


Visions of a Tobacco-Free Life



- TOBACCO-FREE RESTAURANTS
- TOBACCO-FREE AIRPORTS
- TOBACCO-FREE BOWLING ALLEYS
- TOBACCO-FREE PLAYING FIELDS
- TOBACCO-FREE SCHOOLS
- TOBACCO-FREE WORK SITES
- TOBACCO-FREE BARS
- TOBACCO-FREE BINGO HALLS
- TOBACCO-FREE DAY CARE
- TOBACCO-FREE POOL HALLS
- TOBACCO-FREE MALLS
- TOBACCO-FREE COFFEE SHOPS
- TOBACCO-FREE PUBLIC SPACES
- TOBACCO-FREE DINERS
- TOBACCO-FREE OFFICES
- TOBACCO-FREE FACTORIES
- TOBACCO-FREE COLLEGES
- TOBACCO-FREE HOSPITALS
- TOBACCO-FREE MILLS
- TOBACCO-FREE CIVIC CENTERS
- TOBACCO-FREE DANCE CLUBS
- TOBACCO-FREE WORK VEHICLES
- TOBACCO-FREE CONCERT HALLS
- TOBACCO-FREE SHOPPING CENTERS
- TOBACCO-FREE CLINICS
- TOBACCO-FREE BUSES

Cindy McBrady and her grandson enjoy a smoke-free day together. Her inspirational story has motivated others to quit and offers renewed hope for those struggling with the addiction. *Read her story on page 15.*

 **Healthy Maine Partnerships**
Partnership For A Tobacco-Free Maine
 Maine Department of Health and Human Services
 Maine Center for Disease Control and Prevention

Letter From the Director

A Message from the Partnership For A Tobacco-Free Maine's Program Manager

This has been an exciting year for the Partnership For A Tobacco-Free Maine (PTM). We've reached new milestones in our ongoing effort to control and prevent tobacco use. I'm pleased to issue this report summarizing some of the recent successes we share with our many dedicated partners across the state.

- Free and accessible cessation assistance, including the Maine Tobacco HelpLine.
- Retail enforcement efforts to curtail tobacco sales to minors.
- Media campaigns encouraging youth to avoid using

The Future is Brighter, but

The big news is that smoking rates in Maine have declined substantially. When PTM began in 1997, nearly 30% of Maine adults smoked; by 2005, that number was down to 21%. The rate among high school students plunged nearly 60% in the same period to an all-time low of 16.2%.

Maine has received national recognition based on these impressive outcomes. For the past four years, the American Lung Association has published annual report cards for each state, based on efforts in tobacco control and prevention. This year, Maine became the first and only state to receive perfect grades in each of the State of Tobacco Control report's four categories, receiving all "A's" for its smoke-free air, tobacco-prevention spending, cigarette tax, and restriction of youth access.

This honor is a testament to years of sustained, comprehensive efforts that include:

- School-, work-, and community-based initiatives to control tobacco use while promoting safe, smoke-free environments.

tobacco, and motivating tobacco users to quit.

- Continuing efforts to reach high-risk populations with demographically relevant services and resources.

Although Maine is at the forefront of tobacco prevention in the US, we recognize that our job is far from complete. Without a strong future commitment, we could lose the valuable ground we've gained. We need only look at Florida, California, and Massachusetts as cautionary examples. All early

FIRST AND FOREMOST

Maine is the first and only state to receive perfect grades in each of the State of Tobacco Control report's four categories. Maine received all "A's" for its smoke-free air, tobacco-prevention spending, cigarette tax, and restriction of youth access.

leaders in tobacco prevention, these states saw positive trends reverse as funding was diverted. We still face some grave statistics:

- Smoking kills more people from Maine than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides, **combined**.

- 1,700 Maine kids become new daily smokers each year.
- And, possibly our greatest challenge is reaching 18- to 24-year-old adults. Almost one-third of them say that they smoke.

Many Challenges Lie Ahead

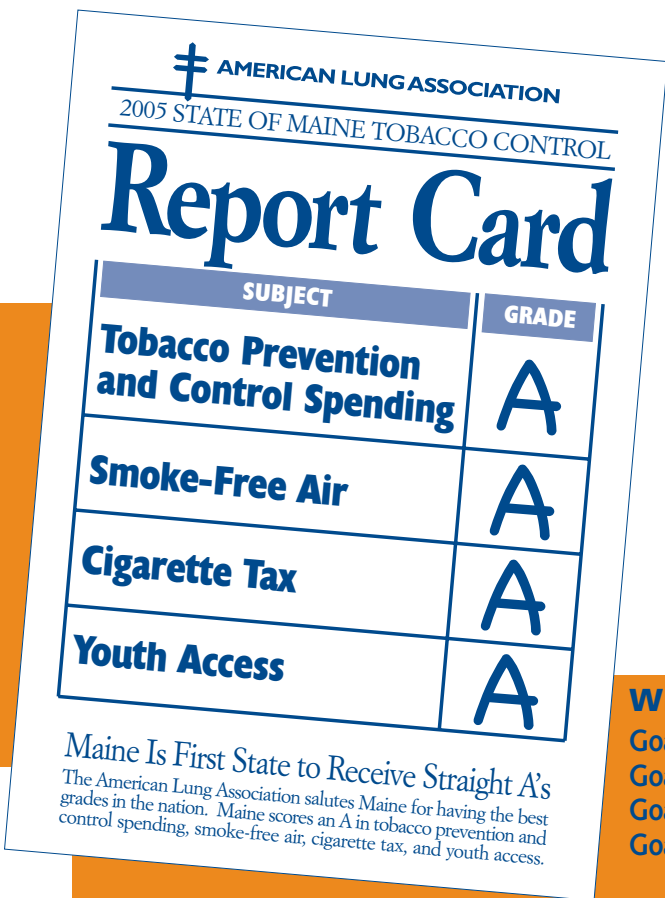
- 2,200 Mainers die each year from smoking-related causes.
- 27,000 kids, now under 18, will one day die prematurely from tobacco use or secondhand smoke.

