


THE LINK

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

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

Winter ISSUE 2009

SMART: Why Proposed Tobacco Tax Increases Are **Excellent** **Public Health Policy**

All states tax tobacco products. Maine taxes cigarettes at \$2.00 per pack, smokeless tobacco at 78% of the wholesale price, and all other tobacco products at 20% of their wholesale price. This means that cigarettes are sold for about \$5.50/pack while little cigars are \$2.40/pack and roll your own tobacco is about \$1.00/pack.

Obviously, non-cigarette tobacco products are taxed at a much lower rate than cigarettes, making them much less expensive. The federal government also taxes tobacco products and increased its cigarette and other tobacco products taxes this year, effective March 31, 2009 (See “Federal Tax on Cigarettes Increases” on page 2.)

A bill proposed for this legislative session in Maine would increase cigarette taxes from \$2.00 to \$3.00 per pack and would increase all other tobacco taxes to be comparable to cigarette taxes. Tobacco tax revenue goes to the

Continued on page 2

How the truth[®] plays out: A Story of an American Legacy Grant In Our Communities



Since the award of the American Legacy Grant to The Partnership For A Tobacco-Free Maine (PTM), the two rural Maine communities of youth that were selected to work with on this project have been extremely busy developing and creating their productions. River Valley Healthy Communities Coalition in Oxford County and Piscataquis Public Health Council in Piscataquis County have used this grant opportunity to develop exemplary projects that demonstrate the value and importance of youth involvement. The two projects have used the truth principles by organizing youth theater teams to create and communicate anti-tobacco messages. This has been a unique opportunity to help embed youth involvement into Maine’s new public-health infrastructure by demonstrating youth’s enthusiasm, creativity, and commitment to tobacco and community issues. Youth have been

Continued on page 3

WHAT’S INSIDE

Federal Tax On Cigarettes Increases ...	2	Thirdhand Smoke Comes to Stay	5
Closing the Loopholes In Maine Secondhand Smoke Laws	3	Calendar	5
Mercy Hospital Wins Award for Tobacco-Free Policy	4	Intensive Tobacco Treatment Training and Conference	6
Bath Iron Works Goes Tobacco-Free ...	4	PTM Online Resources Catalog Is Up and Running	7
Young Adult Social Branding Campaign Coming Soon	5	Web Links	7

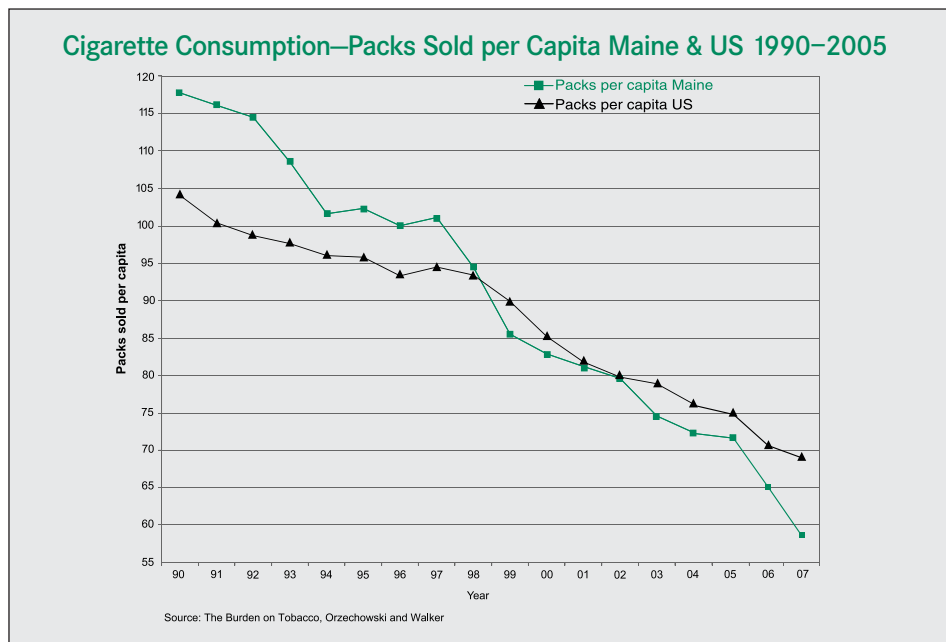
general fund in Maine which means there is no requirement to spend the revenue on tobacco cessation or prevention efforts. Tax increases are still excellent public health policy. Here's why:

