2003-2004 ANNUAL REPORT





FACES of our COMMITY

INDIANA TOBACCO PREVENTION AND CESSATION

TABLE OF CONTENTS

- Letter from Executive Director
- 2 Executive Summary
- 4 Indiana's Progress Toward 2005 Objectives
- 9 Tobacco Use Burden On Indiana
- 28 Tobacco Control Policy
- 35 Indiana's Tobacco Settlement Appropriations
- **37** ITPC Organizational Chart and Staff
- **38** Executive Board Structure/Members
- 39 Advisory Board Structure/Members
- **39** Vision and Mission Statement
- **40** ITPC Annual Accomplishments
- **43** Community Programs
- **55** Media Campaign
- 60 Enforcement of Youth Access Laws
- **62** Evaluation and Surveillance
- **67** Administration/Management
- **68** Budget
- 69 Annual Financial Report
- **70** ITPC Coalitions by County

Letter to Rick Stoddard:

My name is Jessica and i am an eighth grader at Jac-Cen-del High School. My father smokes and he is 46 years old he has smoked since he was 16. I have been bugging him to guit for guite some time but he won't listen. I really don't want to go through such a bad expierience as you had to go through. Our family is really close and it would just break our hearts. Do you know anything i could do to help him quit? I really liked your story..well i didnt like it but it was sad and I cried.. I wish you or anyone would never have to go through such a bad expirience because of a stupid cigarette. I also wish that all of the tobacco companies would go out of business. They should make tobacco illegal to grow. It kills inocent people and hurts their family very much. I am glad you came and spoke to us because before you came I smoked a couple times, but now i will never ever pick up a cigarette again.

Thanx for what you have taught me, Jessica

Cigarette consumption in Indiana decreased 18.5% since SFY 2002, while at the same time state revenues from tobacco sales increased by 175%.

GREETINGS FROM THE EXECUTIVE DIRECTOR - KARLA S. SNEEGAS, M.P.H.

DOORS TO INDIANA'S PAST AND FUTURE FOR TOBACCO CONTROL

In 1964, the federal government, by way of the U.S. Surgeon General report "Smoking and Health," first warned Americans of the serious health risks of cigarette smoke. Four decades later we continue to battle the effects of tobacco use. Our strategies and tactics, backed by a scientific base, are more strategic and targeted. This year's annual report lays out the accomplishments we've made this year. While we have documented significant strides in 2003, the accomplishments of the past year are still outweighed by the challenges of the future are still great. Now is not the time to slow down.

Our future challenges were outlined in the 28th Surgeon General's Report on Smoking and Health released this year. The list of diseases caused by smoking has been expanded. The report reminds everyone that quitting smoking has immediate as well as long-term benefits.

Most Hoosiers do not know that the groundwork for the 1964 landmark report was laid right here in Indiana. Leroy E. Burney was born in 1906 in Burney, Indiana, a town founded by his great-grandfather. Degrees from Butler and Indiana University led him to a public health career that culminated in becoming U. S. Surgeon General in 1956. On July 12, 1957, Burney issued a statement that made him the first Federal official to publicly identify the dangers of smoking.

"The weight of the evidence is increasingly pointing in one direction; that excessive smoking is one of the causative factors in lung cancer."

Now 40 years later we celebrate Dr. Burney as a pioneer who inspired thousands of Hoosiers to make a difference in our state's collective health. This pioneering leadership is seen through the statewide network of ITPC partners and their many accomplishments to celebrate for 2003. The program is truly making a difference in Indiana. Highlights outlined in this report include:

- Youth smoking is at the lowest level in recent years. A 2002 survey showed the cigarette-smoking rate among Indiana high school students dropped from 32% in 2000 to 23% in 2002.
- Hoosiers are smoking fewer cigarettes. Cigarette consumption in Indiana has decreased 18.5% since 2002.
- Hoosiers want to quit smoking. Approximately 86% of Hoosier adults who smoke say they expect to quit smoking and 62% say they will quit smoking in the next six months.

- The number of retailers selling cigarettes to minors is the lowest ever recorded, dropping to 13% compared with 29% when the ITPC program began in 2001.
- Every county in the state is impacted through the network of ITPC partnerships with local and minority communities.
 These partners represent more than 1,600 organizations who have conducted over 10,000 activities at the community level.
- Eight out of ten adults and youth are aware of the ITPC statewide media campaign. Hoosiers aware of the campaign are more likely to understand that tobacco is addictive, more likely to try to quit smoking, and more likely to see secondhand smoke as a serious problem.

The tobacco companies continue to promote their products with multi-billion-dollar budgets. In 1964, the tobacco industry spent \$261.3 million, more than \$1.5 billion in today's economy, on cigarette advertising. By 2001, the marketing expenditures for tobacco products had increased by more than 600 percent to \$11.2 billion, and that number continues to grow. To say we are fighting an uphill battle is an understatement. But it is a battle we must continue to fight for the health and financial well-being of this great state.

In the spirit of Dr. Burney's pioneering leadership, I want to honor and thank Bain J. Farris who served as chairman of the IPTC executive board since its inception in 2000. As of March 2004, he has left Indiana to continue his healthcare career in California Under Bain's leadership, Indiana's program saw quick results and grew to gain national prestige. His leadership paved the way for a new generation of leaders in the fight against tobacco.

While it is necessary to look back and record our accomplishments, it is vital that we look ahead to the future of our movement. ITPC must continue to impact Hoosiers in all communities and at all age levels with programs such as VOICE, Indiana's statewide movement that empowers youth on tobacco issues and exposes the tobacco companies' tactics in targeting teens. Keeping VOICE and the Voice.tv website prominent in the eyes of teens remains a key component in Indiana as we look to new leaders who will shape the public policy of tomorrow.

On behalf of ITPC, we hope you will join us now in reflecting on the 2003 accomplishments. Stay involved with us as we continue to make Indiana a healthier place to live, work, and play!

EXECUTIVE SUMMARY

Tobacco use costs Hoosiers 10,300 lives and \$1.6 billion each year. With the 5th highest adult smoking rate in the United States, Hoosiers must continue to take action in reducing the tobacco burden and reversing its devastating effects through the Indiana Tobacco Prevention and Cessation (ITPC) programs.

The Indiana Tobacco Use Prevention and Cessation Trust Fund and Executive Board exists to prevent and reduce the use of all tobacco products in Indiana and to protect citizens from exposure to tobacco smoke. Following the Centers for Disease Control and Preventions (CDC) Best Practices for Tobacco Control, Indiana established a tobacco control program that is coordinated, comprehensive and accountable. The Hoosier Model for tobacco control incorporates elements from all nine categories recommended by the CDC and has five major categories for funding. The Hoosier Model consists of Community Based Programs; Statewide Media Campaign; Enforcement; Evaluation and Surveillance; and Administration and Management.

ITPC's program can report many accomplishments in state fiscal year (SFY) 2004 and is changing knowledge, attitudes and beliefs regarding tobacco use. The increased awareness and education that have occurred in the past three years is a precursor to reducing Indiana's high tobacco use rates.

OVERALL HIGHLIGHTS:

- Youth smoking among high school students decreased 26% from 2000 to 2002; meeting ITPC's 2005 objective.
- Cigarette consumption in Indiana decreased 18.5% since SFY 2002, while at the same time state revenues from tobacco taxes increased by 175%.



COMMUNITY PROGRAMS:

- All of Indiana's 92 counties continue to receive a grant to conduct tobacco prevention and cessation in their communities, including setting up resources to help smokers quit. Over 1,600 organizations are involved locally, including 25 local and state minority organizations and 12 organizations working on statewide programs.
- ITPC local partners have conducted over 10,200 activities at the community level, such as implementing prevention and education programs in schools, developing cessation networks, working to protect Hoosiers from secondhand smoke, engaging local businesses, and raising awareness of tobacco prevention efforts.
- ITPC 's comprehensive training plan for staff, board, and partners uses a variety of training mechanisms so partners get the resources needed to implement their local tobacco control programs. In SFY 2004, these training opportunities included the second ITPC Partnership Information X-Change with over 350 tobacco control advocates from 88 counties in attendance.

STATEWIDE MEDIA CAMPAIGN:

- Eight out of ten Indiana youth and adults have seen an advertisement from the ITPC media campaign. Confirmed awareness of the ads has steadily increased of the past 3 years as every county in the state is being reached by the media campaign.
- Youth who were aware of at least one ITPC ad were 59% more likely to understand that tobacco is addictive and dangerous compared to those not aware of any ITPC ads.
- Adults who confirmed seeing an ITPC ad were 56% more likely to agree that secondhand smoke is a serious problem and that indoor worksites should be smoke free.
- Adult smokers who had confirmed awareness of an ITPC TV ad were twice as likely to try to quit smoking in the past year.
- The website, www.WhiteLies.tv educates Hoosiers on negative health consequences of tobacco use and the burden on Hoosiers and has received over 4 million successful hits.
- ITPC continued support of the youth-led movement, VOICE, through local events. The youth-focused website, www.voice.tv, has had over 1.4 million hits.
- ITPC partnered with many events throughout Indiana, including the 2nd annual tobacco-free day at the Indiana State Fair, Indiana Black Expo's Summer Celebration, Circle City Classic, Fiesta Indianapolis, La Grand Fiesta, county fairs and other community events.
- Since May 2002 Indiana news media have generated nearly 4,800 articles to tobacco control stories, specifically about the local coalition activities and issues surrounding smoke free air policy.

ENFORCEMENT OF INDIANA'S YOUTH ACCESS TO TOBACCO LAWS:

- The ITPC partnership with the Alcohol and Tobacco Commission (ATC) has reduced the non-compliance rate of tobacco retail sales to minors from 29% in October 2001 to 13% in SFY 2004.
- The percentage of current high school smokers refused purchase of cigarettes due to age increased to nearly 40% in 2002, up from approximately 30% in 2000.

EVALUATION:

- ITPC's evaluation and research coordinating center continues to analyze data and produce fact sheets to share tobacco use behavior, attitude and belief trends in Indiana.
- ITPC conducted the 4th media tracking survey, and prepares for the 2nd adult tobacco survey, and 3rd youth tobacco survey.

ADMINISTRATION AND MANAGEMENT:

- ITPC partnered with the State Personnel Department to promote quitting smoking to all state employees through personnel communication, working through health plans, promoting resources, and regular contact with all agency human resources directors.
- ITPC continues to work with the State Board of Accounts to have field auditors around the state visit the ITPC partners and perform monitoring engagements. The engagements, similar to a mini-audit of grant funds, also serves as an opportunity to educate grantees on administering funding in a not-for-profit environment.

Indiana has a long way to go to reverse the damage brought on by decades to tobacco use and tobacco advertising and promotion. ITPC has made great strides in the past three years and is beginning to realize its efforts. We must not let up but continue to educate Hoosiers and raise awareness of tobacco prevention and control issues.

OBJECTIVE	CURRENT MEASURE AND IDENTIFIED DATA SOURCE(S)
Decrease the overall cigarette smoking rate in Indiana from 27% to 22%.	Indiana's adult cigarette smoking rate of 26% for 2003 has remained unchanged since 2000. Indiana's adult smoking rate is higher than the national smoking rate of 23%. Adult smoking prevalence is measured through the Behavior Risk Factor Surveillance Survey (BRFSS).¹ ITPC uses the BRFSS data as a primary prevalence measure, however the Indiana Adult Tobacco Survey (ATS) provides another valuable source of Indiana adult smoking rates. The 2002 ATS reported Indiana's adult smoking rate at 27%. The next Indiana ATS wil be conducted in the Fall of 2004.
Decrease the current cigarette smoking rates among 9th to 12th grade students in Indiana.	The cigarette smoking rate of 9th to 12th grade students in Indiana was 23.4% in 2002. This is a 26% decline from 2000 where the rate was 31.6%. Nationally, cigarette smoking among grades 9th to 12th is 22.9% ² . The Indiana Youth Tobacco Survey (YTS) is the source for statewide data on youth smoking.
Decrease the cigarette smoking rates among 6th to 8th grade students in Indiana.	The cigarette smoking rate of 6th to 8th grade students was 8.6% in 2002, a decline of 12% from 2000 when the rate was 9.8%. Nationally, the current smoking rate for grades 6th to 8th is 10.1%². The Indiana YTS is the source for statewide data on youth smoking³.
Decrease the percent of babies born to mothers who smoked during pregnancy in Indiana from 21% to 15%.	In 2002, 19% of Indiana's women smoked during pregnancy. The rate was 21% in 1999 and while the decline is not statistically significant it does suggest the beginning of a downward trend. This Indiana specific rate compares to the national average of 12% ⁴ . These data are available from the Indiana Birth Certificate Data, Indiana Natality Report ⁵ .
Increase the number of individuals who	This objective will be measured in three ways:
have access to a smoking cessation benefit through their health insurance coverage.	1. Percent of insurance companies offering smoking cessation.
	ITPC has partnered with the Indiana State Medical Association (ISMA) through the Statewide Community Programs to begin working with major insurance car riers in Indiana. Little data is available and current coverage of smoking cessa tion varies greatly among insurance plans.
	2. Percent of employers that offer smoking cessation benefits.
	At this time no statewide data are available on smoking cessation benefits offered by employers. However, of Indiana's large employers approximately one-third provide cessation through their worksite (34%) and even fewer offer benefits through employer-provided health plans (20%). Local coalitions are working with employers within their communities to address the needs of the workers, provide guidance for smoke free policy and services to help employees quit smoking.
	In November 2003, ITPC partnered with the State Personnel Department to increase smoking cessation opportunities for state employees. This partner ship expanded to include M-Plan in June 2004. M-Plan has provided all state employees access to an online smoking cessation program, Breathe®. ITPC hopes this partnership serves as a model for other health insurance providers and employers.

OBJECTIVE	CURR	ENT MEASUR	RE AND ID	ENTIFIED	DATA SOL	IRCE(S)		
	3. Perc	ent of members	that have si	moking cessa	ation benefits	S.		
Increase the number of individuals who have access to a smoking cessation benefit through their health insurance coverage.	In 2002, only 14.5% of Indiana smokers were aware that their insurance plan covers cessation services. One out of four Indiana adult smokers (25.4%) indicate that their coverage does not pay for cessation services. A striking 40.7% of Indiana adult smokers are not aware whether or not their health insurance covers cessation assistance. Data from the 2002 Indiana ATS.							
Increase the number of smokers who receive smoking cessation advice and support when they visit their primary care providers.	In 2002, 68% of adult smokers who reported visiting a physician receiving advice to quit smoking within the past 12 months, according to the Indiana ATS. In 2001, 69% of adult smokers seeing a physician in the past 12 months report being advised to quit smoking, according to the Indiana BRFSS.							
	In the year 2002, 25.9% of youth smokers reported having visited a physician and receiving information about the dangers of smoking from the doctor or staff. This is a slight decline from 2000, when 27.6% of youth smokers reported visiting a physician and receiving information about the dangers of smoking from the doctor or staff. Data from the 2000 and 2002 Indiana YTS.							
Increase the percentage of retail merchants who are in compliance with youth access laws.	In SFY 2004 the average noncompliance rate among retailers inspected was 13%. This compares to SFY 2003, the noncompliance rate was 15% and 29% in the partnership began in October 2001. The Indiana Alcohol and Tobacco Commission (ATC) conducts the Tobacco Retailer Inspection Program (TRIP). TRIP is the source of data for monitoring routine compliance checks throughout Indiana ⁸ .							
Decrease the percentage of children exposed to secondhand smoke in their homes.		rcentage of yout ne who is smoki			ne same roor	n or car with		
		No exposure	1-2 days	3-4 days	5-6 days	7 days		
	2002	27.8%	23.0%	11.4%	7.5%	30.3%		
	2000	27.0%	23.2%	12.1	5.9%	31.8%		
	According to these measures, exposure to cigarette smoke among you not changed from 2000. Thirty percent (30%) of youth, grades 6-12, are exposed to secondhand smoke daily. These data are from the 2000 are Indiana YTS.							
Increase the percentage of schools with policies prohibiting tobacco products on		•		_		ool campus within 000.		
the past 30 days. This is a slight increase from the 93.2% in 200 leir premises. In 2002, 65.9% of youth smokers indicated that they had not sm pus within the past 30 days. This is a slight decline from 2000, w indicated that they had not smoked on campus within the past 30 data are from the Indiana YTS°.								

OBJECTIVE	CURRENT MEASURE AND IDENTIFIED DATA SOURCE(S)
Increase the percentage of schools with policies prohibiting tobacco products on their premises. (continued)	In 2003, ITPC began tracking schools with tobacco free campuses. Progress is being made with schools throughout Indiana as 27 counties have all tobacco free school districts, with another 29 counties that have a portion of their school districts with tobacco free campuses. However, the remaining 36 counties do not have a tobacco free campus at any of the school districts in their counties. Only 47% of our youth are protected from secondhand smoke in public schools.
Increase the percentage of colleges and universities that have a policy requiring smoke-free dormitories and buildings.	Smokefree Indiana funded 12 colleges and universities throughout Indiana to develop tobacco control coalitions on campuses. Of these 12 institutions, 8 have smoke free residence halls, 7 have smoke free entranceways, 7 do not allow tobacco sales on campus, and 7 have smoke free sporting and intramural events. All funded universities will continue to work on campus policy changes from the momentum already generated ¹⁰ .
Increase the percentage of day care centers with policies prohibiting tobacco products on their premises.	ITPC continues to develop this objective and data sources are being identified ¹¹ . While licensed day care centers currently have smoking restrictions, ITPC seeks to have these restrictions extended to the grounds of the day care centers. In addition, ITPC encourages any unlicensed day care providers to prohibit smoking in all areas.
Increase the percentage of individuals who work in a smoke-free environment.	In 2002, 71% of adults' indoor work policy prohibits smoking in all work areas. Data is from the 2002 ATS.
Increase the percentage of restaurants that are totally smoke-free.	ITPC community-based partners are collecting these data and will they continue to be monitored through the community program tracking system. A list of smoke free restaurants can be found at an online dining guide at www.WhiteLies.tv
Monitor the percent of hospitalization admissions attributable to smoking or tobacco use-related illnesses.	ITPC continues to develop this objective and data sources are being identified.
Monitor tobacco-related deaths.	ITPC continues to develop this objective and data sources are being identified. It is estimated that in Indiana 10,300 persons die each year from tobaccorelated illnesses ¹² .
Monitor tobacco consumption.	In SFY 2004, 605 million cigarette tax stamps were sold. A decline of 18.5% from SFY 2002, when 742 million cigarette tax stamps were sold. This is also a slight decrease since SFY 2003, when 615 million stamps were sold. Indiana Department of Revenue (DOR) collects data on tax revenue from cigarettes and other tobacco products sold.
	Youth Knowledge of Tobacco Health Risks:
Measure knowledge and attitudes related to tobacco.	"Do you think young people risk harming themselves if they smoke from 1 to 5 cigarettes per day?"
	• In the year 2000, the percent of 6th to 8th graders who thought that young people definitely risk harming themselves if they smoke from 1 to 5 cigarettes per day was 65.7%. The percent of 6th to 8th graders who thought there was definite risk in 2002 increased to 67.4%.

INDIANA'S PROGRESS TOWARD 2005 TOBACCO

PREVENTION AND CESSATION OBJECTIVES **OBJECTIVE CURRENT MEASURE AND IDENTIFIED DATA SOURCE(S)**

2002. "Do you think it is safe to smoke for only a year or two, as long as you quit

 Among 9th to 12th graders, the percent of youth who thought that young people definitely risk harming themselves if they smoke from 1 to 5 cigarettes per day was 49.1% in the year 2000. This percentage increased to 57.2% in

- Among 6th to 8th graders in the year 2000, 73.1% believed that it is definitely not safe to smoke for a year or two, as long as you quit. This remained con stant in 2002, with 71.1% of 6th to 8th graders indicating that they thought it is definitely not safe.
- Among 9th to 12th graders, the percent of youth who believed that it is definitely not safe to smoke for a year or two, as long as you guit was 68.7%. This remained constant in 2002, with 69.2% of 9th to 12th graders indicating that they believe it is definitely not safe.
- The number of 6th to 8th graders and 9th to 12th graders who believe that people can definitely get addicted to using tobacco just like they can get addicted to using cocaine or heroin remained constant from 2000 to 2002.

Measure knowledge and attitudes related to tobacco. (continued)

Susceptibility to Smoking:

after that?"

- Among 6th to 8th graders, the percent of nonsmoking youth who were not susceptible to smoking was 67.8% in the year 2000. This dropped to 62.3% in 2002.
- Among 9th to 12th graders, the percent of nonsmoking youth who were not susceptible to smoking was 63% in the year 2000. This percentage increased slightly to 64.5% in 2002.

Social Acceptability:

- "Do young people who smoke cigarettes definitely do not have more friends":
- In 2002, the percentage of 6th to 8th graders who thought that young people definitely do not have more friends increased to 38.2%, compared to 35.8% in 2000.
- 30% of 9th to 12th graders in 2002 thought young people who smoked cigarettes definitely do not have more friends, an increase from 2000 (27.6%) of 9th to 12th graders.

"Smoking cigarettes definitely does not make young people look cool or fit in":

- In 2002, the percentage of 6th to 8th graders thought that smoking cigarettes definitely does not make young people look cool or fit in decreased to 73% compared to 76.4% in 2002.
- Among 9th to 12th graders in 2002, 68% thought that smoking definitely does not make young people look cool or fit in, this was an increase from 63.2% in 2000.

OBJECTIVE	CURRENT MEASURE AND IDENTIFIED DATA SOURCE(S)
	Attitudes toward Tobacco Companies:
	Middle school youth:
	• In 2002, 83.1% of 6th to 8th graders did not buy items with tobacco company names/logos on them (79.2% in 2000); 51.2% would definitely not wear clothing w/ tobacco name/logo on it
	• 52% think tobacco companies have definitely misled young people.
Measure knowledge and attitudes related to tobacco. (continued)	• 35.9% think that tobacco companies should definitely not have the same rights as other companies.
	High school youth:
	 Among 9th to 12th graders in 2002, 81.2% did not buy items with tobacco company names/logos (76.6% in 2000); 37.4% would definitely not wear clothing w/ tobacco name/logo on it (32.3% in 2000)
	• 47.5% think tobacco companies have definitely misled young people.
	 27.2% think that tobacco companies should definitely not have the same rights as other companies.
	Knowledge and Attitude measures reported by the 2002 YTS with comparisons to 2000 YTS.
	Adult Knowledge of Consequences of Secondhand smoke:
	• 53.3% of adults are aware of the dangers of secondhand smoke, indicating that it is very harmful.
	Support for Smoke Free Air Policy:
	• 73.4% of adults who work indoors support smoking bans in all workplace areas.
	 48% of Indiana adults support smoking bans in restaurants; 57.8% support smoking bans in shopping malls; 20.1% support smoking bans in bars.
	Attitudes toward Tobacco Companies:
	 71.2% of adults say that tobacco companies should not be allowed to include coupons for promotional items in packages of cigarettes.
	 34.5% of adults think that tobacco companies should definitely not be allowed to sponsor sporting and other public events.
	• 80.2% of adults report not owning any tobacco promotional items.
	Knowledge and attitude measures reported through the 2002 Indiana ATS.
Reduce health care expenditures.	ITPC continues to develop this objective. In Indiana, the smoking attributable direct medical cost is \$1.6 billion annually ¹³ .
Monitor the number and type of tobacco-related ordinances.	ITPC community-based partners continue to work to protect Hoosiers from secondhand smoke through policy initiatives at various levels in their communities.

