

# THE LINK

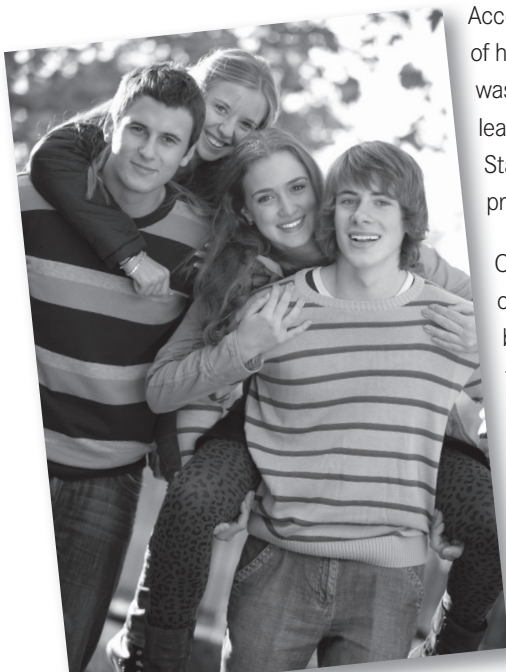
Connecting facts and ideas  
for those working to create  
an environment in Maine that  
supports tobacco-free living.

 **Healthy Maine Partnerships**  
Maine Center for Disease Control and Prevention

SPRING ISSUE 2010

## Why Tobacco Prevention Is **STILL** So Critical

Prevention is recognized as an essential part of tobacco control, especially regarding youth, since most people start smoking in their teens. Through prevention efforts, there has been great progress in reducing youth smoking rates. But recent evidence proves we need to strengthen our efforts.



According to the Maine 2009 YRBSS, the percentage of high school students who were current smokers\* was 18.1%, an increase from 14% in 2007. As the leading preventable cause of death in the United States, tobacco remains one of our worst health problems. There is clearly a need to do more.

Changing social norms around tobacco use can be one of the most difficult tasks in prevention. Youth believe they can quit anytime and don't believe they can become addicted. It's essential to reach children early and to make them aware of the dangers of tobacco, show that tobacco use is "uncool" and not the norm, and teach skills to refuse tobacco. The most powerful prevention efforts illustrate through policy, rules and role modeling that tobacco is not acceptable.

*Continued on page 3*

## PTM'S NEWEST CAMPAIGN About New Tobacco Products

PTM will be rolling out a new media campaign to combat the new smokeless tobacco products that may arrive soon in Maine. The New Products Campaign will target parents, teachers, coaches, legislators, and community leaders to raise awareness of what we consider to be Big Tobacco's newest and most shameful campaign ever, devised to capture the next generation of tobacco users —Maine's children.



The goal of this campaign is to build awareness and alarm among parents, teachers, coaches, legislators, and community leaders about Big Tobacco's newest smokeless tobacco products. These products may look and taste like candy, but may contain up to three times as much nicotine as cigarettes, and can lead to serious addiction issues. These products are also a way to circumvent the laws that discourage smoking and protect people from secondhand smoke.

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# FDA Updates

The Federal Drug Administration Center for Tobacco Products (CTP) prohibited the sale of certain flavored cigarettes on September 22, 2009. Effective on June 22, 2010, CTP will implement the new rule *“Regulations Restricting the Sale and Distribution of Cigarettes and Smokeless Tobacco to Protect Children and Adolescents”* to protect youth from using tobacco products. The new rule will make it more difficult for youth (under 18 years) to access tobacco products and will make tobacco products less attractive to them. The purpose is to limit the tobacco industry targeting of youth to use their products: every day 3,600 youth under 18 will try a cigarette for the first time, with 1,100 becoming addicted and the future regular smokers.



The major requirements of the rules will specifically relate to the sales, distribution, and marketing (promotion, labeling, and advertizing) of cigarettes and smokeless tobacco.

PTM believes that prevention strategies are needed to keep youth from using tobacco products. Reducing youth access and making tobacco less attractive are steps that help keep youth from beginning tobacco use and dying too young from tobacco-related diseases.