In addition to our goals and successes, this report highlights the challenges we still face. There is clearly much work to be done to reach low income/education segments, pregnant women who smoke, straight-to-work young adults from 18 to 24, ethnic minorities, people with mental health and substance abuse issues, and other vulnerable populations. Tobacco remains a problem across all geographic regions and social strata. With continued vigilance on the part of the PTM and all our partners, we are convinced there will be even better news on the horizon. That is why we have adopted the theme of *Reaching for the Goal* for this annual report. Each day, with dedication and an unrelenting commitment to prevention, we can make the dream of saving lives from the grips of tobacco a bigger reality for more Mainers.

Sincerely,



MaryBeth T. Welton, CHES
Program Director



AMERICAN LUNG ASSOCIATION
2005 STATE OF MAINE TOBACCO CONTROL

Report Card

SUBJECT	GRADE
Tobacco Prevention and Control Spending	A
Smoke-Free Air	A
Cigarette Tax	A
Youth Access	A

Maine Is First State to Receive Straight A's
The American Lung Association salutes Maine for having the best grades in the nation. Maine scores an A in tobacco prevention and control spending, smoke-free air, cigarette tax, and youth access.

WHAT'S INSIDE:

Goal 1: Prevent Youth and Young Adults from Using Tobacco	4
Goal 2: Eliminate Nonsmokers' Exposure to Secondhand Smoke	10
Goal 3: Motivate and Help Tobacco Users to Quit	12
Goal 4: Address Populations Disproportionately Affected by Tobacco Use	16

GOAL #1

Prevent Youth and Young Adults from Using Tobacco

Our goal is within reach.

Among Maine high school students, smoking rates have plunged nearly 60% since 1997.

We have further to go.

16.2% of Maine high school students still smoke.

51% of middle and high school students say they see tobacco industry advertising in grocery stores and convenience or gas station marts.

The Loring Job Corp Center, an education and job training program, is proof of the power of prevention. Dr. Reggie Reed, a Partnership member and the Center's community liaison, noted that many of the students who arrived as non-smokers were smokers when they graduated. With assistance from the Power of Prevention, a PTM-funded Healthy Maine Partnership, two tobacco cessation workshops were planned. The first was for students, with over 300 attending. They learned the reasons and the resources for a tobacco-free lifestyle. The second workshop, for employees, got results quickly: fifteen employees quit smoking soon after.

Results

YAP: Youth Helping Youth

Peer pressure ranks high among influences affecting youth choices and behaviors. The Youth Advocacy Program (YAP) harnesses this powerful influence in a positive way, to help youth reduce and prevent tobacco use among their peers. The Program, part of the PTM-funded, community-based Healthy Maine Partnerships, develops and supports an increasing number of youth-driven advocacy programs that position tobacco as dangerous, unattractive, and "uncool."

- PTM contracts with the Maine Youth Action Network (MYAN) to provide YAP groups with ongoing training and technical assistance. Regional training sessions in 2005 attracted more than 150 young people and 23 advisors.
- Stop.Quit.RESIST, last spring's Youth Anti-Tobacco Summit, united close to 100 young people from grades 8-12. Attendees joined forces to rally against the tobacco industry, exchange ideas, and develop action plans for preventing youth smoking.
- The 22nd Annual Peer Leadership Conference brought together all youth leadership programs from all across Maine. Youth and adult participants received training in such subjects as leadership skills, activism and advocacy, and adolescent health and development.
- The summer YAP Coordinator Meeting focused on the role of multicultural understanding, social change, and empathy in providing effective leadership at the community level.

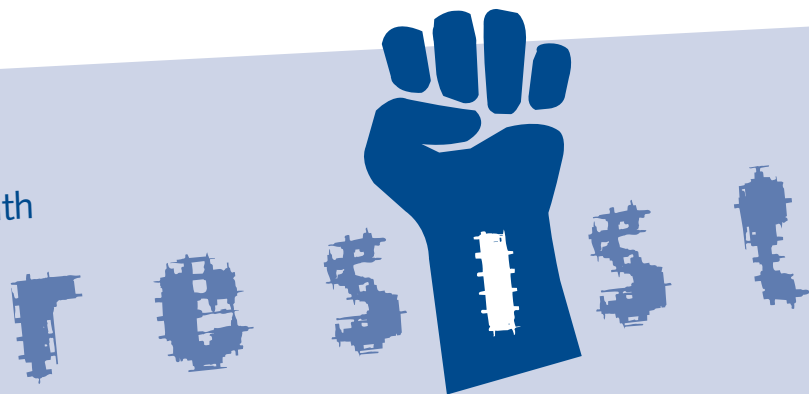
The Youth Advocacy Program (YAP) continues to be a cornerstone of PTM's youth interventions and social marketing campaigns. PTM staff, HMP communities, and YAP coordinators from all over the state convened in August and focused on sharing ideas and training to continue their roles as leaders to youth in their communities. Through the event, YAP coordinators

Stop.Quit.RESIST, a collaboration between the Partnership For A Tobacco-Free Maine, the Maine Youth Action Network and YAP groups, encourages youth to:

Stop tobacco companies' lies and manipulation.