TOBACCO USE BURDEN ON INDIANA

Tobacco use is the single most preventable cause of death and disease in the United States. Smoking alone is responsible for more than 440,000 premature deaths in the United States annually, killing more people than alcohol, AIDS, car accidents, illegal drugs, murders and suicides, combined¹⁴. Close to 10,300 of these deaths happen to Hoosiers¹⁵. These include deaths from lung and other cancers, cardiovascular diseases, infant deaths attributed to maternal smoking, and bum deaths. These premature deaths also include deaths from lung cancer and heart disease attributable to exposure to secondhand smoke.

In addition to the enormous personal, social, and emotional toll of tobacco-related diseases, tobacco use has significant economic impact. Tobacco costs the United States an estimated \$75 billion annually in medical expenses and \$82 billion in lost productivity¹⁶. In 1998, smoking-attributable direct medical expenditures totaled \$1.6 billion in Indiana. This calculates to \$275 per Hoosier in direct medical expenses related to smoking regardless of whether they smoke or not. Indiana spends \$5.73 in smoking related medical and productivity costs to the State for every pack of cigarettes sold¹⁷. A report prepared for the Indiana Hospital & Health Association by Pricewaterhouse Coopers states that Indiana's increase in health insurance premiums can be attributed volume, increased labor costs, and other costs to the hospital. Nearly half of this increase is due to volume, which is driven by an aging population and unhealthy lifestyles, such as smoking¹⁸. These increases in insurance premiums are not directly associated with increases in total spending on services, but are a result of unhealthy behaviors.

Table 1: Highest States by Adult Smoking Prevalence, 2002

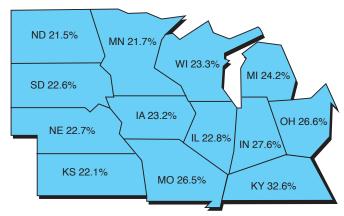
	HIGH 5 STATES	S
Rank	State	Smoking Rates
1	Kentucky	32.6%
2	Oklahoma	29.3%
3	West Virginia	28.4%
4	Ohio	27.7%
5	Indiana	27.6%

In 2002, Indiana's smoking rate was 27%¹⁹. The states with the highest adult smoking rates are listed here. States' smoking ranges from 13% in Utah to 33% in Kentucky.

ADULT SMOKING

In 2003, more than 1.2 million adults in Indiana smoked cigarettes. This makes up 26% of the State's adult population. Indiana is consistently in the list of states with the highest smoking rates and consistently higher than the United States average, where the adult smoking rate is 23%.

Figure 1: Surrounding States Adult Smoking Prevalence, 2002



With the exception of Kentucky and Ohio, Indiana has higher adult smoking rates than its border states and the Midwest region. These data are for 2002. Other state data for 2003 not known at publication.

Indiana measures its adult smoking prevalence through two statewide surveys: 1) Indiana Behavior Risk Factor Surveillance Survey (BRFSS) which data is collected annually and 2) the Indiana Adult Tobacco Survey (ATS) which data is collected every two years. Some differences are seen in comparing smoking rates by gender, race/ethnicity and age. Adult smoking rates for men (28.6%) remain slightly higher than those for women (23.8%). Hoosier smoking rates by gender are 11-14% higher than the national averages as illustrated in Chart 1: Adult Smoking Prevalence, Indiana vs. U.S.

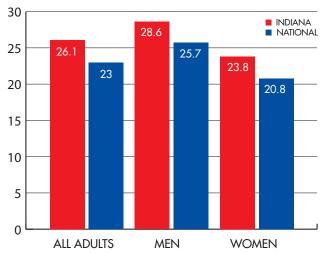


Chart 1: Adult Smoking Prevalence by Gender, Indiana vs. U.S.

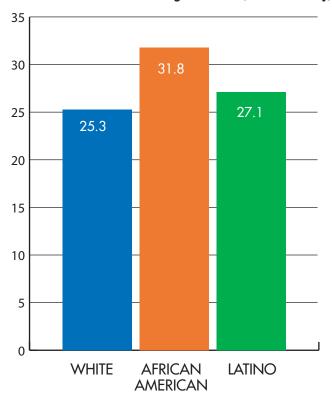
Smoking by Hoosier men and women is higher than U.S. men and women. Data shown is 2003 for Indiana and 2002 for National.

Smoking rates in Indiana are varied among race/ethnic and age groups. As illustrated in Chart 2: Indiana Adult Smoking Prevalence, Race/Ethnicity, 2003, White Hoosiers (25.3%) have a smoking rate similar to the State with 1 million smokers. Similar to Whites, the smoking rate among Latinos is 27.1%, with 43,000 smokers. However, African Americans adult smoking rate is higher among Hoosiers than other race/ethnic groups at 31.8% with 122,000 smokers. However, these slight percent differences among race/ethnic groups are not statistically significant from one another.

Also illustrated in Chart 3: Indiana Adult Smoking Prevalence by Age Group, 2003, approximately one-third of adults age 44 and younger report current smoking, with the 18-24, 25-34 and 35-44 age groups reporting higher smoking rates than older adults.

Smoking by Hoosier adults also varies by level of education. Nearly 38% of adults with less than a high school education currently smoke. As shown in Chart 4: Indiana Adult Smoking, Education Level, 2003, as level of education increases, smoking rates among groups decrease.

Chart 2: Indiana Adult Smoking Prevalence, Race/Ethnicity, 2003



The smoking rate for African American adults appears to be slightly higher than Whites, Latinos, and the State rate. However, no statistical differences were found among raceethnic groups.

Hello- I have been smoke-free for 5 days this time. I did quit once for one and half years. I started smoking again when my husband was ill with colon cancer. He was only 34 and I was 30. I know that sounds stupid to smoke when you are dealing with cancer. There is really no excuse. It does not help though when you have a lot of smokers around you (family and friends) After several attempts to quit, I am totally ready now. This time it is for me. The "White Lies" commercials really help KEEP IT REAL!

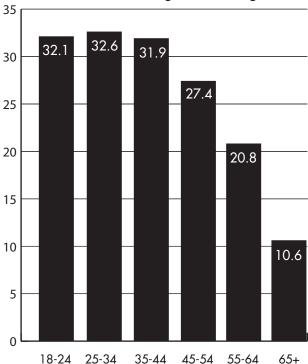
Lynn Morgan County

Youth smoking among high school students decreased 26% from 2000 to 2002; meeting ITPC's 2005 objective.

I am 15 years old and i started smoking when i was 13. I used to smoke about a pack every two days. I am a minor so I had to make them last. And now after almost 2 1/2 years, I have decided to quit smoking. One day I was smoking with some of my friends, and looked at what was in my hand. I was disgusted. Even though I was disgusted i was hooked and I HATED it. Though it was Really hard and since then i have only smoked about 15 cigarettes And that was about three weeks ago. I am going to totally quit by May 2004. No matter what!!!

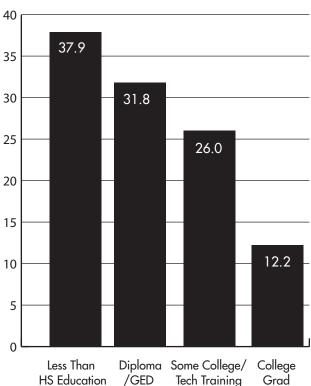
Jem Hamilton County

Chart 3: Indiana Adult Smoking Prevalence, Age, 2003



The highest smoking rates are found in the 18-24, 25-34, and 35-44 age groups with smoking rates declining as age increases. Nearly one-third of Hoosier adults age 44 and below are current smokers.

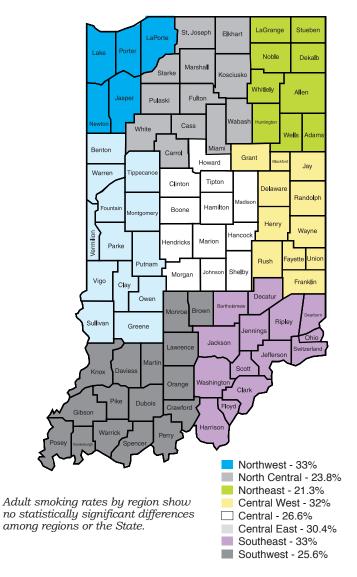
Chart 4: Indiana Adult Smoking, Education Level, 2003



Among those adults without a high school diploma 38% smoke. Smoking rates decline as education increases with 12% of college graduates are current smokers.

In 2002, Indiana collected adult smoking prevalence estimates for geographic areas smaller than the state through the Indiana Adult Tobacco Survey (IATS). Smoking rates by region range from 21% in Northeast Indiana to 33% in Northwest and Southeast Indiana regions, however there are no statistical differences among these rates.

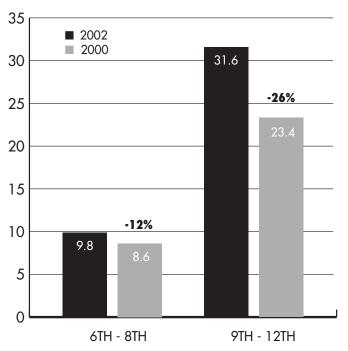
Figure 2:
Map of Indiana Adult Smoking Prevalence by Region, 2002



YOUTH SMOKING

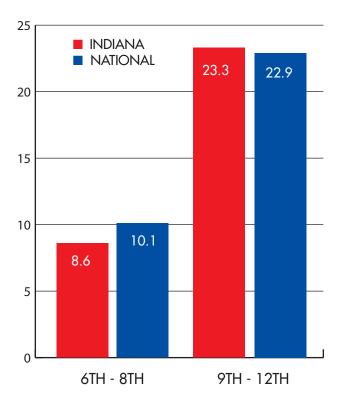
Approximately 23% of Indiana high school (9th to 12th grades) and 9% of middle school (6th to 8th grades) students report current cigarette use. This is a 26% decline among Indiana high school students since 2000. A slight decline of 12% was also seen among middle school students. Indiana's youth smoking rates are similar to the national averages for the first time²⁰.

Chart 5: Indiana Youth Cigarette Smoking, 2000-2002



For high school students the smoking rates dropped by 26% between 2000 and 2002. Middle school smoking rates declined slightly.

Chart 6: Current Smoking by Youth, Indiana vs. U.S., 2002

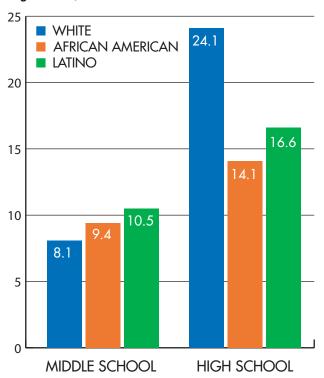


Indiana's smoking rates are similar to the national averages.

Data from the 2002 Indiana Youth Tobacco Survey (YTS) serves as a benchmark to the progress Indiana is making towards its objectives and is a valuable data source, however caution must be used when interpreting these data. The decrease in prevalence in high school and middle school youth is statistically valid and significant, however due to the sampling differences and response rate these findings need further validation²¹. ITPC will be conducting the YTS again in the Fall 2004 to further evaluate youth smoking.

Smoking rates for middle school girls is higher than that for boys. However, smoking rates for high school girls and boys are similar to the state rate. There are no significant differences in middle school smoking among race/ethnic groups as shown in Chart 7: Indiana Youth Smoking by Race/Ethnicity, Middle and High School, 2002. There appear to be some differences between White and African American high school youth. The rate for White students is similar to the state average, while African Americans and Latinos are lower, making White high school students the most at risk population.

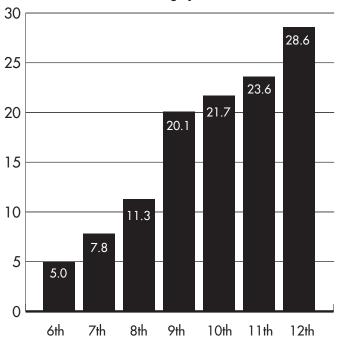
Chart 7: Indiana Youth Smoking by Race Ethnicity, Middle and High School, 2002



Smoking rates among middle school youth do not vary by race. The proportion of White high school youth smoking is higher than African Americans and Latinos.

Smoking rates increase as a youth ages. As shown in Chart 8: Indiana Youth Smoking by Grade, 2002, approximately 5% of 6th grade students are current smokers increasing to 11% by the time students are 8th graders, and then a jump to 20% of 9th grade students smoking then increasing to 28% when they are 12th graders.

Chart 8: Indiana Youth Smoking by Grade, 2002



Smoking increases as youth age with rates ranging from 5% in 6th graders to 28% in 12th graders.

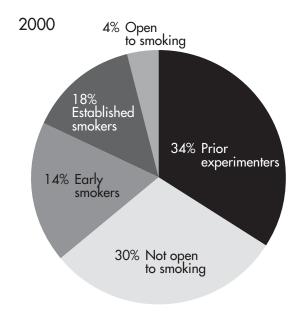
Susceptibility to Tobacco

Analyses of data on smoking uptake and cessation indicators suggest that Indiana youth are responding to local and state tobacco control programs that are funded through ITPC efforts. The percent of high school students who reported being "not open to smoking" increased significantly from 30% in 2000 to 36% in 2002. By the definition of "not open to smoking", these results indicate that more Indiana high school students would not consider smoking in the future or when offered a cigarette by a friend, thus suggesting stronger anti-smoking attitudes that prevent smoking initiation.

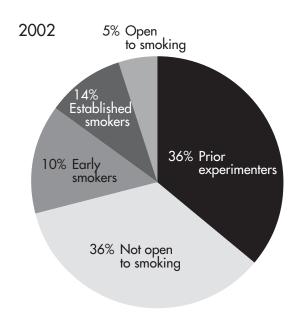
YTS data also show that significantly more high school smokers have tried to quit in 2002 (62.1%) than in 2000 (53.4%). Regardless of whether quit attempts were successful, data suggests that current smokers are receptive to anti-smoking messages and are translating them into action.

For more information on Indiana youth smoking see the 2002 Indiana YTS report at www.in.gov/itpc/research.asp

Charts 9 and 10: Smoking Uptake, High School Students, 2000 and 2002



Percentage of high school students who reported being "not open to smoking" increased significantly from 30% in 2000 to 36% in 2002.





TOBACCO'S IMPACT ON MINORITY POPULATIONS

African Americans

Each year, approximately 45,000 African Americans die from a preventable smoking-related disease²². If current trends continue, an estimated 1.6 million African Americans who are now under the age of 18 years will become regular smokers. About 500,000 of those smokers will die of a smoking-related disease ²³. The smoking rate for Hoosier African American smokers is higher than other African Americans in the United States of 24% (2002). Indiana's smoking rate for African Americans is 32% but does not differ statistically from the smoking rate for other race/ethnic groups.

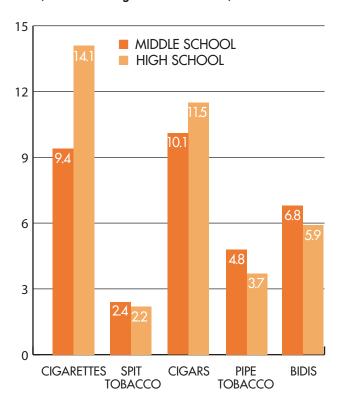
Other racial/ethnic differences show that approximately three of every four African American smokers prefer menthol cigarettes. Menthol may facilitate absorption of harmful cigarette smoke constituents²⁴. Seventy percent (70%) of African American smokers in Indiana smoke menthol cigarettes²⁵. Research also shows that youth and African Americans like flavored cigarettes. In Indiana, 44% of all youth smokers smoke menthols, while 62% of all youth African American smokers smoke menthols²⁶. Brown & Williamson Tobacco Company (B&W), through the Kool cigarette promotion, has recently introduced a series of flavored cigarettes in special packs, marketed under the name "Smooth Fusions." The flavors include "Midnight Berry", "Caribbean Chill", "Mintrigue", and "Mocha Taboo." This use of these flavors is further evidence the com-

pany is targeting youth, especially black youth. R.J. Reynolds Tobacco Company, through its Camel brand has promoted similar flavors.

Kool is a key brand for Brown & Williamson that seeks African American customers, since menthol cigarettes have historically been popular among African Americans. The recent B&W promotion uses a hip-hop theme to promote Kool cigarettes, includes special packs called Kool Mixx packs. These packs feature images of juvenile-oriented disc jockeys, hip-hop artists and dancers that display a "mural" as the two packs are placed next to each other. These special packs sell for the same price as other Kool products. Thirty states, including Indiana, signed onto a letter from New York's Attorney General outlining intentions to file a lawsuit because of these marketing practices and the potential violation of the MSA. B&W soon scaled back the promotion.

The tobacco industry attempts to maintain a positive image and public support among African Americans by supporting cultural events and making contributions to minority higher education institutions, elected officials, civic and community organizations, and scholarship programs. A one-year study found that three major African American publications — Ebony, Jet, and Essence — received proportionately higher profits from cigarette advertisements than did other magazines²⁷.

Chart 11: Current Tobacco Use by Indiana African American Youth, Middle and High School Students, 2002



Cigarettes and cigars are the preferred form of tobacco use among African American youth. The proportion of youth using these products increases with school grade.

African American Youth

Approximately 9% of African American middle school students report current cigarette use. In Chart 11: Current tobacco use by Indiana African American Youth, Middle and High School, 2002, we see that middle school youth use cigars more than cigarettes, followed by bidis.

Use of spit tobacco products is similar among all middle school youth, while cigar use is significantly higher among African Americans and Latinos compared to Whites. A greater proportion of African American and Latinos use pipe tobacco than Whites. A higher percentage of African Americans and Latinos use bidis than White middle school youth.

As youth age into high school, cigarette and cigar use among African American youth increase with cigarette use (14.1%) surpassing cigar use (11.5%). There is also a decrease in bidis use among high school students, indicating that this is a product appealing to younger populations.

Fewer African American high school youth (14%) smoke compared to the State's overall rate for high school students (23%). In comparing African Americans to other race/ethnic groups, a smaller proportion of African American high school youth use spit tobacco compared to Whites and Latinos. Cigar use is similar in all groups while bidis are used among African American high school students more than among Whites and Latinos.

Health Effects of Tobacco for African Americans

African Americans have a higher lung cancer incidence and mortality rates compared to Whites. Rates for new cases of lung cancer were 16% higher for African Americans compared to Whites. In Indiana, African American men have a higher mortality rate of lung and bronchus cancer (117.7 per 100,000) than do White men (92.2 per 100,000). African American women (52.5 per 100,000) also have higher rates of death due to lung cancer than do White women (45.1 per 100,000)²⁸. A recent study found that African American men have the highest cancer burden in the U.S. and this excessive cancer burden is linked to smoking. Further, the study found that cancer death rates among African American males would decline by two-thirds if they did not smoke²⁹.

Smoking significantly elevates the risk of stroke. Stroke is associated with cerebrovascular disease, a major cause of death in the United States. Cerebrovascular disease is twice as high among African American men (53.1 per 100,000) as among White men (26.3 per 100,000) and twice as high among African American women (40.6 per 100,000) as among White women (22.6 per 100,000) in the U.S.

Stroke and hypertension contribute to cardiovascular disease deaths, which are the leading causes of deaths in the U.S., including of African Americans. More people die of cardiovascular diseases attributed to smoking than cancer³¹. Twenty one percent (21%) of all coronary heart disease deaths in the U.S. are due to smoking³².

Latinos

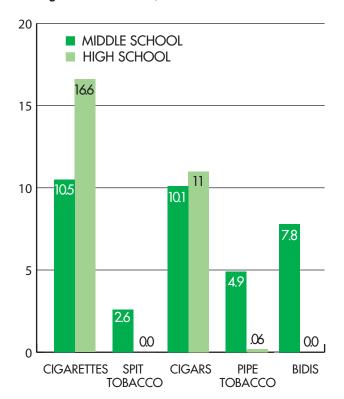
The smoking rates for Latinos in Indiana is similar to Latinos in the U.S. overall (21.2% vs. 21.9%). The smoking rate for Latinos in Indiana does not differ statistically from the smoking rate for other groups.

Tobacco products are advertised and promoted disproportionately to racial/ethnic minority communities. These include target promotions were marketed to the Hispanic American community to increase the tobacco industry's credibility in the community. Tobacco companies have contributed to programs that enhance the primary and secondary education of children, universities and colleges, and have supported scholarship programs targeting Hispanics. Tobacco companies have also placed advertising in many Hispanic publications and contribute to cultural Hispanic events³³.

Latino Youth

Approximately 10% of Latino middle school students currently smoke cigarettes, a similar rate for cigars. Spit tobacco use is similar in all race/ethnic groups, but bidis use among Latino middle school youth is twice that of all youth. The proportion of Latinos and African Americans using pipe tobacco use is greater than that for White youth.

Chart 12: Current Tobacco Use by Indiana Latino Youth, Middle and High School Students, 2002



Cigarettes and cigars are the preferred form of tobacco among Latino middle and high school youth. Middle school Latinos also have a high proportion of bidis use. As Latino middle school youth progress into high school, the proportion using cigarettes and cigars increases, while spit and pipe tobacco use rates decline. The proportion of Latino youth that use bidis drops from 8% in middle school to 0% among high school youth.

Approximately 16% of Latino high school youth currently smoke cigarettes, while the second most used form of tobacco is cigars with 11% of Latino high school students using these products while there is no reported use of smokeless tobacco. Latino high school students have a slightly higher use for pipes compared to other youth.

Health Effects of Tobacco for Latinos

As with the U.S. overall, cancer, heart disease and stroke are the leading causes of death among Latinos. Of cancers, lung cancer is the leading cause of cancer deaths among Latinos.³⁴ Lung cancer deaths are about three times higher for Latino men (23.1 per 100,000) than for Latino women (7.7 per 100,000)³⁵ in the U.S.

Coronary heart disease is the leading cause of death for Hispanics living in the United States. Death rates for coronary heart disease were 82 per 100,000 for Mexican American men and 44.2 per 100,000 for Mexican American women, 118.6 per 100,000 for Puerto Rican men and 67.3 per 100,000 for Puerto Rican women, and 95.2 per 100,000 for Cuban men and 42.4 per 100,000 for Cuban women living in the U.S ³⁶.

