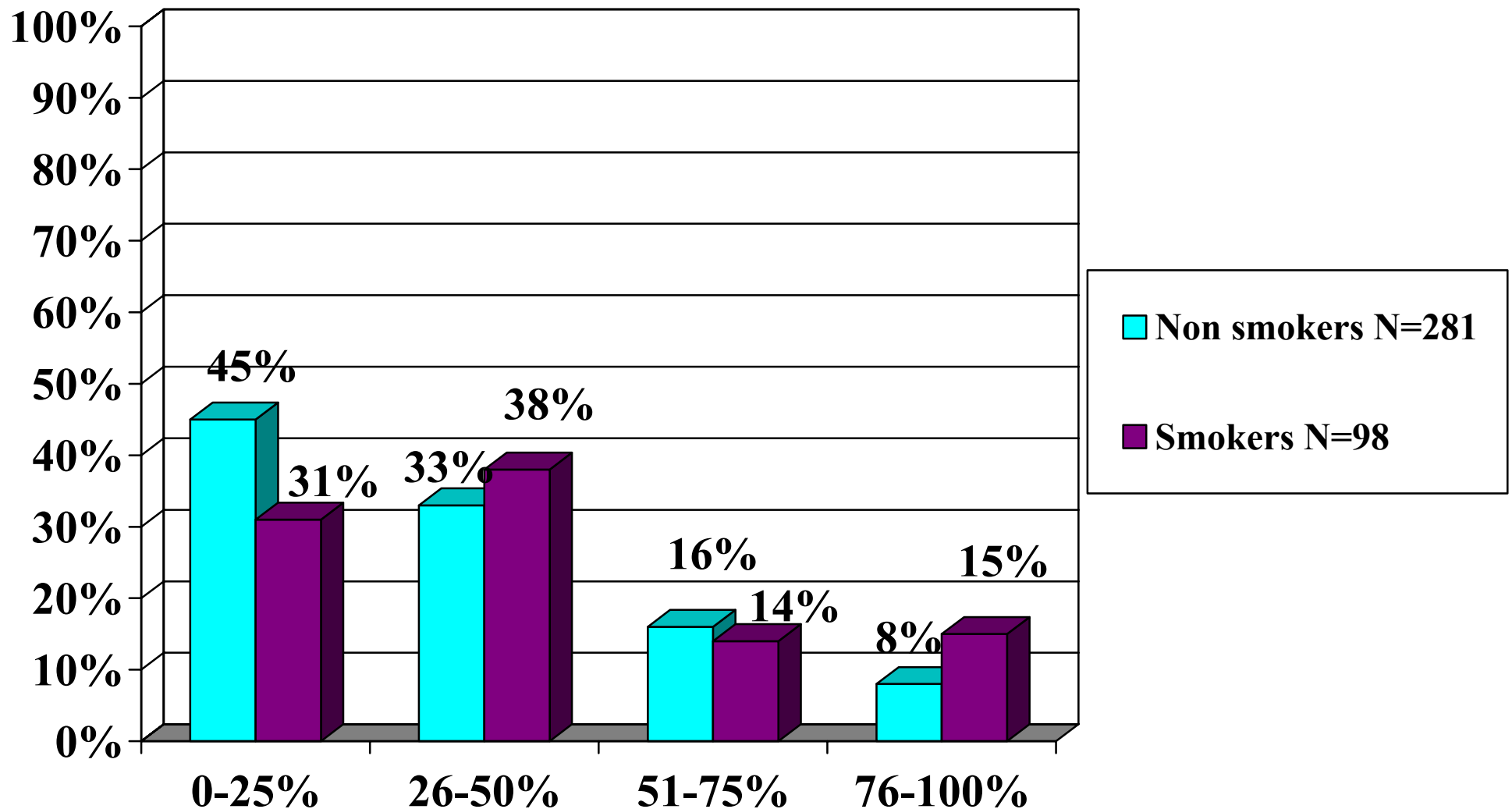


Table 10. Perception of the percentage of smoke free public places

## Perception of the percentage of smoke free public places



are likely to believe there are many smoke free public places since there indeed are many smoke free public places in Owensboro. We hope that in the future we can have a more accurate picture of the actual number of smoke free public places in Owensboro.

