Pennsylvania Tobacco Prevention and Control Program Annual Report

July 1, 2021-June 30, 2022

Division of Tobacco
Prevention and Control

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Program Priorities

Tobacco use continues to be the leading preventable cause of death in the U.S. In Pennsylvania, 16% ¹ of adults currently smoke and 6.6% ² of students are current smokers. The current rate of students who use electronic vape products is 24.4% ³. As a result, the Pennsylvania Department of Health, through the Division of Tobacco Prevention and Control (DTPC), works to create a Pennsylvania free of tobacco-related death and disease through innovation, utilization of resources, and promotion of smoke-free environments and tobacco-free lifestyles.

The mission of the DTPC is to develop, implement, and support strategic and culturally appropriate efforts to reduce tobacco product use and exposure to secondhand smoke in Pennsylvania to enhance the quality of life for all residents. The DTPC has consistently followed the Centers for Disease Control and Prevention (CDC) guide *Best Practices for Comprehensive Tobacco Control Programs* to implement an integrated and effective program to maximize outcomes built on the four CDC goals:

- Prevent the initiation of tobacco use among young people.
- Promote quitting among adults and young people.
- Eliminate nonsmokers' exposure to secondhand smoke.
- Identify and eliminate tobacco-related health disparities.

The DTPC engages in coordinated efforts with key partners and other stakeholders in tobacco prevention and control in Pennsylvania to assess current trends and activities as well as new and emerging public health priorities. By collaborating with partners to leverage resources and raise awareness, the DTPC can provide comprehensive programs to decrease tobacco-related morbidity, mortality, and related economic costs in Pennsylvania and improve health equity.

¹ 2020 Behavioral Risk Factor Surveillance System (BRFSS)

² 2019 Youth Risk Behavior Survey (YRBS)

³ 2019 Youth Risk Behavior Survey

Health Equity

Health equity can be achieved in tobacco prevention and control by eliminating differences in tobacco use and exposure to secondhand smoke between certain groups. Unlike traditional direct-service interventions focusing on individual behaviors, tobacco control policies focus on large-scale, population-level changes. They have the potential to influence and change social norms related to tobacco initiation, use, and secondhand smoke exposure. Comprehensive tobacco control policies help achieve health equity by reducing disparities among groups most affected by tobacco use and secondhand smoke exposure.⁴ Pennsylvania's Comprehensive Tobacco Control Program focuses on the following priority populations:

- African Americans
- Asian Americans/Native Hawaiian/Pacific Islanders
- Hispanic/Latinx populations
- People with behavioral health conditions
- People using non-combustible tobacco
- People using smokeless commercial tobacco, alternative/electronic nicotine products
- LGBTQ+ communities

⁴ Centers for Disease Control and Prevention.Best Practices for Comprehensive Tobacco Control Programs—2014.Atlanta, GA: US Dept of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2014. https://www.cdc.gov/tobacco/stateandcommunity/best-practices-health-equity/pdfs/bp-health-equity.pdf

State Fiscal Year 2021-2022 Program Funding

Tobacco Master Settlement Agreement	\$16,001,000
Centers for Disease Control and Prevention Cooperative Agreement: Component I	\$1,647,634
Centers for Disease Control and Prevention Cooperative Agreement: Component II	\$751,669
Food and Drug Administration	\$1,060,848
TOTAL	\$19,461,151

Tobacco Master Settlement Agreement Funding

On June 26, 2001, Act 77 of 2001, the Tobacco Settlement Act, was signed into law. Chapter 7 of the Act outlined the requirements for prevention and cessation activities in Pennsylvania and established the state's comprehensive tobacco control program. The Act dictates that at least 70 percent of the appropriated funds must be provided to primary contractors to establish tobacco control programs throughout Pennsylvania that are comprehensive, sustainable, and accountable, based on key elements defined in the CDC's Best Practices for Comprehensive Tobacco Control Program. The remaining funds (30 percent) are to be used for statewide efforts consistent with the priorities of the Act, which include Pennsylvania's Free Quitline, statewide youth tobacco prevention initiatives, on-going evaluation and media. No more than half of the 30 percent funding for statewide initiatives may be used for statewide media.

