

MAINE STATE LEGISLATURE

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MAINE LEGISLATURE
OFFICE OF THE CLERK
1000 STATE HOUSE BUILDING
HAZARD, ME 04103

**Tobacco Prevention and Control
Advisory Council
Report to
Governor John Elias Baldacci
and the
Maine State Legislature**

January 2003

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**Tobacco Prevention and Control Advisory Council Members
As of January 2003 (appointments pending)**

Chairperson: Dennise Whitley, MHA
Director of Advocacy and Health Initiatives, Maine
American Heart Association

Connie Chapman, Regional Vice President, American Cancer Society
Kellie Miller, Executive Director, Maine Osteopathic Association
Dan Meyer, Associate Professor, Dir. of Research, Dartmouth Family Practice
Phyllis Wolfe, BIW Wellness Coordinator, Bath Iron Works
Karen Bell, MD, Medical Director, Medical Management Department, Anthem
Lisa Miller, MPH, Senior Program Officer, The Bingham Program
Jo E. Linder, MD, Medical Officer, Disease Control Program, Portland Public Health

The Tobacco Prevention and Control Advisory Council was created as part of the June 1997 tobacco tax legislation establishing the Partnership For A Tobacco-Free Maine (PTM). The Governor, the President of the Senate and the Speaker of the House appoint the nine Council members.

The Council ensures the coordination of PTM initiatives and activities with those of non-profit organizations, community agencies, the Department of Behavioral and Developmental Services as well as other relevant state agencies. The PTM has facilitated three regular meetings of the Council since the last report to the Legislature in December 2001.

Maine Must Reconfirm its Commitment to Tobacco Prevention, Control and Treatment

At the end of its fifth year, the Council reasserts Maine's need to preserve tobacco settlement funds for tobacco prevention, control and treatment. This upholds the original intention of the settlement as agreed to by legislative council. Effective programs, such as the PTM, need adequate funding in order to further reduce smoking rates among Maine youth and young adults and to reduce the burden of tobacco-related illnesses.

The Council recommends that the PTM continue to be funded at the current level of approximately \$14,472,000 from the tobacco settlement Fund for a Healthy Maine or other sources of revenue. This proposal falls within the Centers for Disease Control and Prevention's (CDC) recommended range of \$11 million to \$27 million for comprehensive statewide tobacco prevention and control programs.

Attached is a report from the Partnership For A Tobacco-Free Maine of accomplishments for the calendar year 2002. The Council purports these are excellent examples of effective strategies to reduce tobacco use and tobacco related disease in Maine.

A report from the Partnership For A Tobacco-Free Maine to the Tobacco Prevention and Control Advisory Council

PTM

The Partnership For A Tobacco-Free Maine (PTM), established in 1997, is part of the Bureau of Health, Department of Human Services. It is designed to reflect the CDC's Best Practice Guidelines for Statewide Tobacco Control Programs.

Mission:

To reduce death and disability due to tobacco use among Maine citizens by creating an environment supportive of a tobacco-free life.

Goals:

- Prevent youth and young adults from starting to use tobacco.
- Motivate and help tobacco users to quit.
- Protect the public from exposure to secondhand smoke.
- Identify and eliminate disparities related to tobacco use among population groups.



Healthy Maine Partnerships
The people dedicated to helping us live longer and healthier.

Partnership For A Tobacco-Free Maine
Bureau of Health, Department of Human Services

Accomplishments: January–December 2002

PTM has developed and is implementing all of the components recommended by the CDC for successful Comprehensive Tobacco Control Programs. These components and related PTM initiatives and activities are outlined below.

1. Community Programs to Reduce Tobacco Use

2. School Programs

The PTM funds 31 local community partnerships across the State dedicated to reducing tobacco-related chronic disease by addressing the associated risk factors of tobacco use, physical inactivity, and poor nutrition in their communities. Each local Healthy Maine Partnership (HMP) contracts with at least one School Administrative Unit (SAU) and supports a full-time School Health Coordinator whose job, over the five-year grant, entails coordinating programs related to the health of students in the SAU.

Though work is ongoing, community HMPs have made significant inroads

in tobacco prevention and control in their communities. Among their accomplishments:

- Over half of HMPs have worked with area hospitals on strengthening policies for tobacco use on campus. These hospitals are now, or are in the process of becoming, 100% smoke-free.
- Over half of HMPs are working on tobacco use policies for municipal areas and public recreation sites.
- One-third of HMPs worked with local employers to either develop policies that comply with Maine worksite law or to make their policies stronger than the law to protect workers from second-hand smoke. One HMP assisted 44 such worksites considering stronger tobacco policies.
- Six HMPs provided technical assistance to three colleges and three universities working to strengthen their tobacco policies.

State-Level HMPs

The PTM, in collaboration with the Maine Cardiovascular Health Program, Community Health Program, Coordinated School Health Program, and the Department of Education, form the State-level Healthy Maine Partnerships. These State programs support the 31 local HMPs through grant management, training, technical assistance, and access to collateral materials.