Table 11 contains our findings based on the statement, "Smoking indoors should be allowed at local government buildings." Again, 83% of Owensboro-Daviess County residents disagrees or strongly disagrees with this statement. An informal poll was conducted on the Messenger-Inquirer's website asking if persons believe that the city should ban smoking at the Owensboro Sportscenter. That poll showed that 78% (203 of 260 respondents) favored banning smoking at the Sportscenter. Once again, this poll was a non scientific poll. Based on our research we are showing the actual rate is near 83% of local residents that believe smoking at local government buildings should be banned. Given the separate data obtained from petitions, the Messenger-Inquirer poll, and this new data, we are led to believe that Owensboro-Daviess County wants to see a smoke free facility not only at the Owensboro Sportscenter, but at other government office buildings and workplaces in the community.

Data in Table 12 enables us to examine the issue of smoking at local workplaces. The statement posed was, "Smoking indoors should be allowed at local workplaces." Nearly 76% of local citizens disagrees or strongly disagrees with this statement. Shockingly, no one strongly agrees with this statement. Again, nonsmokers are more likely to disagree or strongly disagree with this statement as opposed to those who smoke. Nevertheless, 47% of smokers disagree or strongly disagree that smoking should be allowed indoors at local workplaces.

Information in Table 13 allows us to examine the issue of smoking at local restaurants. We first assessed how often persons (nonsmokers and smokers) are likely to dine out in a month. The same percentage of nonsmokers and smokers dine out two and three times a week. Generally speaking, however, nonsmokers are less likely to eat out than smokers. These percentage rates can be a bit misleading. The percentage rates within the categories of nonsmokers and smokers are nearly identical. However, 75% of local adults are nonsmokers. Therefore while the percentage rates within categories are very similar, the sheer number of nonsmokers simply outweighs the numbers of smokers. In addition, a majority of local residents (59%) believe that smoking should be completely banned at local restaurants. In fact, as you will see in Table 15, 25% of smokers agree or strongly agree that restaurants should be smoke free.

Data in Table 14 examines the issue of smoking in public places. The statement posed was, "People should be allowed to smoke in public facilities such as restaurants." Some 60% of local citizens disagrees or strongly disagrees with that statement. As expected, there are notable differences between nonsmokers and smokers on this issue as well.

Data in Table 15 enables us to look at the smoke free restaurant issue in a different manner. The statement posed was, "Owensboro restaurants should make smokers go outside to smoke." Here, 55% agree or strongly agree with this statement. We worded this statement in such a way that would give the impression that people are upset that restaurants allow people to smoke within the restaurant. We are a bit surprised that a majority of local residents did agree or strongly agree with this statement. As mentioned earlier, this could precisely be the reason

(given the large number of nonsmokers in the community) as to why nonsmokers are less

Table 11. Belief that smoking indoors should be allowed at local government buildings