CDC Funding

The DTPC receives federal funds from the CDC through the National and State Tobacco Control Program grant to implement a comprehensive statewide tobacco control program that supports statewide, regional, and community-based interventions, mass reach health communication interventions, cessation interventions, surveillance and evaluation, and infrastructure, administration, and management. The five-year grant is comprised of two components: Component I: funding to implement Pennsylvania's tobacco program and Component II: funding to improve Quitline infrastructure to streamline intake, enhance services and absorb increases in demand including demand generated by national media campaigns.

Food and Drug Administration (FDA) Funding

On June 22, 2009, the federal Family Smoking Prevention and Tobacco Control Act (Tobacco Control Act) was signed into law. The Tobacco Control Act amended the Federal Food, Drug, and Cosmetic Act by adding a new chapter granting the FDA authority to regulate the manufacturing, marketing, and distribution of tobacco products to protect the public health and to reduce tobacco use by underage purchasers. The FDA provides funding to states to enforce certain provisions of the Tobacco Control Act and implementing regulations. The DTPC has received FDA funds since 2010 to recruit individuals to conduct FDA tobacco enforcement inspections at retail establishments to ensure tobacco products are not being sold to underage individuals in Pennsylvania.

Statewide Program Grantees and Funding

Grantee	Service(s)	State Fiscal Year 2021-2022 Funding Received
National Jewish Health	PA Free Quitline operations and maintenance	\$1,724,900 (MSA) \$601,245 (CDC) \$2,326,145 TOTAL
American Lung Association of the Mid-Atlantic	Technical assistance through statewide coalition Pennsylvania Alliance to Control Tobacco (PACT) and youth coalition Tobacco Resistance Unit (TRU)	\$718,554 (MSA) \$22,064 (CDC) \$740,618 TOTAL
Public Health Management Corporation	Comprehensive program evaluation of state and local tobacco prevention and cessation programs	\$585,086 (MSA) \$116,374 (CDC) \$701,460 (TOTAL)
Bradbury-Sullivan LGBT Community Center	Training, technical assistance and data collection and analysis to address LGBTQ disparities	\$196,660 (CDC)
JBS, Inc.	Food and Drug Administration Tobacco Retail Compliance inspections statewide	\$591,900 (FDA)
TOTAL		\$3,028,540 (MSA TOTAL) \$936,343 (CDC TOTAL) \$591,900 (FDA TOTAL) \$4,556,783 (GRAND TOTAL)

Statewide Program Goals and Accomplishments

Pennsylvania's Free Quitline – 1-800-QUIT-NOW

Pennsylvania's Free Quitline is available 24 hours a day, 7 days a week. English and Spanish speaking coaches are always available, with other languages available as needed. From July 1, 2021, to June 30, 2022, Quitline services were provided through National Jewish Health (NJH). Teen and adult tobacco users receive counseling from highly trained intake specialists and cessation coaches at NJH. After the initial call to the Quitline, callers who are ready to quit determine a quit date and are offered up to five free one-on-one calls to assist them through the quitting process. The sessions are tailored to the individual needs of the caller, focusing on specific strategies and actions for that caller. If a caller is not ready to quit, he/she is provided with self-help materials and tailored fact sheets.

1-800-QUIT-NOW Reach in Pennsylvania

- Between July 1, 2021, and June 30, 2022, 12,637 inbound calls were made to 1-800-QUIT-NOW.
- Between July 1, 2021, and June 30, 2022, 11,103 users requested services from the PA Free Quitline. During this same time period, 7,022 tobacco users enrolled in PA Free Quitline counseling.

PA Free Quitline Quit Rate[1]

- Pennsylvania's PA Free Quitline six-month quit rate is currently at 31.7 percent.
- The conventional tobacco plus electronic nicotine delivery systems (ENDS) quit rate of 29.9 percent is slightly lower, indicating that some who report being quit at sixmonth follow-up are still using ENDS.
- The conventional tobacco quit rate for individuals using Nicotine Replacement Therapy (NRT) combined with coaching is 32.8% compared to 26.9% with no NRT.