Quit and/or support others who want to quit smoking.

RESIST the pressure and help your peers resist too.



gleaned ideas to increase awareness, empathy, and understanding about the issue of tobacco use within the communities they serve. They also discussed new ways of inspiring youth to be empowered to take action. Other themes included advocacy, multicultural understanding, and social change.

Prevention: Pulling out all the stops

There is no one program, activity, or action that will keep youth from trying tobacco. A problem this complex calls for the comprehensive approach proposed by the National Centers for Disease Control and Prevention (CDC). Maine continues to follow the CDC model, implementing tobacco prevention and control initiatives that influence environments in which youth live.

Our strategies for sustained progress include:

- Strengthening school and community policies that reduce tobacco use in places where youth congregate.
- Implementing age-appropriate, evidence-based prevention programs in grades K through 12.

- Raising taxes on tobacco products as a purchase disincentive.
- Creating tobacco-free media messages that resonate strongly with youth.
- Promoting parent education and support.
- Giving tobacco retailers more education to increase their compliance with tobacco sales laws.

A Snapshot in Time

What is:

A 59% drop in high school smokers and a 64% drop in middle school smokers between 1997 and 2005 means that, as of today, 26,031 fewer Maine youth are smoking.



What would have been:

If the 26,031 Maine youth grew up to be smokers, the picture changes dramatically:

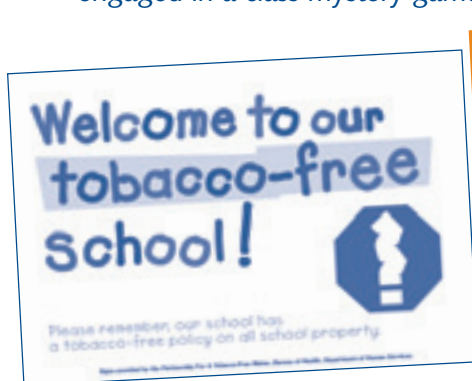
- The economic burden on the State for lifetime medical costs would total an additional \$416,496,000.
- 14,317 would die prematurely from tobacco-related illnesses.
- Each tobacco-related death means 12–21 years of potential life lost.

At School

Tobacco-Free Schools

We look forward to the day when smoking is obsolete at all schools in Maine. To date, 65 school administrative systems have met PTM's criteria to be considered Tobacco-Free Schools. We continue to encourage School Administrative Units (SAU) to develop school policies that prohibit tobacco use on all school property by all people at all times.

- PTM criteria includes developing written procedures to follow when a violation occurs and creating a plan of action for communicating the policy throughout the community.
- Qualifying school systems receive Tobacco-Free signage at no charge.
- YAP groups visited various schools to evaluate their use of Tobacco-Free signage and adherence to school policies. This information will help PTM set future priorities for this prevention initiative.
- A middle school teaching tool for creating awareness about the dangers of tobacco use was developed and piloted in six locations throughout 2006. Called "Billionaire Vanishes," the program is designed to help kids discover the truth about smoking and tobacco addiction as they become engaged in a class mystery game. As schools and



students become more technology-savvy, computers are finding their way into more curricula. As a part of the program, PTM is using laptops to teach 7th graders important facts about tobacco use and to serve as a guide to other health resources on the web.

Life Skills Training

The Life Skills Training program helps adolescents make healthy choices, including saying "no" to tobacco. The program gives students knowledge and skills to increase their self-esteem, make decisions, and deal with many of life's challenges. Life Skills Training (LST) is offered to all Maine SAUs and implementation is required at Healthy Maine Partnership-funded schools. PTM supplies teacher manuals and classroom resources to all participating schools.



- PTM has conducted regional training sessions since 2002. Last year alone, teachers from fifteen school systems attended three training sessions.
- Most HMP-funded schools have sent teachers for training and are implementing the LST program.
- PTM is evaluating the way the LST program is used and supported in order to make improvements. One consideration is to provide school health coordinators with more comprehensive training as a way to give schools an increased appreciation of the program and how it can be incorporated into the health-education curriculum.

On the field

We're well on our way to clearing the air in community recreation areas. During the past year, we collaborated with the Maine Recreation and Park Association to develop an initiative to encourage the development of tobacco-free policies. Our staff also works directly with

many recreation departments, providing advice, technical assistance, and signage. A total of 61 Maine community recreation programs have adopted tobacco-free policies to date.

- A PTM workgroup developed and distributed a policy manual for use by the 31 local HMP programs to advocate for the development of tobacco-free policies.
- PTM provides free signage to recreation programs that provide a copy of their written policy and that implement those policies.
- PTM recommends that these tobacco prevention policies reinforce the benefits for youth rather than focus on negative consequences for violations.

In Stores

No BUTS!

Retailers are key to keeping tobacco products from harming youth. The No BUTS! program (Blocking Underage Tobacco Sales) provides training to tobacco retailers and their employees to prevent sales to underage youth. More than 550 Maine stores are participating so far, including most major chains.