## Belief that smoking indoors should be allowed at local government buildings

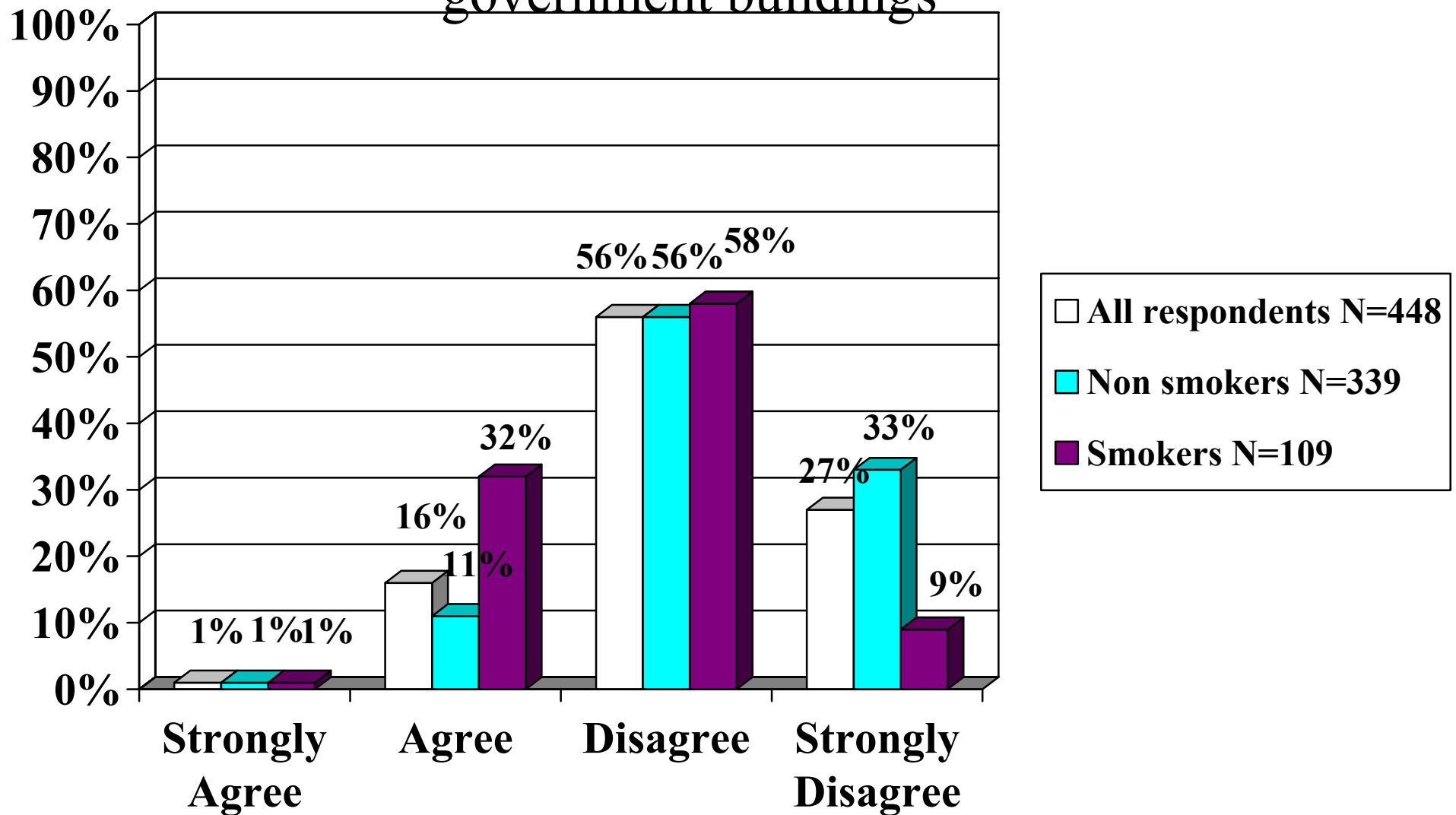


Table 12. Belief that smoking indoors should be allowed at local workplaces

## Belief that smoking indoors should be