1. Taxing tobacco products prevents and reduces tobacco use.

Studies have shown that a 10% increase in the price of cigarettes reduces the rate of smoking among adults by 4% and of youth by 8%. Young (vs. older) adult smoking is curbed more by higher prices (due to taxation) according to a January 2008 American Journal of Public Health (AJPH) article. In Maine, when the state raised the cigarette tax by \$1.00/pack in September, 2005, the Maine Tobacco Helpline experienced a spike in call volume of 400%. Since 2005, Maine's high school student smoking rate has declined by nearly 16%—over 2 percentage points.

2. Proposed tax increases in other tobacco products may also prevent youth from switching to lower priced tobacco or from starting.

Since sweet flavored blunts and little cigars are taxed at a fraction of what cigarettes are taxed, increasing those taxes could deter some youth from starting and could prevent further 'switching' from cigarettes to little cigars. Maine youth survey data has shown that



Increasing cigarette taxes is a financial gain for governments that further reduces tobacco consumption and saves lives.

high school cigar smoking has doubled among high-school students since 2001.

3. Quitting tobacco use helps people better meet their every day expenses.

Some argue that tobacco tax increases are 'regressive' in that they force lower income people to pay more, proportionately, from their income than the wealthy, for tobacco. This argument has surface appeal—but is false. Smoking is addictive; 75% of smokers at any given time want to quit. A pack a day smoker spends about \$1,700 a year on his or her

habit—money he or she could have available to spend on food, housing, health care and recreation—especially in these tough economic times.

4. It costs almost nothing to implement.

A tax increase is one prevention tool that costs very little to implement. State government will see a return on investment—lower tobacco use will reduce the \$602 million annual tobacco related health care costs borne by all of us in Maine.

FEDERAL TAX ON CIGARETTES INCREASES

PL111-3 was signed into law by the President on February 4, 2009. It increased the federal tax on cigarettes by \$.61 (to \$1.01/pack) and increased the tax on roll-your-own tobacco (RYO), smokeless tobacco, and small cigars to a comparable rate. The law caps large cigar taxes at \$.40 per cigar. Increasing the federal cigarette tax to provide healthcare coverage to uninsured children had widespread support. Polling conducted for the Campaign for Tobacco-Free Kids found that more than two-thirds of all voters approved,

including large majorities of democrats, republicans and independents, men and women, and urban and rural voters. The money from this tax increase will fund reauthorization and expansion of the State Children's Health Insurance Program (SCHIP) to cover more children. The bill is predicted to prevent a million kids from starting to smoke, help one million adults quit, save nearly 900,000 lives from smoking-related deaths, and produce billions of dollars in long-term savings in health expenses.

involved in all aspects of the program. Assisted by trained theater facilitators, youth groups in two towns are working to develop and perform productions that address tobacco issues that affect them and their communities. Through the stories, scripts and promotional materials developed by youth, the productions will truly take on their voices.

In Piscataquis County, the role playing/drama aspect of this project has been very effective at getting and keeping the students interested. This community is fairly drama poor in its opportunities

This has been a unique opportunity to help embed youth involvement into Maine's new public-health infrastructure...

for young people. Also, because it is not directly connected to the school, there are no stipulations (like academic eligibility, or being graded) for participating. The Theater Director feels that fact has contributed nicely to the large interest as well.