My Life My Quit

NJH continues to offer My Life, My Quit, a tobacco cessation program designed specifically for teens who want to stop using tobacco products, including electronic cigarettes and vapes. This youth-oriented program incorporates youth-centered approaches to tobacco cessation adapted to include vaping and new communication methods, such as real-time text messaging and online chat with quit coaches. Youth ages 14-17 can call or text a dedicated toll-free number (1-855-891-9989) or enroll and look up information online at mylifemyquit.com. Specialized coaches have experience working with youth and receive intensive youth-focused training related to adolescent development. Youth receive five coaching sessions using the modality of their choice.

Quitline Utilization amongst those who Report a Behavioral Health Diagnosis Individuals with behavioral health conditions including ADHD, anxiety, depression, bipolar disorder, schizophrenia, PTSD or substance abuse disorders, have higher rates of

[1

^[1] Follow-up data reported for callers who completed intake in SFY2019/2020. Follow-up data for these callers was collected in FY2020/2021. Follow-up data for callers who completed intake in SFY2021/2022 is currently being collected and analyzed.

^[2] Reported quit rate is a responder rate, based on an overall 61.4% survey response rate.

tobacco use than their counterparts. To help support all tobacco users and enhance Quitline participant engagement and successful long-term quitting for participants living with a behavioral health condition, NJH offers a specialized protocol for individuals with behavioral health conditions. This protocol offers more intensive care to callers including coaching for a longer period of time, case management services, reflective homework, supportive text messages and emails, resources and a letter to their healthcare provider. The goals of the protocol are to: 1) Improve coach and participant experience, 2) Improve engagement and 3) Improve quit outcomes. Through this protocol, NJH considers the unique needs/barriers faced by these participants and works to keep those with BH conditions engaged in Quitline services.

Statewide Retail Enforcement

DTPC works to prevent the initiation of tobacco use among young people through enforcement of tobacco retailer laws in Pennsylvania. These laws prevent the sale of tobacco products to individuals under the age of 21 and are enforced through several regulatory mechanisms, which include the training of youth to assist with inspections. Act 112 and Tobacco 21 are laws that regulate and enforce the sale of tobacco products to youth. Youth, with adult supervisors, perform enforcement inspections in tobacco retail outlets throughout Pennsylvania. Following the temporary suspension of inspections in March 2020 due to the COVID-19 pandemic, PADOH resumed enforcement inspections beginning in October 2021.

 During the period July 1, 2021 to June 30, 2022, 3,939 retail enforcement inspections were completed across the Commonwealth. Of those enforcement inspections, 20.6 percent resulted in a sale.

Synar Survey

In 1992, the Synar Amendment established requirements that states conduct random, unannounced inspections of tobacco retailers to address youth tobacco access and enforce tobacco retailer laws. Pennsylvania administers the Synar survey annually to meet these federal requirements and estimate the rate at which outlets sell cigarettes to minors. Data is collected via youth buyers, ages 15-18, who attempt to purchase cigarettes from a sample of Pennsylvania cigarette retailers. The outcome of each attempt is recorded; a rate is calculated from the eligible outlets attempted. The 2021 survey was conducted during the summer of 2021. An estimated 16.2 percent (CI: 13.5% - 18.8%) of Pennsylvania retailers sold cigarettes to minors.⁵

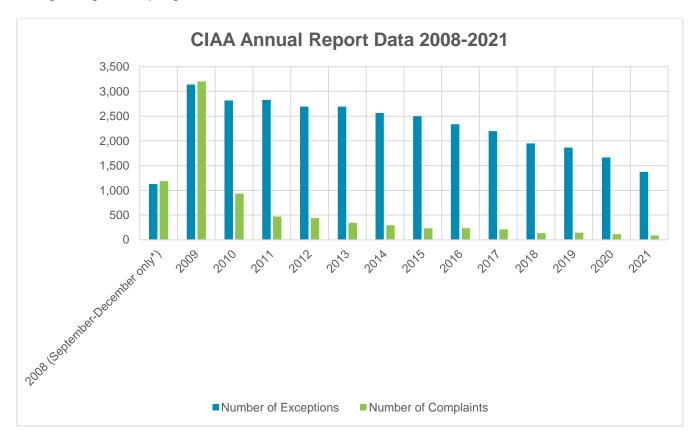
Clean Indoor Air Act

Act 27 of 2008, Pennsylvania's Clean Indoor Air Act (CIAA), became effective on Sept. 11, 2008. The DTPC administers the CIAA Program by 1) educating businesses on how to comply with the CIAA and providing CIAA information to the public; 2) issuing exceptions to businesses that meet specific criteria and monitoring those exceptions; and 3) enforcing the CIAA to ensure public places without exceptions remain tobacco-free and that individuals are not wrongfully exposed to secondhand smoke. Eliminating exposure to secondhand smoke and promoting cessation are two evidence-based strategies that can contribute to a