allowed at local workplaces

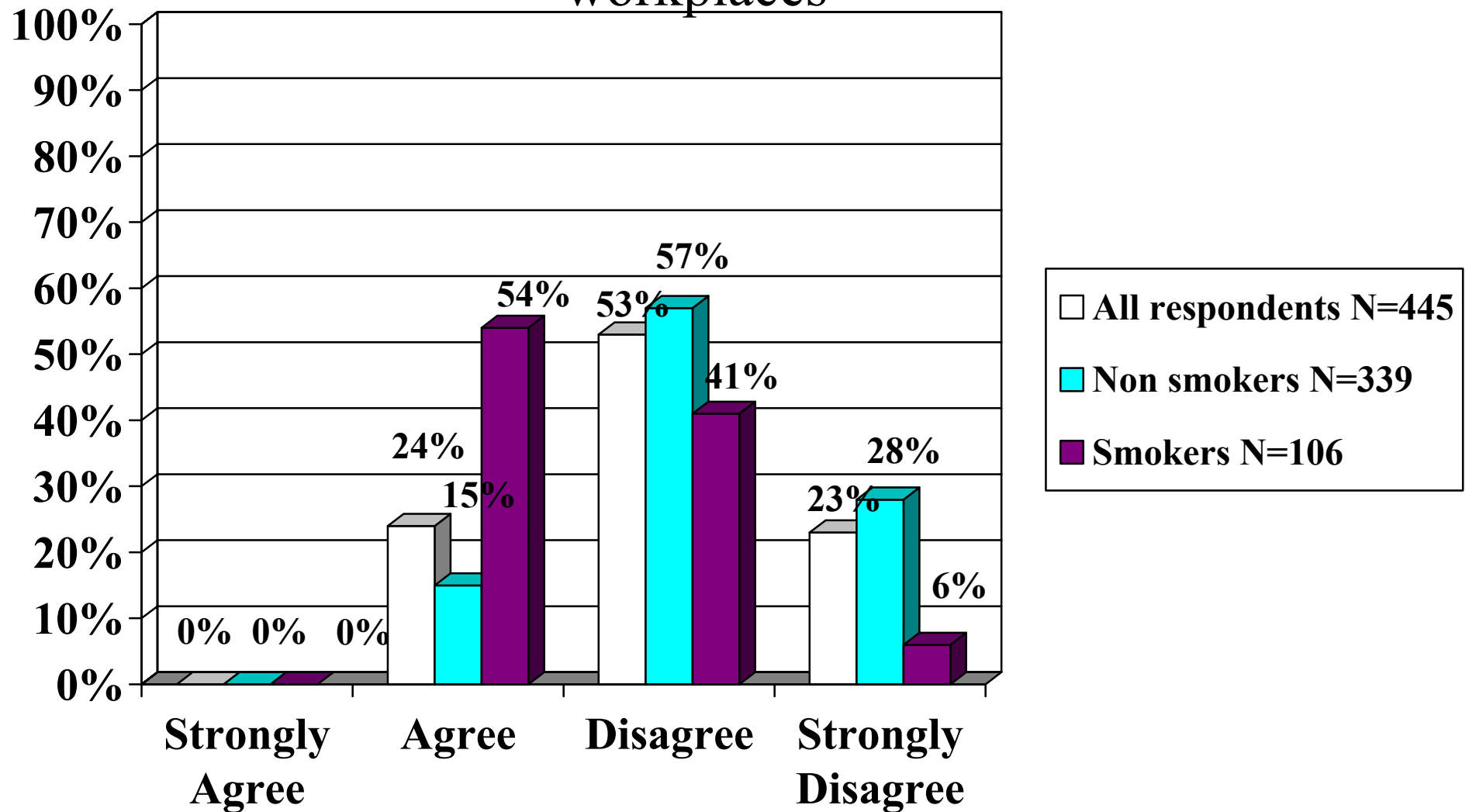


Table 13: How often do you dine out

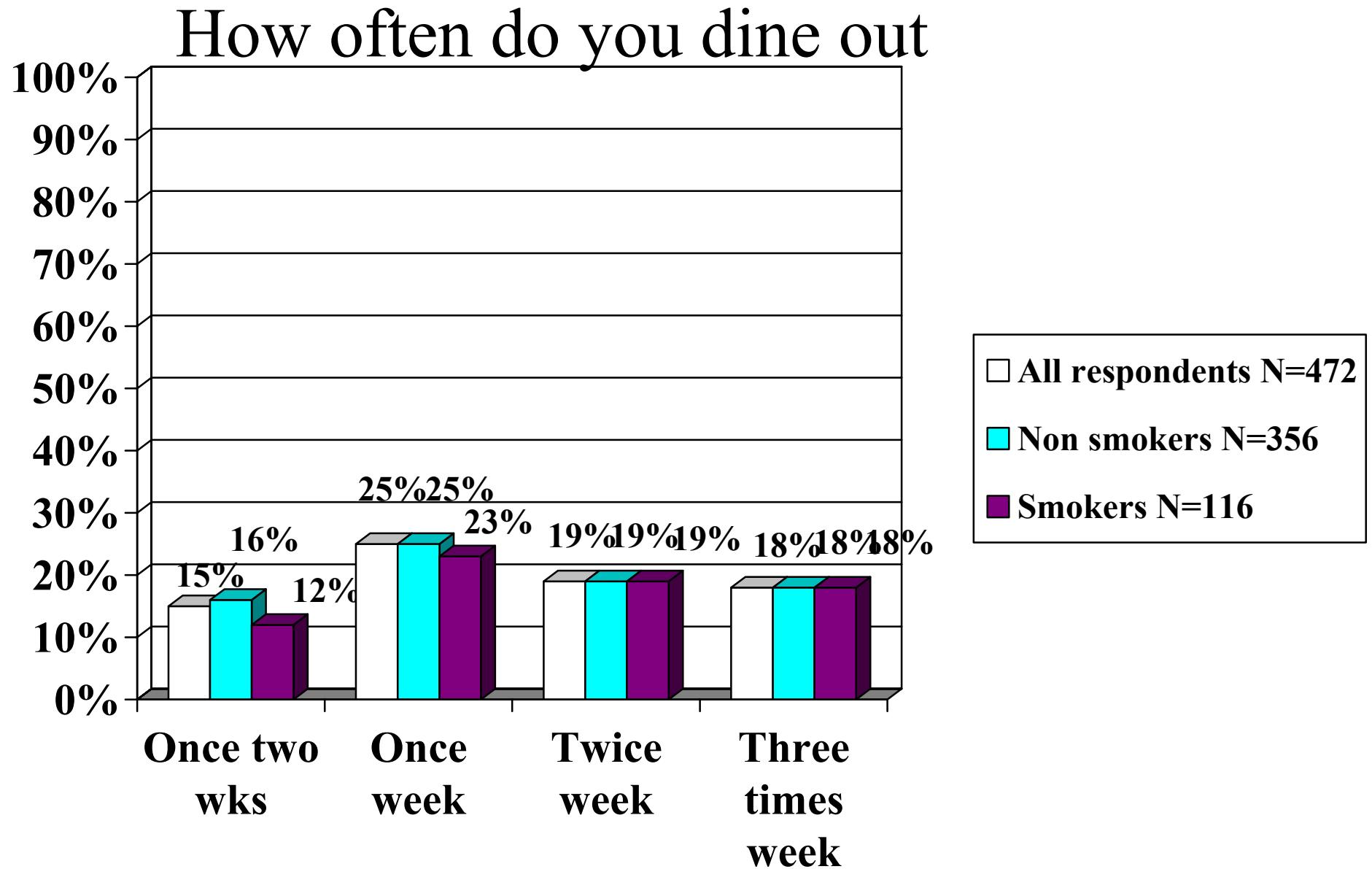


Table 14: Belief that people should be allowed to smoke in public places, like restaurants