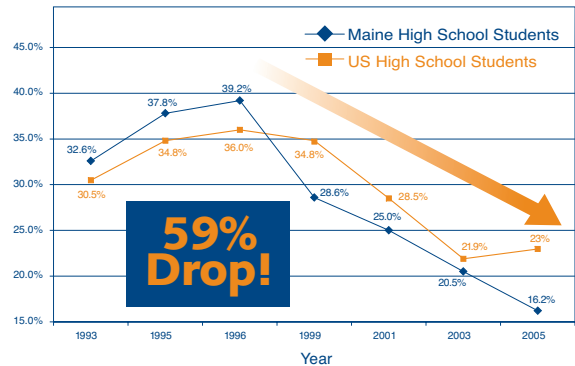
Over 40 local grantees attended No BUTS! trainings to learn about the tobacco retailer education program and how it helps address underage tobacco use in Maine. Local grantees are encouraged to enlist their local retailers to participate in the No BUTS! program.

Responsible Retailer Legislative Resolve

Tobacco companies spend almost \$75 million per year in Maine on marketing and youth are one of their top targets. By spending more on point-of-purchase (in-store) advertising than all other forms of cigarette advertising combined, it's no wonder that three-fourths of Maine youth report noticing tobacco messaging in a convenience store.

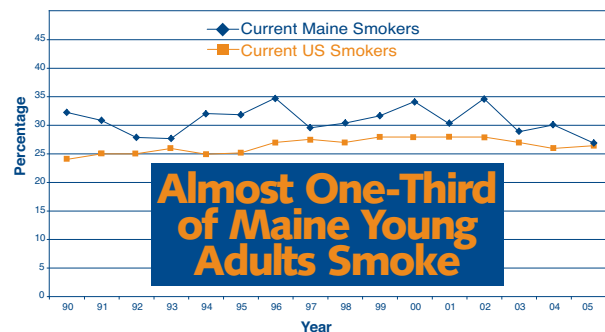
To address these concerns, the Legislature issued a resolve that calls for developing an education and incentive plan to promote responsible use of point-of-sale

Smoking Rates — High School Students Maine & US 1993 — 2005



Source: Maine Department of Education, Youth Risk Behavior Survey: 1993, 1995, 1996, 2001, 2003, 2005
Note: 1999 data is from the Maine Youth Tobacco Survey and was collected in the fall of 1999

Smoking Rates — Young Adults 18–24 Maine & US 1990 — 2005



Source: Maine Behavioral Risk Factor Surveillance System



tobacco marketing materials. PTM and a select group of tobacco retailers, HMP directors, and YAP coordinators are rising to the challenge.

PTM's responsible retailing program was developed as an enhanced youth tobacco prevention component of the No BUTS! program. This program offers community recognition and publicity to the retailers who go above and beyond the original No BUTS! requirements and willingly cooperate with the request to reduce, change, or remove some of their tobacco advertising. This higher level of commitment and concern for underage youth

tobacco advertising, both inside and outside on the retail property. Following the survey, youth will follow up with a letter and personal visit to request that the owner remove or change specifically-noted signage. This kind of youth involvement has been very successful in other states where responsible retailing initiatives have been implemented. The program will be officially launched throughout Maine in 2007.

Into Teens


Over the past three years, PTM has launched a series of media and social norms campaigns aimed at youth. By continuously building on the success of previous campaigns, we have been able to create a mounting and long-term impact.

The primary goals of these initiatives are to make middle school and high school-aged youth aware that a nonsmoking lifestyle is the norm in Maine and encourage them to make lasting decisions not to smoke. Additional goals included raising awareness of the health and cosmetic risks associated with smoking, the manipulation of youth by the tobacco industry, and the fact that tobacco is addictive.

- Don't Get Me Started – TV messages featuring teen smokers talking in their own words about the reality of their own tobacco addiction.
- "92%" Social Norms Campaign – This in-school teaser campaign generated excitement about posters featuring the mysterious message, "92%." Students later learned at school assemblies that the number refers to the percentage of middle school students who think smoking is uncool.
- How 'Bout That – Comical and edgy, this series of radio messages addressed little-known facts about tobacco use and tobacco industry manipulation.
- Maine Resistance – A comprehensive campaign including TV messages made for teens by teens, an interactive website, and lifestyle-compatible promotional materials.

will be rewarded with a "badge of honor," which will be called "Star Store." The Star Store status will be integrated with the No BUTS! branded program and will be promoted as a premium level of achievement. Retailers that participate can remove their original No BUTS! decals/signage and replace them with the upgraded emblem. All aspects of this program recommended to the Legislature are voluntary and are designed to respect both the retailer's schedule and his legal right to advertise tobacco products.

Youth across the state will be invited to participate in the program under the direction of YAP coordinators, who will train them to survey stores and count all uses of



Scenes from one of PTM's youth-driven TV campaigns.

Outcomes

Measuring the results of these four campaigns revealed the following outcomes:

- High school smoking rates dropped from 25% in 2001 to 16.2% in 2005. Middle school smoking rates declined from 9.9% in 2001 to 7.5% in 2005.
- 94% of teens now say that they are aware of anti-smoking messages and 91% find them convincing.
- The number of teens who say smoking would limit their aspirations and self-image rose from 82% to 89%.
- Teens who heard the radio campaign were more likely to believe that smoking isn't cool and makes people less attractive. They also saw that the tobacco industry tries to entice teens to smoke.
- Fifty-four schools ordered materials for the "92%" campaign, representing an impact on 17,774 students throughout Maine.
- Fifty-seven communities have passed policies to make their community recreation fields tobacco-free. More than 74 schools throughout Maine, 53 of which are HMP-funded, have adopted a PTM-approved school policy to prohibit tobacco use on campus and at any school functions attended by students, parents, or staff.