The entire rule can be found at [www.fda.gov/protectingkidsfromtobacco](http://www.fda.gov/protectingkidsfromtobacco).

**To learn more about the CTP, visit  
[www.fda.gov/TobaccoProducts/default.htm](http://www.fda.gov/TobaccoProducts/default.htm)**

## PTM's Newest Campaign *Continued from page 1*

This campaign will include a new TV ad that will inform adults about these products, without actually showing the products themselves, and will direct viewers to the website **[www.tobacconeversquits.com](http://www.tobacconeversquits.com)**.

There will also be a radio ad that talks about the new products, and again directs listeners to the website. Finally, we will have a brochure for parents, coaches, teachers, legislators, and community leaders explaining the dangers to our children of these new smokeless products.

When the above ads are ready to be rolled out, PTM will be sending out a press kit to all of the DTCs and HMPs that will include a Swiss cheese press release that can be tailored to individual communities, a PDF of the brochure, and some background information about the campaign.

Tobacco companies continue to find ways of over turning all the hard work we've done to develop strong laws and policies which make smoking unacceptable, unaffordable, and invisible. All of these products can be used in places where smoking is not permitted. These products make it possible for kids to use nicotine almost anywhere and not feel motivated to avoid tobacco and its stigma.

Unfortunately, smokeless does not equal harmless. These products are still addictive and can cause severe health problems. The key to lowering Maine's youth smoking rate is to prevent kids from ever starting to use any tobacco products. While Maine has made great strides in reducing our youth smoking rates, our efforts at prevention must continue with each new generation.

*Examples include:*

### SALES AND DISTRIBUTION

- Prohibits the sale of cigarette packages with fewer than 20 cigarettes
- Prohibits the distribution of free samples of cigarettes and restricts distribution of free samples of smokeless tobacco

### MARKETING

- Prohibits tobacco brand name sponsorship of any athletic, musical or other social/cultural events
- Prohibits exchange of gifts for buying cigarettes or smokeless tobacco



November 11, 2010  
Peer Conference

November 12, 2010  
Youth Summit

# Tobacco Expert Dr. Jonathan Foulds Intensive Tobacco Treatment Conference

The theme of the Intensive Tobacco Treatment Training and Conference 2010, organized by the Center for Tobacco Independence (CTI), was *Tobacco, Diversity and Disparities*. Diversity is defined as being inclusive of racial and ethnic populations while disparity refers to those populations that are disproportionately affected by tobacco use and tobacco-related diseases. Disparity addressed by tobacco control programs are those differences in the pattern, prevention, and treatment of tobacco use, as well as differences in capacity, infrastructure, and access to resources. This is important to our tobacco work in Maine because we need to understand which populations are disproportionately affected by tobacco. We also need to know how each may be defined by its own culture, gender, age, socioeconomic status, geography, disability or special health care needs. Programs need to understand the various populations in order to develop appropriate messages, resources, and increased access for tobacco treatment. Smoking prevalence rates have not dropped for some of Maine's populations, including Native Americans, LGBT, Latino Americans, African Americans, new immigrants, and pregnant women. Experts from the different populations provided presentations to answer some of these questions at the conference.

CTI invited and was privileged to have Dr. Johnathan Foulds, MA, MAppSci, PhD, as the KeyNote Speaker. A professor at the University of Medicine and Dentistry, New Jersey (UMDNJ) School of Public Health, and Director of the Tobacco Dependence Program, he is a clinical psychologist with expertise in nicotine addiction and tobacco dependence treatment. Dr. Foulds' has researched and linked low socioeconomic status to the use of menthol cigarettes.

Menthol flavoring masks the harsh taste of tobacco and is generally used by those who are less educated, less likely to be employed, living in poverty, and who smoke earlier in the day (a measure of addiction). Compared to non-menthol smokers, menthol smokers smoked fewer cigarettes, but actually inhaled more smoke and nicotine per cigarette, saving money on the number of cigarettes smoked. Menthol users had a higher level of nicotine addiction and lower quit rates. The research concluded that menthol is more addicting and more harmful to health [Gandhi, et. al. Int J Clin Pract 63: 360-367 2009].