PREGNANT WOMEN

Smoking can impact the lives of even the youngest Hoosiers. Approximately 19% of women in Indiana smoked during pregnancy in 2002, a slight decline from 21% in 1999³⁷. Smoking during pregnancy is associated with poor health outcomes, such as low birth weight, premature birth, growth retardation, and Sudden Infant Death Syndrome (SIDS).

- Twenty to thirty percent (20-30%) of the cases of low birth weight babies can be attributable to smoking³⁸.
- Women who smoke during pregnancy had more than twice the risk of delivering a low birth weight baby³⁹.
- Babies with mothers who smoked during pregnancy have twice the risk of SIDS and infants of nonsmoking mothers⁴⁰.
- Women who smoke have a higher incidence of ectopic pregnancy.
- Pregnant smokers also have a 30-50% higher risk for miscarriage than nonsmokers.

Pregnant smokers ready to quit should know that it's never too late to quit smoking during your pregnancy. Many pregnant women are tempted to cut down the number of cigarettes they smoke instead of quitting. Cutting down to less than 5 cigarettes a day can reduce risk, but quitting is the best thing pregnant women can do for themselves and their baby. The bene-

Adult smokers who had confirmed awareness of an ITPC TV ad were twice as likely to try to quit smoking in the past year.

Today, January 9th 2004 is day five without a cancer stick. I, like many others, have tried to quit many times in the past 20-25 years that I've smoked. Like some of these wonderful and helpful testimonial letters, each time I bought a pack I felt quilty and most times when I finished a cigarette, I felt physically bad. I fooled myself into thinking cigarettes helped calm me down in times of stress, although physiologically just the opposite happens, our heart beats faster when we smoke. I'm 38 now and have 2 great kids and a third on the way. I have to stop thinking that I can have just one cigarette and it will be OK. I'm also avoiding certain people who smoke. For years, I've visualized my children standing by the hospital bed while I die from cancer. Now I'm trying to alter the course of the future by visualizing myself having a game of tag with them. Thanks for the persuasive ads on TV. Keep them coming. Also thanks for this site. These testimonials are very helpful. Maybe soon I'll be off the high blood pressure medicine and breathing deep once again. I really hope that the evil cigarettes are out of my life for good this time. Thanks for this opportunity.

John L Lake County fits of quitting smoking can be seen immediately. After just one day of not smoking, the baby will get more oxygen. While women experience withdrawal symptoms, these are often signs that the body is healing. They are normal, temporary, and will lessen in a couple of weeks. Pregnant women will have more energy and will breathe easier when they quit.

The rate of Indiana mothers who reported smoking during pregnancy is more than one and a half times the national average. Even more alarming are rates in Indiana counties that exceed state and national rates. Sixty-eight (68) of Indiana's 92 counties have a smoking during pregnancy rate higher than the Indiana average. All but three Indiana counties have a smoking during pregnancy rates higher than the United States average. The county rates for women smoking during pregnancy range from 37% to 7%. This table lists Indiana's counties along with the percentage of mothers who reported smoking during pregnancy.

Women and Smoking

In the fall 2003, the National Women's Law Center and the Oregon Health & Science University released Women and Smoking: A National and State-by-State Report Card. The report shows that most states are falling far short of what is needed to reduce the number of women and girls in this country who smoke. Indiana, along with 38 other states, received a failing grade. Smoking is the leading cause of preventable death among women, yet the report gives most states a failing grade in implementing proven tobacco prevention and cessation measures that can reduce smoking and save lives. States were graded based on status indicators such as smoking rates, cessation attempts, and exposure to secondhand smoke; and policy indicators such as support for cessation coverage by a quitline or health plan, restrictions of smoking in public places, tobacco taxes, funding for tobacco prevention programs, and youth access laws. Indiana ranked 46 out of all 50 states and the District of Columbia in the report. Over 4,100 women die each year (in Indiana) from tobacco.

ITPC, with the Office of Women's Health (OWH), responded to the report by hosting a briefing featuring one the report's authors, Judith G. Waxman, policy analyst for the National Women's Law Center. In October 2003, ITPC and OWH brought together approximately 75 women in government, community, and business leaders to garner their support to work together to educate the public and change policy. In addition, a resolution urging women's and other organizations to get involved in the fight against tobacco burden on Hoosier women was initiated.

Table 5: Percent of Mothers Who Reported Smoking During Pregnancy, Indiana Counties, 2002

COUNTY	%	COUNTY	%	COUNTY	%
Adams	11.1	Henry	23.1	Porter	17.0
Allen	13.8	Howard	22.9	Posey	22.7
Bartholomev	v 20.2	Huntington	24.2	Pulaski	35.8
Benton	13.9	Jackson	23.5	Putnam	27.1
Blackford	29.9	Jasper	20.7	Randolph	27.5
Boone	13.8	Jay	19.5	Ripley	22.2
Brown	23.4	Jefferson	28.9	Rush	24.8
Carroll	17.8	Jennings	28.0	St. Joseph	15.0
Cass	20.7	Johnson	17.8	Scott	36.8
Clark	22.0	Knox	32.1	Shelby	29.3
Clay	28.4	Kosciusko	19.7	Spencer	19.8
Crawford	33.1	LaGrange	9.6	Starke	30.5
Daviess	16.2	Lake	15.4	Steuben	22.8
Dearborn	22.6	LaPorte	24.2	Sullivan	26.4
Decatur	25.9	Lawrence	25.2	Switzerland	28.4
DeKalb	24.0	Madison	27.3	Tippecanoe	13.8
Delaware	24.3	Marion	18.2	Tipton	15.5
Dubois	14.2	Marshall	17.8	Union	24.7
Elkhart	17.2	Martin	27.6	Vanderburgh	22.8
Fayette	29.4	Miami	22.2	Vermillion	26.3
Floyd	20.9	Monroe	15.5	Vigo	27.0
Fountain	25.6	Montgomery	28.3	Wabash	26.1
Franklin	24.0	Morgan	24.2	Warren	20.8
Fulton	30.3	Newton	26.9	Warrick	16.1
Gibson	24.0	Noble	20.3	Washington	26.7
Grant	27.6	Ohio	23.0	Wayne	26.2
Greene	25.2	Orange	26.5	Wells	17.4
Hamilton	6.7	Owen	23.6	White	18.6
Hancock	15.9	Parke	29.8	Whitley	22.4
Hendricks	12.6	Perry	28.4		
Harrison	23.6	Pike	22.7		

TABLE 5: The proportion of pregnant women smoking during pregnancy ranges form 7% to 37% by county.

OTHER TOBACCO USE

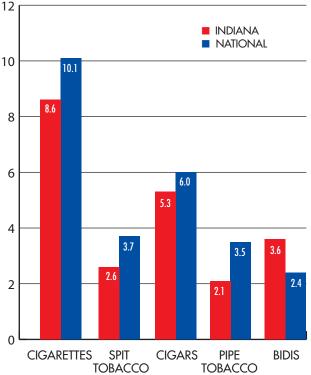
While cigarettes are the preferred form of tobacco use in Indiana, other products are used. Other tobacco products include spit or chewing tobacco, cigars, pipes, and bidis.

Spit Tobacco

Approximately 17% of Hoosier adults have tried spit tobacco, and of those adults more than 20% use these tobacco products every day or some days⁴¹. This is slightly less than the U.S. rate of 22% of adults who currently use spit tobacco. Of those Indiana adults who use spit or chewing tobacco every day or some days, one-third use less than one can per week and another 36% use 1-2 cans of spit tobacco per week⁴².

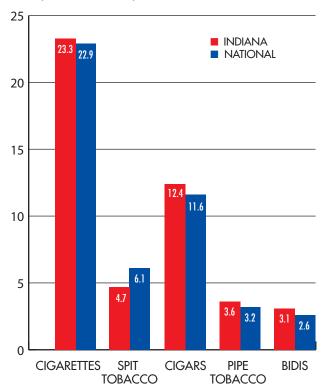
Approximately 3% of middle school and 5% of high school youth currently use spit tobacco. As illustrated in Chart 13: Current use of all tobacco products by middle school youth, Indiana vs. U.S., 2002 and Chart 14: Current use of all tobacco products by high school youth, Indiana vs. U.S., 2002, these rates are lower than the national averages.

Chart 13: Current Use of all Tobacco Products by Middle School Youth, Indiana vs. U.S., 2002



Hoosier middle school youth prefer cigarettes over other tobacco products. More Hoosier youth use bidis than other U.S. middle school youth.

Chart 14: Current Use of all Tobacco Products by High School Youth, Indiana vs. U.S., 2002



Hoosier high school youth prefer cigarettes as their form of tobacco use but all use rates are higher than the U.S.

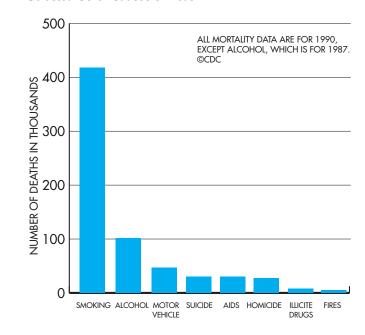
Cigars, Pipe tobacco and Bidis

Few middle school youth are regular users of cigars (5.3%), while over 12% of high school youth currently smoke cigars. Less youth use pipes, with only 2% in middle school and approximately 4% in high school. Approximately 3% of middle and high school youth currently use bidis. Use rates for cigars, pipes and bidis by Hoosier youth are lower than the national averages except for middle school youth using bidis. This Indiana rate is higher than the national average (3.6% vs 2.4%). Indiana high school youth use pipe tobacco the same rate as the U.S.

HEALTH CONSEQUENCES OF TOBACCO USE

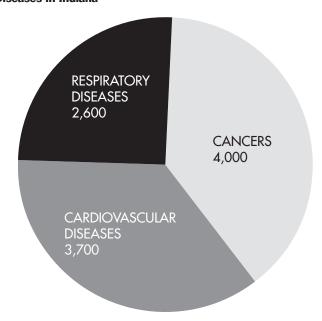
Smoking alone is responsible for an estimated 440,000 premature deaths in the United States annually with nearly 10,300 deaths in Indiana. On average, persons who smoke cut their lives short by at least 10 years⁴³. Smoking is the major risk fact for cancers, heart diseases and strokes, the leading causes of death in the U.S. and Indiana.

Chart 15: Annual Deaths From Smoking Compared with Selected Other Causes of Death



The number of deaths to tobacco far exceeds deaths by other causes.

Chart 16: Annual Deaths Caused by Major Smoking-related Diseases in Indiana



Cardiovascular diseases cause nearly as many tobacco-related deaths to Hoosiers than cancers⁴⁴.

Surgeon General's Reports

2004 marked the release of the 28th U.S. Surgeon General's report on tobacco use and the celebration of the 40th anniversary of the first report on Smoking and Health released in 1964.

The Health Consequences of Smoking: A Report of the Surgeon General (2004) states that "smoking remains the leading cause of preventable death and has negative impacts on people at all stages of life. It harms unborn babies, infants, children, adolescents, adults, and seniors". The main findings of the report describes the harmful effects of smoking on nearly every organ of the body, causing many diseases and reducing the health of smokers in general. It also reminds everyone that quitting smoking has immediate as well as long-term benefits, such as reducing risks for diseases caused by smoking and improving overall health. In addition, the report stresses that smoking cigarettes with lower machine-measured yields of tar and nicotine provides no clear benefit to health.

The Health Consequences of Smoking Report provides a list of diseases caused by smoking and has been expanded to include abdominal aortic aneurysm, acute myeloid leukemia, cataract, cervical cancer, kidney cancer, pancreatic cancer, pneumonia, periodontitis, and stomach cancer. These are in addition to diseases previously known to be caused by smoking, including bladder, esophageal, laryngeal, lung, oral, and throat cancers, chronic lung diseases, coronary heart and cardiovascular diseases, as well as reproductive effects and sudden infant death syndrome.

The 40th Anniversary of the first Surgeon General's Report on Smoking and Health is being celebrated in 2004 by remembering Indiana's roots to the national tobacco control movement. In 1957, then Surgeon General and Indiana native Leroy E. Burney publicly identified cigarette smoking as a cause of lung cancer, becoming the first Federal official to link smoking and cancer. Seven years later on Jan. 11, 1964, his successor, Luther Terry, issued a report that set into action a national tobacco control movement that continues today. January 11, 2004, marked the 40th anniversary of *Smoking and Health*, a comprehensive report on cigarette smoking that for the first time officially linked tobacco use with cancer and other deadly diseases. When the report was issued in 1964, people knew very little about the dangers of smoking. The event served as a warning that initiated a public health movement that is still facing an uphill climb.

Leroy E. Burney was born in 1906 in Burney, Indiana, a town founded by his great-grandfather. A medical education that included degrees from both Butler University and Indiana University led him to a career in public health that poised him to become United States Surgeon General in 1956. On July 12, 1957, Burney issued a statement that made him the first Federal official to publicly identify the dangers of smoking.

"The weight of the evidence is increasingly pointing in one direction; that excessive smoking is one of the causative factors in lung cancer."

The statement opened the door to additional research that led to the first official report from the Surgeon General on the effects of tobacco use. The full text of the report can be found on the Centers for Disease Control and Prevention website at http://www.cdc.gov/tobacco/sgr/sgr_1964/sgr64.htm.

Leroy Burney died in 1998, but his pioneering spirit has inspired thousands of Hoosiers, including Stephen Jay, MD, member of the ITPC Executive Board, to continue the effort to save lives. Dr. Jay authored a historical article on Burney's impact that was published this year by the Indiana Historical Society Magazine, *TRACES*.

Respiratory Health

Smoking is a known cause of chronic obstructive pulmonary disease (COPD), which includes chronic bronchitis and emphysema⁴⁵. Smoking accounts for 90% of all COPD deaths in the U.S. According to the American Cancer Society's second Cancer Prevention Study, female smokers were nearly 13 times as likely to die from COPD as women who had never smoked. Male smokers were nearly 12 times as likely to die from COPD as men who had never smoked⁴⁶. Indiana has a 30% higher smoking attributable death rate due to COPD compared to all other states⁴⁷.

Coronary Heart Disease and Stroke

More than 61 million Americans suffer from some form of cardiovascular disease, including high blood pressure, coronary heart disease, stroke, congestive heart failure, and other conditions. Coronary heart disease and stroke are the main types of cardiovascular disease caused by smoking and are the leading causes of death in the United States⁴⁸.

Twenty-one percent (21%) of all coronary heart disease deaths in the U.S. are due to smoking⁴⁹. The smoking attributable death rate for coronary heart disease in Indiana was 71 per 100,000 deaths in 1999, 20% higher than the all state average⁵⁰.

Coronary heart disease results from atherosclerosis of the coronary arteries. Cigarette smoking releases toxins in the blood contributing to the development of atherosclerosis, a progressive hardening of the arteries caused by the deposit of fatty plaques and the scarring and thickening of the artery wall. Inflammation of the artery wall and the development of blood clots can obstruct blood flow and cause heart attacks or strokes.

Stroke is the third leading cause of death in the United States. Cigarette smoking is a major cause of strokes. The risk of stroke decreases steadily after smoking cessation. Former smokers have the same stroke risk as nonsmokers after 5 to 15 years⁵¹.

Cancer

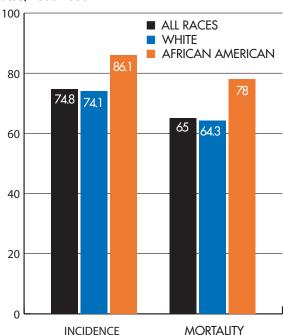
Cancer is the second leading cause of death and was among the first diseases causally linked to smoking. More than 30% of all cancers are due to smoking⁵². The 2004 Surgeon General's report adds more evidence to previous conclusions that smoking causes cancers of the oral cavity, pharynx, larynx, esophagus, lung, and bladder. The 2004 report also lists newly identified cancers caused by smoking, including cancers of the stomach, cervix, kidney, and pancreas and acute myeloid leukemia⁵³. For smoking-attributable cancers, the risk generally increases with the number of cigarettes smoked and the number of years of smoking, and generally decreases after quitting completely.

Smoking causes about 90% of lung cancer deaths in men and almost 80% in women⁵⁴. Men who smoke increase their risk of death from lung cancer by more than 23 times. Women who smoke increase their risk of dying from lung cancer by nearly 13 times⁵⁵. In 1987, lung cancer surpassed breast cancer and the leading cause of cancer death among women.

The lung cancer incidence rate, 1995-1999, for Indiana men (103.8 per 100,000) is much higher than the U.S. (86 per 100,000). However, incidence rates for women are similar in Indiana to the national rates (51.4 per 100,000-U.S. vs. 54.4 per 100,000)⁵⁶.

Lung cancer is leading cause of cancer mortality in Indiana, killing an average of 3,800 Hoosiers per year between 1996 and 2000. Between 1996 and 2000, an average of 4,400 new cases of lung cancer were diagnosed each year. In 2003, 4,400 new cases of lung cancer were expected in Indiana⁵⁷.

Chart 17: Indiana Lung Cancer Average Incidence and Mortality Rates, 1996-2000



Average lung cancer incidence and mortality rates are higher for African Americans than for Whites.

Gender and race are also factors in lung cancer incidence and mortality rates. Lung cancer mortality rates are significantly higher (51% higher) in Indiana males than in Indiana females. Indiana males develop an average of 2,500 new cases of lung cancer each year, compared to an average of 1,900 new cases in Indiana females. In any given week, approximately 85 Hoosiers are diagnosed and about 75 Hoosiers die from lung cancer. Lung cancer causes more deaths every year than do colorectal, breast, and prostate cancers combined.

Table 6: Average Indiana Lung Cancer Incidence Rates by County, 1996-2000

Lung cancer incidence rates by county range from 37.7 per 100,000 to 96.2 per 100,000. The Indiana average is 74.8 per 100,000⁵⁹. The lung cancer mortality rates are lower than the state average of 65 per 100,000 for nearly two-thirds of the counties. The remaining counties have fewer than 20 cases reported and therefore the rates cannot be provided.

Thirty-nine counties have lung cancer incidence rates higher than state average of 74.8 per 100,000.

COUNTY	COUNT	RATE	COUNTY	COUNT	RATE	COUNTY	COUNT	RATE
Adams	61	37.7	Hendricks	311	75.0	Pike	50	66.0
Allen	930	62.7	Henry	230	78.6	Porter	416	63.0
Bartholome	n 235	67.0	Howard	325	72.2	Posey	89	65.9
Benton	43	80.0	Huntington	134	67.6	Pulaski	40	52.0
Blackford	58	70.0	Jackson	179	84.7	Putnam	143	83.2
Boone	164	76.7	Jasper	108	74.5	Randolph	123	75.4
Brown	37	47.1	Jay	72	56.7	Ripley	84	62.3
Carroll	56	50.4	Jefferson	131	79.9	Rush	81	79.8
Cass	179	79.1	Jennings	117	92.9	St. Joseph	1,055	78.3
Clark	419	87.4	Johnson	354	71.8	Scott	100	94.4
Clay	145	96.2	Knox	192	84.4	Shelby	141	66.1
Clinton	134	74.2	Kosciusko	226	64.5	Spencer	64	61.1
Crawford	51	90.6	LaGrange	84	60.2	Starke	108	83.9
Daviess	107	65.7	Lake	1,734	70.2	Steuben	92	58.3
Dearborn	133	63.8	LaPorte	414	71.2	Sullivan	109	90.6
Decatur	102	80.5	Lawrence	222	84.7	Switzerland	30	64.3
DeKalb	136	74.6	Madison	577	76.2	Tippecanoe	403	74.7
Delaware	476	76.8	Marion	3,596	94.7	Tipton	51	55.1
Dubois	110	56.7	Marshall	161	69.8	Union	21	56.5
Elkhart	476	60.0	Martin	37	63.1	Vanderburgh	828	84.7
Fayette	111	74.2	Miami	122	67.5	Vermillion	85	86.7
Floyd	289	82.5	Monroe	274	62.8	Vigo	508	89.1
Fountain	87	81.0	Montgomery	137	68.3	Wabash	135	68.5
Franklin	55	51.1	Morgan	254	85.5	Warren	30	64.3
Fulton	82	68.9	Newton	54	71.8	Warrick	173	72.2
Gibson	134	70.5	Noble	148	73.8	Washington	93	69.9
Grant	311	73.1	Ohio	26	84.9	Wayne	340	80.5
Greene	130	66.6	Orange	90	82.3	Wells	61	41.4
Hamilton	307	54.0	Owen	92	82.2	White	100	68.3
Hancock	200	78.3	Parke	73	73.5	Whitley	98	63.5
Harrison	126	79.0	Perry	69	65.3	Indiana		74.8

Source: Indiana State Department of Health — Indiana State Cancer Registry and the Epidemiology Resource Center, Data Analysis Team, May 2003. Rates are per 100,000 population age-adjusted to the 2000 U.S. Population Standard.

Table 7: Average Indiana Cancer Mortality Rates by County, 1996-2000

COUNTY	COUNT	RATE	COUNTY	COUNT	RATE	COUNTY	COUNT	RATE
Adams	12	#	Hendricks	42	31.0	Pike	4	#
Allen	201	38.0	Henry	28	26.4	Porter	72	33.2
Bartholomev	v 29	23.0	Howard	42	27.8	Posey	19	#
Benton	4	#	Huntington	24	30.2	Pulaski	10	#
Blackford	17	#	Jackson	31	41.2	Putnam	26	46.5
Boone	29	36.4	Jasper	20	38.2	Randolph	14	#
Brown	11	#	Jay	20	43.2	Ripley	18	#
Carroll	10	#	Jefferson	18	#	Rush	10	#
Cass	33	41.2	Jennings	23	59.1	St. Joseph	170	33.2
Clark	51	31.2	Johnson	52	30.9	Scott	15	#
Clay	23	42.0	Knox	40	44.7	Shelby	14	#
Clinton	25	34.9	Kosciusko	41	31.1	Spencer	9	#
Crawford	5	#	LaGrange	11	#	Starke	23	50.1
Daviess	21	32.1	Lake	339	38.7	Steuben	18	#
Dearborn	31	44.3	LaPorte	53	25.0	Sullivan	8	#
Decatur	19	#	Lawrence	32	33.3	Switzerland	5	#
DeKalb	24	36.4	Madison	88	32.2	Tippecanoe	61	31.6
Delaware	70	32.9	Marion	529	42.0	Tipton	9	#
Dubois	27	35.5	Marshall	22	27.2	Union	4	#
Elkhart	87	30.4	Martin	11	#	Vanderburgh		33.7
Fayette	17	#	Miami	20	32.4	Vermillion	11	#
Floyd	42	38.8	Monroe	51	34.7	Vigo	52	26.1
Fountain	24	55.9	Montgomery		35.7	Wabash	25	32.3
Franklin	12	#	Morgan	28	26.8	Warren	11	#
Fulton	9	#	Newton	4	#	Warrick	24	28.4
Gibson	21	29.0	Noble	32	45.5	Washington	21	53.9
Grant	52	35.8	Ohio	6	#	Wayne	57	36.2
Greene	24	31.7	Orange	15	#	Wells	23	45.2
Hamilton	54	30.9	Owen	8	#	White	17	#
Hancock	30	36.1	Parke	11	#	Whitley	11	#
Harrison	12	#	Perry	9	#	Indiana		65

[#] Rate suppressed if fewer than 20 cases. Source: Indiana State Department of Health — Indiana State Cancer Registry and the Epidemiology Resource Center, Data Analysis Team, May 2003. Rates are per 100,000 population age-adjusted to the 2000 U.S. Population Standard.