⁵ Pennsylvania Department of Health. Division of Health Informatics. (2022). 2021 Annual Synar Report.

reduction in disease, disability, and death.⁶ Many reports and studies consistently document reductions in tobacco use following the implementation of smoke-free laws and policies.⁷

The CIAA has numerous exceptions: two types of drinking establishments (referred to in the CIAA as type I drinking establishments and type II drinking establishments), two types of cigar bars (referred to in the CIAA as type I cigar bars and type II cigar bars), and tobacco shops. Currently, there are 1,2588 exceptions for drinking establishments, cigar bars and tobacco shops issued in Pennsylvania. The graph below depicts the annual decrease in both CIAAA exceptions and complaints received by the DTPC since the beginning of the program.



Vaping Epidemic Action Plan

In response to the vaping epidemic, the DTPC is addressing statewide prevention of initiation to emerging tobacco products, including e-cigarettes, for youth and young adults through the development of a Vaping Epidemic Action Plan⁹. Plan objectives include:

 Advocate for secure and level tobacco prevention and control funding for program activities

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⁶ Best Practices for Comprehensive Tobacco Control Programs, Centers for Disease Control and Prevention. https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf. Published 2014.

Best Practices for Comprehensive Tobacco Control Programs, Centers for Disease Control and Prevention. https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf. Published 2014.

⁸ Pennsylvania Department of Health. Division of Tobacco Prevention and Control. (2022). CIAA System Data.

⁹ Pennsylvania Department of Health. Division of Tobacco Prevention and Control. Vaping Epidemic Action Plan.

- Advocate for flavored tobacco product restrictions
- Develop and strengthen school partnerships to offer e-cigarette resources and education
- Provide guidance and resources to support service providers and coalition members in addressing e-cigarette epidemic in their communities
- Increase the number of trained and certified INDEPTH alternative to suspension program facilitators
- Increase the number of trained and certified Not-on-Tobacco (N-O-T) youth cessation program facilitators
- Promote the Ask, Advise Refer (AAR) tobacco intervention training for healthcare providers

2022 Pennsylvania LGBTQ Health Needs Assessment¹⁰

The Division continues to support Bradbury-Sullivan LGBT Community Center in measuring disparities impacting community wellness. Since 2015, Bradbury-Sullivan has collected data about community health needs and barriers to care. In 2022, Bradbury-Sullivan led a coalition of more than 30 LGBTQ organizations across the state collecting data for the 2022 Pennsylvania LGBTQ Health Needs Assessment. This information will be used to support new and existing community-based programs designed to close gaps in service and address the unique health needs of our population. Every person who takes part in the survey will not only help community leaders and healthcare professionals learn more about how to promote the health and wellbeing of LGBTQIA+ people, but also empower the coalition to build a stronger network of LGBTQIA+ community supports across the state. A final report will be available upon completion of the assessment and analysis of the data.

¹⁰ Pennsylvania Department of Health. Division of Tobacco Prevention and Control 2022 LGBTQ Health Needs Assessment.

Youth Engagement: TRU

During this state fiscal year (SFY), PACT and the American Lung Association continued coordination of TRU, the youth tobacco prevention and control movement in Pennsylvania. At the end of SFY 2021/2022, TRU had 2,419 youth members statewide. PACT worked with Regional Primary Contractors (RPCs) to support youth recruitment; communication strategies including e-blasts, sharing monthly infographic reports, and updates RPCs on TRU initiatives like Tobacco 21 and Clean Indoor Air. PACT also disseminated e-newsletters for advisors and RPCs.