The PTM is intent upon making all Maine schools 100% tobacco-free. Toward this goal, the PTM has developed a Tobacco-Free School Policy manual (based on CDC Guidelines) which is actively promoted to all School Administrative Units. SAUs that meet PTM criteria receive signs to post in and around school grounds. To date, this includes 33 SAUs representing 93 schools.

3. Enforcement

The PTM, in conjunction with the Department of the Attorney General, has implemented a retail training and outreach program for responsible tobacco sales. More than 650 tobacco retailers have participated in the statewide "No BUTS!" program. Where such programs as "We Card" just talk about the law, "No BUTS!"

The compliance rate among Maine retailers in refusing tobacco sales to minors rose to 93% in 2002, one of the best rates in the nation.

addresses the public health reasons for restricting youth access to tobacco. The program also offers incentives for retail compliance and rewards stores not cited for selling to minors.

The PTM continues its collaborative relationship with the Departments of the Attorney General and Behavioral and Development Services to conduct tobacco retail compliance inspections. The compliance rate among Maine retailers in refusing tobacco sales to minors rose to 93% in 2002, one of the best rates in the nation.

4. Statewide Programs

Youth Initiatives

A number of statewide initiatives are centered on tobacco prevention and control. One strong example is the Youth Involvement and Leadership project* which offers training and technical support to the Youth Advocacy Programs (YAP), that are part of the 31 community HMPs. Through this youth initiative, YAP members become part of a statewide network of teens working in their communities to reduce smoking, increase physical activity, and improve nutrition. Many YAP members participate in the Maine Youth Action Network, learning leadership skills they can take back and share with their service areas.

A State-level "MY TURN" (Maine Youth Tobacco Resistance Network) Advisory Board is also in development. The board will consist of youth elected to represent each YAP region in the State. Together, the board members will address tobacco-related activities designed to influence policy and environmental change, primarily at the State level.

* The Bureau of Health Youth Involvement and Leadership project is a collaborative effort of the PTM, Maine Cardiovascular Health Program, Teen and Young Adult Health Program, and the Maine Suicide Prevention Program.

Disparities Project

The Disparities Project is a statewide effort to identify and address population groups disproportionately affected by tobacco. For example, Native Americans have been identified as having higher rates of smoking and higher rates of tobacco disease. As a result, the PTM has contributed to grants allowing tribes to develop culturally sensitive tobacco prevention and control programs. The PTM is also developing a statewide training program for use in different cultural contexts.

Maine has seen a 36% drop in tobacco use among high school students since the PTM was founded in 1997.

Future efforts will be guided by representatives of various State populations. The PTM is recruiting a cross section of people who will function as a tobacco subcommittee to the Bureau of Health Disparities Workgroup.

Athletes Program

The PTM's Tobacco-Free Athletes Program (TFA) targets athletes and coaches. At the core of the program is a trio of TFA Coaching Manuals: one for soccer, one for basketball, and one

for baseball/softball. These manuals, developed in collaboration with the Governors Council on Physical Fitness & Sports and the Maine Principals Association, promote tobacco-free living through individual and team pledges and sport-specific skill drills. The program gets a boost from the Maine Soccer Federation which offers soccer clinics to teams that promote tobacco-free messages. One example is in Washington County, where PTM is working with a local coach to enhance a county-wide soccer program as a means of getting the tobacco-free message to kids in this impoverished area.

5. Chronic Disease Programs to Reduce the Burden of Tobacco-Related Diseases

Even if current tobacco users quit, the residual burden of disease among past users would continue for decades to come. For that reason, the CDC promotes collaboration between State tobacco control programs and chronic disease prevention programs to prevent diseases as well as detect them early enough to deliver effective treatment. Here in Maine, the PTM maintains that kind of collaboration, working closely with the Maine Cardiovascular Health Program, the new Maine Asthma Program, the Oral Health Program, and The Maine Cancer Registry, among others.

6. Counter-Marketing Media and Statewide Education

TV, radio, and newspaper are some of the most powerful weapons in the

fight against Big Tobacco. The PTM uses media to effectively counter Tobacco Industry marketing with public education. PTM also developed and distributed materials to educate various target groups.

HelpLine for the general public

Purpose: Educate smokers and their families about how to quit. 33,974 information brochures distributed.

HelpLine for healthcare providers

Purpose: Provide phone numbers and information for providers to give their patients who are ready to quit. 9,209 Rolodex cards, brochures, Quit Tip cards distributed.

“Every Mother’s Wish” Program

Purpose: Help healthcare providers educate low-income pregnant women about the dangers of smoking during pregnancy. 355 kits distributed.

Parents’ Educational Kits

Purpose: Give parents information about how to talk to their kids about tobacco, how important it is for parents to set a good example by quitting, and how to help kids who are addicted to tobacco. Over 5,000 distributed statewide.

Cigar and Spit Tobacco Educational Materials

Purpose: Offer the public important facts about the dangers of cigars and spit tobacco. 2,400 brochures distributed statewide.