Fifty-three (53) counties with mortality rates are lower than state average of 65 per 100,000.

4 days ago I was informed that I may have emphysima. I am 30 years old & a single mother of 2 children. I am scared of what may happen to me and my children. I have not had a cigarette since then. It is very hard. I believe I have been addicted to nicotene since before I was born. My mother smoked while pregnant and both parents smoked around me as a child, even after I was diagnosed with Asthma at the age of 2. I never been a heavy smoker, less than a pack a day. This has been a wake up call for me, and I hope my story is helpful to someone else.

Ms. Johnson Hendricks County

The percentage of current high school smokers refused purchase of cigarettes due to age increased to nearly 40% in 2002, up from approximately 30% in 2000.

I developed pneumonia and was hospitalized this Thanksgiving. After seeing the look of fear on my youngest son's face while I was in the ER struggling to breath I swore I'd never smoke again. It has been 1 month ago today I stopped smoking. I admit I still crave them at times, and I sometimes miss them, but I pray everyday for the strength, will power and disapline to not give in and relapse. For my sake, for my children and for my grandchildren ... I vow to continue my pledge to quit. Wish me luck.

Vickey Marion County

SECONDHAND SMOKE

Secondhand smoke, or environmental tobacco smoke (ETS), is a mixture of sidestream smoke and exhaled smoke in the air. Secondhand smoke has been shown to cause heart disease, cancer, respiratory problems and eye and nasal irritation. Exposure to secondhand smoke takes place in the home, public places, worksites and vehicles.

Secondhand smoke is classified as a Group A carcinogen (cancer causing agent) under the Environmental Protection Agency's (EPA) carcinogen assessment guidelines. Secondhand smoke contains over 4,000 compounds, more than 50 carcinogens and other irritants and toxins.⁶⁰

Each year in the United States, an estimated 53,000 deaths are attributable to secondhand smoke breathed by nonsmokers, making it the third leading cause of preventable death⁶¹. Of these deaths, 3,000 are due to lung cancer each year with an estimated 800 from exposure at home and 2,200 from exposure in work or social settings⁶².

In Indiana each year 950-1,690 Hoosiers die from others' smoking, such as exposure to secondhand smoke or smoking during pregnancy⁶³. Infants' exposure to secondhand smoke is two to four times more likely to cause low birth weight⁶⁴. Over 900 low birth weight babies in Indiana are born as a result of secondhand smoke⁶⁵.

Every day more than 15 million children are exposed to secondhand smoke in the home, including 420,000 Hoosier children⁶⁶. Millions of doctor visits and thousands of hospitalizations occur due to children's exposure to secondhand smoke.

Witnessing smoking behavior inadvertently sends a message that smoking is acceptable and may encourage modeling of the behavior. Three out of four youth in grades 6-12 who reported

Table 8: Major Health Exposure in Children	Effects of Secondhand Smoke
Sudden Infant Death Syndrome	SHS causes irritation of the airways; maternal smoking is a risk factor for SIDS and lower birth weight
Acute and Chronic Respiratory Illness	SHS particles get into the airways and alvedi; can increase severity with irritation of the lungs; greatest impact occurs during first year of life
Asthma	Smoking during pregnancy may affect lung growth; SHS increases risk of lower respiratory infection
Middle Ear Disease	SHS exposure strongly linked with ear infections

Children experience significant health problems due to exposure to secondhand smoke.

being in the same room or car with someone who is smoking at least one day per week, while nearly half are exposed three or more days each week. Thirty percent (30%) of youth, grades 6-12, are exposed to secondhand smoke daily⁶⁷. Youth who never smoked were significantly less likely than current smokers to live with someone who smokes⁶⁸. These findings suggest even greater emphasis on encouraging smoke free homes and cars as well as encouraging youth to refuse being in smoke filled environments.

Table 8: Major Health Effects of Secondhand Smoke Exposure in Children highlights the most common health effects caused by secondhand smoke exposure in children. Children are especially affected by secondhand smoke because their bodies are still developing and can hinder the growth and function of their lungs. Exposure to secondhand smoke results in an estimated 1,900 to 2,700 sudden infant death syndrome (SIDS) deaths each year in the U.S.⁶⁹ Hundreds of thousands of lung and bronchial infections are caused by secondhand smoke each year⁷⁰. Children and infants exposed to secondhand smoke in the home have dramatically higher levels of respiratory symptoms and respiratory tract infections⁷¹. Secondhand smoke exposure increases the number of new asthma cases and worsens asthmatic symptoms. Children of parents who smoke also have an increased number of respiratory infections and symptoms and slower lung development⁷².

Asthma

Asthma is the most common chronic illness among children. There is a strong association between exposure to secondhand smoke and childhood asthma⁷³. This is especially true for children of parents who smoke. Asthma cases attributed to secondhand smoke cost the U.S. more the \$236 million⁷⁴. In Indiana, over 11,000 cases annually are attributed to secondhand smoke exposure costing nearly \$9 million⁷⁵.

Ear Infections

More than 24 million office visits to physicians occur each year for acute ear infections in children under age 15⁷⁶. Research indicates that exposure to parental smoking is associated with a greater risk of ear infections. Approximately 4,500 ear infections cases attributable to secondhand smoke occur in Indiana each year, costing Hoosiers \$2.2 million⁷⁷.

See the section on **pregnant women** and smoking for additional information that describes the harmful effects of tobacco smoke exposure by infants and children.

Coronary Heart Disease

Exposure to secondhand smoke, even in small amounts, increases the risk for coronary heart disease. A study released in April 2003 monitored the hospital admissions in Helena, Montana for heart attacks during a sixth month period⁷⁸. Compared those numbers to the same time period in the previous four years, and with data for the surrounding area not

affected by a smoke free law, researchers found a 40% drop in admissions for heart attacks from people living or working in Helena (where a smoke free ordinance was in effect) and no change for people living further away. This study and other findings supporting the link between secondhand smoke exposure and heart disease prompted the CDC to issue a warning to people at risk for heart disease to avoid all buildings and gathering places that allow indoor smoking. This warning stressed that as little as 30 minutes of exposure to second-hand smoke can have a negative health effect.

The Truth about Ventilation

There is no safe level of secondhand smoke exposure; only the elimination of secondhand smoke can guarantee protection from its effects. Opponents to smoke free policies offer ventilation systems as an alternative to eliminating secondhand smoke from indoor venues. However, no ventilation system has been designed that guarantees protection from exposure to secondhand smoke. The main purposes of ventilation systems are to limit the accumulation of carbon dioxide and to reduce odors. While there may be less visible smoke in the air, ventilation systems do not eliminate the smoke's toxins⁷⁹.

CESSATION

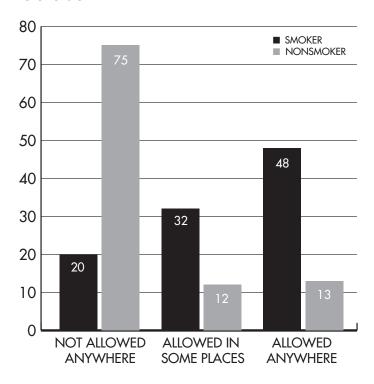
Quitting smoking is difficult to do, and with more than 1 million adult smokers in Indiana, there are many people that need help quitting. Despite the large number of Hoosier smokers, more than 193,000 Hoosiers were successful in quitting during 2002 and more than half (55.4%) tried to quit smoking during that past year. In addition the 2002 data showed,

- Eighty-six percent (86%) of current smokers expect to quit at some time in their lives
- \bullet Sixty-two percent (62%) were planning to quit in the next six months
- Twenty-five percent (25%) wanted to guit in the next thirty days

Intentions to quit smoking indicate that many Hoosiers are thinking about changing their behaviors and moving toward a readiness to quit tobacco. Several factors influence whether Hoosier adults have intentions to quit smoking or will attempt to quit:

- As one ages, they are more likely to guit smoking
- Beliefs about the dangers of secondhand smoke also cause more smokers to want to guit smoking
- Smokers who received advice from a physician were 2.5 times more likely to want to quit smoking than those not receiving advice from their doctors
- Smokers in households that had rules prohibiting smoking were nearly two times as likely to be successful in quitting. More than half (52%) of smokers have some rules restricting smoking in their homes. Eighty-seven percent (87%) of non-smokers have home rules restricting smoking.

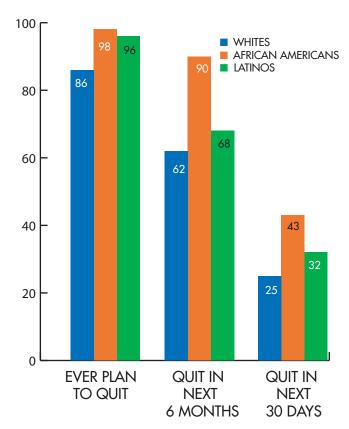
Chart 17: Rules on Household Smoking, Smokers vs. Nonsmokers.



More nonsmokers have rules limiting smoking in the home than do smokers. However, a significant percent of smokers restrict smoking. More smokers have no restrictions compared to the majority of nonsmokers that prohibit smoking in all areas of the home.

Intentions to quit smoking vary by race/ethnic groups. African American smokers were 7.5 times more likely than Whites to have intentions to quit smoking. A significantly greater proportion of African American (90%) smokers expressed intent to quit in the next six months compared to other race/ethnic groups. Fifty-one percent (51%) of Latino smokers stated that they plan to stop smoking within next thirty days and 67% stated they expect to stop smoking in the next six months. Approximately 62% of African American smokers reported a quit attempt in the last twelve months. Nearly 70% of current Latino smokers tried to quit in the last twelve months.

Chart 18: Quit Intentions by Race/Ethnicity



Intentions to quit smoking are greater for Indiana minority populations than for White smokers.

Awareness of Cessation Resources

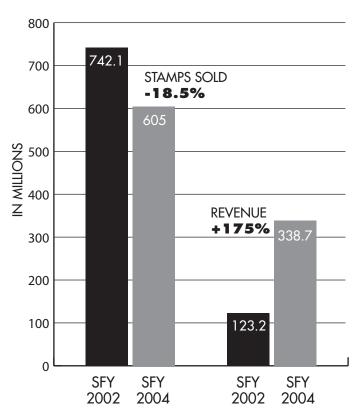
Awareness of the resources to quit smoking is an important step toward cessation. Many smokers need help to quit smoking, and the majority (60%) of Hoosiers are aware of local resources to help them quit. However, in 2002, only 20% of smokers used any medication and only a few (4%) used cessation counseling to help them quit. Cessation services are available in all of Indiana's 92 counties. Visit www.itpc.in.gov/community.asp to find the coalition working in your community.

Youth also want to quit smoking and need help, however data from 2002 indicate that the awareness of smoking cessation resources among high school smokers is relatively low (27%). Interestingly, non-smokers are significantly more aware of these resources (40%) than smokers. Only 6% of high school smokers have participated in cessation programs. The rate of participation in cessation programs for middle school students increased significantly from 8% in 2000 to 13.5% in 2002. These findings suggest that much more can be done to raise young smokers' awareness of resources to help them quit, and encourage participation in cessation programs to actualize the intent to quit into permanent cessation. Further investigation into how this increase was achieved among middle school students may provide insight into methods for encouraging participation among older students.

CIGARETTE CONSUMPTION

Cigarettes smoked by Hoosiers can be estimated through the number cigarette tax stamps sold to tobacco retailer distributors. Data on tax stamp sales are collected through the Indiana Department of Revenue. The number of cigarette stamps sold in SFY 2004 was slightly lower than the number sold in SFY 2003, while there has been a significant decline since SFY 2002. In SFY 2004, 605 million cigarette stamps were sold in Indiana, as illustrated in Chart 19: Indiana Cigarette Consumption, SFY 2002-2004. While the number of stamps sold declined 18.5% since SFY 2002, state revenue collected from tobacco taxes increased by nearly 175%. A 40-cent increase in Indiana's cigarette tax took effect July 1, 2002, bringing Indiana's tax to 55.5 cents per pack. However, this is lower than the current average cigarette tax for all states of 79.2 cents.

Chart 19: Indiana Cigarette Consumption



In Indiana, cigarette taxes have decreased cigarette smoking and increased state revenues.

ECONOMIC IMPACT

In addition to the enormous personal, social, and emotional toll of tobacco-related diseases, tobacco use has significant economic impact. Tobacco costs the United States an estimated \$75 billion annually in medical expenses and \$82 billion in lost productivity⁸⁰. In 1998, smoking-attributable direct medical expenditures totaled \$1.6 billion in Indiana. These expenditures include annual individual expenditures for four types of medical services, including ambulatory care, hospital care, prescription drugs, and other care (including home health care, nonprescription drugs, and other nondurable medical products). This calculates to \$275 per Hoosier in direct medical expenses related to smoking regardless of whether they smoke or not. Indiana spends \$5.73 in smoking related costs to the State for every pack of cigarettes sold⁸¹.

Smoking-attributable direct medical and productivity expenditures are rising. As all states struggle to curb Medicaid costs, it is important to note that about 16% or \$380 million of all Indiana Medicaid expenditures are related to smoking. Medicaid costs related to smoking increased by 33% from 1993-1998 in Indiana.

Indiana would spend less by continuing its current tobacco prevention program for the next 25 years than it spends caring for dying and sick smokers in just one year. Indiana's comprehensive tobacco control program can save the state millions of tax-payer dollars. If Indiana reduced smoking by 25%, it would save Indiana taxpayers over \$20 million per year in smoking-related Medicaid costs⁸².

Tobacco's Burden on Business

Businesses are constantly looking for ways to cut costs and increase productivity. The health of employees is the major factor in a business's bottom line. Tobacco use among Hoosiers is a burden for Indiana and your business. When employees smoke, they are not the only ones who pay. Increased medical costs, higher insurance rates, added maintenance expenses, lower productivity, and higher rates of absenteeism from smoking costs American businesses between \$97 and \$125 billion every year.

Cigarette-caused fires are the #1 cause of fire death in U.S. Direct property loss due to fires in the U.S. was an estimated \$10.6 billion in 2001. The U.S. Office of Technology and Assessment reported that current smokers averaged almost three times as much sick leave as non-smokers, and significantly more sick leave than former smokers. Unscheduled smoking breaks add up to 136 hours of non-productive paid work time per year, per smoker⁸³. Employees that smoke visit healthcare professionals up to six times more often than non-smokers. They are admitted to the hospital almost twice as often as non-smokers; average 1.4 additional days in the hospital per admission over non-smokers; and incur more workplace injuries than non-smokers⁸⁴.

Making workplaces smoke free will lower business costs and produce a healthier workforce. Eliminating tobacco use in the workplace projects a positive image to the public and demonstrates pride in your business and the products and services your company delivers.

Benefits of a Smoke Free Workplace

- Improvement in employee and visitor health
- Lower absenteeism and increased productivity
- Employee support for non-smoking policies
- Reduced liability of claims
- Lower maintenance costs
- Lower insurance premiums

Facts about the Cost of Tobacco in the Workplace

- Health and fire insurance premiums can be 25% to 35% lower for smoke free businesses, and morbidity and fire statistics suggest that premium discounts should be as high as 70%⁸⁵.
- Costs for employee absences include temporary replacements and lowered productivity and morale among employees who are on the job dealing with the absences.
- Smoking can cost employers an extra \$45 per year for accidental injury and related workers' compensation costs⁸⁶.
- Higher carbon monoxide levels, eye irritation, and lower attentiveness of smokers can cause an increase in inefficiency and errors.
- Studies on workplaces have shown workers' compensation costs for a smoker averaged \$2,189 compared to only \$176 for a nonsmoker⁸⁷. A study of 300 booking clerks at a large U.S. airline found that smokers are absent from work for sickness as many as 6.16 days per year on average, compared with 3.86 days for those employees who never smoke⁸⁸.

Tobacco Cessation Is a Bargain Among Preventive Health Measures

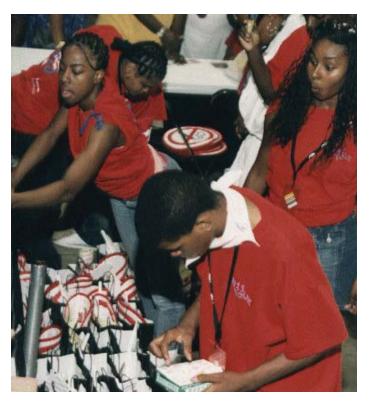
Paying for tobacco use cessation treatments is the single most cost-effective health insurance benefit for adults that can be provided to employees⁸⁹. There are few preventive health interventions that are more cost-effective than tobacco cessation. The potential savings from tobacco cessation are directly related to the costs of tobacco to your organization. Recent studies suggest the benefits of cessation outweigh the costs and offer a net gain over time. It costs between 10 and 40 cents per member per month to provide a comprehensive tobacco cessation benefit (costs vary based on utilization and dependent coverage)⁹⁰. In contrast, the annual cost of tobacco use is about \$3,391 per smoker nationally ⁹¹. Researchers at the University

of Michigan simulated the financial results of a workplace cessation program. The results suggested that, by the third year, the savings to the company matched the total costs of the cessation program. By the fifth year, the financial benefits were almost twice the costs⁹².

Working to Help employers Reduce Health Care Costs

In November 2003, ITPC and the Indiana State Personnel Department (ISPD) announced its partnership to promote quitting smoking to all State of Indiana employees. ITPC shares information through a variety of communication tools aimed at State workers, such as the State personnel newsletter, state agency websites, regular contact with all agency human resource directors and ISPD events throughout the year to promote new and existing resources to help people quit smoking. The State is Indiana's second largest employer with 35,000 employees and over 80,000 lives covered under the State's health plans. By reducing tobacco use and improving the overall health of state workers, the plan will also work to reduce healthcare costs.

Already through this partnership, one of the State's health plans, M-Plan, has begun offering its web-based smoking cessation program to all state employees regardless of their health plan membership. ITPC hopes this partnership with employers will serve as a model for local grantees as the ITPC program focuses on ways to not only improve overall health, but to also bring significant cost savings to the State. With local coalitions working in Indiana's 92 counties, there are resources in place to work with any Indiana business looking to encourage tobacco cessation.



TOBACCO CONTROL POLICY

Policy change has been demonstrated as an effective strategy to change social norms regarding tobacco use and to combat the impact tobacco takes on our society. Tobacco control policies include:

- Protecting citizens and workers from exposure to secondhand smoke
- Increasing tobacco taxes
- Providing cessation coverage through health plans and programs
- Authorizing the FDA to regulate all tobacco products
- Ensuring strong youth access laws and enforcing those laws
- Reducing tobacco advertising, promotion, and marketing
- Regulating the manufacturing of fire safe cigarettes
- Funding comprehensive tobacco control programs

PROTECTING CITIZENS AND WORKERS FROM EXPOSURE TO SECONDHAND SMOKE

Many Hoosiers spend a significant part of their day at the work-place. The 2002 Indiana Adult Tobacco Survey indicates that 71% of adults' indoor work policy prohibits smoking in all work areas. Similarly, of the top five largest employees from each county in Indiana, 68% have completely smoke free indoor work areas. However, very few (15%) of these large employers have smoke free grounds³³. Although there has been a relative increase in the proportion of total indoor workforce working under a smoke-free policy, Indiana and the Midwestern states are trailing the rest of the country in their worksite policies³⁴.

There are currently over 1,700 municipalities in the U.S. with local laws in effect that restrict where smoking is allowed. These include some of the largest cities, such as New York City, Los Angeles, San Diego, Dallas, San Francisco, and Boston. Ten states have state laws that require 100% smoke free workplaces, and/or restaurants, and/or bars⁹⁵. These include:

- California
- Delaware
- New York
- Connecticut
- Maine
- Massachusetts
- Rhode Island
- Florida
- Vermont
- Utah
- Idaho
- Maryland

Hello. I am 24 years old, and I started smoking 11 years ago, thanks to my stepsister and Mother. I am ready to quit! I am tired of feeling bad, and am getting married in 1 year and want to have kids some day and don't want to smoke while pregnant, like my Mom did with all of her kids. I want to have a heathly life and healthy life for my future kids! Thanks for this web-site. I am well on my way now!!

Christina Hendricks County

ITPC local partners conducted over 10,200 activities at the community level, such as implementing prevention and education programs in schools, developing cessation networks, working to protect Hoosiers from secondhand smoke, engaging local businesses, and raising awareness of tobacco prevention efforts.

I had smoked for about 10 years, then one day my 11 year old asked me to quit so I did cold turkey and have been smoke free for 2 years. I had watched alot of my family members die from smoking.... i quit for good and I am proud of myself.....

Tammy Tipton County In addition, several countries have smoke free public places including Norway, Ireland, India, New Zealand, and Bhutan.

However, in Indiana, approximately 5% of Hoosiers are protected against secondhand smoke by such policies. Communities with comprehensive smoke free restrictions include Bloomington, Fort Wayne, and Monroe County.

Several Indiana cities and counties passed smokefree policies for government buildings and facilities, and a number of school districts expanded their smoke free building policy to include all school property and sponsored events.

In 2003, in an effort to decrease children's exposure to secondhand smoke, PL 252, was enacted by the Indiana General Assembly. This law prohibits smoking in a school bus during a school week or while the school bus is being used for school functions. Policies such as these are a step to reducing exposure to secondhand smoke.

Local tobacco control coalitions across Indiana are working to increase youth protection from secondhand smoke. While federal law prohibits smoking within school buildings, local jurisdictions have enacted policies that are more restrictive and encompass all school grounds. Coalitions are working with school districts to ensure tobacco use is not allowed on school campuses anywhere. Progress is being made with schools throughout Indiana, as 27 counties have all tobacco free schools districts providing 47% of our youth with protection from secondhand smoke at school. Another 29 counties have a portion of their school districts with tobacco free campuses. However, the remaining 36 counties do not have a tobacco free campus at any of the school districts in their counties. More on how Indiana youth are leading the initiative to get tobacco off of their campuses in the **Community Program** section.