The following are examples of tobacco prevention and control activities involving youth and youth serving organizations completed this fiscal year:

- Day at the Capitol (DATC) annual event took place on May 3, 2022 with over 370 youth and adult lung health and tobacco control advocates, as well as 45 legislators, participating;
- Promoted TRU and recruited student members and ambassadors through a variety of mechanisms, including partnerships with schools, churches, youth coalitions, gay straight alliances, Students Against Drunk Driving (SADD) groups, YMCAs, 4-H youth groups, Girl Scout troops, camps and student councils;
- Engaged TRU youth in legislative visits, advocacy events (e.g., DATC), Advocacy 101 training and tobacco prevention holidays (e.g., Great American Smokeout, Great American Spit Out, Kick Butts Day);
- Highlighted TRU youth ambassadors during DATC Community Forum, where they spoke about their experience with TRU and advocating for tobacco prevention and control funding; and
- Supported students to apply to be TRU Ambassadors and TRU Advocate of the Year.

Regional Primary Contractors and Funding

Region (based on DOH community health districts)	Contractor	County(ies) Served	State Fiscal Year 2021-2022 Funding Received
Allegheny County	Adagio Health	Allegheny	\$1,101,011 (MSA)
North Central	American Lung Association	Bradford, Centre, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union	\$829,952 (MSA)
Northeast	American Lung Association	Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Susquehanna, Wayne, Wyoming	\$1,520,955 (MSA)
Northwest	Erie County Department of Health	Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango	\$1,008,403 (MSA) \$170,000 (CDC) \$1,178,403 TOTAL
Philadelphia County	Philadelphia Department of Public Health	Philadelphia	\$1,625,825 (MSA) \$243,050 (CDC) \$1,868,875 TOTAL
South Central	American Lung Association	Adams, Bedford, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntington Juniata, Lebanon, Mifflin, Perry, York	\$1,690,687 (MSA)
Southeast	Health Promotion Council	Berks, Bucks, Chester, Delaware, Lancaster, Montgomery, Schuylkill	\$3,315,610 (MSA)
Southwest	Adagio Health	Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Somerset, Washington, Westmoreland	\$1,315,610 (MSA)
TOTAL			\$12,821,103

Regional Primary Contractor Subcontractors and Funding

Allegheny County

Subcontractor	State Fiscal Year 2021-2022 Funding Received
UPMC Western Psychiatric Hospital	\$50,616
North Braddock-Neighbors Helping Neighbors	\$6,630
AHN-Center for Inclusion Health	\$19,456
Allies for Health + Wellbeing	\$17,700
Duquesne University	\$59,088
Program for Female Offenders	\$8,000
Hugh Lane	\$52,996
Keystone Wellness Programs	\$76,100
Latino Communities Connection	\$15,380

North Central Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
Public Health Management Corporation	\$72,109
Brenneman Printing	\$8,138
Clean Air Council	\$6,667
American Lung Association	\$569,316
Red House Communications	\$46,070
Northcentral Pennsylvania AHEC	\$23,663
Pathway to Recovery	\$37,439
Fahlgren Mortine	\$35,000

Gaudenzia	\$10,891
University of Rochester Medical Center	\$4,984
Williamsport LGBT Community Outreach	\$1,000
River Valley Health and Dental	\$2,000
Geisinger Health Plan	\$4,000
Centre County Youth Service Bureau	\$1,700
Hughes Design	\$6,975

Northeast Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
Public Health Management Corporation	\$132,204
Brenneman Printing	\$12,834
Clean Air Council	\$6,667
American Lung Association	\$823,329
Red House	\$38,500
East Central PA AHEC	\$86,082
Pathway to Recovery	\$82,627
Lehigh Valley Health Network-Pocono	\$39,708
Lehigh Valley Health Network	\$129,021
Bradbury Sullivan	\$100,000
Fahlgren Mortine	\$65,000
University of Rochester Medical Center	\$4,984

Northwest Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
PA Coalition for Oral Health	\$6,683
C. Coffin Creative	\$3,100
Rescue Agency	\$70,000
Sunsrata	\$75,000
Adagio Health	\$48,025
Alcohol & Drug Abuse Services, Inc.	\$14,125
Ryan Miller	\$24,165
Paula DiGregory	\$160,108
National Cinemedia, LLC	\$4,253
Clearfield-Jefferson D&A Commission	\$23,261
Growing Wellness, LLC	\$14,650
YMCA Titusville	\$4,625
Brenda Ridgeway	\$9,360
Sight Center of NWPA	\$32,000
Link the Valley	\$4,000
Erie Otters Hockey	\$3,500
Latino Connection	\$64,750
Millcreek Police Department	\$2,205
Moore Research Services, Inc.	\$20,000
YMCA of Greater Erie	\$3,850
Screenvision Media	\$5,000

