

# MAINE STATE LEGISLATURE

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December 1, 2012

Hon. Kevin Raye, Senate President  
Office of the Senate President  
3 State House Station  
Augusta, Maine 04333

Hon. Robert Nutting  
Office of the Speaker of the House  
2 State House Station  
Augusta, Maine 04333

Dear President Raye and Speaker Nutting,

Please find the attached annual report of the Tobacco Prevention and Control Advisory Council. This report is being delivered to you in accordance with MRSA Title22, § 272, section 2.

Should you have any questions about the report or require more information, please do not hesitate to contact the Tobacco Prevention and Control Advisory Council or the staff at the Partnership for a Tobacco-free Maine, Maine Center for Disease Control, Maine Department of Health and Human Services.

Sincerely,

A handwritten signature in black ink, appearing to read "Tina Harnett Pettingill". The signature is written in a cursive, flowing style.

Tina Harnett Pettingill, MPH, CPC

CC: David Boulter; Executive Director of the Legislative Council

## **Tobacco Prevention & Control Advisory Council's Annual Report 2012**

**The Partnership For A Tobacco-Free Maine (PTM) is Maine's state tobacco, prevention and control program. PTM is a comprehensive program that works in multiple goal areas: to prevent youth from smoking, to assist people to quit their use of tobacco and to protect people from secondhand smoke while identifying and assisting those people most affected by tobacco use and exposure.**

## **Executive Summary**

The Partnership For A Tobacco-Free Maine (PTM) has achieved significant milestones this calendar year as a result of a sustained, collaborative and comprehensive approach.

### **Achievements:**

In an ongoing effort to reduce tobacco smoke exposure in the home, Maine became the first state in the nation to require protection of tenants in new units. The Maine State Housing Authority, now called MaineHousing, by a vote of its Board of Directors, approved the 2013 Qualified Allocation Plan which will now include a threshold requirement that all projects funded through its Low Income Housing Tax Credit (LIHTC) program must be 100% smoke free. Signed by Governor LePage on October 25, 2012, Maine is the first state in the nation to require this.

The Maine Tobacco HelpLine annualized treatment reach during this calendar year was 3.73 %. This is especially significant when statistically state tobacco cessation quit lines have an average reach of only 1 - 2 %. The training component of the Maine Tobacco HelpLine hosts an annual Intensive Tobacco Treatment Training and Conference; the spring 2012 event was attended by 136 participants. Recognizing that those with mental health and behavioral health issues have higher rates of tobacco use and addiction than the general population, the theme of this year's event focused on the link between mental health and tobacco use and how best to provide effective treatment counseling and related nicotine replacement therapy to this specific population.

As part of our ongoing effort to provide training in tobacco treatment to all Mainers, The Maine Helpers Program (based on the University of Arizona College of Medicine program) was launched during 2012. Three Helpers Train-the-Trainer sessions were conducted with 42 professionals trained and certified. This resulted in 14 Helpers Training held and a total of 103 new “Helpers” trained throughout the state to provide supportive and empathetic assistance to friends, family and co-workers who are struggling to end their addiction to tobacco products.

Recognizing that preventing youth from ever starting to use tobacco must be a priority, PTM has established community level guidelines for recreation providers of all types to assist them in their efforts to provide smoke-free and tobacco-free outdoor recreation settings for families to enjoy. As 2012 comes to a close, eighty-six (86) community recreation tobacco-free outdoor policies are in place across the state which supplement the comprehensive smoke-free laws in the State by decreasing secondhand smoke exposure, encouraging youth from never starting to use tobacco products, and by providing a tobacco-free environment that supports tobacco-free living.

Maine has developed and maintained a respected, comprehensive program that has its foundation in Maine’s strong indoor smoking laws protecting all of its residents from secondhand smoke in public places and workplaces, in its effective tobacco treatment training and services, as well as, in its commitment to provide strong prevention programs that encourage Maine’s youth to avoid tobacco use and to enjoy a smoke-free and tobacco-free life.

**Ongoing challenges:**

Despite these achievements, youth in Maine still succumb to tobacco addiction. According to the 2011 Youth Behavioral Risk Survey (YBRS), 15.2% of Maine high school students report smoking in the past month. This translates into approximately 12,670 students. More alarming is the rise in use of “other tobacco products” among Maine youth. For example, between 2001 and 2011, there has been an increase of 24.19% in the use of smokeless tobacco among Maine high school age youth, predominantly among boys. With the new spitless products there is recent evidence to suggest an increase in girl’s use, which while not statistically significant, is of concern.