Next Steps

While we've made great strides in curtailing youth smoking, we know there's more to do. In the coming months, we will focus on these and other initiatives to keep the momentum going.

- Working with YAP groups to counter the tobacco industry's manipulation of youth
- Reducing tobacco advertising in local convenience stores
- Advocating for parents as partners in prevention
- Developing a revamped youth prevention web site and a corresponding youth-produced social marketing campaign
- Implementing the evidence-based CDC's parenting campaign, *Got a Minute? Give it to Your Kid*, to help parents of middle school children prevent tobacco and other substance use



welcome
TO THE
resistance.

GOAL #2

Eliminate Nonsmokers' Exposure to Secondhand Smoke

We're breathing a lot easier.

Virtually all of Maine's indoor public places are now smoke-free, including restaurants, bars, beano halls, and all workplaces, including job-related vehicles.

We're not in the clear quite yet.

10% of Maine workers report that they still encounter smoking in their workplace.

54% of high school students and 43% of middle schoolers are exposed to secondhand smoke one or more days per week.

41% of high school students and 43% of middle schoolers live with a smoker.



Results

Change is in the Air

Nationwide, the American Lung Association report card shows the most significant progress in the area of smoke-free air. Maine is proud to be among the first states requiring public places and worksites to be smoke-free.

Surveys show that there is strong support for protections from secondhand smoke in Maine. As awareness of this problem reaches an all-time high, it becomes easier to implement and enforce a growing list of tobacco-free initiatives.

Policy & Environmental Changes

- The Maine State Legislature continues to strengthen Maine's strong smoke-free air laws:
 - Virtually all of Maine's indoor **public places** are now smoke-free, including restaurants, bars, beano halls, and all **workplaces**, including job-related vehicles.
 - In all daycare facilities, including those that are home-based; smoking outdoors and in vehicles when children are present is also prohibited.
 - Outdoor non-enclosed areas where smoking is allowed must now have at least four feet of space open to the outdoors at the top or bottom of at least one wall.
 - Fines for violations have been increased.
 - All beano/bingo halls must be smoke-free.
 - Prior exemption for taverns, lounges, and pool halls has been revoked.

Smoke-Free Progress Across the State

- The “Breathe Easy, You’re in Maine” media campaign celebrates Maine’s smoke-free air laws.
- PTM provides public education to support legislative changes regarding Maine’s smoking laws.
- Our Tobacco-Free Family Kit offers information and activities and has been widely distributed and well received.
- We’ve updated our “Good Work!” kit to reflect Maine’s stronger workplace smoking law.
- The Black Mountain Ski Area became the first in the nation to go entirely smoke-free. Other ski areas in Maine are currently strengthening their policies.
- In 2005, the newly-created Smoke-Free Housing Coalition was established to provide resources and technical assistance to help landlords of multi-unit buildings understand their rights and responsibilities around the issue of secondhand smoke. With PTM support, the Smoke-Free Housing Coalition launched a new web site that provides both landlords and tenants with information about smoking in rental buildings. The web site also provides a landlord guidebook that shows the benefits and means to have a smoke-free rental building. The two one-day conferences held in Bangor and Portland in May 2006 attracted over 100 landlords who came to learn about the benefits, the legality, and the process for adopting smoke-free policies.
- Six housing authorities in Maine (Auburn, Lewiston, Sanford, Bar Harbor, Southwest Harbor and Old Town) have adopted policies that have made all of their units smoke-free. While they grandfathered in current tenants, these policies are still groundbreaking and make Maine, as of June 30, 2006, the state with the most smoke-free public housing policies.
- The Maine Tobacco-Free College Network (MTFCN), a collaboration among the American Cancer Society, American Lung Association of Maine, local HMPs, colleges and other partners, is making steady progress in limiting tobacco use and providing free cessation services on Maine’s college campuses. As noted earlier,

18- to 24-year-olds have the highest percentage of smokers in Maine and college students make up a significant proportion of those numbers. While college students do tend to smoke less than their straight-to-work counterparts, they still face an onslaught of peer pressure to “experiment” and the stress of school life. Many young adults have a sense of invincibility in their early twenties and don’t make the connection between the little symptoms, such as coughing and long-term health effects. They also believe they can give it up easily when they enter the professional world after graduation. The MTFCN is working to counter those false perceptions and raise awareness.

- The Maine Tobacco-Free Hospital Network is a new collaborative initiative designed to encourage the voluntary adoption of tobacco-free policies and practices, including outdoors, on Maine’s hospital campuses.

Next Steps

Secondhand smoke in private vehicles and homes remains a real concern and there’s more to be done to make worksites and school campuses tobacco-free. Our goals for the foreseeable future include:

- Developing a manual to increase public awareness about the dangers of secondhand smoke.
- Promoting 100% tobacco-free policies that exceed workplace laws.
- Developing focused public awareness materials to reach populations at risk.
- Providing increased support to the Maine Tobacco-Free College Network, Smoke-Free Housing Coalition, and other collaborative efforts.
- Launching a social marketing campaign that targets parents who smoke and encourage them to not expose their children in vehicles and homes.

GOAL #3

Motivate and Help Tobacco Users to Quit

We're pushing the right buttons.

Calls to the Maine Tobacco HelpLine soared between 2004 and 2005, reaching more than an estimated 6% of the smoking population and making it one of the most effective in the nation.

There's still a lot on the line.