Mercer County Behavioral Health Commission	\$115,800
Michael Albanese	\$10,800
Karissa Fisher	\$4,625

Philadelphia County

Subcontractor	State Fiscal Year 2021-2022 Funding Received
AB&C Creative Intelligence	\$453,883
Mighty Engine	\$406,187
David A. Lopez and Co.	\$9,489
Public Health Management Corporation	\$291,398
University of Pennsylvania	\$158,667
Health Promotion Council	\$552,991
Clean Air Council	\$63,110
Bradbury Sullivan	\$50,000
William Way LGBT Center	\$15,045
Red House Communications	\$165,000

South Central Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
Public Health Management Corporation	\$146,992
Brenneman Printing	\$14,243
Clean Air Council	\$6,667
American Lung Association	\$766,618

Red House Communications	\$53,000
Harrisburg Area YMCA	\$199,254
Lung Disease Foundation of Central PA	\$63,818
Healthy Communities Partnership	\$135,387
WellSpan Health	\$155,725
Lebanon Family Health Services	\$77,000
Community Health Counsel of Lebanon County	\$2,000
Fahlgren Mortine	\$65,000
University of Rochester Medical Center	\$4,984

Southeast Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
Bucks County Health Improvement	\$78,000
Bradbury Sullivan LGBT Center	\$148,440
ChesPenn Health Services	\$42,000
Clean Air Council	\$60,000
Council on Chemical Abuse	\$90,100
Council of SEPA	\$101,750
Council of SEPA-Enforcement	\$56,000
Holcomb Behavioral Health Services	\$86,350
Latino Connection	\$68,000
Latino Connection-Enforcement	\$29,600
Lancaster General Health/UPenn	\$96,100

Lehigh Valley Health Network	\$90,000
Riddle Hospital/Mainline Health	\$100,000
Phoenixville Hospital/Tower Health	\$100,900
Suburban Community Hospital/Prime Healthcare	\$100,900
PHMC REG	\$139,000
PHMC Fiscal	\$84,000
UPenn	\$215,000
Black Doctors Covid Consortium	\$27,215
Albright College	\$10,000
Bucks County Community College	\$10,000
Perry Media Group	\$100,000
Brenneman Printing	\$30,000
Katie Warner/Bronwyn Lucas	\$24,750

Southwest Region

Subcontractor	State Fiscal Year 2021-2022 Funding Received
Greene County Human Services	\$37,154
Fayette Drug & Alcohol Commission	\$47,308
Eric Sinclair	\$20,000
Dawn Pelligerino	\$7,000
Cambria County Drug Coalition	\$59,088
Butler Sherrif	\$10,000
Becky Kishlock	\$8,000

Keystone Wellness Programs	\$118,142
JAMB	\$7,000
Indiana Regional Medical Center	\$263,000
Luke Kilger	\$4,948
Twin Lakes-UPMC	\$17,160
Washington Drug & Alcohol	\$44,446
Teen Outreach Center	\$5,000
Washington Health Systems	\$13,990

Regional Primary Contractor Goals and Accomplishments

Six regions reflect the Department's six Community Health Districts, while two additional service areas cover Allegheny and Philadelphia counties. During this state fiscal year, the Regional Primary Contractors focused efforts on the following program priorities based on regional need and guidance from the DTPC. These selected findings provide a summary of the work of the RPCs, both at regional and state levels, in the four CDC goal areas.

Goal Area 1: Prevent initiation of tobacco use among young people

- RPCs offer community level cessation services, both group and individual counseling, to state residents and refer residents to the PA Free Quitline for telephone counseling cessation services.
- RPCs enrolled 2,230 participants in group (n=1,276) and individual (n=1,044) cessation counseling during SFY 2021-2022.

Goal Area 2: Promote quitting among adults and young people

- RPCs offer group cessation programs and one-on-one counseling sessions to tobacco users across the state.
- RPCs work to promote the Quitline as an accessible cessation resource.
- RPCs supply NRT to eligible Pennsylvanians.