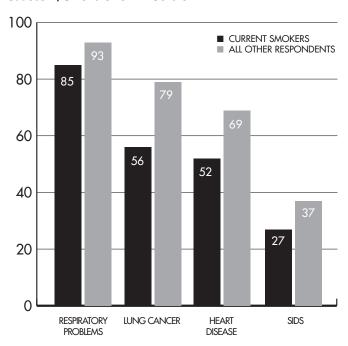
As communities work on tobacco control strategies at the local level, it is very important that these communities maintain the authority to pass strong smoke free policy. Passing local policy has been a successful tool in protecting the public from exposure to secondhand smoke and changing social norms regarding tobacco use. The tobacco industry is very aware of the threat of local policy activity and would prefer to battle policy change at the state level, therefore the tobacco companies' strategy is to achieve preemption. Preemption is a provision in state or federal law that eliminates the power of local government to pass laws. Local control of these policies allows for meaningful debate and education on the importance of a good policy that protects all citizens. This education prepares the community for the policy change resulting in easier enforcement and support for the policy. Local policymakers have the right and responsibility to protect their citizen's health and pass policy as the community wishes. Maintaining local control of setting these policies is important.

Hoosier adults, especially nonsmokers, support smoke free policies in public places. Sixty-four percent (64%) of all Hoosier adults, and 80% of nonsmokers feel smoking should not be

allowed in indoor work areas. In addition, half of all adults feel that smoking should be prohibited in restaurants, increasing to over 60% for nonsmokers.

Slightly over half of Hoosier adults believe that secondhand smoke is very harmful. Similarly, many expressed knowledge that exposure to secondhand smoke causes various health problems. These data, however, show strong differences between attitudes and beliefs of current smokers compared to other respondents. Current smokers were much less likely than nonsmokers to be aware of each of the dangers of secondhand smoke. As illustrated in Chart 20: Percent of Adults That Say Secondhand Smoke Causes..., Smokers vs. All Others⁹⁶.

Chart 20: Percent of Adults That Say Secondhand Smoke Causes..., Smokers vs. All Others



A majority of adults say that secondhand smoke causes various health problems, with a lower proportion of smokers reporting beliefs in these health impacts.

Beliefs of tobacco's harmful effects impact a smoker's intention to quit smoking. Those smokers who are aware that smoke from other people's cigarettes is very harmful were more than twice as likely to intend to quit smoking or attempt to quit, and more than three times as likely to quit smoking successfully, compared to smokers without this knowledge.

Attitudes toward smoke free policies in Indiana's minority communities show that African Americans were more likely to believe that secondhand smoke is very harmful to one's health compared to members of other communities.

A greater proportion of African Americans in Indiana believe that smoking should not be allowed in any work areas than did other respondents (83% vs. 68%). Similarly, the African American community expressed greater support for banning

smoking in restaurants than members of other communities (78% vs. 65%), as well as bars and lounges (82% vs. 70%).

Latino nonsmokers are more likely to agree that secondhand smoke is a cause of Sudden Infant Death Syndrome (SIDS) and lung cancer than other nonsmokers. Latino smokers are more likely to believe that smoking should not be permitted in restaurants (88%) compared to other race/ethnic groups (77%).

INCREASING TOBACCO TAXES

Health economists have shown that increasing the price of cigarettes causes a reduction in smoking. Numerous U. S. Surgeon General reports have concluded that an optimal level of excise taxation on tobacco products will reduce smoking rates, tobacco consumption and the long-term health consequences of tobacco use. Raising state cigarette taxes always reduces smoking rates and always increases state revenue as shown by states like Michigan and New York⁹⁷.

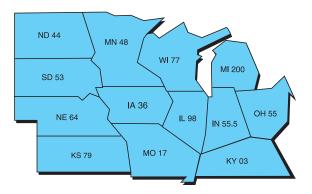
Economic research studies currently conclude that every 10% increase in the real price of cigarettes reduces adult smoking by about 4% and teen smoking by roughly 7%. There is strong evidence that youth are more responsive to price increases than adults. Youth are up to three times more sensitive to price than adults while younger adults (18-24) are about twice as sensitive to price than older adults. Recent studies conclude that the greatest impact of price increases is in preventing the transition from youth experimental smoking to regular (daily) smoking. Considering 90% of smokers start as teenagers, a group highly sensitive to price, higher taxes can sharply reduce youth smoking. A reduction in youth smoking will influence a long-term decrease in adult smoking.

A 2002 national report issued by the American Lung

Table 9: State Cigarette Excise Taxes

Association, American Cancer Society, American Heart Association and Campaign for Tobacco-Free Kids praised Indiana for increasing the state cigarette tax by 40 cents a pack. Prior to July 1, 2002, Indiana had one of the lowest tobacco taxes in the United States: ranking 44th with a 15.5-cent tax. The increase in the State's cigarette tax to 55.5 cents brought Indiana closer to the all-state average of 79.2 cents¹⁰⁰. However, there is still room to bring the tax near the national goal for state cigarette tax up to a minimum of \$1.00 per pack.

Figure 3: Surrounding States Tobacco Taxes



Indiana's tax is lower than border states Michigan and Illinois, while higher than Kentucky.

Tobacco taxes still remain one of the strongest interventions to decrease smoking. As discussed earlier, the 2002 tax increase has had an impact on decreasing cigarette consumption and increased revenue. If Indiana were to increase its cigarette tax to the all states' average (79.2 cents), Indiana could expect to see¹⁰¹:

- Fewer Hoosiers smoking-14,000 adults and 22,000 youth
- Thousands of Hoosier deaths avoided by not smoking-7,000 youth and 3,000 adults

RANK	(STATE	TAX	RANK	STATE	TAX	RANK	STATE	TAX
1	Rhode Island	246.0	18	New Mexico	91.0	35	Minnesota	48.0
2	New Jersey	240.0	19	California	87.0	36	North Dakota	44.0
3	Michigan	200.0	20	Nevada	80.0	37	Alabama	42.5
3	Alaska°	160.0	21	Kansas	79.0	38	Texas	41.0
5	Connecticut	151.0	22	Wisconsin	77.0	39	Georgia	37.0
6	Massachusetts	151.0	23	Montana	70.0	40	lowa	36.0
7	New York	150.0	24	Utah	69.5	40	Louisiana	36.0
8	Washington	142.5	25	Nebraska	64.0	42	Florida	33.9
9	Hawaii	140.0	26	Wyoming	60.0	43	Oklahoma	23.0
10	Pennsylvania	135.0	27	Arkansas	59.0	44	Colorado	20.0
11	Vermont	119.0	28	Idaho	57.0	44	Tennessee	20.0
11	Arizona	118.0	29	INDIANA	55.5	44	Virginia	20.0
13	Oregon	118.0	30	Delaware	55.0	47	Mississippi	18.0
13	Dist./Columbia	100.0	30	Ohio	55.0	48	Missouri	17.0
13	Maine	100.0	30	West Virginia	55.0	49	South Carolina	7.0
13	Maryland	100.0	33	South Dakota	53.0	50	North Carolina	5.0
17	Illinois	98.0	34	New Hampshire	52.0	51	Kentucky	3.0
	······					•		

- Increase in state revenue of \$112 million
- Long term health savings of \$379 million

PROVIDING CESSATION COVERAGE THROUGH HEALTH PLANS AND PROGRAMS

A 2002 study released by the CDC indicated that the high cost and lack of access to cessation treatment is one of the primary obstacles to reducing smoking in the United States. Based on the 2002 National Health Interview Survey, the study finds that, while smoking rates among adults have declined much too slowly from 25 percent in 1993 to 21.6 percent in 2002, 70 percent of adult smokers said they want to quit. However, only 4.7 percent of those who had quit in the past year were able to maintain abstinence from smoking for three to twelve months. Clearly, improved access to smoking cessation services is one of the keys to accelerating the decline in adult smoking rates.

Indiana covers the cost of cessation therapy and counseling as a part of the state's Medicaid benefits; however, it is not clear if Medicaid patients are aware of this benefit and accessing the benefit.

We do not yet know what percentage of Indiana's employers provides cessation therapy and counseling as a part of their employee benefit package, although that number seems to be inadequate. Of Indiana's large employers in each county approximately one-third of provide cessation through their worksite (34%) and even fewer offer benefits through employer-provided health plans (20%)¹⁰². Providing cessation services to employees through onsite employee assistance programs or through health plans can save businesses money.

AUTHORIZING THE FDA TO REGULATE ALL TOBACCO PRODUCTS

The need for federal legislation to grant Food and Drug Administration (FDA) the authority to regulate tobacco products is a direct result of the Supreme Court's 2000 decision that held that the FDA does not have authority to regulate tobacco products. Currently, no Federal government agency regulates tobacco products as used by consumers, including their manufacture, content, addictiveness, availability and sale. However, in May 2004, identical, bipartisan bills were introduced in the U.S. Senate and the U.S. House of Representives to grant the U.S. Food and Drug Administration authority to regulate tobacco products. This marks the first time that identical bills supported by the public health community have been introduced in both houses of Congress.

These bills will protect kids and save lives by granting the FDA authority to 103:

- Restrict tobacco advertising and promotions, especially to children
- Stop illegal sales of tobacco products to children
- Require disclosure of the contents of tobacco products and

tobacco industry research about the health effects of their products

- Require changes in tobacco products, such as the reduction or elimination of harmful chemicals, to make them less harmful or less addictive
- Prohibit health claims about so-called "reduced risk" products that are not scientifically proven or that would discourage current tobacco users from quitting or encourage new users to start
- Require larger and more informative health warnings on tobacco products

This legislation would bring changes to every aspect of the manufacturing, marketing, labeling, distribution and sale of tobacco products. These measures can significantly reduce the number of people who start smoking, increase the number of smokers who quit, and reduce harm to those who are unable to quit. Granting FDA regulation of tobacco products is intended as a complement, to other tobacco prevention, cessation and control measures.

The need for regulation of tobacco products can be demonstrated here in Indiana. The introduction of new tobacco products in the market has had a direct impact on Indiana in recent years. In 2001, Brown&Williamson (B&W) used Indianapolis and surrounding central Indiana as a test market for Advance™. In 2002, Ariva® (B&W) arrived in stores, followed by Quest® (Vector Tobacco) in 2003, as Indiana is one of seven states testing this new line of products. Previous research shows that smokers have misconceptions about the health risks of socalled "light" and "ultralight" cigarettes104. Successful marketing of the tobacco companies foster these beliefs. Scientific studies indicate that these products have not resulted in different rates of tobacco-related deaths and diseases compared to those who smoke "regular" cigarettes $^{\scriptscriptstyle 105}\!.$ Smoking cigarettes that have a lower yield of tar does not substantially reduce the risk for lung cancer¹⁰⁶. Tobacco companies continue these deceptive marketing practices as they introduce new "reduced risk" products continuing to appeal to the health concerns of smokers.

Data from the 2002 Indiana Adult Tobacco Survey (IATS), illustrate that these misconceptions are present among Hoosier smokers and the need for FDA authority to regulate all tobacco products.

- An estimated 30% of Hoosier adults have heard about these "reduced risk" products with 10% of those adults having tried one of these products.
- There were no gender differences in those adults who have heard of these products, but Whites were 60% more likely to be aware of these products than African Americans.
- \bullet Nearly 16% of Hoosier adults agree/strongly agree that these new products are safer than regular cigarettes. Men are more likely to share this belief than women.

ENSURING STRONG YOUTH ACCESS LAWS AND ENFORCING THOSE LAWS

Indiana code (I.C. 35-46-1-10) prohibits selling tobacco products to juveniles. While early data indicates that over the last year, compliance to the law has improved, the methodology for penalties is considerably weaker in Indiana than other states. States that have seen the greatest improvement in enforcement of youth access laws require that a license be obtained to sell tobacco products and that progressive penalties for retailers who sell tobacco to juveniles includes eventual revocation of license. In 2003, PL 250 was established, requiring all tobacco retailers to have a certificate to sell tobacco products. Selling without a certificate is a class A infraction (up to a \$10,000 fine). This law also allows the Alcohol Tobacco Commission (ATC) to handle all tobacco fines. Civil penalties collected for tobacco violations are deposited in the youth tobacco education and enforcement fund. It also repeals prohibition on certain tobacco billboard advertisements and repeals a provision concerning advertising of tobacco products that is preempted by federal law.

Another law, PL 117 requires a merchant who sells cigarettes to a person in Indiana through direct mail or the Internet to: (1) ensure that the customer is at least 18 years of age; and (2) pay the state cigarette tax or provide notice that the customer is responsible for the unpaid state taxes on the cigarettes. It also establishes penalties for violations. This legislation also requires merchants to furnish the Indiana Department of Revenue the names, addresses and date of birth of those who purchase cigarettes through direct mail or Internet in order to collect excise taxes and use taxes. PL 253 extends PL 117 to also include the sale of all tobacco products via the Internet, direct mail, and telephone.

Local jurisdictions in Indiana are preempted from passing laws stronger than Indiana's state youth access laws. As a result, continued improvement in the state law and enforcement are the only avenues to improve this policy area.

REDUCING TOBACCO ADVERTISING, PROMOTION, AND MARKETING

The Federal Trade Commission's (FTC) most recent annual report (2001) on cigarette sales and advertising shows that cigarette manufacturers spent a record \$11.2 billion on advertising and promotion, an increase of 17 percent from the \$9.57 billion spent in 2000. Over \$239 million was spent in Indiana. That is the largest amount reported since the FTC began tracking cigarette sales and advertising in 1970. The tobacco industry spends \$30.7 million a day to advertise and promote its deadly products. Tobacco advertising increased 67% in the first three years after the tobacco companies agreed to curtail some aspects of their marketing as part of the 1998 Master Settlement Agreement (MSA) with the states.

The amount spent on tobacco prevention in all states is only 6% (\$682 million) of what the tobacco industry spends on mar-

keting and advertising. In fact, the tobacco companies' spending for marketing in a single day in the U.S. (\$30.7 million) is three times Indiana's annual budget for tobacco prevention.

The bulk of the increase in advertising and promotional spending by the tobacco industry is in the area of promotional allowances and retail value added, accounting for 82% of total spending. This money is being spent for retail promotions and product placements that heavily impact children and teenagers. Two-for-one offers and other enticements are particularly effective with teenagers and children who have less disposable income than adults and are more likely to be influenced by promotional items in convenience stores.

The tobacco industry continues to push the envelope with its marketing tactics. The latest of these tactics comes from Brown & Williamson Tobacco Company (B&W) and the promotion of their Kool cigarettes. Kool is a key brand for B&W that seeks African American customers, since menthol cigarettes have historically been popular among African Americans. The recent B&W promotion uses a hip-hop theme to promote Kool cigarettes, includes special packs called Kool Mixx packs. These packs feature images of juvenile-oriented disc jockeys, hip-hop artists and dancers that display a "mural" as the two packs are placed next to each other. These special packs sell for the same price as other Kool products. Buyers of two packs received a free "stick radio," a tiny radio with ear plugs. This Kool Mixx pack promotion is being paired with a national disc-jockey competition, with the slogan "Soundtrack to the Streets." This competition was scheduled to tour 13 cities and includes distribution of a cd. (Indiana cities are not currently targeted for the promotion but are included in distribution for the products.)

Kool has also introduced a series of flavored cigarettes in special packs, marketed under the name "Smooth Fusions". The flavors include "Midnight Berry", "Caribbean Chill", "Mintrigue", and "Mocha Taboo". The use of these flavors provides further evidence that the company is targeting youth, especially African American youth. These products, introduced in March 2004, are being sold in only 20 major cities, including Indianapolis.

Market research shows that African Americans prefer mentholated cigarettes, and Indiana data support this finding. Seventy percent (70%) of African American smokers in Indiana smoke menthol cigarettes .¹⁰⁷ Research also shows that youth and African Americans like flavored cigarettes. In Indiana, 44% of all youth smokers smoke menthols, while 62% of all African American youth smokers smoke menthols¹⁰⁸. This preference for flavored cigarettes coupled with the marketing through the "hip hop" culture, clearly indicates B&W is focusing on a target market aimed at youth.

The pairing of these deadly tobacco products with the hip-hop culture promotes smoking to youth. It is widely known that young people listen to this type of music and can be enticed through such music products as cds and radios. This market-

ing violates the MSA in that it is clearly using tactics and marketing techniques to reach youth through the sponsorship of this DJ competition and giveaways. In May 2004, Indiana's Attorney General joined with 30 other state's attorneys general signing onto a letter from the New York Attorney General planning to file suit against B&W for violating the MSA. B&W soon backed off some aspects of the promotion.

In store displays, similar to the ones used in this promotion, target youth. Research shows that 75% of teens visit a convenience store at least once a week¹⁰⁹. Indiana current (36%) and frequent (64%) middle school youth smokers were significantly more likely to purchase or receive such items than high school youth who never smoked (11%). Similarly for high school youth, current (39%) and frequent (45%) smokers were significantly more likely to purchase or receive such items than high school youth who never smoked (9%)¹¹⁰. Youth who wear tobacco company items encourage smoking behavior and a positive attitude toward tobacco companies.

FIRE SAFE CIGARETTES

Cigarette caused fires are responsible for 1,000 deaths and 4,000 injuries in the U.S. One-third of the victims are children. In addition to lost lives, these fires cause \$4 billion in property damage¹¹¹.

While it is not possible to ensure every smoker uses care when handling an intentionally burned product, it is possible to alter the way that product is manufactured to make cigarette-caused fires far less likely. In June 2004, New York becomes the first state to require new "fire-safe" cigarettes to be sold. The law requires tobacco manufacturers to produce cigarettes meeting new fire safety standards. These standards came out of a technical study group mandated by the federal Safe Cigarette Act of 1984 and were deemed "technologically and economically feasible." This law is meant to cut down on the number of smoking-related fires. Unfortunately, Hoosiers are not protected by such a regulation.

The fire safe cigarettes are wrapped in special ultra-thin banded paper that inhibits burning. It is important to note that the lower-ignition paper does nothing to curtail the toxicity of cigarettes or reduce the health effects of smoking. Major cigarette makers have been urged to use New York's standards to produce and distribute fire-safe cigarettes to other states. However, there is no regulation requiring this practice.

FUNDING FOR COMPREHENSIVE TOBACCO CONTROL PROGRAMS

The U.S. Centers for Disease Control and Prevention states that adequate funding is necessary to carry out a comprehensive tobacco control program and to improve on Hoosier's health that is impacted by the State's alarming tobacco use rates.

In 2002, Indiana ranked sixth in the nation in funding tobacco

prevention, and was spending 93.4 percent of the minimum amount of \$34.8 million that the CDC recommends Indiana spend on tobacco prevention. Funding for Indiana's comprehensive tobacco control program was reduced by approximately 70 percent in April 2003. The appropriation was reduced to \$10.8 million annually for state fiscal years 2004 and 2005. Indiana is currently spending 31% of the CDC recommeded minimum amount, ranking it 26th among other states.

Impact of Budget Reduction

For SFY 2004 and 2005, the ITPC Executive Board approved several budget cuts in components of the Hoosier Model for Comprehensive Tobacco Control Programs.

ITPC's commitment to its community programs remained strong, building on the great progress that had been made, but the following changes were made during SFY 2004:

- The development of a statewide telephone line to help smokers quit was stopped.
- The community-based partnerships and minority-based partnerships were renewed in the fall 2003, with a reduction in the grant period from 24 months to 18 months. The scope of the grant was narrowed in focus on limited interventions rather than a comprehensive plan. Overall funds for local community grants was reduced by 30%.
- Local community grants were not guaranteed for each county, nor was each county guaranteed an allotment of funding.

 Therefore, the grants were competitive in nature.
- The minority-based partnership grant program was changed to include grants to both local and state minority organizations. No cuts were made in the amount of funding for minority grants.
- The statewide grant funding in SFY 2003-2004 was reduced to 50% of its annual budget and the existing grantees were asked to modify their scopes of work. Pilot grants were eliminated. Statewide grants were awarded in February 2004 for a total of \$1.25 million, which was a reduction from \$6 million. The grant period was reduced from 24 months to 12 months for all statewide grants.

While progress has been made in changing attitudes of smokers and nonsmokers, youth and adults, tobacco use in Indiana is still highly acceptable due to current social norms. A statewide media campaign continued so that visibility of tobacco issues stay in front of Hoosiers. The following modifications were made for SFY 2004-2005:

- The budgeted amount for the statewide media campaign was reduced by 50%.
- ITPC partnered with the American Legacy Foundation on their paid media co-op program, providing leverage for increasing the purchasing power of media buys.

The Alcohol and Tobacco Commission (ATC) began instituting a tobacco retailer certificate program requiring a certificate fee of \$50, providing increased revenue for ATC. ATC and ITPC have made great strides in reducing the sales of tobacco to youth.

• The budgeted amount to ATC for enforcement was reduced by 63% in SFY 2004.

Tobacco control experts recommend maintaining a strong commitment to evaluation. Evaluation data are extremely important in verifying program results. Some cost cutting measures can be put into place while still maintaining integrity to evaluation results. The following changes were made:

- The evaluation budget was reduced by 50%.
- The State Board of Accounts Monitoring Engagements Agreement was reduced relative the number of grantees.

The agency administration and management costs were reduced by 27%. With the new budget, staff has assumed additional responsibilities relative to providing training efforts statewide. ITPC has not filled 9 vacant positions that exist from the original staffing structure.

The programmatic impact of the budget reductions is not known at this time. However, states such as Minnesota that experienced similar budget reductions found that youth susceptibility to smoking, an important predictor of youth tobacco use, significantly increased after the funding was reduced. Minnesota's annual tobacco prevention and cessation program funding was cut more than 80% putting an end to the youth-focused media campaign. Similarly, Massachusetts experienced an increase in illegal tobacco sales to minors after a 92% budget cut⁹⁴.

Return on Investment

The amount recommended by the CDC for funding of comprehensive tobacco control in Indiana is \$34.78 – \$95.80 million to be funded by the Master State Settlement Agreement (MSA). ITPC's program is modeled after the nation's most successful tobacco control programs such as Florida, Oregon, Mississippi, California, and Massachusetts. These states have experienced strong return on their investment.

- California estimated that for every \$1.00 invested in the state tobacco prevention program, California saved \$3.50 in direct healthcare costs.
- Massachusetts found that it saved over \$2.00 in direct healthcare costs for every \$1.00 invested in the state tobacco prevention program.
- Indiana could lock in similar returns on investment by restoring adequate funding for its state tobacco prevention program. CDC recommends that Indiana spend \$34.8 million annually for tobacco prevention programs.

Well, today is the day!!!! I just caught myself running out of cigarettes and rummaging through the ashtray for a half smoked ciggarette and it made me so upset!!! I never realized that my addiction was so bad!!! I'm almost 24 now and have been smoking since 16. I have heard my husband say over and over how he hates my smoking and how he gets sore throats and his allergies act up because of it but I never seemed to care. Well, it's finally hitting me. I want to do this and I'm going to do this!!!!!