In Oxford County, the students chose F.R.E.S.H. (For Rescuing Every Students Health) for their name because they think their interest in theatrics can be used for additional social issues beyond tobacco such as, alcohol abuse, domestic violence, etc. They are learning through this project how to write, produce and perform truly entertaining events on a theme and all of them will be able to replicate this process. In addition, a how-to video will be created at the end by documenting the process.

Closing the Loopholes In Maine Secondhand Smoke Laws

Legislation is proposed in the 124th session of the Maine Legislature that seeks to close the remaining gaps or “loopholes” in Maine’s already strong public place and workplace laws. Maine began clearing the air in 1985 with the Workplace Smoking Act of 1985 and has strengthened Maine law so that nearly all indoor public places are now smoke-free. However, there are still places where smoking continues to damage the health of Mainers.

The current bill seeks to remove exemptions and clarify other issues by the following:

- 1) Repealing the law that provides an exemption for designated smoking areas indoors in places of employment and provides a definition of permitted outdoor designated smoking areas;*
- 2) Repealing the law on smoking in hospitals, nursing homes and jury rooms that differed from the public place and workplace laws;*
- 3) Providing that non-consensual exposure to second hand smoke may be a nuisance and trespass and is enforceable as such;*
- 4) Clarifying that high stakes bingo and beano games run by federally recognized Indian tribes are the only bingo and beano games during which smoking is and has been permitted;*
- 5) Clarifying that ‘business facility’ includes a residential facility licensed by DHHS and a personal residence, unit or apartment within residential facilities not licensed by DHHS during the period of time that the personal residence, unit or apartment is a place of employment such as for home care workers;*
- 6) Clarifying that ‘residential facility’ means a facility licensed by the Department of Health and Human Services.*

The proposed bill will end smoking in jury rooms, hospitals, nursing homes and licensed residential facilities. It also clarifies workplace law by including a section that specifies that vehicles used in the course of employment must, by law, be smoke-free, and that any outdoor designated outdoor smoking area be at least 20 feet from entryways, doors and windows.

A separate bill addresses smoking in outdoor eating areas of restaurants and bars, proposing that smoking be prohibited inside and within five feet of outdoor eating areas of restaurants and bars.

The law still allows and will continue to allow smoking in a business when the business is not open, smoking as part of a performance or part of a religious ceremony, in hotel rooms, in private residences unless they are a day care facility in operation, and at off-track betting parlors.



For more information about this and other Maine Laws and rules, go to http://tobaccofreemaen.org.breathe_easy/in_public_places.php.

Mercy Hospital Wins Award for Tobacco-Free Policy



Maine Tobacco-Free Hospital Network continues to recognize Maine health care systems for their progress in adopting and enforcing comprehensive tobacco-free hospital policies.

In conjunction with the American Cancer Society's Great American Smoke-out, an award was given this year to Mercy Hospital. When Mercy Hospital's newest facility opened this fall, it was in compliance with the new tobacco-free policy that had been approved in August 2008, with the main campus of the hospital following suit in January 2009. The hospital supports training on tobacco use and treatment for employees, with approximately eighteen staff trained in the Basic Skills Workshop sponsored by the Center for Tobacco Independence and Healthy Maine Partnerships, with six staff members who have completed the 2-day Intensive Tobacco Treatment Training.

Of particular note is the fact that their parent company, Catholic Health East, has an Investment Committee which has adopted a social accountability policy that precludes any investments in tobacco companies. Mercy Hospital's Tobacco-Free Environment Policy was developed by a subcommittee of Mercy Hospital's Wellness Committee. The award application was submitted by Mary Fink, Manager of Respiratory Therapy on behalf of hospital Administrator, Eileen Skinner. Other Maine hospitals receiving awards this past November for strong tobacco-free policies included Central Maine Medical Center, Northern Maine Medical Center and Southern Maine Medical Center.