Goal Area 3: Eliminate nonsmokers' exposure to secondhand smoke

- RPCs provide services relating to the implementation of the Pennsylvania CIAA including technical assistance to establishments and workplaces as needed.
- RPCs assist the DTPC in the verification of exception requests and follow-up on CIAA complaints.
- RPCs conduct site visits to establishments that apply for a CIAA exception to check for structural compliance with the CIAA and to submit results to the DTPC.

Goal Area 4: Identify and eliminate tobacco related health disparities

 RPCs outreach to various community-based organizations including populationfocused community service agencies to educate and provide services to adults and youth disparately impacted by tobacco use. Below are additional accomplishments by RPCs by service area:

Allegheny County

- Through a partnership with Jefferson Hospital, a grant funded program, Front Door Initiative, was started to address needs related to social determinants of health for patients in the emergency department. The program uses an online referral system, Find Help, to connect patients to community organizations that can help with food insecurity, housing, and tobacco cessation.
- Individuals participated in the Healthy You, Health Baby Pilot Program. Participants worked with Tobacco Treatment Specialists monthly to share successes and discuss challenges related to tobacco cessation.
- Provided tobacco cessation services to individuals involved with the Light of Life Rescue Mission Partnership, a homeless shelter located in the Pittsburgh area. Light of Life's mission is to hold a place of hope and healing for men, women, and families who are experiencing homelessness, poverty, or addiction.

North Central Region

- Continued an expansion of comprehensive tobacco treatment programming with Gaudenzia, which included creating a workgroup to assisting the development of a culture change strategy, conducting an employee readiness survey, and offering tobacco treatment education and training for all staff.
- Partnered with Latino Connection to host pop-up events throughout the region, targeting Latino members of rural communities and further educate them on the burdens of tobacco related illnesses and economic consequences caused by tobacco use. In addition, materials were distributed at various corner stores and bodegas in both English and Spanish.
- Developed new partnerships with the following school districts in addressing the vaping epidemic: Centre County Youth Service Bureau, Williamsport Area School District, South Williamsport School District, and Keystone Central School District. Staff provided either INDEPTH, an alternative to suspension program, and/or youth cessation programming, N-OT).

Northeast Region

- Continued work with the following schools on implementation of N-O-T, INDEPTH, as well as discussions on strengthening tobacco-free policies, which qualifies some to be recognized as Vape-Free Schools: North Pocono School District, Mid Valley School District, Western Wayne School District, Holy Cross High School, and Hazleton School District.
- Partnered with Bradbury Sullivan LGBTQ to provide programming in the region on the following activities to target the LGBTQ population: TRU recruitment, tobaccofree worksite policy implementation, legislative visits, and signage/resources at the Smokefree Lehigh Valley Pride event.
- Developed a Freedom From Smoking® Testimonial Video that features a
 participant from the Lehigh Valley, so that various tobacco cessation partners can
 use the testimonial as a tool to talk to individuals contemplating tobacco treatment.

Northwest Region

- Worked with behavioral health organizations to engage in culture change activities to incorporate tobacco cessation into behavioral health recovery settings.
- Provided tobacco brief intervention trainings to healthcare providers in the region.

Philadelphia County

- Launched several novel media local and state-wide campaigns to highlight the PA Free Quitline and promote tobacco recovery.
- Revamped Philadelphia's Tobacco Retailer Database to better monitor, track and enforce against tobacco retailers.
- Held a regional tobacco-free campus summit in coordination with regional partners and advocacy organizations.

South Central Region

- Worked with partners in Lebanon County to present information on addressing the vaping epidemic. Partners recruited students to join the new TRU+ alumni group and take a comprehensive approach to updating tobacco-free policies at various school districts in Lebanon County. This approach included offering INDEPTH, an alternative to suspension program, as well as youth cessation programming, N-O-T.
- Partnered with the Rainbow Rose Center in York County to change the York County Pride festival to tobacco-free and offered tobacco education at the event.
- Created new tobacco-free community garden signs that will be coupled with a campaign to educate community members about how tobacco smoke can be hazardous to the growth of vegetable plants.

Southeast Region

- Piloted tobacco merchant education program in Montgomery, Bucks, and Delaware Counties targeting merchants.
- Provided Tobacco Dependence Treatment to over 900 adults to assist them in their journey to quit.
- Launched a media campaign promoting quitting vaping among youth/young people and referring them to This Is Quitting program.
- Increased engagement with local colleges by partnering with the Philadelphia & Southeast Region Tobacco Free College Campus Summit and awarding two minigrants for schools to implement tobacco-free policies.