## Belief that people should be allowed to smoke in public areas, like restaurants

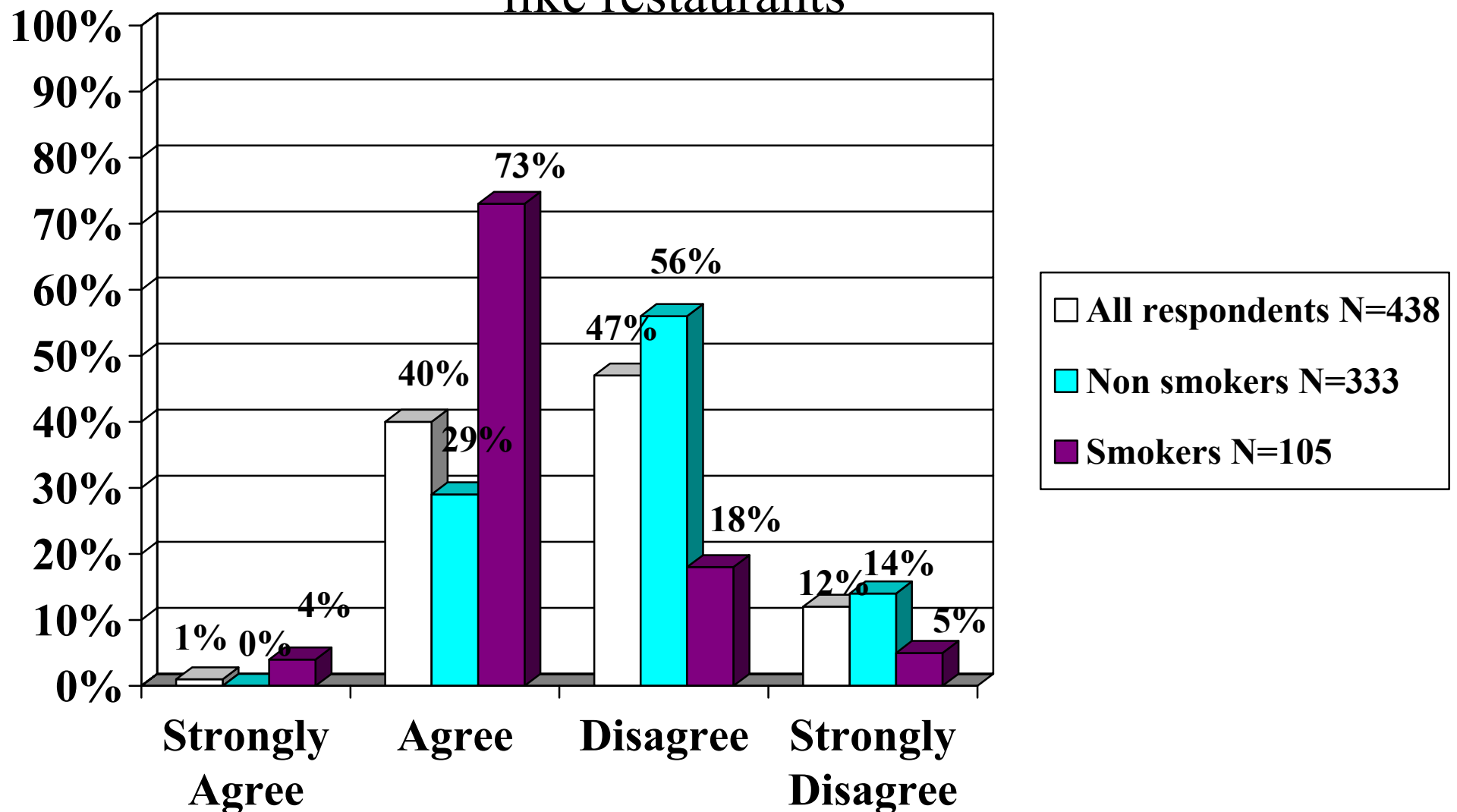
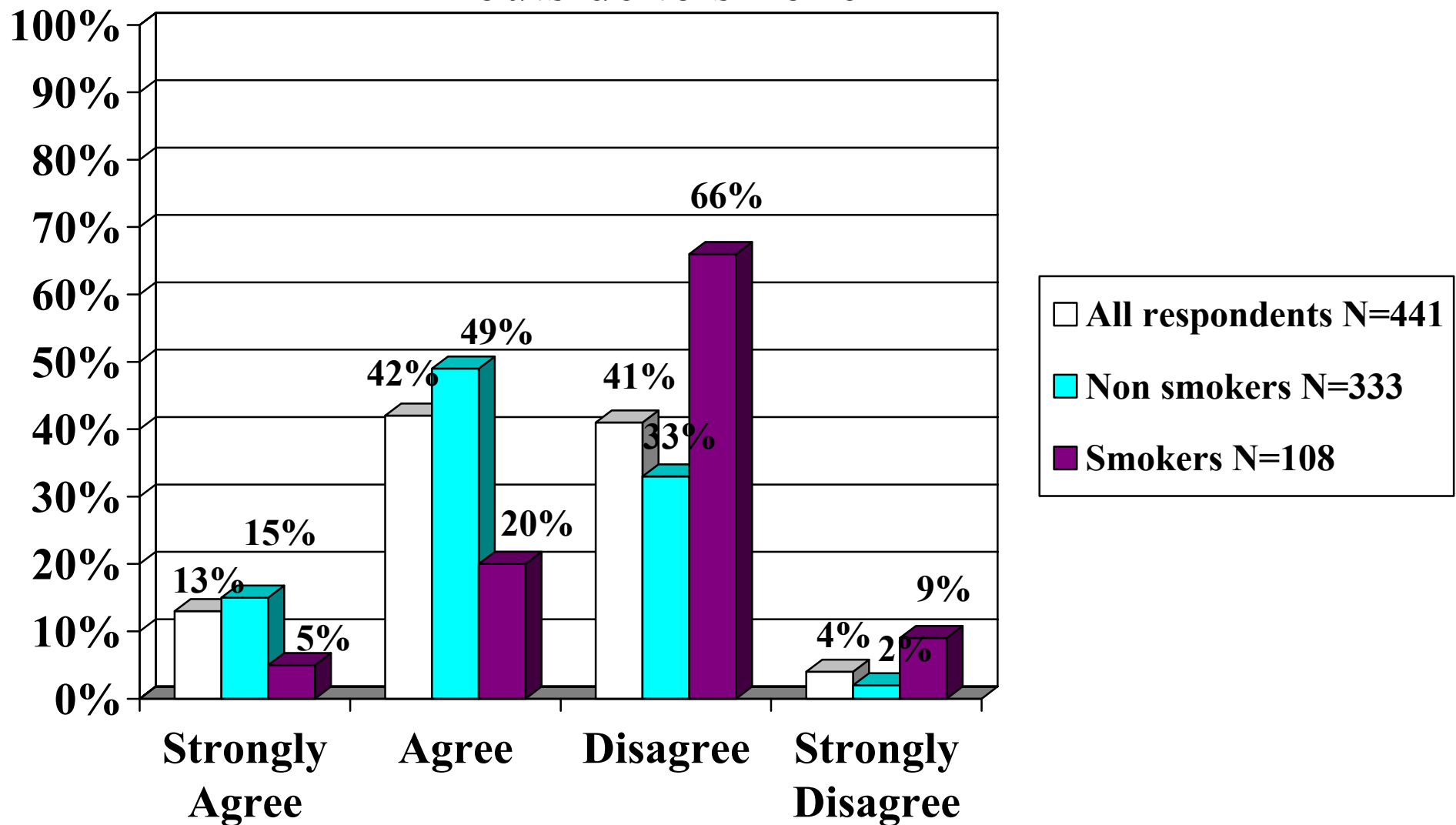


