

September 2020

Baby & Me Program Adapts to Meet COVID-19 Challenges Head On

With the COVID-19 pandemic, the Baby and Me Tobacco-Free Program shifted to a new look and innovative ways for outreach. Participating Community Health Centers were provided new outreach materials and promotional items as well as personal protective equipment (PPE). New items provided include table covers, large framed and smaller posters, enrollment and stuffed post-partum carrying bags, pens, and brochures. New brochures include a QR code that can be scanned to find current Baby & Me (BM) participating Community Health Center sites. Innovative ways to achieve outreach



and enrollment goals have resulted in partnerships with the Institute for the Advancement of Minority

Health in the creation of innovative Drive-through Baby Showers, presentations conducted regarding the BM Program on “Terrific Tuesday Community Connection” conference calls sponsored by United Health Care, distribution of promotional items to the patients in the OB clinics and BM display tables set up within health clinics.



With BM in its 4th Year of implementation, it is showing remarkable success. The final patient data statistical report from Year 3 (through July 31, 2020) reveals 148 expectant women enrolled, 56 babies delivered, 82% of deliveries were at greater than 36 weeks gestation and 86% of infants were born at or greater than 5.5 lbs. These are remarkable outcomes for mothers and their babies. Congratulations to all

BM participating Community Health Centers and their participating patients!

CHCAMS is always looking for new community health centers to join this BM winning team, committed to improving the health of women in their child-bearing years and the health of their babies. If you are interested in making your health center part of this program, please contact Maria Morris at 601-502-5954 for more information.

Mississippi Tobacco Quitline FAX Referral Form & Temporary Use Instructions

The Office of Tobacco Control is working with a new vendor, Optum, for its Mississippi Tobacco Quitline services. The new referral portal is under construction and should be made available soon. For those patients in need of assistance now, referrals can be made using a fax referral form so patients can continue to receive cessation treatment and have a streamlined experience. Once the portal is ready, additional information will be forwarded to all health centers.

Health center tobacco cessation counselors should continue to ensure all referrals to the MS Quitline are for patients ready and committed to quit tobacco for good.

To find a fillable copy of the temporary Tobacco Quitline Fax Referral Form, please open the following hyperlink: [link](#).

If you have any questions or concerns, please contact Dr. Reeshemah Allen, Cessation Branch Director II at Reeshemah.Allen@msdh.ms.gov , or Wayne Miley at wmiley@chcams.org or by phone at 601-624-6296.

American Academy of Pediatrics Offers Webinar Training

The American Academy of Pediatrics (AAP) is dedicated to the health and well-being of all

children. The AAP will be offering a webinar on Thursday, September 24, 2020, at 7:00 p.m. The training topic will be “E-cigarettes 101: What They Are, Their Health Effects, and Why They Appeal to Youth.”



To register for this training opportunity, click on the following link: [Click Here](#)

Participants in this training can expect to be equipped with the latest information on the definition of what an e-cigarette is, the health effects of using them, and a clear understanding of why they are so attractive to teens and young adults.

Tobacco Industry Sponsors Youth Prevention Program Called “End Nicotine Dependence (END)”

The beginning of each school year, the tobacco industry sponsors youth tobacco prevention programs in America’s schools. This year was no exception. While it may sound promising on the surface, a closer look reveals reasons for concern. The current school program, called “End Nicotine Dependence,” or END for short, is funded by Altria, the parent company of Phillip Morris, the largest tobacco product producing company in America. For more information on the school program, visit <https://www.tobaccofreekids.org>.

The CDC and the Surgeon General have examined these types of programs and determined tobacco-



sponsored programs are ineffective and may be responsible for the promotion of tobacco use and have a negative impact on other (non-tobacco sponsored) evidence-based programs and their effectiveness.

Please work with your local schools to alert them to the dangers these tobacco industry sponsored programs may pose. If resources for your area schools are needed, the Mississippi Office of Tobacco Control has a multitude of resources to assist schools, communities, and other interested organizations in the fight to prevent and reduce tobacco use, with many services, resources and programs designed to address teen and young adult tobacco usage. To find information on these resources, visit the MSDH site at <https://msdh.ms.gov> or contact the Office of Tobacco Control at 601-991-6050.

Journal of Adolescent Health Publishes Abstract on COVID-19 Risk for Young Adults

According to the Journal of Adolescent Health, evidence indicates that smoking is associated with a higher likelihood of COVID-19 disease progression, including increased illness severity, intensive care unit admission, or death, primarily because of its damage to upper airways and decreases in pulmonary immune function. This smoking factor is of importance for young adults, who typically have low rates for most chronic illnesses but relatively higher smoking rates. Recent research has indicated that young adults are initiating first-time smoking at higher rates than adolescents, a reversal of previous initiation patterns. Close to one third (32%) of young adults are medically vulnerable to severe COVID-19 illness. Smoking is the strongest risk factor for young adults with one in 10 participating in smoking during the past 30-days.

Individual vulnerability indicator rates for the full sample varied widely. Three of the four highest estimates were for smoking indicators: past 30-day smoking (11%), current asthma (9%), past 30-day e-cigarette use (7%), and past 30-day cigar products use (5%). Lowest rates for individual indicators were for heart conditions and liver conditions, both rates <1.0%.



For access to the full abstract, please access the following link:

[https://www.jahonline.org/article/S1054-139X\(20\)30338-4/fulltext](https://www.jahonline.org/article/S1054-139X(20)30338-4/fulltext)