The fact that steep drops in youth smoking/tobacco use have stalled nationally and in Maine is of deep concern. As noted in the August 10, 2012 MMWR<sup>1</sup>, tobacco use continues to be the leading cause of preventable death and disease in the United States, with nearly 443,000 deaths occurring annually because of smoking and exposure to secondhand tobacco smoke. According to national statistics, 80% of youth who smoke will continue their use into adulthood and one-half of these will die up to 13 years earlier than their non-smoking peers. Since 90% of youth begin their use prior to age 18, and 99% of current tobacco users began prior to age 26 it is vital that Maine concentrate its efforts on proven strategies to prevent youth from ever starting.

The 2011 Maine Integrated Youth Health Survey (MIYHS) includes some troubling data on youth tobacco use; for example, 67% of high school youth report that it would be “sort of easy” or “very easy” to get cigarettes if they

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<sup>1</sup> Morbidity and Mortality Weekly Report, Volume 61 / Number 31: August 10, 2012.

wanted some, including getting them from friends, family, stealing as well as buying them illegally (under 18 years of age) in stores. 52% of high school and 50.4% of middle school students say that they see tobacco product advertising in stores "a lot". Of all youth surveyed who report that they have ever smoked a whole cigarette, one third report doing this before they turned 13 years of age.

The negative health effects of cigarette smoking are immediate. It is especially deleterious among adolescents and young adults where it causes early damage to the abdominal aorta including a narrowing in this large artery that carries oxygen rich blood to the major organs as noted in the 2012 U.S.DHHS, *Preventing Tobacco Use Among Youth and Young Adults: A report from the Surgeon General* CDC National Center for Chronic Disease Prevention and Health Promotion. From the same report we have learned that adults who smoked during adolescence can have lungs that never develop to their full potential size and hence never perform to full capacity.

The recommended components of a comprehensive, multi-component, effective program to prevent youth initiation of tobacco use include school-based policies and programs, smoke free laws and policies, community norms that support tobacco-free living and targeted media campaigns.

It is vital to the long term health of Maine residents that the Partnership For A Tobacco-Free Maine as a comprehensive program continues to be supported at all levels.

## **Goal one:**

### **Preventing youth and young adults from using tobacco**

#### **Rationale and progress to date**

Maine's youth high school smoking rate, defined as youth smoking cigarettes any day in the past thirty days, according to the 2011 Maine Integrated Youth Health Survey (MIYHS) is 15.5%. Cigar (cigarillos and little cigars) use by high school age youth is 12.9% and 1.8% for middle school youth.

PTM's powerful counter marketing, community initiatives, and youth leadership training over the past decade has clearly been successful; however, most youth who were exposed to our earlier messages have now become adults.

There are always new youth growing up who are susceptible to becoming addicted to tobacco. Preventing youth from ever starting to use tobacco is the most important step in reducing the state's smoking rates and the resulting disease, disability, and death.

We know from national studies that 90% of addicted adult smokers started using tobacco before the age of 18, 99% before age 26 and about one-third of these smokers will die prematurely from a smoking-related disease. While Maine has made great strides in reducing our youth smoking rates, our efforts at prevention must continue and be directed to each new generation.

PTM's state tobacco control and prevention program uses the federal CDC recommended strategies by supporting Maine's strong state laws as well as voluntary comprehensive policies especially in settings frequented by



youth and families, for example in outdoor community recreation locations, and in all schools.

The prevention effort includes mass media campaigns that include fact sheets, brochures, radio, television, web and internet sites to reach and communicate to youth and with their teachers, coaches, and especially parents.

A new effort in 2012 was to get kids to think about their decision making process. The **"Why I don't smoke" campaign**, encourages youth to log onto to facebook and to interact with other kids to stay committed to not ever using tobacco.

In collaboration with the State's Department of Education, PTM provides information to those involved in health education as well as teaching tools to help in classroom based instruction. Developed over the past few years, the **interactive program called "The Billionaire Vanishes"** encourages middle school aged students to use their laptops to follow clues to solve a mystery while learning new tobacco-related facts by referencing places on the internet about tobacco use and its dangers.

At the community level, PTM has remained committed to its collaboration with the statewide network of Healthy Maine Partnerships. The initiatives support a commitment to community engagement and youth leadership in support of a tobacco-free lifestyle.

