



Meeting Minutes



Meeting Title:	Tobacco Control Advisory Council Meeting	
Meeting Location:	Zoom	
Meeting Date:	Tuesday, February 10, 2026	
Time:	9:00 am - 10:30 am	
Council Attendees:	Dr. Robert Collins Gena Vail, NP Dr. C. Latoya Mason Dr. Matthew Wesson Dr. Felix Twum Dr. Jonathan Hontaz	
Non-Council Attendees:	Sharonda Banks Felicia Kent Ashley McKenzie Brenda McGloster Darrius Moore Diamond Nixon Kimberly Hughes Calandra Davis Rochelle Thompson	



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	AGENDA TOPIC	NOTES
I	Introductory Remarks	The MS TCAC quarterly meeting was called to order at 9:03 a.m. and was presided over by Sharonda Banks. Mrs. Felicia Kent, Director of the Office of Adult Health, provided a high-level update on FY26 Tobacco Control priorities and progress. She shared that key contracts are advancing through the OpenGov procurement process, positioning the program for timely implementation and alignment with state and federal requirements. She also highlighted ongoing efforts to strengthen workforce capacity, noting that the Office Director position is currently under review, with additional staff positions to be advertised in the coming weeks to support program delivery and sustainability. Mrs. Kent further emphasized a continued focus on evidence-based strategies, including the upcoming launch of statewide media campaigns to promote adult cessation, increase utilization of cessation services, and prevent youth vaping through targeted outreach and engagement
II	Legislative Updates Advocacy Partners	Kimberly Hughes (ACS) – The 2026 Mississippi legislative session is underway. Several tobacco-related bills were introduced this session, but most failed to advance due to inaction before last week’s deadline. One bill remains active that would prohibit the sale of nicotine-adjacent products, with the intent of incorporating this provision into existing law. Mississippi has state conforming legislation to establish and enhance penalties for distributing nicotine products within a specified proximity to educational property and other public places. Both House and Senate versions were introduced; the Senate bill remains active and has passed House committees. Representative Creekmore introduced a bill to increase the tax on e-cigarettes, with the proceeds directed to mental health, but it did not pass last week’s deadline. Additional tobacco tax bills have been introduced and are still alive. The American Cancer Society (ACS) will continue monitoring the Mississippi State Department of Health’s appropriations bill and will advocate for maintaining current tobacco control funding levels. In addition, ACS is working on legislation to require insurance coverage for lung cancer biomarker testing. Bills have been introduced in both the Mississippi House and Senate and are currently moving through the legislative process. ACS also has a contractor working along the Mississippi Gulf Coast to advance local smoke-free ordinances. Progress in Ocean Springs has



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		stalled after new officials were elected, despite significant groundwork over an extended period. Additionally, ACS is expanding its focus to additional coastal municipalities while also working to strengthen and update ordinances in Pascagoula and Pass Christian, as well as exploring opportunities in neighboring communities.
III	Tobacco Control Program Updates	Ashley Skipper (Community Programs) provided a programmatic update to the council. The Mississippi Tobacco Free Coalitions (MTFC) are community-based coalitions that work to prevent the initiation of tobacco use among youth by reducing exposure to secondhand smoke and promoting tobacco cessation services. The MTFCs partner with schools and faith-based organizations to provide education and resources to the communities they serve. They also provide assistance to Mississippi municipalities in working towards comprehensive smoke-free ordinances. Current contracts include Community Educational Support Systems of Mississippi, covering Clark, Wayne, and Jasper counties; Mississippi State University, covering Attala, Leake, Winston, Choctaw, Montgomery, Webster, Clay, Lowndes, and Oktibbeha counties; Easter Seals of Mississippi, covering Chickasaw and Lee counties; and The Montgomery Institute, covering Neshoba, Noxubee, Kemper, Leflore, Carrol, and Humphreys counties. From July 2025 to December 2025, MTFCs and program staff worked to implement and promote Catch My Breath programs, youth awareness initiatives, youth-focused community outreach activities, parent empowerment sessions, tobacco awareness, Freedom from Smoking class sessions, health awareness fairs, and staff development sessions. As a result of these activities, the MTFCs were able to reach 962 youth and 2,534 adults and disseminate 5,246 resources. As the fiscal year continues, Community Programs' next steps are to increase community collaboration with diverse organizations and cross-collaborate with the MSDH prevention teams to align tobacco control prevention initiatives with chronic disease prevention and management initiatives. Diamond Nixon (Youth Programs) provided a programmatic update to the council. Youth Programs' key focus areas are prevention, cessation, policy and enforcement, and community outreach. • Smoking Cigarettes rates among youth has declined • Current vaping use in Mississippi Public Schools is 15.7%