Krissy Laporte County

Eight out of ten Indiana youth and adults have seen an advertisement from the ITPC media campaign. Confirmed awareness of the ads has steadily increased of the past few years as every county in the state is being reached by the media campaign.

I smoked for about 8 years after being a non-smoker most of my life. I started smoking when I got divorced and smoked most of my 30's. Most people smoke before that and I think I smoked to lose weight and take off stress. I think to be truly successful at quitting, you must analyze why you smoke. People smoke cigarettes for different reasons, emotional or otherwise. I think you have to examine why to be a lifelong non-smoker. I also think that we need to have all public places "smoke free".

Tammy Marion County

INDIANA'S TOBACCO SETTLEMENT APPROPRIATIONS

TOBACCO MASTER SETTLEMENT AGREEMENT ACCOUNTAS OF JUNE 30, 2004

 Total Settlement Receipts
 \$721,786,571.00

 Total Interest Earnings (since inception)
 \$13,634,830.00

 Total Revenue
 \$735,421,401.00

 Less Transfers Out
 \$550,137,991.00

 Total Expenses
 \$550,137,991.00

 Account Balance
 \$185,283,410.00

Pursuant to IC 4-12-1-14.3 all payments made by the tobacco industry to the State of Indiana in accordance with the Master Settlement Agreement are deposited in the Indiana Tobacco Master Settlement Agreement fund. Money may be expended, transferred, or distributed from the fund if authorized by law.

INDIANA'S TOBACCO SETTLEMENT APPROPRIATIONS AND EST. OF REMAINING BALANCES

As of June 30, 2004

Fiscal Year = July 1 - June 30 In Millions	1999-2000	2000-2001	2001-2002	2002-2003	2003-2004	2004-2005
Tobacco Use Prevention and Cessation Trust Fund		\$35.0	\$5.0	\$25.0	\$10.8	\$10.8
¹Retained in the MSA Fund				(\$10.0)		
Local Health Departments		\$3.0	х	\$3.0	\$3.0	\$3.0
Minority Epidemiology		х	Х	Х	\$0.5	\$0.5
State Department of Health		х	Х	Х	\$25.7	\$25.7
Cancer Registry		х	х	х	\$0.2	\$0.2
Minority Health Initiative		х	х	Х	\$2.1	\$2.1
Sickle Cell		х	х	Х	\$0.2	\$0.2
Aid to County Tuberculosis Hospitals		х	х	Х	\$0.1	\$0.1
Aids Education		х	Х	Х	\$0.7	\$0.7
HIV/AIDS Services		х	Х	Х	\$2.3	\$2.3
Test for Drug Afflicted Babies		х	х	Х	\$0.1	\$0.1
State Chronic Diseases		х	х	х	\$0.5	\$0.5
Women, Infants, and Children Supplement		х	х	Х	\$0.2	\$0.2
Matemal Child Health Supplement		х	х	Х	\$0.2	\$0.2
Breast Cancer Education and Diagnosis		х	х	х	\$0.1	\$0.1
Prostate Cancer Education and Diagnosis		х	х	х	\$0.1	\$0.1
Rural Development Admin Fund		х	х	Х	\$2.4	\$2.4
Rural Development Council Fund		x	х	х	\$1.2	\$1.2
Value Added Research Fund		×	х	х	\$0.6	\$0.6
Technology Development Grant Fund		х	Х	х	\$4.5	\$4.5

INDIANA'S TOBACCO SETTLEMENT APPROPRIATIONS AND EST. OF REMAINING BALANCES (Continued)

21st Century Research and Technology		х	х	х	\$37.5	\$37.5
Commission on Hispanic and Latino Affairs		Х	Х	Х	0.1	0.1
Prescription Drug Account		\$20.0	\$10.0	\$20.0	\$8.0	\$8.0
⁵ Transferred to General Fund			(\$5.3)	(\$14.7)		
Indiana Health Care Account & Chip Match (Chip Match only, 1999-2000)	18.8	\$23.1	\$33.6	\$38.2	х	х
⁵ Transferred to General Fund			(\$8.3)	(\$15.6)		
CHIP Assistance - previously included with IN Health Care Account		x	x	x	\$23.8	\$26.2
Local Health Maintenance Fund		\$1.5	\$1.3	\$1.4	\$3.9	\$3.9
Farmers & Rural Community Impact Account		х	\$5.0	\$5.0	\$0.0	\$0.0
⁵ Transferred to General Fund			(\$4.66)	(\$0.04)		
Community Health Centers Capital Costs		\$10.0	х	\$1.0	\$0.0	\$0.0
⁵ Transferred to General Fund			(\$1.0)			
Community Health Centers Operations Cost		\$15.0	\$15.0	\$15.0	\$15.0	\$15.0
⁵ Transferred to General Fund			(\$0.4)			
Regional Health Care Construction Account		х	\$14.0	\$14.0	\$0.0	\$2.9
⁵ Transferred to General Fund			(\$10.0)			
Developmentally Disabled Client Services		х	\$13.4	\$30.3	\$21.3	\$21.3
FSSA - Division of Disability and Aging		х	\$3.0	\$3.0	\$0.0	\$0.0
DDARS Salaries of Direct Care Workers		х	х	х	\$3.0	\$3.0
Transfers to General Fund FY03				\$30.3		
Total Appropriations	\$18.8	\$107.6	\$100.3	\$145.9	\$168.1	\$173.4
Beginning Bal 7/1		\$151.0	\$191.5	\$242.9	\$199.88	\$185.2
² Transfers Out & Appropriations	-18.8	-\$94.0	-\$101.4	-\$191.2	-\$144.7	-\$173.4
³ Receipts & Interest	169.8	\$134.5	\$152.8	\$148.2	\$130.0	
⁴ Ending Balance 6/30	\$151.0	\$191.5	\$242.9	\$199.9	\$185.2	\$11.78

^{1.} Retained in the MSA Fund by the State Budget Agency because it was determined the MSA Fund was over appropriated and in violation of the 60% spending cap.

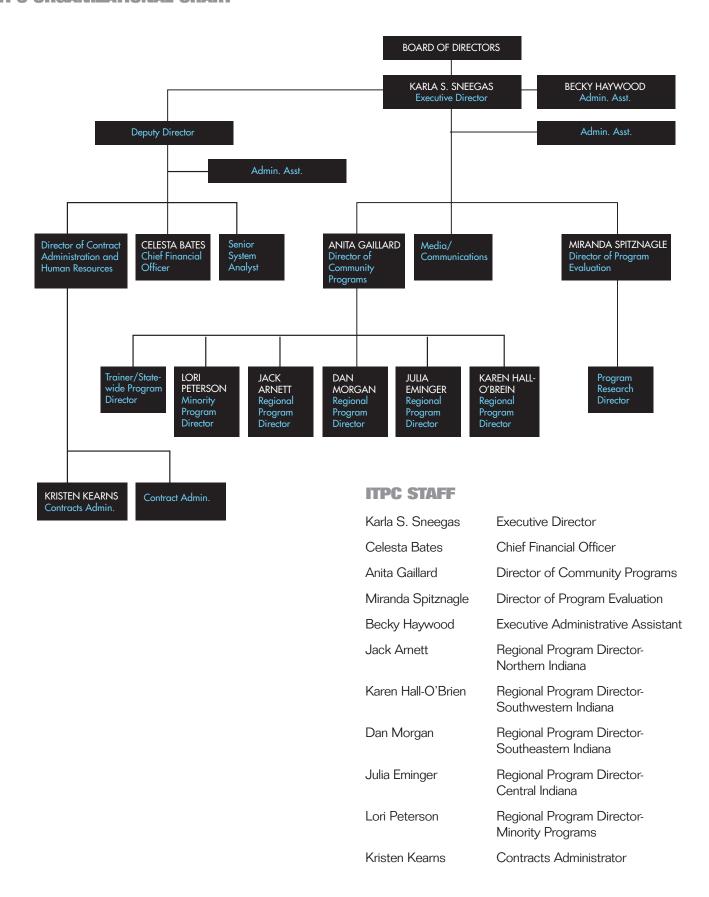
^{2.\$168.1} and \$173.4 represents appropriations listed in House Enrolled Act 1001-2003. Transfers Out & Appropriations for Fiscal Years 2000-2003 are actual transfers out of the fund as listed in the Auditor of State's accounting system instead of appropriations listed in HEA 1001-2003.

^{3.} Further analysis of the Receipts and Interest deposited into the MSA fund resulted in the need to adjust past revenues and ending balances to reflect actual amounts posted to the Auditor of State's records.

^{4.} Projected ending Balance does not include any settlement receipts or interest to be earned in fiscal year 2005. In years past, settlement receipts have been received in the spring of the year and therefore are expected in the spring of 2005.

^{5.} Transfers to General Fund ordered by State Board of Finance. A total of \$60 million dollars for fiscal years 2002 and 2003 biennium was transferred from various tobacco funded programs into the General Fund from the original appropriations by the Legislature.

ITPC ORGANIZATIONAL CHART



EXECUTIVE BOARD STRUCTURE

The Tobacco Use Prevention and Cessation Executive Board (Tobacco Board) was established by Indiana Code 4-12-4-4. This stipulates the following Board structure:

Five (5) ex officio members:

- The Executive Director (nonvoting member)
- The State Superintendent of Public Instruction
- The Attorney General
- The Commissioner of the State Department of Health
- The Secretary of the Family and Social Services Administration

Eleven (11) members appointed by the governor who possess:

• Knowledge, skill, and experience in smoking reduction and cessation programs, health care services, or preventive health measures

Six (6) members who are appointed by the governor representing the following organizations:

- The American Cancer Society
- The American Heart Association, Indiana Affiliate
- The American Lung Association of Indiana
- The Indiana Hospital and Health Association
- The Indiana State Medical Association
- The Indiana Council of Community Mental Health Centers

The Governor shall designate a member to serve as chairperson. The executive board shall annually elect one of its ex-officio members as vice chairperson. IC 4-12-4-4(i).

Executive Board Members (as of 6/30/04)

Karla S. Sneegas Indianapolis Robbie Barkley Indianapolis Richard Feldman, M.D. Indianapolis Patricia Hart Muncie Richard Huber, M.D. Greenwood Stephen Jay, M.D. Indianapolis James Jones Cicero Robert Keen, Ph.D. Greenfield J. Michael Meyer Borden Steve Simpson, M.D. Gary John Graydon Smith Indianapolis Alan Snell, M.D. South Bend Mohammad Torabi, Ph.D. Bloomington

Ex Officio Members

Peggy Voelz

Alice Weathers

Gregory A. Wilson, M.D. State Health Commissioner,

Acting Chair

Columbus

Evansville

Stephen Carter Attorney General

Suellen Reed, Ed.D. State Superintendent of

Public Instruction

Cheryl Sullivan Secretary Family and Social

Services Administration

ADVISORY BOARD STRUCTURE

Advisory Board (IC 4-12-4-16)

ITPC has an advisory board that meets quarterly and serves to offer recommendations to the Executive Board on the following:

- Development and implementation of the mission and long range plan;
- Criteria to be used for the evaluation of grant applications;
- Coordination of public and private efforts concerning reduction and prevention of tobacco usage; and
- Other matters for which the Executive Board requests recommendations from the advisory board.

Indianapolis

Muncie

Advisory Board Members

Olga Villa Parra

Cecilia Williams

Robert Amold Wolcotteville Arden Christen, D.D.S. Indianapolis Diane Clements Evansville Bennett Desadier, M.D. Indianapolis Steve Guthrie Anderson Kiki Luu Fort Wayne Heather McCarthy Griffith Nadine McDowell Gary Steve Montgomery, D.C.P. Franklin Diana Swanson, N.P. Bloomington

EXECUTIVE BOARD VISION AND MISSION STATEMENT

Our Vision

The Tobacco Use Prevention and Cessation Trust Fund Executive Board's vision is to significantly improve the health of Hoosiers and to reduce the disease and economic burden that tobacco use places on Hoosiers of all ages.

Our Mission

The Tobacco Use Prevention and Cessation Trust Fund exists to prevent and reduce the use of all tobacco products in Indiana and to protect citizens from exposure to tobacco smoke. The Board will coordinate and allocate resources from the Trust Fund to:

- Change the cultural perception and social acceptability of tobacco use in Indiana
- Prevent initiation of tobacco use by Indiana youth
- Assist tobacco users in cessation
- Assist in reduction and protection from secondhand smoke
- Support the enforcement of tobacco laws concerning the sale of tobacco to youth and use of tobacco by youth
- Eliminate minority health disparities related to tobacco use and emphasize prevention and reduction of tobacco use by minorities, pregnant women, children, youth and other at-risk populations.

The Board will develop and maintain a process-based and outcomes-based evaluation of funded programs and will keep State government officials, policymakers, and the general public informed. The Board will work with existing partnerships and may create new ones.

ITPC ANNUAL ACCOMPLISHMENTS

SFY 2001

- Allocated funds to the Indiana Alcohol and Tobacco Commission (ATC) to increase the enforcement of Indiana's youth tobacco access law
- Selected an advertising agency to begin a media campaign in September 2001
- Initiated the application process to fund local communitybased partnerships in all 92 counties
- Initiated the application process to allocate \$2.5 million for local minority-based partnerships to address health disparities in Indiana
- Started the process to select an evaluation and research coordinating center
- · Recruited and hired staff

SFY 2002

- Awarded funding to 88 of 92 counties for local partnerships grants to conduct a coordinated, comprehensive tobacco prevention and cessation program. These grants represent over 1200 new tobacco control partners in the State of Indiana.
- Approved funding for 31 local minority partnership grants representing 23 of the 29 counties with the majority of the minority populations in Indiana.
- Completed the Community Programs funding with awards to 19 statewide, regional and pilot program partners in June 2002.
- Successfully planned and launched three advertising campaign waves, two new brands (Whitelies.tv and voice.tv), and reached millions of Hoosiers with a "Live Without Tobacco" message.
- Launched an aggressive youth-led tobacco movement called VOICE, formed a youth advisory board, and held our first statewide youth summit.
- Increased earned print media coverage of tobacco issues by approximately 400% compared to coverage in 2000.
- Partnered with Indiana Black Expo (IBE) enabling them to sever its financial ties with tobacco companies and allowed ITPC to be a major part of IBE Summer Celebration.
- Decreased the average noncompliance rate for retailers inspected for violations to Indiana's tobacco sales to minors law to 20% in 2002 from 29% in October 2001.
- Established an evaluation coordinating center to provide external evaluation for the ITPC program.

SFY 2003

- Youth smoking for high school students decreased 26% from 2000 to 2002; meeting the 2005 objective.
- Over 193,000 Hoosier adults reported quitting smoking in 2002.
- Approximately 86% of Hoosier adult smokers reported they expect to quit smoking and 62% say they will quit smoking in the next 6 months.
- Cigarette consumption in Indiana, measured by cigarette stamp sales decreased 17% between SFY 2002 and SFY 2003, at the same time increasing state revenues from tobacco taxes by 186%.
- All of Indiana's 92 counties received a grant to conduct tobacco prevention and cessation in their communities, including setting up resources to help smokers quit. Over 1,600 local organizations are involved statewide, including 31 local minority organizations and 19 state, regional and pilot programs.
- ITPC partners conducted over 4,700 activities at the local level, such as implementing prevention and education programs in schools, developing cessation networks, and raising awareness of tobacco prevention efforts.
- In April 2003 Bloomington passed the most comprehensive ordinance in the state banning smoking in all public places. Monroe County followed in May 2003.
- ITPC implemented a comprehensive training plan for staff, board, and partners. Through a variety of training mechanisms, partners are getting the resources needed to implement their local tobacco control programs.
- Every county in the state is being reached by the media campaign and results from the youth and adult media tracking surveys indicate that 75% of Indiana youth and adults are aware of advertisements from the ITPC media campaign.
- Youth who were aware of at least one ITPC ad were 45% more likely to understand that tobacco is addictive and dangerous compared to those not aware of any ITPC ads. Adults who confirmed seeing an ITPC ad were 51% more likely to believe the dangers of tobacco use.
- \bullet Youth that could recall at least one ITPC TV ad were 55% more likely to agree with anti-tobacco industry attitudes than those who have not seen any TV ads.
- A website, www.WhiteLies.tv, was created to educate consumers on the tobacco industry lies and the negative health consequences of tobacco use in Indiana. www.WhiteLies.tv has received over 2 million successful hits and www.Voice.tv over 500,000 hits.
- ITPC continued its support of the youth-led movement, VOICE, and held the second "Say What" VOICE youth sum-

mit, where 300 Indiana youth gathered to learn about VOICE and how to "Have Your Say" against the tobacco industry.

- Indiana news media have devoted more newsprint and airtime to tobacco control stories, specifically about the local coalitions and issues surrounding smoke free air policies, logging over 2500 newspaper articles. Compared to 1999-2000, coverage of tobacco issues in Indiana newspaper has increased by over 900 articles in 2002-2003.
- The ITPC partnership with the Alcohol and Tobacco Commission (ATC) has reduced the non-compliance rate of retails sales to minors from 29% in October 2001 to 14% in June 2003.
- ITPC's evaluation and research coordinating center conducted the first adult tobacco survey and the second youth tobacco survey; designed and implemented a web-based program tracking system to allow ITPC partners to report their activities; and conducted an annual assessment to gauge progress from the first year.

SFY 2004

- Youth smoking among high school students decreased 26% from 2000 to 2002; meeting ITPC's 2005 objective.
- Cigarette consumption in Indiana decreased 18.5% since SFY 2002, while at the same time state revenues from tobacco sales increased by 175%.
- ITPC entered into its second funding cycle for Community, Minority and Statewide grants, all accomplished through a Request for Proposals process.
- All of Indiana's 92 counties received a grant to conduct tobacco prevention and cessation in their communities, including setting up resources to help smokers quit. Over 1,600 organizations are involved locally, including 24 local and state minority organizations and 12 organizations working on statewide programs.
- ITPC local partners conducted over 10,200 activities at the community level, such as implementing prevention and education programs in schools, developing cessation networks, working to protect Hoosiers from secondhand smoke, engaging local businesses, and raising awareness of tobacco prevention efforts.
- ITPC 's comprehensive training plan for staff, board, and partners used a variety of training mechanisms so partners get the resources needed to implement their local tobacco control programs. In SFY 2004, these training opportunities included the second ITPC Partnership Information X-Change with over 350 tobacco control advocates from 88 counties in attendance.
- Indiana served as one of two national pilots for an advanced tobacco control leadership fellows program. A total of 14 local

- tobacco control advocates from Indiana were selected to participate through an extensive application process.
- Eight out of ten Indiana youth and adults have seen an advertisement from the ITPC media campaign. Confirmed awareness of the ads has steadily increased of the past few years as every county in the state is being reached by the media campaign.
- Youth who were aware of at least one ITPC ad were 59% more likely to understand that tobacco is addictive and dangerous compared to those not aware of any ITPC ads.
- The social acceptability of using tobacco among youth has declined significantly since 2001.
- Adults who confirmed seeing an ITPC ad were 56% more likely to agree that secondhand smoke is a serious problem and that indoor worksites should be smoke free.
- Adult smokers who had confirmed awareness of an ITPC TV ad were twice as likely to try to quit smoking in the past year.
- The website, www.WhiteLies.tv, educates Hoosiers on negative health consequences of tobacco use and the burden on Hoosiers and has received over 4 million hits.
- ITPC continued support of the youth-led movement, VOICE, through local events. The youth-focused website, www.Voice.tv, has had over 1.4 million hits.
- ITPC strengthened its partnership with Indiana Black Expo and the Summer Celebration enabling the IBE to continue to refuse financial contributions from tobacco companies and strengthen its tobacco prevention and cessation programming.
- ITPC hosted the 2nd annual Tobacco Free Kids Day at the Indiana State Fair. In 2003, ITPC and the State Fair recruited a youth sports figure to come to the Fair resulting in the largest-recorded Tuesday attendance, up 64% over the previous years attendance.
- ITPC partnered with many events throughout Indiana, including Circle City Classic, Fiesta Indianapolis, La Grand Fiesta, county fairs and other community events.
- Indiana news media has generated nearly 4,800 articles since May 2002 to tobacco control stories, specifically about the local coalition activities and issues surrounding secondhand smoke.
- The ITPC partnership with the Alcohol and Tobacco Commission (ATC) has reduced the non-compliance rate of tobacco retail sales to minors from 29% in October 2001 to 13% in SFY 2004.
- Enforcement of Indiana's tobacco laws has become a priority among law enforcement. The ITPC/ATC partnership continued to provide 13 additional state excise officers and support staff, and resources for training law enforcement officers on the enforcement of Indiana laws.

- TRIP officers conducted close to 6,400 retailer inspections, averaging over 530 inspections per month.
- ATC performed 649 retailer training workshops reaching 21,000 people.
- The percentage of current high school smokers refused purchase of cigarettes due to age increased to nearly 40% in 2002, up from approximately 30% in 2000.
- ITPC's evaluation and research coordinating center continued to analyze data and produce fact sheets to share tobacco use behavior, attitude and belief trends in Indiana.
- ITPC conducted the 4th media tracking survey and prepares for the 2nd adult and 3rd youth tobacco surveys.
- ITPC monitored programs through a quarterly reporting system. The system is web-based for program monitoring. The activities occurring in the local communities are tracked to ensure the programs are executed properly and to assess the level of activity at the local level.
- ITPC worked with the State Board of Accounts to have field auditors around the state visit the ITPC partners and perform monitoring engagements. The engagements, similar to a miniaudit of grant funds, also serves as an opportunity to educate grantees on administering funding in a not-for-profit environment.
- ITPC partnered with the State Personnel Department is promote quitting smoking to all state employees through personnel communication, working through health plans, promoting resources, and regular contact with all agency human resources directors.



THE HOOSIER MODEL FOR COMPREHENSIVE TOBACCO PREVENTION AND CESSATION

The CDC recommends that States establish tobacco control programs that are comprehensive, sustainable, and accountable. Based upon the evidence, specific funding ranges and programmatic recommendations are provided. The recommended funding range for Indiana is \$34.8 to \$95.8 million. The CDC recommends that States establish tobacco control programs that contain the following elements:

- Community Programs to Reduce Tobacco Use
- Chronic Disease Programs to Reduce the Burden of Tobacco-Related Diseases
- School Programs
- Enforcement
- Statewide Programs
- Counter-Marketing
- Cessation Programs
- Surveillance and Evaluation
- Administration and Management

The CDC draws on "best practices" determined by evidence-based analyses of cigarette excise tax-funded programs in California and Massachusetts and by CDC's involvement in providing technical assistance in the planning of comprehensive tobacco control programs in other states.