**The NO BUTS! Program** is an ongoing, nationally recognized retailer training program to block underage sales to minors under age 18. Maine retailers have maintained a stellar record, as evidenced by the fact that

the rate of illegal sales to youth has remained at 5% or less over the past three years.

**The Star Store Program** is a voluntary education and recognition program to encourage tobacco retailers to responsibly manage point-of-sale marketing materials for tobacco products. Tobacco retailers who voluntarily reduce their point-of-sale tobacco advertising will be recognized at both the state and local levels. As a NO BUTS! “Star Store” the retail outlet will be rewarded with “good neighbor” status through in-store, local media and community promotions. The intent of this initiative is to involve the participation of youth groups throughout Maine to conduct assessments of the retailers. This initiative is a business friendly approach to the serious issue of tobacco industry advertising that attracts the attention of youth and makes tobacco use seem to be the norm. This initiative resulted from a 2005 Resolve, Chapter 46 that was passed by the Legislature’s Joint Standing Committee on Health and Human Services.

**PTM Action Sheets** are one-page fact sheets for parents, coaches and teachers to educate them about new tobacco products and the negative impact of tobacco use on athletic performance. The action sheets are meant to give action steps on what to do and how to reach out to youth. PTM will create more action sheets as part of this ongoing series.

**Recreation Policy:** The PTM Tobacco-Free Community Recreation Initiative gives community recreation departments and other community programs tools for developing policies that promote tobacco-free environments. PTM provides no-cost signage after a policy is reviewed and accepted by PTM. There are currently over 86 tobacco-free community recreation policies throughout the state.

**School Policy:** During the 123<sup>rd</sup> legislative session, the Maine State Legislature passed a bill that strengthened the law regarding tobacco use on school grounds. School buildings and grounds are required to be 100% tobacco free at all times. PTM has supported an additional step by working with Maine's schools to encourage the development of a comprehensive policy to include the following: procedures for enforcing the policy; procedures for communicating the policy; prohibition against tobacco use by students, staff, parents, and visitors on school property, in school vehicles, and at school sponsored functions on or away from school property; as well as, prohibition against tobacco advertising in school buildings, at school functions and in school publications.

## **Maine's Annual Anti-Tobacco Youth conference**

The Maine Annual Youth Conference was held in November 2012. The event is sponsored by PTM and organized by the Maine Youth Action Network along with the Maine Youth Leadership Team. Approximately 340 youth and adults from across Maine came together to learn about programs to promote and invest in youth leadership, as well as, provide a range of opportunities for teens and young adults to get involved with tobacco prevention and control.

As our mission is to reduce tobacco related death and disability in Maine by creating an environment supportive of a tobacco-free lifestyle, we believe in the importance of the power of youth voices in the fight against big tobacco. The event provides an opportunity for youth from grades 7-12 to gain knowledge, resources, skills, and allows them to network amongst those throughout Maine. They are also given the opportunity to share and participate in action planning during which they identify steps they can have learned and how they can build upon those in their own communities and schools.

## **Goal two:**

### **Preventing exposure to secondhand tobacco smoke:**

#### **Rationale and progress to date:**

Secondhand smoke is deadly. According to the Surgeon General of the United States, "The scientific evidence indicates that there is no risk-free level of exposure to secondhand smoke."<sup>2</sup> And as noted in the Institute of Medicine report: IOM (Institute of Medicine). 2010. *Secondhand Smoke Exposure and Cardiovascular Effects: Making Sense of the Evidence*. Washington, DC: The National Academies Press: "... while smoking restrictions protect non-smokers; such restrictions also help smokers quit, cut down and avoid relapse by reinforcing a non-smoking standard or 'norm' ". Maine has taken a strong stand as evidenced by its laws to protect residents of the state.

#### **Maine's Laws Relating to Smoking**

The laws related to secondhand smoke in Maine primarily relate to two settings: workplaces where the law is in place to protect employers and employees; and public settings, defined as places into which the public is invited or allowed, to protect the public at large from the dangers of secondhand smoke. Smoking is banned by Maine law in all enclosed indoor areas of the workplace. This includes a ban on smoking in all employer-owned and employer-leased vehicles. Smoking is also banned in employee-owned vehicles when such vehicles are being used in the course of work whenever other employees or persons are in the vehicle for work-related reasons.