Table 15: Belief that Owensboro restaurants should make smokers go outside to smoke

## Belief that Owensboro restaurants should make smokers go outside to smoke



likely to go out to eat than smokers.

Dr. Hahn's 1999 work also shows that 66% of state legislators believed businesses would not experience reductions in profits if they adopted smoke free policies. While not entirely pertinent at this time to discuss, there is documentation that shows restaurants that move from smoking to smoke free status do not experience a reduction in profits. In fact, some restaurants increase their profits. It is speculated that one reason that profits could increase is because tables are turned over sooner during rush hours which were previously occupied by smokers "enjoying" a cigarette at the table after their meal.

Data in Table 16 allows us to examine the issue of regulating tobacco advertisements at local convenient stores. Some 73% of local citizens agrees or strongly agrees with the following statement: "Advertising tobacco products at local gas stations/convenience stores should be regulated." We were once again pleasantly surprised by the number of smokers (55%) that agree or strongly agrees with this statement. A similar assessment made by Dr. Hahn's work revealed that 63% of state legislators thought it were desirable to restrict tobacco promotion items to children. While this is certainly different from tobacco advertising, it does illustrate that our state legislators think similarly regarding the issue of restricting tobacco promotions and advertisements. The RiverValley Regional Prevention Center staff have been told by experts in the field of tobacco prevention that this city has a particular problem with the amount of tobacco advertisements at local gas stations and convenience stores. Based on the data from this project, apparently our local citizens have also noticed.

The last piece of data which is not presented in table format is data regarding the role of local radio and print media. (We decided not to address the television media based on the national anti tobacco campaign spearheaded by the Truth organization.) Based on sex and smoking status, 68% of local residents agrees or strongly agrees that the Messenger-Inquirer has helped them to become aware of the local tobacco issue. Approximately 43% of the community (equal based on sex and smoking status) agrees or strongly agrees that the local radio stations have helped to make them aware of the local tobacco issue. We decided to gather data of this nature to make a general assessment of how the community feels regarding the tobacco series that the Messenger-Inquirer has embarked. In the field of prevention, we often struggle to get our information to the media in the form of articles and one time reports. It is very important for issues of public health to be supported in an array of community sectors. We are strongly encouraged by the Owensboro-Daviess County community's ability to address this difficult public health issue by the commitment (not simply participation) that has been set forth by the Owensboro Messenger-Inquirer.