The Hoosier Model for comprehensive tobacco prevention and cessation is derived from the Best Practices model outlined by the CDC and required by I.C. 4-12-4. In addition, guidance is provided through recommendations outlined in the Guide to Community Preventive Services for Tobacco Control Programs. This Guide provides evidence the effectiveness of community-based tobacco interventions within three areas of tobacco use prevention and control: 1) Preventing tobacco product use initiation, 2) Increasing cessation 3) Reducing exposure to secondhand smoke. The Hoosier model has five major categories for funding and incorporates elements from all nine categories recommended by the CDC.

The Hoosier Model consists of:

- Community Based Programs
- Statewide Media Campaign
- Enforcement
- Evaluation and Surveillance
- Administration and Management

Funding for Indiana's comprehensive tobacco control program was reduced by approximately 70 percent in April 2003. The appropriation was reduced to \$10.8 million annually for state fiscal years 2004 and 2005. For SFY 2004 and 2005, the ITPC Executive Board approved several budget cuts in components of the Hoosier Model. These changes are discussed in each program section.

COMMUNITY PROGRAMS

PURPOSE

To achieve the individual behavior change that supports the nonuse of tobacco, communities must change the way tobacco is promoted, sold, and used while changing the knowledge, attitudes, and practices of young people, tobacco users, and nonusers. Effective community programs involve people in their homes, worksites, schools, places of worship, entertainment venues, civic organizations, and other public places. Evaluation data show that funding local programs produces measurable progress toward statewide tobacco control objectives.

INDIANA'S EFFORT

Indiana has been nationally recognized for its Community Based Programs that incorporates Minority, School, Cessation and Statewide Programs under one broad category because these programs are interconnected and can all be addressed by linking local community coalitions with the statewide counteradvertising program.

In the summer 2001, ITPC set up its community-based and minority-based grant application process utilizing the American Cancer Society's Communities of Excellence guidelines. The first local partners were funded in December 2001 and as of September 2002, all of Indiana's 92 counties had a tobacco prevention coalition operating. By June 2003, 31 minority-based coalitions were established in 23 Indiana counties.

The fall of 2003 brought a grant renewal process for local tobacco control efforts. ITPC staff conducted five regional trainings statewide to prepare new and existing grantees for the application process. In addition, to getting information on completing the application, organizations statewide were given training on evidenced-based tobacco control interventions. The training stressed the importance of being strategic in community planning especially due to the reduction in available funding for local efforts. ITPC was able to continue the work of coalitions in all 92 counties, with 24 state and local minority based partners working in 25 counties through SFY 2005.

The partners have been working on four goal areas: 1) Building and maintaining coalitions; 2) Reducing secondhand smoke exposure; 3) Implementing work plans designed to decrease youth smoking initiation; and 4) Increasing smoking cessation strategies and services. Local coalitions provide training opportunities to establish a solid foundation in tobacco control knowledge and the tactics of the tobacco industry. They have also increased advocacy activities related to tobacco free schools and secondhand smoke policies.

In addition to the local partnerships, the statewide partnership grants continued. The 19 statewide, regional and pilot partners that were established in June 2002 were reduced to 12 statewide projects by June 2004 due to budget constraints.

Statewide projects increase the capacity of local programs by providing technical assistance on evaluating programs, promoting media advocacy, implementing smoke free policies, and reducing minors' access to tobacco. Supporting organizations that have statewide access to diverse communities can help eliminate the disparities in tobacco use among the State's various population groups. Programs that successfully assist young and adult smokers in quitting can produce a quicker, and larger, short-term public health benefit than any other component of a comprehensive tobacco control program. These projects have a broader focus with ITPC's vision and mission and enhance the efforts occurring at the local level.

The community programs are evolving into strong and influential forces in the statewide tobacco control movement. Their work in the local communities is vital to the success of the statewide program, and ITPC is committed to the local community programs by providing training, technical assistance and resources. Over 1,600 organizations work on tobacco control through the ITPC network of community programs in Indiana. See the appendix for summaries of each county and the coalitions working in those counties.

PROGRAM CHANGES IN SFY 2004

ITPC's commitment to its community programs remained strong, building on the great progress has been made. However, the following program changes were made during SFY 2004 due to the budget cut.

- The development of a statewide telephone line to help smokers quit was stopped.
- The community-based partnerships and minority-based partnerships were renewed in the fall 2003, with a reduction in the grant period from 24 months to 18 months. The scope of the grant was narrowed in focus on limited interventions rather than a comprehensive plan. Overall funds for local community grants reduced by 30%.
- Local community grants were not guaranteed for each county and each county was not guaranteed an allotment of funding. Therefore, the grants were competitive in nature. No more than one grant per county was accepted for review.
- The minority based partnership grants was changed to include grants to both local and state minority organizations. No cuts were be made in the amount of funding for minority grants.
- The statewide grant funding in SFY 2003-2004 was reduced to 50 percent of their annual budgets and the existing grantees were asked to modify their scopes of work. Statewide grants were awarded in February 2004 for a total of \$1.25 million, a reduction from \$6 million from SFY 2002-2003. Grants were reduced from 24 months to 12 months.

EARLY FINDINGS

Local community-based and state and local minority-based programs

The community program progress is tracked through a variety of mechanisms. This includes monitoring the implementation of activities as well as evaluating their effectiveness in working towards ITPC's objectives. ITPC tracks how local coalitions implement activities through a web-based program tracking system. Each coalition has a unique login to access the system and report electronically. Through this reporting system ITPC can track local program activity level.

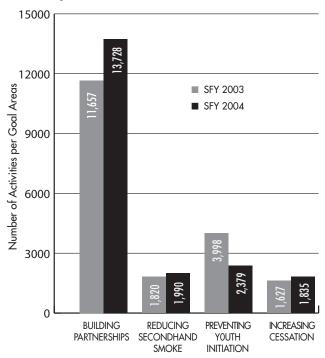
Coalitions have reported nearly 10,200 program activities since July 2002, ranging from VOICE events to community presentations to delivering training. These include activities such as:

- More than 2,000 presentations annually in SFY 2003 and SFY 2004 to local communities
- Approximately 475 training activities in SFY 2003 and nearly 400 trainings in SFY 2004
- Nearly 600 cessation, patient, and student education activities in SFY 2003, with almost 700 such local activities in SFY 2004

A majority of the work local coalitions are doing is activity

toward Goal 1: Building Strong Partnerships, as illustrated in Chart 21: Tobacco Control Program Areas by Local Partnerships 112. These activities include training of coalition and community members, adults and youth; developing relationships with key stakeholders and decision makers in their communities; and building diverse coalitions in their community. Throughout many Indiana communities, tobacco prevention coalitions were established for the first time. The ITPC funding provided the resources to hire staff, purchase education materials and resources, conduct training programs, and recruit and maintain local coalitions. The beginning stages of a coalition are spent establishing partnerships and building capacity of the coalition. The formation of coalition is a powerful and effective tool to mobilize the community to make the change that support tobacco control efforts. These coalitions also have become the central focus in organization networks through their community.

Chart 21: Tobacco Control Program Areas by Local Partnerships



During SFY 2003 and 2004, building strong partnerships was the goal area where a majority of the local coalitions are working.

Overall, the coalitions throughout the State have increased the number of voluntary smoke free policies in worksites, government buildings, recreational facilities, and restaurants. This tobacco control strategy is central to Goal 2: Reducing Exposure to Secondhand Smoke. Several coalitions are continuing to educate their communities on the dangers of secondhand smoke and that they can make a difference and enact smoke free air policies that would protect everyone. The overall goal is to allow all Hoosiers to breathe smoke free air.

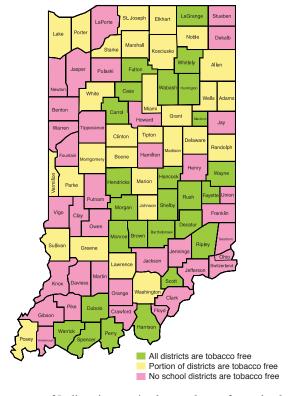
As coalitions across Indiana work to make these changes in their communities, they also focus on the environment of youth. While federal law prohibits smoking within school buildings, local jurisdictions have enacted policies that are more restrictive and encompass all school grounds. Coalitions are working with school districts to ensure tobacco use is not allowed on school campuses anywhere. Reasons cited for these more restrictive policies include:

- Protecting all youth and adults from secondhand smoke exposure
- Providing positive role modeling for all students at all times on school grounds
- Reducing litter
- Demonstrating a positive image for the school district
- Encouraging smoking cessation among employees to reduce health care costs

 Making enforcement of youth possession of tobacco laws easier

Progress is being made with schools throughout Indiana as 47% of youth enrolled in Indiana public schools are protected through 100% tobacco free school policies. In 27 counties all school districts have implemented these policies. Another 29 counties have a portion of their school districts with tobacco free campuses. However, the remaining 36 counties do not have a tobacco free campus at any of the school districts in their counties. In many schools the students are leading the initiative to get tobacco off of their campuses. They do not want to be exposed to the smoke and feel that if the students cannot use tobacco on campus then neither should the adults.

Figure 4: Tobacco Free Schools Map



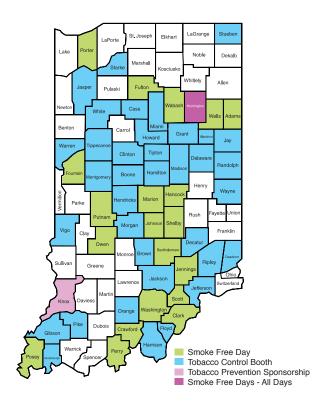
Thirty percent of Indiana's counties have tobacco free school campuses for all of their schools.

Many coalitions are involving youth in all coalition efforts and as they work on Goal 3: Preventing Youth Initiation of Tobacco Use. Youth that do not start to smoke before the age of 19 are more likely to remain smoke free for their lifetime. Recommended strategies for preventing youth from starting to smoke include increasing price of tobacco products, strong media campaigns, and smoke free environments. All of these strategies are working in Indiana. The cigarette tax increase is having an impact as youth are more sensitive to price increases. The local communities complement these statewide strategies with leveraging local media and establishing networks that support youth in their decision not to smoke. VOICE, Indiana

youth speaking out against big tobacco, is one way coalitions are supporting youth and letting their voice be heard to stop the devastation of tobacco use. More smoke free public places and workplaces impact the number of youth who start smoking.

Through implemention of these strategies, Indiana communities are changing social norms, creating a tobacco free culture in Indiana. Through smoke free air policies and increasing the price of tobacco, more people want to guit and need help guitting. Local coalitions are providing these resources through work on Goal 4: Increasing Cessation. While tobacco use is an addiction, people can guit with help. Setting up cessation networks and policies are key to changing how cessation is delivered throughout the community. These local networks are meeting the demand for tobacco users who are ready to quit Nearly 1,100 "How to Quit" packets have been requested through the 1.866.515.LIFE toll free line and www.WhiteLies.tv website. ITPC mails out a packet to the individual who is interested in guitting smoking. Family members or friends often request packets to be sent to those smokers they would like to encourage to quit. In addition, the local ITPC partner is notified that someone in their county is interested in quitting smoking and then follows up with the individual to see if their cessation needs are being met.

Figure 5: 2003 County Fairs Smoke Free Days and Tobacco Control Coalition Booths



Over half of the Indiana Counties had a presence at the County Fairs.

Local coalitions are approaching tobacco control in various ways tailored to their own communities. Many coalitions take advantage of local fairs and festivals as an avenue for promoting a tobacco free message. In the summer of 2003, 20 of the 92 counties participated in their County Fairs with a Tobacco Free Day and another 33 counties had a booth at the fair, which allowed them to promote a tobacco free lifestyle. Huntington County took that even further and was able to make the entire fair tobacco free!

STATEWIDE PROGRAMS

ITPC Statewide partnerships are using evidenced-based tobacco prevention and cessation efforts for youth and adults. These programs are implemented by diverse partner organizations throughout the State complementing and enhancing the efforts of the local programs. All state grantees have been coordinating and linking with ITPC to deliver a unified and strengthened message across the State that is carefully coordinated with ITPC community-based and minority-based grant recipients. Approximately \$1.25 million dollars was awarded to the following organizations in SFY 2004:

- Future Choices. Inc.
- Indiana Academy of Family Physicians Foundation
- Indiana FFA Foundation
- Indiana High School Athletic Association
- Indiana State Department of Health-Prenatal Substance Use Prevention Program (PSUPP)
- Indiana State Fair Commission
- Indiana State Medical Association
- Indiana Teen Institute at Vincennes University
- Montgomery County AHEAD Coalition

New 2004-2005 statewide partners and projects

Future Choices, Inc.: Partners with six other organizations that focus on services to those with disabilities to provide statewide tobacco awareness and advocacy programs for Hoosiers with disabilities. It concentrates on education of the effects of tobacco use and secondhand smoke.

Indiana State Fair Commission: Provides a statewide platform to enhance ITPC's media campaign to a large and diverse population showcasing VOICE and agriculture. It educates the public on tobacco control issues in an entertaining environment, including Tobacco Free Kids Day at the Indiana State Fair.

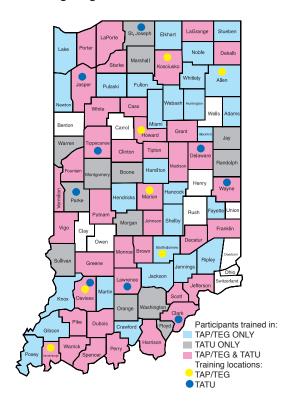
Montgomery County AHEAD Coalition: Provides leadership for a regionalized, ongoing training and capacity building network for communities that will sustain the momentum of the VOICE movement at the grassroots level which will ultimately result in

a successful statewide VOICE movement. This project strengthens existing communication, marketing and networking resources.

In 2002-2003, ITPC partnered with the following organizations. A majority of the projects have been completed and some projects have been awarded continued grants. A few have been able to adjust their projects to extend the grant period.

Clarian Health: Clarian Health Partners, Inc. conducted eight training workshops of Tobacco Education Group and Tobacco Awareness Program (TAP & TEG), a tobacco use intervention and cessation program for youth, for all local community-based and minority-based partners. There were more than a hundred different organizations consisting of schools, hospitals, community centers, local tobacco and drug-free coalitions, health departments, police departments, minority organizations and colleges engaged in the training. Nine training workshops for Teens Against Tobacco Use (TATU), a peer to peer education/prevention program, were also conducted at various locations statewide. A total of 411 facilitators representing 83 counties have been trained in two years. Clarian Health Partners began follow-up with all TATU and TAP & TEG facilitators through an electronic newsletter providing support for everyone working to keep youth tobacco free. In March and May 2004, two state of the art cessation trainings were provided to 25 participants in each session. (Project dates: June 2002 to December 2004)

Figure 6: Counties Participating in Youth Prevention and Cessation Training Programs



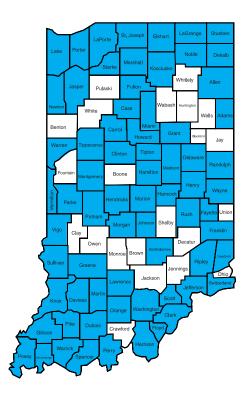
Conner Prairie Living History Museum: Conner Prairie seeks to provide historical context for understanding tobacco prevention in Indiana and apply this perspective to a discussion on current attitudes and behavior regarding tobacco use. Through this program, Tobacco: A Poisonous Practice, Conner Prairie generates discussion of the social and cultural attitudes toward tobacco in the 19th century. Engaging characters, from 1836 Prairietown (Horace Palmerston) and 1886 Liberty Corner (Benjamin Lloyd McIntyre and Theodora Heath Louden) represent the anti-tobacco movement in America. In addition to the programming at the museum, Conner Prairie presents a distance learning version of the program with supplementary education materials for teachers. Conner Prairie was the recipient of the 2003 Award for Innovative Programming from the Indiana Public Health Association for this project. (Project dates: June 2002 to December 2004)

Healthy Communities Initiative of St. Joseph County: Healthy Communities Initiative implemented the Tobacco-Free Zone Project, a clinic-based tobacco prevention and cessation program to de-normalize tobacco use by exposing all patients to prevention messages and opportunities for cessation. This program trained clinic staff, including physicians, in tobacco education and cessation. In addition, youth patients exposed to secondhand smoke received education on these dangers and their parents received advice to encourage cessation. A success story for this project involved an extended family from South Bend that enrolled in a cessation program together. In total, 15 family members enrolled in a cessation program together. They felt that if they smoked together then they should quit together! The family's issue was that several members have smoking related illnesses and all wished to guit. They received local television coverage due to the large number in the family. During the project nearly 1,300 referrals for cessation were made with over 300 clients beginning a cessation program. This project resulted in a 17% quit rate. In addition to cessation services, there were approximately 400 encounters with youth educating them about secondhand smoke. (Project dates: June 2002 to May 2004)

Indiana Academy of Family Physicians Foundation: The Indiana Academy is conducting the Tar Wars® Program to educate elementary school youth regarding tobacco free lifestyles through a community-based approach using physicians, educators and other health care providers, with a goal of reaching youth in all Indiana counties. Indiana Academy of Family Physicians put local coalitions in touch with 4th and 5th graders in classes statewide, to educate students to resist tobacco messages and promote healthy lifestyles. In SFY 2003 and 2004, approximately 275 schools and over 22,000 students received the Tar Wars presentations in 70 counties throughout Indiana. Local coalitions appreciate this tobacco control program and the services of the Indiana Academy of Family Physicians within their local schools.

(Project dates: June 2002 to May 2004; June 2004-May 2005)

Figure 7: Schools Receiving Tar Wars® Presentations, SFY 2003-2004



Indiana Alliance of Boys and Girls Clubs: The Indiana Alliance is implementing SmartMoves, a nationally recognized program encompassing instruction and skill building activities, parental involvement and community support. Youth from the Boys and Girls Clubs also link into the VOICE movement, Indiana's youth speaking out against big tobacco. Programs are established with 61 Boys and Girls Clubs in 34 counties through our Statewide partnership, in addition to the relationships established at the local level. (See Figure 8.) This past year, Indiana Alliance member clubs have conducted close to 4,400 SMART Moves activities involving nearly 48,000 youth across the state. In addition, 4,100 Healthy Lifestyles activities, involving close to 52,000 youth, have been conducted. The SMART Moves program has involved nearly 900 SMART leaders activities with approximately 6,000 young adults in anti-tobacco leadership and advocacy roles. In local clubs, approximately 7,900 adults participated in close to 300 anti-smoking initiatives. Of those who have participated in the SMART Moves program, at least 70% have successfully completed all components of the program. Ninety-four percent (94%) of participants report that the club promotes an anti-tobacco message, with 96% report they have decided not to smoke. Since the ITPC grant began the Indiana Alliance clubs have partnered with more than 100 local organizations to reach youth in the community.

(Project dates: June 2002 to May 2004; June 2004-May 2005)

Figure 8: Participating Boys and Girls Clubs



Indiana Black Expo (IBE): IBE has developed a marketing and educational awareness campaign emphasizing the importance of smoke free environments. The program has implemented the "Commit 2 Quit" campaign to help people stop smoking. The campaign outreach has been statewide and incorporated into specialized community events reaching the minority population. The Commit 2 Quit program has made an impact through media placement, event sponsorship and community involvement. IBE has also included extensive outreach to minority media outlets and involvement of IBE youth in collaboration with VOICE. The ITPC-IBE partnership has enabled IBE to sever its financial ties to the tobacco industry and be leaders in the fight against tobacco, the leading killer of African Americans. For more information on this partnership and the community reach see the section in the Statewide Media Campaign.

(Project dates: June 2002 to May 2004; IBE continues its partnership with ITPC as a statewide minority partner.)

Indiana FFA Organization (FFA): FFA is implementing a grass-roots, youth-driven campaign that includes peer mentoring and leadership development for high school youth. FFA youth develop workshops and promote the tobacco-free message through conferences and agricultural networks throughout the State. Their efforts have included peer mentoring, classroom tobacco-control curriculum implementation and distribution of tobacco control materials through the various chapters throughout the state and at the national FFA Convention in Louisville, Kentucky. Indiana FFA organization annually conducts 14 leadership conferences and workshops. Indiana FFA chapters in

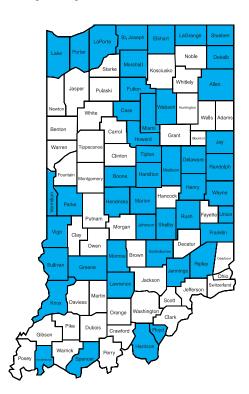
198 schools from 84 counties have enabled tobacco prevention efforts to reach more than 60,000 youth throughout Indiana.

(Project dates: June 2002-May 2004; June 2004-May 2005)

Indiana High School Athletic Association (IHSAA): IHSAA has developed and implemented a communications network to reach student athletes, teachers, coaches and administrative staff with a tobacco free message. Nearly 400 schools received materials about the effects of tobacco use to discuss with students IHSAA also enhanced the ITPC media campaign with the help of a student-athlete advisory committee. IHSAA developed tobacco free messages for various events, such as athletic competitions, and advertisements aired on dozens of radio stations statewide. In SFY 2003 and 2004, IHSAA created and traveled with an interactive exhibit on the health effects of tobacco use and good health. It visited 84 middle schools and 10 Boys and Girls Clubs in 46 counties reaching over 14,000 youth. (Figure 9.)

(Project dates: June 2002-May 2004; June 2004-May 2005)

Figure 9: Indiana Counties Reached During the 2003-2004 School Year by the ITPC/IHSAA Interactive Exhibit on Tobacco Free and Healthy Lifestyles.



Indiana Latino Institute (ILI): The Indiana Latino Institute's (ILI) tobacco control program identifies and secures Latino partners from various community agencies and organizations across the state to form a tobacco control coalition. ILI provides a comprehensive train the trainers program; helps build capacity of partner organizations; and involves Latino youth in the process of over 400 people during 16 diverse trainings throughout the project. ILI provided support to several Indianapolis Latino restaurants in going smoke free, including holding press conferences to announce these smoke free restaurants. A Week Without Tobacco was celebrated among the Latino community in South Bend, culminating with a soccer tournament titled "El que no fuma gana" (The one who does not smoke wins). ILI reached over 4,200 people from June 2002 through August 2003 through direct presentations about tobacco control. ILI also developed a resource center for community partners to access current information available on tobacco control and launched its website in July 2003, www.indianalatino.com.

(Project dates: June 2002 to December 2003. ILI continues its partnership with ITPC as a statewide minority partner. See Community Programs: Local community-based and minority-based partnerships.)