The Good Work! Resource Kit includes sample policies that can be

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<sup>2</sup> *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. U.S.DHHS CDC Office on Smoking and Health. 2006

downloaded and adapted to the needs of the individual employer while meeting or exceeding state law. The Kit can be viewed on the web at [www.tobaccofreemaine.org](http://www.tobaccofreemaine.org). A simplified Guide for Maine Employers (found within the kit and also available separately) provides an easy to read summary of how Maine businesses can more easily comply with Maine law. Helpful brochures, information and more can be accessed easily from one's desktop online at [www.ptmstore.org](http://www.ptmstore.org).

The Partnership For A Tobacco-Free Maine website has been updated to include an online listing and brief description of all relevant secondhand smoke laws with a link to the state's legislative website to access the statute. To support the legislation that prohibits smoking in public places, PTM created a generic smoke-free area sign that cites all tobacco laws. This sign is available free of charge to Maine businesses in order for them to comply with the law.

Smoking is also prohibited in residential facilities licensed by DHHS when an employee is physically present to perform work there.

Employers in Maine may only allow smoking outdoors, at least twenty (20) feet from entryways, vents, windows and doorways, and not in a location that will allow smoke to circulate back into the building. (Public Law 2009, Ch. 300 and 22 M.S.R.A. §1580-A).

In outdoor locations, smoking is prohibited in, on or within twenty (20) feet of common areas, including beaches, playgrounds, and public places (including rest rooms) at Maine's state parks and historic sites.

Smoking is also prohibited in outdoor eating areas of bars, restaurants,

and snack bars—at any eating establishment where food or drink is served to the public for consumption on the premises—24 hours a day, 365 days a year. (Public Law 2009, Ch. 140 and 22 M.S.R.A. § 1542 SUB-§ 1 & 1550).

Smoking is prohibited in a motor vehicle by the operator or a passenger whenever a person under the age of sixteen years is present. A person violating this section of Maine law commits a civil violation for which a fine of \$50 may be assessed or a written warning given at the discretion of the law enforcement officer.

Violations of any of these laws may be reported to PTM by phone and/or complaints can be filed online at [www.tobaccofreemaine.org](http://www.tobaccofreemaine.org) Complaints are forwarded to the proper enforcement authorities.

**The Breathe Easy Coalition of Maine** is an “umbrella coalition” comprised of the Smoke-Free Housing Coalition of Maine, the Maine Tobacco-Free College Network and the Maine Tobacco-Free Hospital Network. The coalition’s purpose is to reduce involuntary exposure to secondhand smoke by voluntary improvements in both indoor and outdoor environments through a collaborative effort involving Maine’s colleges, health care/hospital systems and within its multi-unit residential housing.

**The Smoke-Free Housing Coalition of Maine** seeks to protect residents in multi-unit housing from exposure to secondhand smoke since the home is now the predominant location for exposure to this deadly, toxic substance.<sup>3</sup>

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<sup>3</sup> Ibid.

Secondhand smoke is especially dangerous to children, the elderly, those with respiratory disorders and even pets. Children exposed to secondhand smoke at home have an increased risk of developing ear infections and respiratory tract infections, and are 44% more likely to suffer from asthma.

Since its start in 2004, the Smoke-Free Housing Coalition has provided technical assistance and accessible resources to a wide range of partners. It has made Maine the first state in the nation to have successfully assisted all twenty of the state's Public Housing Authorities to develop and implement fully 100% smoke free policies for all of the units; protecting 9,470 residents living in over 5,000 units. In addition, 48% of private landlords have chosen to go smoke-free; protecting over 135,000 tenants. Surveys conducted with tenants in 2011 show that over 70% of tenants prefer to live in a smoke free building.

The Smoke-Free Housing Coalition of Maine also promotes the use of the Smoke-Free Home Pledge Family kit. Patterned after the Environmental Protection Agency's model, the kit supports families in adopting a pledge to keep their home smoke free at all times. Since 2008, 4,546 households in Maine have signed the pledge to keep their homes smoke-free.

**The Maine Tobacco-Free College Network** works with college administrators, health centers and student groups to promote tobacco-free living on campus. Since the smoking rate among young adults 18-24 years of age in Maine is 29.2% significantly higher than the overall adult rate of 22.8%, it is vital that colleges protect their students from secondhand smoke, educate about the danger of tobacco addiction and provide ready



access to tobacco treatment opportunities to students, faculty and staff.<sup>4</sup>

Utilizing an approach based on specific criteria, the MTFCN held a workshop and awards event on November 15, 2012, in conjunction with the Great American Smoke-Out (GASO) honoring nine colleges; four of which met the highest standards and received gold awards.