Bath Iron Works Goes Tobacco-Free

Effective January 5, 2009, General Dynamics Bath Iron Works, adopted a new and comprehensive tobacco-free policy. The announcement, featured on the company's website, states the following:

"BIW's Tobacco-Free Workplace Policy prohibits the use of tobacco or smoking products while on any BIW-owned or controlled properties, including parking lots, BIW vehicles, warehouses, out-of-state offices and ships under construction after January 4, 2009. Tobacco use onboard delivered ships will be governed by the Commanding Officer's policy as it pertains to Navy personnel. The policy applies to everyone who works for BIW, does business here or visits our facilities. We appreciate your cooperation with this policy which will create a better, more productive, healthier and safer work environment for all of us."

This policy assures a healthier workplace for BIW and its 5,700 employees. The policy is the result of a collaborative

approach that has included the engagement of the local Healthy Maine Partnership "ACCESS Health" a program of Midcoast Hospital; Maine Health's Center for Tobacco

Independence and the resources and support of the State of Maine's tobacco prevention, treatment and control program the Partnership for a Tobacco-Free Maine. Ongoing support is being provided by BIW with assistance from the

collaborating partners for those who may wish to end their use of tobacco, as well as providing ready access to information and resources for family members in a variety of venues. This is, indeed, wonderful news. Thanks you BIW and its "Building Healthy Ways" program for the role that BIW plays in the lives of so many in Maine. Great job, BIW!

Tips for staying tobacco-free

- Try to avoid alcohol, coffee and other beverages that you associate with smoking.
- Develop healthy habits such as swimming or jogging that make smoking difficult or impossible.
- Keep your hands busy with playing cards, whittling, tinkering with something or doing chores.
- Never allow yourself to think that one won't hurt - because it will.

Bath Iron Works
A GENERAL DYNAMICS COMPANY

Young Adult Social Branding Campaign

Coming Soon



PTM has teamed up with Jeff Jordan of the Rescue Social Change Group, an agency that develops social change models, to implement an energized branding strategy to steer the smoking culture among young adults in Maine onto a healthier path. Social Branding is specifically designed to change the behaviors of young adult smokers by creating culture-driven brands that can influence the various market segments throughout the state. The Social Branding strategy in Maine combines traditional advertising with event- and street-based marketing through a series of club-based events called “Shenanigans,” led by a team of culture savvy professionals. Tobacco use will be addressed at the community level in pilot sites, focusing on a specific young adult subculture and the social acceptability of smoking, making it the ideal strategy to reduce young adult smoking rates in Maine. Stay tuned for more information as the campaign develops over the next few months.

Thirdhand Smoke Comes to Stay



What comes after secondhand smoke? Thirdhand smoke, a new classification defined as the residue tobacco smoke leaves behind after a cigarette is put out. It clings to your hair, clothes, furniture, children’s toys and other objects. It’s one reason for the new smoking law that prohibits people from smoking in their vehicles with children under the age of 16 inside. PTM will be showcasing this relatively new area of study in the next edition of link. For the latest research, go to: <http://pediatrics.aappublications.org/cgi/reprint/123/1/e74>

MARK YOUR CALENDAR

March 25, 2009
Campaign for Tobacco-Free Kids
Kick Butts Day

April 4, 2009
The World of Women’s Wellness
Thomas College, Waterville

April 14 & 15, 2009
Intensive Tobacco Treatment
Training & Conference
South Portland
207-662-7154
email: tobaccotrng@mmc.org

April 30 & May 1, 2009
5th Annual Maine Youth
Anti-Tobacco Summit
Augusta
www.myan.org/myan3/index.php

May 10–16, 2009
National Women’s Week
www.womenshealth.gov/WHW

PREVIEW: Intensive Tobacco Treatment Training and Conference MONDAY, APRIL 13

Jackie is a 35-year-old nurse who smokes just under 1 pack per day. She is upset and embarrassed by her smoking, and she has tried quitting three times over the past five years. She would like to try quitting again, but each time she tried she began to gain weight. This was very distressing for her and she relapsed. Prior to her most recent quit attempt, she planned carefully to address this: on the same day she quit smoking, she started a low-carb diet. To her dismay, she quickly started smoking after just one day, and she fell off her diet the day after that. Her doctor tells her that quitting smoking is a lot more important for her health than “gaining a few pounds”. She knows her doctor is right, but that doesn’t change the way she feels when the numbers on her bathroom scale start to climb.