While Maine's adult smoking rates are down, 21% still smoke (1% higher than the national average).

People want to quit.

Smokers and the friends and families of smokers throughout Maine call on the HelpLine and other health professionals to help them quit smoking.

- 75% of current smokers say that they want to quit.
- 59% of adult smokers have tried to quit in the past year.
- 72% of smokers have reported being advised to quit by a physician in the past twelve months.

Results

Calling All Quitters

The Maine Tobacco HelpLine

The Maine Tobacco HelpLine offers free telephone counseling to anyone in Maine who wants to quit using tobacco. In 2005, there were 15,526 calls to the HelpLine, more than in any previous year. Calls represented every county in the state, in proportion to the number of smokers in that county.

In addition to the dollars that support the HelpLine from the State Fund for a Healthy Maine, we were granted supplemental funds from the National CDC to enhance access to the HelpLine. Our focus is two-fold. First, we have improved the HelpLine's ability to respond to callers ready for active counseling. The second focus is to help providers connect chronically ill patients with tobacco treatment counseling and other self-management support resources.

- Since 2001, 34,330 tobacco users have received help from the Maine Tobacco HelpLine (from August 2001 to June 2006).
- Call volume and the number of callers helped has increased by 30%.
- The HelpLine is providing services to Mainers that have the highest smoking rates – almost 60% of callers have a high school education or less.
- Almost half of callers have no insurance or are MaineCare recipients.

Medication Program

Nicotine Replacement Therapy (NRT) medications, such as the nicotine patch or gum, are available through the HelpLine and select community health centers and tobacco treatment specialists. The PTM Medication Voucher Program makes these medications available to tobacco users who don't have prescription drug insurance or whose coverage doesn't include NRTs.

“After countless attempts to quit smoking on my own, I finally called the Maine Tobacco HelpLine. It was the best thing I could have done. My counselor was great and kept me on track through some tough times. With her help, and the support of my family and friends, I am happily, FINALLY a non-smoker.”

—A Former Smoker

1-800-207-1230

THE MAINE TOBACCO HELPLINE

- For HelpLine callers, more than 35% who receive counseling report not smoking six months after receiving HelpLine counseling plus free nicotine replacement therapy. Of those receiving only counseling, 22% reported not smoking six months later. The combination of counseling and NRT increased quit rates.

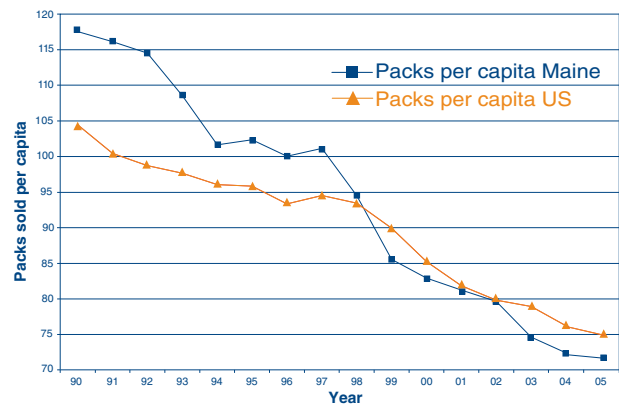
Leaders In Training

Treatment Training & Interventions

Across Maine, regional trainings teach health, school and social service professionals best practices in the delivery of brief interventions and treatments for tobacco dependence. Participants learn how to assess a tobacco user’s readiness to change, deliver stage-appropriate interventions and support, and assist in creating a plan to quit.

More than 1,500 Maine health, school and social service professionals have participated in either one- or two-day treatment educational conferences. The one-day seminars, called Basic Skills Training, teach the attendees to incorporate tobacco treatment messages into their practices. Participants all learned how to conduct brief tobacco treatment in any setting. The training is a prerequisite to the more intensive two-day program, which is designed to prepare attendees to become a Maine-certified tobacco treatment specialist.

**Cigarette Consumption —
Packs Sold Per Capita
Maine & US 1990 – 2005**



Cigarette sales are on the decline – from 101.1 packs per capita in 1997 to 71.5 packs in 2005.

PTM, through its contractor CTI, has provided over 590 physician offices and clinics with on-site tailored training around tobacco treatment and the resources available for tobacco users in Maine. Through the trainings, the professionals learn how to systematically address tobacco use among their patients in a way that fits precisely with the nature of their practices.

Making (Air) Waves

In order to reach Maine's heavily addicted smokers, PTM developed a hard-hitting outreach campaign. The result is an award-winning counter-marketing television message that graphically illustrates a death from smoking related lung cancer. PTM unveiled the spot at a press conference attended by all major media outlets.

Public education and media messaging is continuing to be a vital weapon in battling the onslaught of the tobacco industry's marketing efforts in Maine. Tobacco companies are heavily targeting youth and other vulnerable populations with slick, big budget advertising, both in the media and in stores. The tobacco industry spends an average of \$15.4 billion per year to market their products nationally, and the portion spent in Maine has skyrocketed to almost \$75 million.

Targeting the largest population of smokers

Young adults in Maine aged 18-24 continue to smoke at an alarming rate of almost 27% – almost one in three! Something is happening among Maine's young adults after high school. They're not only starting college or a job – many are starting to smoke or chew tobacco.

Preliminary focus group tests in Portland show that peer-pressure-laden college environments encourage students to experiment, push their limits, and define their uniqueness. Many are not aware that most people who "experiment" with smoking become addicted. They falsely believe that they will easily end their experimentation phase when they graduate and enter the work world.