**The Maine Tobacco-Free Hospital Network** implements a similar approach as it collaborates with leaders within Maine's health care institutions. At its March 21, 2012 event, twenty-eight of Maine's thirty-nine hospitals (71%) received an award from MTFHN. The sixteen hospitals that achieved Gold Star status represent 2,223 acute care beds and stretch across all sixteen of Maine's counties protecting countless patients, staff, doctors, visitors and vendors.

**Breathe Easy on the web:** The Breathe Easy Coalition of Maine maintains a website and also hosts individual websites for each of its three component areas. Resources for all three components are also available; including fact sheets, sample leases and more; all of which are available for free download. In addition specific technical assistance is provided on a regular basis and as needed by request from tenants, consumers, landlords, health care organizations, college health officials and others. An annual schedule of webinars is made available, as are monthly electronic newsletters through online subscription. Breathe Easy Coalition staff host an Annual Meeting to bring together the many partners and collaborative entities with whom Breathe Easy works throughout the year. On July 26, 2012, the annual meeting featured keynote speaker Dr. Jonathan Winickoff, a pediatrician and researcher from Massachusetts General

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<sup>4</sup> Maine BRFSS, 2011.

Hospital, presenting on the emerging public health issue of third-hand tobacco smoke. A special award was presented to former PTM Program Manager Dorean Maines honoring her contribution and recognizing her retirement.

To contact the Breathe Easy Coalition by email;

[breathe.easy.maine@gmail.com](mailto:breathe.easy.maine@gmail.com)

Websites for the three components are:

[www.SmokeFreeForME.org](http://www.SmokeFreeForME.org); [www.MaineTobaccoFreeCollegeNetwork.org](http://www.MaineTobaccoFreeCollegeNetwork.org);

[www.MaineTobaccoFreeHospitalNetwork.org](http://www.MaineTobaccoFreeHospitalNetwork.org)

## **Goal three:**

### **Motivating and helping tobacco users to quit:**

#### **Rationale and progress to date:**

Maine's adult smoking rate according to the 2011 BRFSS was 22.8%. The apparent increase as evidenced by this specific survey may not be significant compared to previous years. A new methodology for analysis was used in 2011 because cell phone users were included to assure a more accurate representation of Maine's population in the 2011 sample. In prior years the survey sample was limited to households with landlines. According to the U S census 2011, Maine's adult population is 1,058,704; 22.8% would account for approximately 241,384 adult tobacco users. The rate among females is 20.6%, and for males 25.1% according to the 2011 Maine BRFSS.

Smoking rates vary widely among subsets of Maine's population. The smoking rate among Maine adults with annual incomes less than \$15,000 is 38.9%; while the rate for Maine adults with an annual income of more than \$50,000 is 12.5%.

Among the Medicaid/MaineCare population, the adult smoking rate according to the 2011 BRFSS is 40.4%. The 2009 Maine Pregnancy Risk Assessment Monitoring System (PRAMS) reports that 21.2% of all pregnant women in Maine smoke during their pregnancy, and the percent of women who smoke who are on Medicaid/MaineCare is much higher at 35.9%.

Pregnant women who smoke are a particularly difficult population to reach; but they do call the HelpLine. To assess the current status of female callers the tobacco specialist counselors who answer the HelpLine ask whether a woman caller is currently or not pregnant; planning to

become pregnant within the next three months, and if she is currently breastfeeding her child. During FY 12 (/1/2011-6/30/2012) 3,160 women who called were not pregnant, 51 currently pregnant, 31 were planning a pregnancy and 11 were currently breastfeeding their infant.

PTM conducted six focus groups in September of 2012 with MaineCare recipients who smoke to determine why they don't quit smoking, why they don't use their treatment/cessation benefit and whether or not they use their doctor as a resource to help them to quit smoking. PTM will use this information to design better ways to encourage smokers, both men and women, with low incomes (according to Federal Poverty guidelines) to seek treatment for their tobacco use.

Because research has shown that tobacco users/smokers are two to three times more likely to quit when using assistance than when they try on their own, the Partnership for A Tobacco-Free Maine (PTM) contracts with the MaineHealth's Center for Tobacco Independence (CTI) to implement the Statewide Tobacco Dependence Treatment Initiative for Maine. The Center for Tobacco Independence provides best practice, evidence-based tobacco treatment in accordance with the 2008 Public Health Service Guidelines (PHSG); Treating Tobacco Use and Dependence.