To learn more, visit [www.tobaccoprogram.org](http://www.tobaccoprogram.org)  
or visit Dr. Foulds' smoking cessation blog at  
[www.healthline.com/blogs/smoking\\_cessation](http://www.healthline.com/blogs/smoking_cessation).

## Why Tobacco Prevention Is STILL So Critical *Continued from page 1*

When PTM launched the youth campaign, Unleash Your C ("C" is the campaign brand and stands for "choice"), our goal was to promote positive social norms and healthy self-identity formation among teens regarding tobacco use. Additional goals included illustration that teens have the power to control their choices, but they must accept responsibility for the results, whether positive or negative. Their choices ultimately define them so it's important to make the right ones, such as never taking up tobacco use.



### HMPs and their importance in tobacco prevention

Prevention does work. Maine's strong political resolve and public health partnerships have led to real results: Rates of cigarette smoking declined by 64% among Maine's high school youth over the decade (1997-2007). But there is much more work ahead, including addressing the 2009 increase in youth smoking rates. While the tobacco industry works to addict new customers to replace the thousands who die from using their product, efforts at prevention must continue in schools and communities using policy, enforcement, and the media to protect each new class of children entering the school system.

\*Current cigarette smokers are youth who report smoking cigarettes on one or more of the past 30 days. Data from YRBSS state data.

## Feedback wanted!

We invite your feedback about our website,

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

It's currently undergoing some reconstruction, and we'd appreciate your help identifying any broken links or suggesting improvements.

Please email your comments to: [ellie.sparks@maine.gov](mailto:ellie.sparks@maine.gov).

Thank you!



# Brochures for the New Outdoor Dining Law Are Now Available

A new law took effect last fall. All outdoor dining and eating areas, such as patios, decks, sidewalk tables and picnic tables at snack bars are required to be smoke-free whenever and wherever food or drink is served to the public to be consumed. The law applies 24 hrs a day, 365 days a year.

*The outdoor dining brochures are now available for order on the PTM Store.*



## New Resources on PTMstore.org

Three new items will be available for order in our online store. The first one is a new tobacco products brochure. This is intended to inform parents, coaches, teachers, and other adults of the new smokeless tobacco products that will be out on the market soon. The second brochure is the new HelpLine brochure (available now) that has replaced #127—*How The HelpLine Works* in the PTM Online Store. The final item is a revamped Quit brochure that will replace #107—*Quit Brochure* in the PTM Online Store.

## The Rule-Making Process and Maine's Laws Relating to Smoking

Whenever the legislature passes a new law, or significantly strengthens an existing law, it creates the need for effective enforcement. As the entity responsible, Maine's Department of Health and Human Services has rulemaking authority and follows the process defined by the Maine Administrative Procedures Act. Through rulemaking, a document is created that has the detail necessary to address the many situations that may arise as the new provisions of the law are implemented.

The rulemaking process is lengthy because it includes the steps necessary to assure that the rule has a legal effect. The process includes:

- (1) a planning phase, wherein the proposed changes are made and advertised for the public to view,
- (2) a public education and involvement phase to assure that the public can comment in person or in writing,
- (3) an adoption process that includes a review by the Office of the Attorney General to approve the form and legality of the proposed rules,

(4) a final review by the Commissioner of the Department of Health and Human Services and, finally,

(5) the filing of the certified copies with the Secretary of State's office in a prescribed format.

During the most recent biennium of the legislature, several gaps or "loopholes" in existing smoking and tobacco laws were closed. The laws related to smoking primarily relate to two settings: workplaces where the law is in place to protect 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 second-hand smoke. PTM staff developed the rules to address and clarify the changes in both laws in collaboration with the Tobacco Enforcement Coordinator in the Attorney General's Office. A public hearing was held on March 31, 2010. There were no challenges to the rules at the public hearing nor submitted in writing and the rules have now been submitted for final approval and filing. While a long process, it is a great example of democracy in action.