How well do these media campaigns work? An independent market research firm evaluates their reach

and effectiveness on a regular basis. Here is a synopsis of 2002 campaigns along with their results:

Bar Workers—TV Ads

Purpose: Create awareness of the effects of secondhand smoke on workers in public places.

- 48% of the public is aware that bar workers are exposed to greater risks from secondhand smoke.

HelpLine Messages—TV and Radio Ads

Purpose: Develop awareness of this phone counseling service and encourage tobacco cessation.

- 75% of HelpLine callers cited the ads as their motivation to call.
- During periods of no advertising, call volumes dropped dramatically—from 30 to 40 per day down to less than 10 per day.

Tobacco Messages Developed by Youth, for Youth—TV and Radio Ads

Purpose: To focus on 1) manipulation by the Tobacco Industry, 2) tobacco refusal skills, and 3) tobacco addiction.

- Focus group results indicate that youth remember and relate to ads.

“Don’t Smoke Around Your Kids”—TV and Radio Ads

Purpose: Communicate the risk of secondhand tobacco smoke to children’s health.

- 34% of Maine adults know the consequences of secondhand smoke.

“Quit for Your Kids”—TV and Radio Ads

Purpose: Appeal to parents to “be there” for their children by showing young people who lost a parent to tobacco-related disease.

- Increased calls for quitting information.
- Awareness of health consequences jumped from 12% to 25% after the ads ran.
- 73% of the population recalls the message.

HelpLine counseling leads to a threefold higher quit rate than quitting without assistance.

7. Cessation/Treatment Programs

The PTM Tobacco Treatment Initiative provides vital services currently lacking in Maine’s clinical settings. Based on scientific methods, the Initiative offers the public direct access to cessation counseling and medications and educates Maine school and healthcare professionals about treating tobacco use.

The Maine Tobacco HelpLine (1-800-207-1230)

The HelpLine provides professional counseling to any Maine resident who wants help quitting tobacco.

Between January and December 2002, the HelpLine assisted 4,687 callers representing all Maine counties. Of these people, 4,019 were tobacco users, 206 were friends or family, 156 were health-care providers, and 306 called for information. Independent surveys indicate that 22% of those quitting were not smoking six months after HelpLine counseling. HelpLine counseling leads to a threefold higher quit rate than quitting without assistance.

PTM Tobacco Medication Voucher Program

This program provides nicotine therapy (patches or gum) for up to eight weeks for people without insurance or whose insurance does not cover tobacco medications. Medications issued through the program can be easily attained at any pharmacy. Recipients also receive HelpLine counseling to maximize quitting success.

In the first four months:

- 567 tobacco users from all Maine counties enrolled in the Voucher Program.
- 41% of HelpLine callers received Medication Vouchers.

PTM Tobacco Treatment Training Program

The PTM takes several approaches to help healthcare and other professionals treat Maine tobacco users:

Basic Skills Training: Designed to enhance tobacco intervention skills. In 2002, 410 healthcare providers, social workers, and teachers from across Maine attended a two-day training session. Nearly all (96%) felt the training enhanced their ability to help patients and clients who use tobacco.

Clinical Outreach: Offers healthcare providers with on-site assistance from clinical experts. Education focuses on improving practice skills, enhancing office systems, and providing resources.

Tobacco Treatment Tool Kits: 4,900 kits, featuring treatment guidelines and referral information, were distributed to healthcare and dental providers.

“Every Mother’s Wish” Program: An effective intervention tool for low-income pregnant women who smoke. The provider kit includes: a video for patients to watch during a routine prenatal visit; a pledge form that when signed, allows a HelpLine counselor to call; a special T-shirt as an incentive to enroll in the program; and a sterling silver necklace for each mom-to-be who completes the intensive counseling program.

Tobacco Use and Treatment Facts

- 1 out of 4 Maine adults smokes. Among ages 18 to 24, 31% are smokers.
- Over 70% of all smokers want to quit. Each year, over 50% seriously attempt quitting.

- Without treatment, 5% to 10% of quitters will be smoke-free one year later.
- With treatment (counseling and medication), up to 20% to 40% of quitters will be smoke-free one year later.

8. Surveillance and Evaluation

The PTM partners with the MCVHP in evaluating programs at local and State levels. The State-level HMPs are developing an on-line monitoring system to help local HMPs track and evaluate their work.

To track tobacco data, the PTM conducts a Maine Adult Tobacco Survey and a Youth Tobacco Survey. As a cost-saving measure, the PTM conducts these extensive surveys only every three to four years. During the off-years, the PTM uses data from the Behavioral Risk Factor Surveillance System and the Youth Risk Behavior Survey.

9. Administration and Management

A comprehensive tobacco prevention and control program requires a tremendous amount of coordination between the State agency and its partners. HMP Senior Program Manager Patricia Robinson oversees the effort and ensures coordination of the Healthy Maine Partnerships at the State and community levels.

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The Department's Affirmative Action Coordinator has been designated to coordinate our efforts to comply with and implement these Federal laws and can be contacted for further information at 221 State Street, Augusta, Maine 04333, (207) 287-2567, or Hearing Impaired 1-800-438-5514 (TTY).