The Tobacco Dependence Treatment Initiative is comprehensive, and is comprised of four major components:

1. Coordination of the statewide system of tobacco dependence treatment services.
2. The Maine Tobacco HelpLine 1-800-207-1230 (telephonic counseling). The HelpLine is also reached via 1-800-NEWCHOICE (advertised specifically for youth under 18) and the national quit line number 1-800-

QUITNOW. The Maine Tobacco HelpLine reaches all counties in Maine offering easy access and free treatment even in Maine's most rural areas.

3. Statewide tobacco dependence treatment trainings: A variety of trainings of healthcare providers and allied professionals, about evidence-based tobacco treatment are provided annually.
4. The Maine Medication Voucher Program: Available to those without insurance or underinsured for cessation treatment. Tobacco users without insurance or under-insured and who are otherwise eligible may receive over the counter (OTC) Nicotine Replacement Therapy (NRT): Patch, gum, lozenge—all are FDA approved medications proven effective for tobacco treatment.

While many state quit lines reach 1-2% of smokers, the Maine Tobacco HelpLine's reach is 3.73% of Maine's tobacco users; the tobacco treatment intervention reach is 3.27% of Maine smokers. The total number of calls per year is approximately 15,000 which include smokers/tobacco users, doctors, family members, and calls for materials. The number of callers in the most recent fiscal year who registered for treatment was 5,900; 67% (3,834) received nicotine replacement therapy as part of their treatment.

The percent of Maine smokers who seek to end their use continues to increase dramatically due to the efforts of PTM to increase awareness among smokers and to provide accessible avenues to quit. The rate of efforts to quit (defined in BRFSS as those who "tried to quit") increased from 43% in 1994-1996 to 60% (with the highest rates found among those 18-34 years of age) during the time period 2009-2010.<sup>5</sup>

Fax referrals and Electronic Medical Record Referrals are becoming an important part of the Maine Tobacco HelpLine (MTHL) process to better

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<sup>5</sup> BRFSS 1994-2010 analysis

reach smokers. Known as the MTH Electronic Medical Referral project, this effort seeks to increase provider referrals to the MTHL by ensuring that a patient is asked at every visit about their tobacco use and offered tobacco treatment. If the patient agrees the provider will enter the information necessary and a tobacco specialist from the MTHL will call the patient to help them through the quitting process. A successful example of this approach has been the alliance formed by the MTHL with InterMed a multi-specialty healthcare organization serving 80,000 patients in the Portland area through their three sites and their seventy-five providers. InterMed now identifies tobacco users and refers them to the MTHL using a standard MTHL referral form that is embedded into their electronic health record (EHR) creating a permanent record and reminder system coupled with ongoing support.

The training component of the Tobacco Treatment Initiative has added new elements to its range of training opportunities. Launched during the calendar year of 2012 and based on a program from the University of Arizona's College of Medicine, the Maine Helpers Training Program is being used to more effectively train laypeople and non-clinical healthcare professionals to help tobacco users to take steps to quit. Fourteen trainings were held this year and as a result there are now fourteen Helpers Trainers who can conduct trainings for others who seek to become Trainers. In addition 103 Helpers are now prepared to encourage tobacco users to quit and utilize the Maine Tobacco HelpLine.

The Annual Intensive Tobacco Treatment Training Conference attracted 136 participants in the spring of 2012 to learn more about effective tobacco treatment and about the link between mental health and increased tobacco use.

Recognizing the expansion in the use of the e-cigarette and the many misconceptions around this relatively new product, a special symposium was

held on July 9, 2012 which featured a keynote from nationally recognized leader Dr. Nathan Cobb who spoke on the topic "What We Know and What We Need to Know."

Due to its ongoing efforts to train and certify tobacco treatment providers, the Maine Tobacco Treatment Initiative's Training and Certification Program received conditional accreditation from the Council for Tobacco Treatment Training Programs (CTTTP), the national accreditation body developed and sponsored by the Association for the Treatment of Tobacco Use and Dependence (ATTUD). The accreditation recognizes the combined Tobacco Intervention Trainings and Certification Component: Basic Skills Training, the Intensive Tobacco Treatment Training and Conference and the Maine Tobacco Treatment Certification Program as one of the eight premier tobacco treatment training and certification programs in the country.