## KUDOS

### Gold MTFHN awards:

The Maine Tobacco-Free Hospital Network, sponsored by the Partnership For A Tobacco-Free Maine, held its annual awards ceremony on March 24th at the Maine Hospital Association to honor 14 hospitals and 7 individuals for their achievements. Hospitals winning the Gold Award, the highest honor, were **Spring Harbor Hospital, The Aroostook Medical Center, Parkview Adventist Medical Center, Franklin Memorial Hospital, Miles Memorial Hospital** and **Mercy Hospital**. Seven hospitals received Silver Awards, and one received a Bronze.



# The Quit Link: Where quitting is contagious

Launching this summer, **The Quit Link** is an exciting new social networking site for Mainers who want to quit tobacco and/or supporters of people who want to be tobacco-free.

Studies indicate that 70% of smokers have expressed the desire to quit tobacco, and this will be another tool that they can use. The purpose of The Quit Link is to provide these individuals with another place to turn and a support network that is designed to improve quitting success.

New research has indicated that quitting tobacco, as with other health concerns, is directly linked to the social networks in which an individual is engaged. By creating a virtual support network, this campaign seeks to capitalize on this principle and the relationships of the tobacco user.

The advantage of The Quit Link is that once those wishing to quit have succeeded, they become the ambassadors for the campaign and the resources affiliated with it, helping us to reach the remaining smokers through the power of social networking. This is NOT a tobacco cessation site. The goal of The Quit Link is to promote cessation



through people's social networking communities in a place that they are already spending time online.

Phase I of the campaign includes getting the The Quit Link website up and running, activating a Facebook page and a Twitter page (these will be monitored daily, and any cessation questions that come into the site will be answered by a Tobacco Specialist at the Center for Tobacco Independence), and populating the social networking sites through targeted online ads and through already established connections (e.g. the DTCs, HMPs, and other partners). There will also be a place for special populations beginning with Pregnant Women and LGBT with more population added in Phase II. This soft launch will allow the site to have some activity on it before engaging in a statewide media campaign.

Phase II of the campaign will be a statewide public launch. After the social media sites have been populated, a television campaign along with proactive outreach to the public will drive traffic to the sites. All DTCs and HMPs will receive an electronic media kit outlining the launch, goals, and overview of the social networking sites associated with The Quit Link as well as a Swiss cheese press release.

The Quit Link will provide links to local resources, extensive information about the Maine Tobacco HelpLine, and other tools to ensure quitting success. The website will also serve as the portal to the social networking components to further develop these "relationships" into an online social support structure and make quitting contagious.

The logo for 'THE QUIT LINK' features the words in a bold, green, sans-serif font. Above the word 'QUIT' is a decorative arch of five small green circles, with two larger green circles at the ends of the arch, resembling a bridge or a path.



## Searching for the latest data? Check out these helpful links:

The toll of tobacco use in Maine:

<http://tobaccofreekids.org/reports/settlements/toll.php?StateID=ME>  
(See also section on research and facts)

Youth data in Maine and other states: <http://apps.nccd.cdc.gov/yrbss>

Adult data in Maine, other states, and the US: <http://apps.nccd.cdc.gov/brfss>

Facts on tobacco use by specific populations in Maine and a variety of other data:  
[http://www.tobaccofreemaine.org/explore\\_facts/Maine\\_facts\\_and\\_stats.php](http://www.tobaccofreemaine.org/explore_facts/Maine_facts_and_stats.php)

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ISSUE OF

THE **LiNK**

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*The Link is published by the Partnership For A Tobacco-Free Maine (PTM).  
The mission of PTM is to reduce death and disability from tobacco use among Maine residents  
by creating an environment supportive of a tobacco-free life. For more information,  
visit us at [www.tobaccofreemaine.org](http://www.tobaccofreemaine.org) or contact us at (207) 287-4627.*



Maine Center for Disease  
Control and Prevention

An Office of the  
Department of Health and Human Services

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner

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