William is a 47-year-old man. He smokes 1½ packs per day, has diabetes and weighs 237 pounds. He had one heart attack 18 months ago, his blood sugar is not well managed, and his eight attempts to quit smoking have all ended in frustration. His health has become so compromised, and he feels so badly about himself, he hardly knows what problem to attack next. The last time he tried quitting smoking, his diabetes actually got worse and he began gaining weight. He knows to the outside world it may appear that he just doesn’t care and has no discipline. For him, however, it’s more a feeling of being hopelessly trapped, and he doesn’t know where to turn. As bad as things are, things just always seem to get worse when he tries to quit smoking.

Jackie and William can attest to the great difficulty many people encounter when they try to quit their use of tobacco. We have come to understand that tobacco use is more than just a bad habit that sits in isolation from other conditions. It is, in fact, a powerful addiction that binds the individual to use of a product that profoundly affects brain chemistry, significantly alters metabolism and becomes tightly interwoven with other chronic conditions such as diabetes, obesity and heart disease. Although many tobacco treatment specialists and nutritionists operate in highly distinct professional spheres, their patients and clients may not draw such distinctions.

The upcoming PTM “Intensive Tobacco Treatment Training and Conference” (4/14/09 & 4/15/09 in South Portland) seeks to bridge that gap. The first day’s

keynote address by nationally recognized researcher, author and teacher Bonnie Spring, Ph.D.—“Tobacco Treatment and

Weight Management: A Convergence of Parallel Universes”—sets the tone for the first day.

Presentations on weight management, diet, relaxation techniques and a panel discussion on “Multiple Risk Behavior Change” seek to further provide a conceptual understanding and practical strategies on how to better serve the complex needs of many patients who use tobacco.

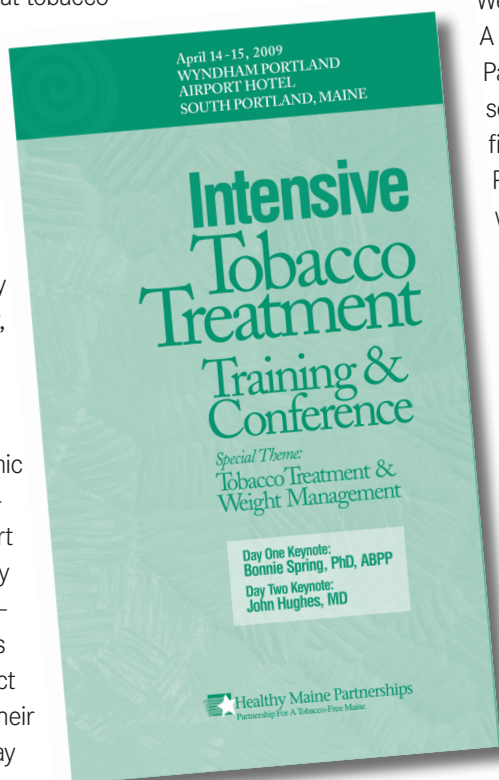
In addition to this special focus, the conference also brings back to Maine Dr. John Hughes, internationally recognized as one

of the leading experts in the field of tobacco dependence and treatment. Other exciting conference topics include motivational interviewing, treatment planning, ethics, and an unveiling of current projects by PTM to bring increased face-to-face tobacco treatment to Maine to supplement the work of the Maine Tobacco HelpLine.

This is a unique opportunity to learn state-of-the-art advances in the field of tobacco treatment as well as a chance to meet and interact with others in Maine who make up our network of care.

All who have ever attended a 1-day PTM “Tobacco Intervention: Basic Skills Training” are eligible to attend. If you have questions or are unsure about your past attendance at a PTM training, please call our training coordinator at 662-5224.