Southwest Region

- Formed a school policy workgroup to help educate school administration in tobacco programming and assist in updating policies to include interventions. New school signage was also provided to the participating schools.
- Hosted a successful Youth Leadership Conference with over one hundred students and five legislators in attendance.
- Participated in a partnership with Clear Day Treatment Center to offer an eightsession cessation program that offers support to those in recovery and those suffering with a mental and/or behavioral health diagnosis.

Program Evaluation

Evaluation is used to assess the implementation and outcomes of DTPC's comprehensive tobacco control program to increase the program's efficiency and impact over time. Accountability is assessed by documenting the effectiveness of programs, measuring program outcomes, documenting implementation and increasing the impact of programs.

The Department has used an independent evaluation vendor, Public Health Management Corporation (PHMC), to measure short-term, intermediate and long-term outcomes since 2005. Evaluation activities are guided by four inter-related priorities:

- Increasing standardization of programs and evaluation;
- Utilizing data for program improvement and decision-making;
- Assessing program outcomes as well as process outcomes; and
- Improving internal and external communications.

<u>Data Collection and Evaluation Accomplishments</u>

- Developed regional program data measures for statewide evaluation which standardized data collection and reporting among RPCs.
- Evaluated RPCs and DTPC to solicit feedback and information in areas central to tobacco prevention and control programs. Recommendations included improving communication by fostering partnerships, creating opportunities for collaboration and sharing successes among regional and statewide contractors.
- Strengthened program capacity related to data use and tracking impact by providing technical assistance to support and build the capacity of DTPC and its contractors to promote the regular use of program data and research on best practices.
- Built capacity at the state and regional levels by:
 - continuing to promote the development and use of needs assessments as program planning tools;
 - engaging stakeholders in discussion of plans to conduct tobacco surveillance activities to ensure coordination of program and population level data collection, analysis and interpretation; and
 - continuing to promote the use of program data for program planning and decision-making at both the state and regional levels.

Recommendations for Further Reductions in Tobacco Use

Every three years, the Division works with key partners and other stakeholders in tobacco prevention and control in Pennsylvania to develop a Strategic Plan for a Comprehensive Tobacco Control Program in Pennsylvania. The strategic plan is reflective of a statewide assessment of current trends and activities, as well as defining new and emerging public health priorities. In addition, the strategic plan defines a roadmap to significantly decrease tobacco-related morbidity, mortality, and related economic costs in Pennsylvania. By collaborating with partners to enact this plan, the Division can work collaboratively to reduce non-smokers' exposure to secondhand smoke and better assist current smokers to successfully quit using tobacco.

Working with decision makers and elected officials is critical to protecting Pennsylvanians from the harmful impacts of tobacco use. Implementing the following public policies can impact the number of Pennsylvanians, specifically disparate populations, who use tobacco products and are exposed to secondhand smoke.

- Master Settlement Agreement Funding for Program
 Allocate funding for comprehensive tobacco control at levels recommended by the CDC to meet the needs of Pennsylvanians (\$140 million annually).
- Comprehensive Clean Indoor Air Legislation Remove exemptions from the CIAA, extending full protection from the effects of secondhand smoke to all Pennsylvania workers. Remove preemption from CIAA, enabling any locality to adopt and enforce indoor air regulations that set higher standards than the existing state law.
- Insurance Coverage for Tobacco Cessation Adopt legislative or regulatory standards for comprehensive smoking cessation treatment coverage by insurance companies and Medicaid program in Pennsylvania. Legislative standards requiring commercial insurance coverage in excess of what is required by federal law should be accompanied with state funding to support the mandate.
- Tax Non-Cigarette Tobacco Products at 40 Percent Wholesale
 Create tax parity, with cigarettes, on all other tobacco products, including cigars,
 (using percentage of wholesale price) to prevent youth from initiating or switching
 use due to an uneven tax regime. Fully protect residents from the health harms of
 tobacco by introducing the tax as a weight-based tax on smokeless and roll-yourown tobacco, and by not taxing cigars. Pennsylvania remains one of only two
 states that do not tax cigars.