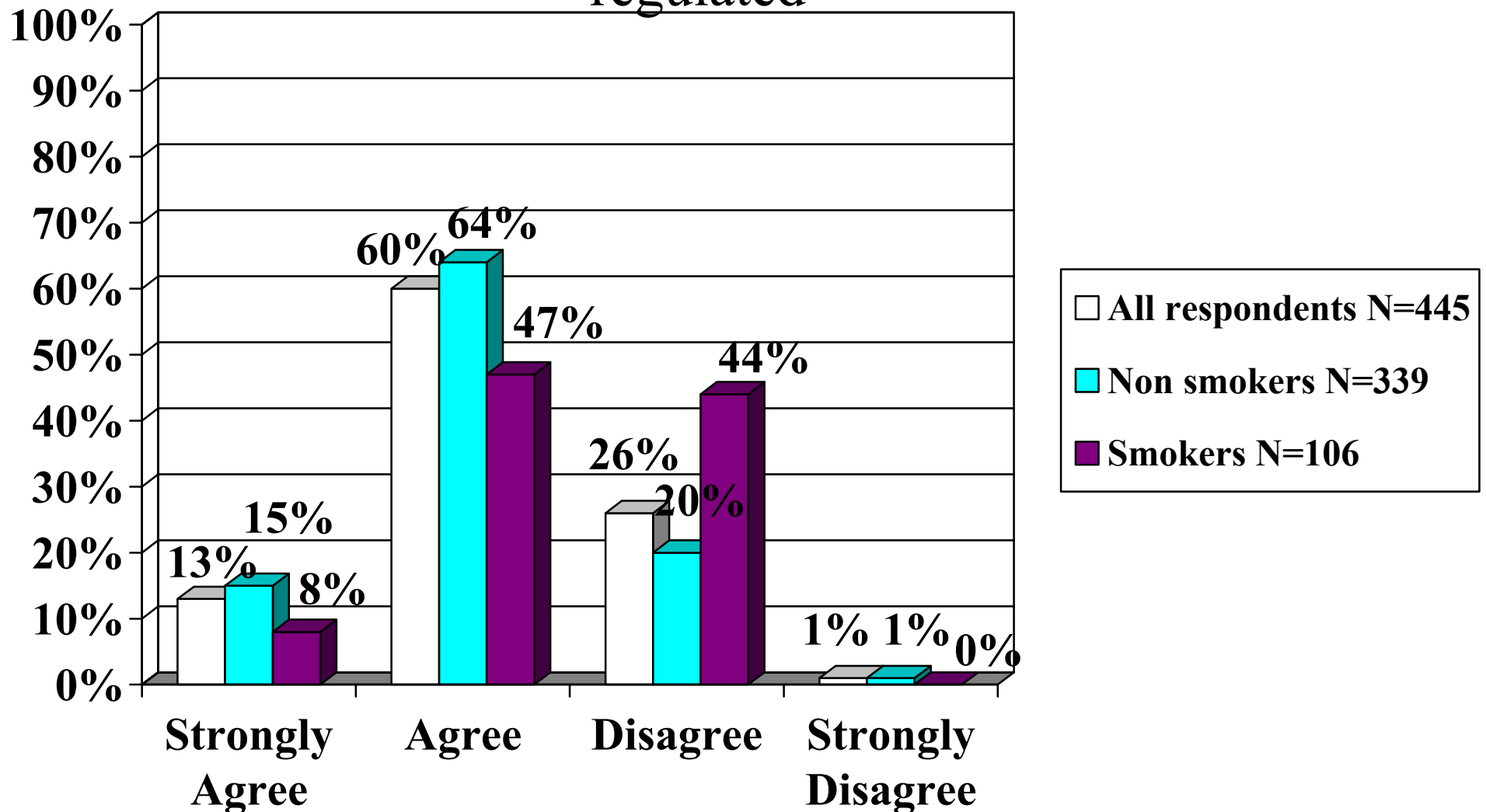
### ***Final comments***

If this report is to be successful, then it will cause some changes in our local level approach to the public health issue of smoking and second hand smoke. We are able to establish a number of ideas, beliefs, perceptions, and feelings regarding tobacco control initiatives and the current state of smoking in Owensboro-Daviess County.

First of all, the rate of adult smoking in Owensboro-Daviess County is not nearly as high as

Table 16. Belief that advertising tobacco at convenient stores should be regulated

## Belief that advertising tobacco at convenient stores should be regulated



community citizens think. In addition, most adult citizens think the adult smoking rate is higher than the youth smoking rate, which is not true. We also have been able to determine that the Owensboro-Daviess County community supports local level efforts to effectively address the problems related to smoking and second hand smoke in the community.

We have been able to dispel two different kinds of perceptions. One, the adult smoking rate is not as high as we thought. Secondly, Owensboro-Daviess County citizens actually overwhelmingly support smoking and second hand smoke initiatives. One particularly dangerous question that now rises is should we not be as persistent with our efforts because the adult smoking rate is lower than we expected? A definite no is the reply. We say no because there is some reason why local citizens believe the adult rate is so high. In addition, let us not forget that the state youth rate is nearly double the actual local adult rate. We need to now focus on why do adult citizens in this community believe that smoking is so prevalent? One particular answer to that question is that maybe it is indeed prevalent. But prevalent in the sense that it is physically visible everywhere we go in the community. This is the dangerous part of this issue that must be confronted in our community. Focusing on the aforementioned best practices is the ultimate outcome that can be achieved by our community as a result of this report.

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