The registration fee remains at \$125.00 for the two day conference, which includes breakfast, lunch, an evening reception on the first day and CEU’s. An optional pre-conference workshop on “Motivational Interviewing in Groups” takes place from 1:00–5:00 on Monday, 4/13/09 and costs \$25.00.



To download a brochure go to: www.tobaccofreemaine.org/pdf/Training%20Brochure.pdf

PTM Online Resources Catalog is Up and Running!

Our new online ordering system is live, so you may now order PTM materials directly from the website. The system displays a picture of each item with an order number, availability, and an easy check out process. Once an order is placed, it is automatically submitted through the approval process. You can check on its status at any point.

How to place your order

From the PTM website, click on Order Materials (www.ptmstore.org) and start shopping. Once you click Proceed to Check Out, the system will prompt you to register. Enter your name, email and password. Your account will be verified with a confirmation e-mail from the system. Once you receive this e-mail and verify your account, go back into the system and enter the rest of your information. You will need to select an HMP affiliation from the drop-down menu and enter your mailing address and contact info. Upon check out, you will click through a series of tabs. Once you hit submit, sit back and relax—your materials are on the way!



Web LINKS



Searching for the latest data?

Check out these helpful links:

For the toll of the cost in lives and medical costs from tobacco use in Maine: <http://tobaccofreekids.org/reports/settlements/toll.php?StateID=ME>. See also section on research and facts.

For county or regional youth data: <http://www.maine.gov/maineosa/survey/home.php>

For other Maine and national data from YRBSS: <http://apps.nccd.cdc.gov/yrbss/>

For other Maine and national data from BRFSS: <http://apps.nccd.cdc.gov/brfss/index.asp>

For the most recent facts on tobacco use in the state of Maine, visit http://www.tobaccofreemaine.org/explore_facts/Maine_facts_and_stats.php

Partnership For A Tobacco-Free Maine (PTM) Staff:

Dorean Maines
Acting Program Manager
Email: dorean.e.maines@maine.gov
Phone: (207) 287-3268

Carol Coles
Public Health Educator
Secondhand Smoke: All Settings, Including Public
Places and Worksites; Tobacco-Related Disparities:
Analysis, Capacity Enhancement, Programming
Email: carol.r.coles@maine.gov
Phone: (207) 287-4626

Ellie Sparks
Office Associate
Email: ellie.sparks@maine.gov
Phone: (207) 287-9634

Catherine Ramaika
Public Health Educator
Women and Smoking, Tobacco Industry Tactics, and
Cessation/Treatment
Email: catherine.a.ramaika@maine.gov
Phone: (207) 287-4628

Michelle C. Ross
Public Health Educator
Prevention: Youth, YAP and NO BUTS!
Email: michelle.ross@maine.gov
Phone: (207) 287-5762

Becky Pearce
Public Health Educator
Email: rebecca.pearce@maine.gov
Phone: (207) 287-6027



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

Printed under appropriation #014-10A-9922-022
The Department of Health and Human Services (DHHS) does not discriminate on the basis of disability, race, color, creed, gender, age, sexual orientation, or national origin, in admission to, access to or operation of its programs, services, 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 Acts 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 civil rights may be forwarded to the DHHS' ADA Compliance/EEO Coordinator, State House Station #11, Augusta, Maine 04333, 207-287-4289 (V) or 207-287 3488 (V), TTY: 800-606-0215. Individuals who need auxiliary aids for effective communication in programs and services of DHHS are invited to make their needs and preferences known to the ADA Compliance/EEO Coordinator. This notice is available in alternate formats, upon request.

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.

LINK 8

 **Healthy Maine Partnerships**
Partnership For A Tobacco-Free Maine

11 State House Station
Augusta, ME 04333-0011
Phone: 207-287-4627
www.tobaccofreemaine.org

PRESORT
FIRST-CLASS
U.S. POSTAGE
PAID
Permit #492
Portland, ME