Scenes from one of PTM's Health Effects TV campaigns.

Next Steps

More help for youth trying to quit.

Although many young people consider quitting or try to quit themselves, they may not know about or have access to cessation services relevant to them. PTM is in the process of addressing these issues as part of a legislative resolve. Members of our staff have convened a planning group to document youth cessation services in Maine. We support the American Lung Association of Maine in providing training for the N.O.T. youth cessation program in schools and youth centers.

The straight-to-work population often enters blue-collar fields, where tobacco use is much more prevalent among their peers. Not only that, these young adults express a sense of hopelessness and "surrender" to a life without fulfilling life experiences and career advances.

For both subgroups of young adults, there is a sense of "invincibility." They are young and nothing can harm them. And if they pick up a few bad habits, they feel they are young enough to avoid serious health effects. Communicating with these two groups requires a very different set of messages. What will motivate and reach a college student is not likely to resonate with straight-to-work young adults. New campaigns are being developed for late next year to address this population.

Visions of a Tobacco-Free Life

Cindy McBrady is enjoying a more rewarding and healthier life.

Cindy McBrady is not the type of person that typically asks for help from others. But when asked about one of her greatest accomplishments—quitting smoking—Cindy will gladly tell you how much the counselors at the PTM HelpLine meant to her.

Having tried to quit more than a dozen times by herself, Cindy remembers the day when all the reasons she wanted to quit came together in one big force of motivation. She had always wanted to quit for health reasons, but she had also

talking with her husband about her feelings and struggles, Cindy says she came to realize that smoking had a tighter grip on her than what some people experience with drug addictions.

She said it's important that people know how difficult her quitting experience was because it shows how addictive and controlling tobacco can be. "Quitting smoking was one of the worst things I have ever been through," she said. "Support from those around you is crucial, because the process



"I ENJOY NOT BEING A PRISONER TO SMOKING. IF I CAN DO IT, ANYBODY CAN."

begun to realize that smoking would prevent her from enjoying her grandchildren in the future. One day at a doctor's appointment, she heard the words that finally pushed her to quit for good. "A doctor who had been encouraging me to quit for years said to me, 'You know, maybe you're just not ready to quit yet.' And I thought, 'Really? Well, I'll show you [I can]!'" She credits that pivotal moment with prompting her to call the PTM HelpLine.

The HelpLine sent Cindy a quitting package and she went on the patch to help her with cravings. She told many people she was quitting, including her work associates, because she knew how difficult the quitting process was going to be for everyone around her. She also found support online through quitting forums and chat rooms.

As a 32-year smoker, Cindy's dependence was deeply entrenched. Her husband, a substance abuse counselor, had quit about 10 years earlier. In

of quitting can be more difficult and horrific than what the person quitting can even anticipate or comprehend."

But the rewards have been tremendous. Prior to being a non-smoker, Cindy had bronchitis almost every winter, causing her to miss work. Thinking that was normal, she put up with it year after year and denied that it was related to her smoking. Since quitting, she has not had bronchitis once in four and a half years. "I also had no idea that smoking left such a noticeably offensive odor on your clothes, hair and in your house. Now, when a smoker walks in the room just after having a cigarette, the smell is almost overwhelming to me."

Knowing that she has a much greater chance of being around to see her grandchildren grow up is the best reward for Cindy. She says the freedom she has gained as a non-smoker has made it so much easier to spend time on important tasks and enjoy doing the things she loves. Smoking used to

prevent Cindy from relaxing with friends, enjoying a meal, and sometimes even traveling. "I would not even take plane trips over a couple hours long because of the cravings. Sometimes I could not even hear what a friend or co-worker was saying, because all I was thinking about was that next cigarette."

"I enjoy not being a prisoner to smoking. From the moment you get up in the morning and your feet hit the floor, you want a cigarette... in a meeting... during a movie... I hated it, but I was compelled to do it. I love being able to finally make up my own mind. I have control over smoking, it doesn't control me," she said.

Today, Cindy is still spreading the word to her friends and colleagues that smoke. Four people in her immediate social circle have quit because of her, and countless others have been inspired to call the HelpLine because of her testimony on a PTM TV message. "If I can do it, anybody can," she said.

GOAL #4

Address Populations Disproportionately Affected by Tobacco Use

We're building on our knowledge.

Through ongoing research, we have identified populations at greatest risk for tobacco addiction, tobacco related disease and exposure to secondhand smoke. While many challenges remain in reaching specific populations at risk, PTM has made progress, even in the face of mounting marketing dollars from Big Tobacco to capture new generations of smokers.

Women

- 16.2% of pregnant women in Maine smoked during the last three months of pregnancy.
- 37.6% of pregnant women with household incomes less than \$16,000 smoke.
- Lung cancer accounted for 28% of all cancers among Maine women in 2002.

Nine mini-grants were awarded to Partnership recipients for innovative projects based on topics discussed at *Face The Facts: A Forum on Women and Smoking*.

One of the recipients made headlines in our newsletter for her work. Two others were featured presenters at a second forum on women and smoking, *Sharing the Journey*, held in December 2005.

Sharing the Journey explored the idea that quitting smoking is a process, with success measured by every healthcare provider who discusses the issue with a female patient and every woman who tries to quit.

Over 100 people attended, including nurses, respiratory therapists, social workers, and local community members. One task before the forum was to critique future communication materials targeting women who smoke. The immediate feedback was essential to make the tobacco-free message more effective.