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		(high school) • Current vaping use in Mississippi Public Schools is 6.4% (middle school) • 37.7% of high school students have tried at least one tobacco product • 62.9% of middle school students tried e-cigarettes between the ages of 10 and 12 • Flavors cited as a reason for use by 38% of youth Youth Programs priorities, goals, and focus include: • Decrease Youth Vaping & Focus on Prevention • Offer an option to Quit (Youth Vaping Cessation) • Work with schools in Mississippi to adopt Model Vaping/Tobacco Comprehensive policies and adopt alternatives to suspension • Expand youth-centered education campaigns to address vaping misconceptions • Increase parent and caregiver awareness on youth tobacco/vaping risks • Integrate cessation support into healthcare and school-based health programs • Collaborate with community organizations for culturally relevant outreach The youth tobacco prevention program is a multi-component framework that addresses three essential goals through mobilizing youth activists, promoting tobacco-free environments, and increasing the youth's affinity toward anti-tobacco branding and messaging. This program advances the field of tobacco prevention because the structure is aligned with the Centers for Disease Control's Best Practices for Comprehensive Tobacco Control Program, which includes preventing tobacco initiation among youth and identifying and eliminating tobacco-related disparities among population groups. The program works to engage youth (grades 9-12) in tobacco prevention activities, reduce youth's access to tobacco products, and increase youth exposure to effective anti-tobacco messaging. Caffee Caffee and Associates Public Health Foundation (CCAPHF) is a Youth Program partner. CCAPHF is implementing a statewide Youth Tobacco and Vaping Prevention Program with MSDH, focused



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		on preventing youth initiation through education, advocacy, and policy change. The program operates across Youth Engagement, Tobacco-Free Community, and Brand Affinity pathways, prioritizing high-need and high-risk secondary schools statewide. 24 secondary schools have been recruited statewide, with 21 youth leaders have been trained within the schools. As of January 2026, youth programs have reached 1,733. Youth Programs' call to action includes: • Empowering schools and educators to implement evidence-based prevention programs • Engaging parents, caregivers, and community leaders in awareness efforts • Strengthening retail enforcement and closing access gaps • Supporting youth-focused cessation initiatives to help quit vaping • Advocating for policies, limiting flavored products, and youth-targeted marketing • Monitoring progress with updated surveys and adapting strategies accordingly • Working together to protect Mississippi youth from nicotine addiction
IV	Open Floor for Council	Dr. Wesson had questions about the restructuring and placement of the Office of Tobacco Control. Mrs. Kent explained that the tobacco control program is now within the Office of Adult Health. All components of tobacco control will remain. Advocacy partners raised several questions related to tobacco control contracts and internal processes that are affecting or slowing down the issuance of contracts. All concerns were addressed by Mrs. Kent and will be discussed with senior leadership. Dr. Wesson inquired about kratom and its effects on youth. No one on the council was familiar with kratom. This is a topic that we will incorporate into the next council meeting.



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V	Business (Old)	No Quorum
VI	Business (New)	No Quorum
VII	Closing Remarks/Comments/Feedback	Closing remarks were made, and the evaluation link was provided via a QR code to participants during the meeting for completion.
VIII	Adjourn	All agenda items were addressed, and the meeting adjourned at 10:09 a.m.

ACTION ITEMS

#	Step	Person (s) Responsible	Due Date
1	Send a meeting poll to the council to vote on a potential new date and time for quarterly meetings.	Sharonda Banks	3/16/2026
2	Send a meeting poll to the council to vote on a meeting date to reconvene in December.	Sharonda Banks	3/16/2026
3	Email meeting minutes to council members.	Sharonda Banks	2/17/2026



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Instructions for Form 1075, Meeting Notes

Revision Date, 1/22/18

Purpose: The MSDH Meeting Minutes are optional and not mandated for use; however, it is strongly recommended to meet adequate documentation standards as a PHAB accredited agency. The form serves as strong documentation that a meeting took place and what was discussed. This documentation is particularly important for continuing accreditation.

Instructions: Prior to the meeting, prepare the agenda with topics to be discussed and times for discussion. Meeting Title, Location, Date and Time should match what is listed on the Meeting Agenda (Form 1074). Agenda topics should also be listed in the table provided, and corresponding discussion and/or decisions made should be entered into the notes section of the table. The Action Items table should be completed to list actions to be taken after the meeting, as well as who is responsible for their completion and any relevant deadlines associated. There is space in the footer for the name of the person who compiled the minutes and submitted them to the group for review and approval.

Office Mechanics and Filing: To be determined by meeting purpose and topics discussed.

Retention Period: To be determined by meeting purpose and topics discussed.