LBGT

- A disproportionate number of men and women in the gay community smoke, compared with state averages.
- Some are reluctant to visit their healthcare providers and many don't have access to appropriate healthcare. Most are not easily reached through social marketing campaigns delivered via mainstream media.

Ethnic Minorities

- In the Portland area, studies revealed that Serbo-Croatian males and females believe that more than 90% of their population segment smokes.
- Also in the Portland area, perceived prevalence of tobacco use was also very high among Somali, Sudanese, Vietnamese and Cambodian males.

Low SES Populations

- According to the 2004 Maine Adult Tobacco Survey, 20.7% of adults smoke, however those with less than a high school education smoke at a much higher rate of 37.5%. Smoking is much more likely in low-income households (28.5% of Maine adults earning less than \$25,000 smoke). Smoking is clearly associated with social disadvantage, as defined by educational attainment, income, and occupational class.

Native Americans

PTM collaborates with the Maine Cardiovascular Health Program (MCVHP) to fund Native American tribes to develop and implement culturally sensitive tobacco interventions that focus on reducing use of commercial tobacco and exposure to secondhand smoke, as well as implement other MCVHP initiatives. The tribes are working on the following:

- Smoke-free campuses, tribal buildings, and tribal vehicles
- Prohibiting smoking of commercial tobacco products at social functions to change the community norm around commercial tobacco use
- Providing tobacco medications and counseling at the health centers
- Promoting the Maine Tobacco HelpLine to tribal members
- Implementing school-based prevention programs
- Smokers who have been diagnosed with chronic diseases
- Working with healthcare providers to actively identify the smokers among their patients who have been diagnosed with one or more chronic illnesses and assist them in quitting

There's far more to learn.

Results

Priority Populations

Maine's most vulnerable populations are in special need of attention. These include people with lower incomes and fewer years of education, in addition to people with behavioral health issues, including substance abuse. In Maine, straight-to-work youth, ages 18 to 24, smoke at higher rates than the general population. Priority populations, such as LGBT, Native Americans, and other subcultures, are unfairly and aggressively targeted by the tobacco industry. Pregnant women of low SES are vulnerable to tobacco use during pregnancy and during the postnatal period, due in part to exposure to spouses, mates, family, and friends who continue to smoke.

Based on extensive research, we are developing culturally and demographically relevant resources for these populations. Working with our state and local partners, we are rising to the challenge these groups represent.

Promoting Equality

- Portland Public Health received funding to develop culturally sensitive anti-tobacco programming for

use with specific minority groups. Community members produced three videos under the direction of Portland's Minority Health Coordinator to deter Somalian, Sudanese and Serbo-Croatian youth from using tobacco.

- Four Native American tribes have received funding from the PTM to implement culturally sensitive tobacco interventions.
- PTM partnered with Maine Primary Care Association to implement the Medication Voucher Program in 39 community and rural health centers that reach the underserved population.
- The Hospital Data Project was created in response to the need for accurate health data on race and ethnicity. The Project provides training for the intake staff of all Maine hospitals.
- Year-long mini-grants were awarded to seven HMPs to reduce and eliminate tobacco-related disparities at the local level.

Next Steps

Through ongoing training, capacity building, and enhanced data collection, we will continue to reduce tobacco-related disparities in Maine. Our plans for the future include:

- Encouraging local coalitions to work with social service providers who work with the populations PTM has identified as priorities.
- Continuing to research national programs that may be relevant to Maine in our efforts to reach populations at risk for tobacco use and tobacco-related disease.
- Keeping watch on the tobacco industry to track its tactics and priorities.
- Creating tools to help parents, coaches, and other role models communicate strong anti-tobacco messages to young people.
- Developing a targeted social marketing campaign to encourage LGBT smokers to quit.
- Enhancing the community and Rural Health Centers' capacity to address tobacco use and provide free NRT to those who qualify.

Program Expenditures (FY07)

Community/School Grants	\$6,559,000
School Based Health Centers	\$377,000
Statewide Coordination	\$1,324,000
Statewide Youth Development and Leadership Initiative	\$175,000
Public Education and Media	\$2,478,000
Tobacco Treatment	\$1,900,000
Evaluation	\$440,000
Tobacco Treatment Medication	\$900,000
Surveillance, Evaluation, Clinical Outreach and Other Related Activities	\$820,710



Healthy Maine Partnerships

Partnership For A Tobacco-Free Maine

Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention



John Elias Baldacci, Governor
Brenda Harvey, Commissioner

Printed under appropriation #014-10A-9922-022

The Maine Department of Health and Human Services does not discriminate on the basis of disability, race, color, creed, gender, age, or national origin, in admission to, access to, or operations of its programs, services, or activities, or its hiring or employment practices. This notice is provided as required by Title II of the Americans with Disabilities Act of 1990 and in accordance with the Civil Rights Act of 1964 as amended, Section 504 of the Rehabilitation Act of 1973 as amended, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972, and the Maine Human Rights Act. Questions, concerns, complaints, or requests for additional information regarding the ADA may be forwarded to the Maine Department of Health and Human Services' ADA Compliance/EEO Coordinator, State House Station #11, Augusta, Maine 04333, 207-287-3488 (V), 207-287-4479 (TTY). Individuals who need auxiliary aids for effective communication in programs and services of the Maine Department of Health and Human Services are invited to make their needs and preferences known to the ADA Compliance/EEO Coordinator. This notice is available in alternate formats, upon request.