Indiana Minority Health Coalition (IMHC): IMHC provided technical assistance in capacity building and project management to ITPC minority-based partners. This assistance focused on the areas of board development, financial management and reporting, program evaluation and program implementation. IMHC completed assessments on the ITPC minority-based partners and designed individual technical assistance plans. Project staff implemented those plans with 22 ITPC partners. Typology analyses were completed for those ITPC partners. IMHC also provided a three-part, comprehensive, cultural competency training in two key regions of the state, Lake County and a regional training for Howard, Cass, Miami and Grant Counties.

(Project dates: June 2002-May 2004)

Indiana Regional Council in Carpenters: The Indiana Carpenters Union's overall goal is to change the cultural acceptability of smoking and tobacco use by blue collar Hoosiers, specifically those in organized labor. A massive education and awareness campaign has been implemented with union leadership in all labor segments to include anti-smoking measures in union-employer agreement, communicate the health consequences of continued tobacco use, and create an overall healthier work environment for union employees. As unions have traditionally opposed smoke free policies and ordinances, this project is accelerating the process of de-normalizing tobacco use among workers and will assist in promoting policies that promote protection from secondhand smoke. Over 15,000 blue collar workers throughout Indiana have been reached with information about various issues of tobacco use.

A brochure and video were developed specifically for this population that informs them about the effects of tobacco use on retirement, including benefits of quitting and reducing exposure to secondhand smoke. The Carpenters project is also working with union leadership to change health plans regarding tobacco use. A cost analysis on the tobacco related illnesses and benefits of cessation coverage was presented to union trustees to promote a policy change. While this policy is currently under review, this analysis is a valuable tool for any labor and management team and can help influence policy change in all worksites

(Project dates: June 2002-April 2005)

Indiana State Department of Health Prenatal Substance Use Prevention Program (PSUPP): PSUPP is a prevention program designed to help prevent birth defects, low birth weight, premature births and other problems due to maternal use of tobacco, alcohol or drugs during pregnancy. The three components of PSUPP are I) identification of high-risk chemically dependent pregnant women, provide perinatal addiction prevention education, promote substance abstinence, provide referrals to treatment services, and follow-up; 2) facilitation of training and education for professionals and paraprofessionals who work with women of childbearing age on how to identify high risk chemically dependent pregnant women; and 3) providing public education on the dangers of tobacco, alcohol and other drugs use during pregnancy. The ITPC grant enabled ISDH to expand PSUPP to seven additional clinics in rural and urban counties bringing the total number of clinics to fourteen throughout the State serving 23 counties. Due to budget cuts, the program cut three clinics to a total number of 11 sites. In SFY 2004, site directors screened over 1,100 pregnant women for tobacco, alcohol and drug use, with termination of tobacco use at delivery was 62% in the fourth guarter of SFY 2004. Site directors became more visible in their communities by receiving referrals, participating in 32 community events, making more than 60 presentations and providing education and materials to providers and the public. In addition, site directors discussed the dangers of tobacco use with 120 non-pregnant women smokers and women exposed to secondhand smoke.

(Project dates: June 2002-May 2004; June 2004-May 2005)

Indiana State Medical Association (ISMA): ISMA developed and distributed materials to physicians outlining insurance coverage allowing them to better advise patients on available cessation services. ISMA is also working to encourage more physicians to provide tobacco cessation counseling by a reminder system using chart stickers. These materials have been very popular and helpful, reaching more than 8,000 Indiana physicians. ISMA is offering cessation training opportunities to health care professionals online at www.mededcme.org.

(Project dates: June 2002-May 2004; June 2004-May 2005)

Indiana Teen Institute (ITI): ITI is implementing a youth empowerment project to mobilize and galvanize youth tobacco prevention efforts statewide. ITI is building on the momentum of the youth movement, VOICE, by linking these messages to the ITI summer conferences and other training opportunities for over 61,000 youth and adults. ITI continually focuses their efforts on training youth empowerment techniques to youth advocates, adult coordinators, community representatives, parents and key stakeholders throughout Indiana. Their website, www.ITIAdventure.com, is also a valuable tool.

In 2003, ITI exceeded the projected number of youth and adult participants attending its summer conferences by nearly 50%. Approximately 500 Hoosiers participated in one of two, intensive, week long sessions focusing on ITPC local coalitions and community partnerships. Participants learned multiple strategies for effectively promoting tobacco control messages.

Their 2004-2005 grant focuses on serving as a VOICE Hub coordinator for east central Indiana.

(Project dates: June 2002-August 2004; June 2004-May 2005)

Moving in the Spirit, Inc.: Moving in the Spirit Ministries coordinates Project F.A.I.T.H. (Faith-Communities Addressing Issues of Tobacco and Health), a comprehensive plan for tobacco control within the faith-based communities all over the state. With the understanding that the church is often a community or neighborhood's most valuable resource when seeking refuge and support, the Project F.A.I.T.H. initiative seeks to build on that infrastructure and enhance the faith-based initiatives of churches throughout the state to include tobacco prevention and cessation programs. Project F.A.I.T.H. has four major components: 1) Identify and train current church program staff in effective program strategies for tobacco prevention and education; 2) Identify and train church health professionals in the provision of cessation services (Inspire Program); 3) Bring the message of tobacco cessation and prevention to churches through a variety of events offered in conjunction with Sunday worship service; and 4) Increase cross-denominational, faithbased alliances to advocate for tobacco free policies in churches and communities throughout the state. To date, Moving in the Spirit Ministries have held 18 trainings statewide and cities include Gary, Fort Wayne, Richmond, Kokomo, Lafayette, Indianapolis, Evansville, South Bend, Jeffersonville, New Albany, and Terre Haute.

(Project dates: June 2002-September 2004)

Purdue University-School of Nursing: A Tobacco User's Cessation Helpline (TOUCH) program for Purdue University students. Students receive one or more of the interventions found to be effective with the college population. Student response to the helpline has been limited as many are not ready to guit smoking. While the student response has been low, inquiries from Purdue faculty and staff has been strong moving the project into the next phase by offering services to faculty and staff. Additionally, other methods of outreach are being tested with these populations, such as email and instant messaging. Research team members have also provided tobacco use prevention and cessation information to student groups living in residence halls, fratemities and sororities and through university news sources. Overall, the program has received positive coverage in the student newspaper and many are well aware of the project and say that they have referred a friend to the TOUCH helpline.

(Project dates: June 2002-December 2004)

PharmASSIST, Inc.: This project offers cessation training to pharmacists and cessation counseling to smokers in pharmacies and other locations linked by cessation networks in southwestern Indiana. PharmASSIST, Inc. offered cessation services that included pulmonary function tests and one week of nicotine replacement therapy to approximately 450 patients with a 6-month cessation rate of 23%. Approximately 110 pharmacists and nurses received hands-on training and received intervention materials and information. At follow up 70% of these health care professionals were counseling 4 or more patients per month about quitting smoking.

(Project dates: June 2002-May 2004)

The Sanders Group: The Sanders Group developed a multimedia resource project to assist community advocates in working with school systems to develop and implement tobacco free policies. This project focuses on comprehensive school system tobacco-free policy development and implementation. The project includes a web-based instrument for assessing and planning action plans for addressing tobacco use and addiction prevention policies and programs in Indiana school corporations, and developing videos that demonstrate how to implement comprehensive school tobacco polices. Select schools from across the state have served as examples for these policies and are featured on the video. Pilot tested materials will be launched to the ITPC local partners in the Fall 2004.

(Project dates: June 2002-May 2004)

United Health Services (UHS): The Hearing and Speech Center of St. Joseph County provided intensive education and intervention with families of preschool age children on negative effects of secondhand smoke on children's hearing health. UHS developed an informative brochure to educate parents about the dangers of secondhand smoke on children's hearing. This project provided information to day care and preschool providers in the St. Joseph County and working with the American Cancer Society of St. Joseph to access cessation program for low income and minority families identified through the project.

(Project dates: June 2002-May 2004)

TRAINING

ITPC developed comprehensive two-year training plan for staff, board, and partners, that includes mandatory training sessions, elective training topics, an annual information-sharing conference, bimonthly conference calls, cluster meetings, and numerous communication tools. ITPC is committed to providing its partners with training needed to implement their local tobacco control programs by adapting content and material to meet experience level of the communities. These training methods allow ITPC to disseminate the latest evidence based research and applications in tobacco control. Training highlights include:

- System of "cluster" meetings for the partners, dividing counties into 4-5 counties per cluster. The ITPC Regional Directors customize and conduct the cluster meetings at least quarterly with input from the partners.
- Comprehensive conference call/technical assistance structure for all partners that include national, regional and local presenters as well as an opportunity for regular information sharing and problem solving among partners.
- Monthly e-newsletter for its partners to highlight local activities, share new tobacco control resources, and keep them up to date on future events.
- Regional training workshops and elective trainings workshops are continually offered to meet the needs of the partners. See Figure 10: SFY 2003 Training Calendar
- The second Partnership Information X-change, "Faces of our Communities" for over 350 ITPC partners in 88 counties providing training on current topics from state and national speakers.
- Partner organization with the state addictions conference, Many Voices One Vision.
- A comprehensive annual training plan for staff, board, and grant partners. More than 850 local and state training activities were recorded for SFY 2003-2004.



Figure 10: ITPC SFY 2004 Training Calendar

Tobacco 101 2 - Lafayette 14 - Terre Haute 16 - Richmond Indiana Teen Institute 20-25 - Vincennes Conference Calls 22-23 Brown Bag Lunch	August Cultural Competency Training 5-7 – Kokomo Preparing for the 2004 RFP 26 – Merrillville 27 – Ft. Wayne 28 – Indianapolis Tobacco Awareness Program/Tobacco	September Preparing for the 2004 RFP 2 – Jeffersonville 5 – Evansville Conference Calls 16-17 Cultural Competency Training 23-25 – Lake County	October Tobacco Awareness Program/Tobacco Education Group (TAP/TEG) 2-3 – Evansville 16-17 – Indianapolis State of the Art Tobacco Cessation: Servicing the African American Community, Martin University – 3	November Teens Against Tobacco Use (TATU) 4 – Muncie 20 – Jasper Advocacy Institute Fellows Program 17-20 – French Lick Clean Indoor Air Training for ITPC Staff – 25	December National Conference on Tobacco or Health 10-12
with Cathy Melvin 29 O4 January	Education Group (TAP/TEG) 28-29 – Warsaw February	March	April	May	June
Conference Calls 16-17 Teens Against Tobacco Use (TATU) 21 – Washington, IN	Orientation/ Tobac Tobacco 101 26 3 – Pa Dacco Use TU) Confe 16-17 – Washington, Tobac Progra	Tobacco Awareness Program/Tobacco	Media Training 8 – Greencastle 12 – Frankfort 13 – Montgomery 14 – South Bend 15 – Scottsburg 19 – Muncie 27 – Greensburg	State-of-the-Art Cessation 13-14 – Indianapolis Conference Calls 18-19	New Coordinator Orientation/ Tobacco 101 21 ITPC Annual Information Exchange Meeting "Faces of Our Community"
		Education Group (TAP/TEG) 18-19 – Indianapolis State-of-the-Art Cessation	Advocacy Institute Fellows Program 20-21 – Greencastle		22-23 Conference on Disparately-effected Populations 24

Advocacy Institute Fellows

Indiana has partnered with the national Tobacco Technical Assistance Consortium (TTAC) and Advocacy Institute (AI) to serve as a national pilot site for an in-residence leadership development and capacity building program for tobacco control professionals, volunteers and grassroots activists. The mission of TTAC is to build capacity to achieve effective tobacco prevention and control programs and policies. The Advocacy Institute's mission is to make social justice leadership strategic, effective and sustainable.

The program is designed for seasoned advocates working on tobacco control in Indiana. Its purpose is to strengthen the tobacco control movement in Indiana by strengthening individual leadership skills. The program is comprehensive and consists of three sessions over a 1-year period. This pilot program is only offered in Indiana and Nebraska. The components include a customized program for Indiana; a focus on looking at the participants as teachers and learning from them; setting up the opportunity for people to step out of their daily lives and reflect on the work they do; foster a collective vision among the participants; and enhance advocacy skills. A total of 14 individuals were selected to participate through an extensive application process. Individuals represent the following counties: Allen, Delaware, Harrison, Lake, Madison, Marion, Sullivan, St. Joseph, and Tippecanoe.

Some of the results include:

- Refreshing, new style of "training" for the participants by a nationally renowned organization
- Opportunity to build trust among the partners in Indiana
- Build confidence in the work we are doing
- Understand how individuals and communities fit into the tobacco control movement in Indiana
- Leadership skills
- Electronic Listserv that is very active that allows participants to exchange ideas

SCHOOL AND COMMUNITY SPEAKERS

Rick Stoddard

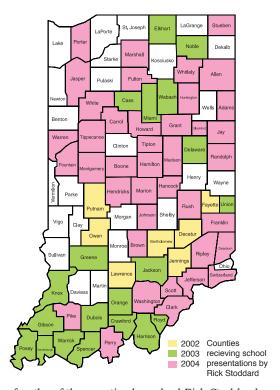
Rick Stoddard and his story about loosing his wife to smoking diseases when she was only 46 years old is featured in some of the ads in the media campaign.

ITPC has expanded efforts to reach Hoosiers, and particularly young Hoosiers, through sponsored speakers during school convocations, community town hall meetings, community events and local media. Rick delivers a compelling "no-lecture" message as he tells the story of his wife Marie and her death due to smoking. His message is particularly effective in the rural area of Indiana that is often difficult to penetrate through traditional media avenues.

Since 2002, Mr. Stoddard has personally spoken to approximately 100,000 Hoosier youth in 68 Indiana counties. Rick reached youth in the 50 counties in 2003-2004 school year.

In the Spring 2004, Rick began outreach to blue collar workers speaking at worksites in Allen County. His message resonates with Hoosiers very well, especially participants in rural areas who are often difficult to penetrate through traditional media avenues. Mr. Stoddard received the 2003 Community Award from the Alcohol, Tobacco and Other Drugs Section of the American Public Health Association (APHA).

Figure 11: Counties Receiving School Presentations by Rick Stoddard; School Years 2002-2004



Three-fourths of the counties have had Rick Stoddard speak to youth between 2002-2004.

Lorene Sandifur

Lorene Sandifur continued her aggressive speaking tour in memory of her husband Gary, who died at age 51 from lung cancer and brain tumors caused by smoking. Lorene's powerful message about the pain and suffering caused by tobacco use was delivered live to hundreds of people throughout Indiana – in schools, community meetings and at numerous events. Lorene's compelling message was also a key part of ITPC's media campaign, reaching many thousands of Hoosiers this past year. In 2004, she launched the Gary Sandifur Tobacco Free School Award at the ITPC Partner Information X-change.

Nationally Recognized Speakers

ITPC and its network of local partnerships regularly bring nationally recognized speakers to Indiana's local communities as part of the overall public awareness campaign to understand tobacco's role as the leading cause of Hoosier deaths. Indiana has been fortunate to learn from these and numerous other experts in the field of tobacco prevention and cessation this past year. In 2004 these speakers have included individuals such as:

- •Brenda Bell Caffee, creator of California's Not in Mama's Kitchen Program
- •Jeanette Noltenius, former director of the Latino Coalition on Tobacco and Alcohol, specializes in public policy issues
- •Victor DeNoble, former Philip Morris scientist and researcher has reached several communities in Indiana.
- •Rick Bender, victim of smokeless tobacco cancer
- Rick Stoddard, known for his commercials about his wife's death due to tobacco use
- K. Michael Cummings, Roswell Park Cancer Institute and well-known for secondhand smoke issues
- Donna Warner, Director of Planning and Program
 Development for the Massachusetts Tobacco Control
 Program, cessation expert
- C. Ann Huston, Communication Director, North Carolina Tobacco Prevention and Control Branch, expert on media advocacy
- Lori Fresina, Northeast Regional Advocacy Representative, Campaign for Tobacco Free Kids, clean indoor air ordinance campaign expert
- Aaron Doeppers, Midwest Regional Advocacy
 Representative, Campaign for Tobacco Free Kids, advocacy expert
- Cathy Melvin, Partnership Chair and Director, Smoke-Free Families National Dissemination Office
- Judith G. Waxman, National Women's Law Center
- Natascha Palmer and Erin Seedorf, Colorado Get R!EAL Youth Specialists, Colorado Department of Public Health and Environment
- Stuart Kerr, Coordinator, Tobacco-Free Ohio, Toledo
- David Stevens, Lexington, Kentucky City Council
- Becky Tuttle, Outreach Coordinator, Kansas Tobacco Control
- Nancy Williams, Oral Health of America



STATEWIDE MEDIA CAMPAIGN

PURPOSE

Indiana's statewide media campaign is a combination of paid and earned media messages designed to counter pro-tobacco influences and increase pro-health messages and influences throughout the state. Counter-marketing consists of a wide range of efforts, including paid television, radio, billboard, and print counter-advertising at the state and local level; ethnic marketing; media advocacy and other public relations techniques using such tactics as news releases, news conferences, media outreach, media tours, editorial materials, featured stories, local events, and health promotion activities; and efforts to reduce or replace tobacco industry sponsorship and promotions. Counter-marketing activities can promote smoking cessation and decrease the likelihood of initiation. They also can have a powerful influence on public support for tobacco control interventions and set a supportive climate for school and community efforts.

The power of media and marketing to influence behavior and drive demand for products and services is well known. According to the 2001 Report from the Federal Trade Commission (FTC), the tobacco industry spent over \$11 billion on advertising, \$239 million in Indiana. The tobacco industry expenditures on advertising and marketing in 2001 increased 17% from the previous year. By comparison, ITPC spent \$5.3 million for all media expenditures in SFY 04 and have \$3.5 million bugeted for SFY 2005. The tobacco companies are spending \$39 per Hoosier to advertise and promote smoking while we are spending fifty to ninety cents to promote smoking prevention and quitting through advertising campaigns. Counter-marketing and public relations campaigns can break through the industry's clutter and communicate the truth about tobacco and the industry's deceptive marketing practices.

INDIANA'S EFFORTS

ITPC allocated \$5.3 million for the media and counter-marketing component SFY 2004. The media campaign targets both Indiana general population adults and youth, along with specific segments of minorities and pregnant women. The aim of the media campaign is to educate the public about the dangers of tobacco use, secondhand smoke and tobacco industry marketing practices. The campaign is working to change the social norms and acceptability of tobacco use in Indiana.

Indiana's public awareness and media campaign provides critical support for all components of the Hoosier Model. ITPC and MZD Advertising, along with partners Promotus Advertising and Bingle Research, produced effective, award-winning campaigns that have high recall by Hoosiers.

PROGRAM CHANGES IN SFY 2004

While progress has been made in changing attitudes of smokers and nonsmokers, youth and adults, tobacco use in Indiana is still highly acceptable due to current social norms related to tobacco use. A statewide media campaign must continue so that visibility of tobacco issues stay in front of Hoosiers. The budgeted amount for the statewide media campaign was reduced by 50% in SFY 2004. However, ITPC was able to work with the American Legacy Foundation on their paid media cooperative program, providing leverage for increasing the purchasing power of media buys. Additionally, all major media continued to contribute significant bonus spots and ad space.

ITPC MEDIA CAMPAIGN

Educating Hoosiers on the harmful effects of secondhand smoke continued as the primary focus of the statewide media campaign in SFY 2004. Due to its co-op with the American Legacy Foundation, ITPC selected to launch the "Letters"



campaign in October 2003. The "Letters" campaign encompassed the damage done to families and loved ones from years of tobacco use, captured in the form of letters written to family members. The ads featured the "Saves Lives, Saves Money" logo and the 1-866-515 LIFE hotline for those seeking help with quitting smoking. Every county in the state continued to be reached by the statewide campaign.

In response to the increasing efforts of the community partners for messages to reduce secondhand smoke exposure, ITPC launched its "Right to Breathe" campaign. Centering on the knowledge that all Hoosiers have the right to breathe smoke free air, the commercials aired on television and radio stations throughout the state. The advertisements portrayed a mother getting into her car, lighting a cigarette and the smoke drifting to the back seat where a child is buckled into a car seat. The child's inability to escape the secondhand smoke has made an impact on Hoosiers' attitudes about the dangers of secondhand smoke. Community and minority-based partners also had the opportunity to tag the commercials with their local information and identification.

While ITPC continued its focus on secondhand smoke, local partner inquires led to the development of the "Cut It Out" cessation campaign. Developed for use at the local level, the television, radio, newspaper and outdoor advertisements promoted local cessation efforts, including classes and other services.

Secondhand Smoke Challenge

Indiana's secondhand smoke challenge, the "Breathing Room" promotion launched statewide effort to educate Hoosiers on the steps they can take to make their lives tobacco free. The promotion centered on a pledge, with consumers choosing any of the following options to: make their home and/or car smoke free, support smoke free restaurants, or quit smoking. In the first two months of the promotional launch, over 500 Hoosiers submitted pledge forms via the mail or on-line at www.WhiteLies.tv or www.Voice.tv. Local community partners embraced this promotion and aggressively promoted it at their county fairs, festivals and other local events. As a complement to "Breathing Room", in April, an on-line smoke free dining guide was added to www.WhiteLies.tv, allowing Hoosiers to view smoke free restaurants in their communities.

WhiteLies.tv

www.WhiteLies.tv has proven to be effective in spreading the messages that young people are targeted by tobacco companies, secondhand smoke kills and Hoosier adults can get help to quit smoking. Hoosiers continue to log onto www.WhiteLies.tv to get information on How to Quit smoking and to learn more about the dangers of tobacco. In an effort to strengthen the connection between WhiteLies.tv and the local partners' efforts, several promotional and local events were executed throughout the year.

Voice

VOICE is Indiana's youth-led movement against tobacco use. By reaching out into Hoosier communities and schools to inform teens about how they were being targeted by the tobacco industry, youth continued to strengthen the VOICE movement. Throughout the summer, numerous VOICE youth joined forces with community and minority partners to secure tobacco free days at their local county fairs. Their efforts culminated in the success of the second annual Tobacco Free Day at the Indiana State Fair. Over 30,000 people were exposed to VOICE and its message when VOICE youth addressed the large crowd attending the VOICE Xtreme Air Show featuring Tony Hawk.

This momentum carried into the school year as teens throughout the state began working with schools and other organizations in their communities to establish support for VOICE. Youth realized their strength in numbers as they began campaigning their school boards for tobacco free campuses, encouraging restaurants and businesses to become smoke free and organizing press conferences to announce youth tobacco survey results. They continued their advocacy with local activities in support of Kick Butts Day, the Great American Smokeout, and World No Tobacco Day.

In addition to these endeavors, youth presented the VOICE message at events such as the Three Rivers Festival in Fort Wayne, Coca-Cola Circle City Classic, and Evansville Nut Club Fall Festival. Sponsorship opportunities opened the door for VOICE to speak to attendees of the Point of Youth conferences in Lebanon (February 2004) and Indianapolis (January 2004) as well as the DECA statewide conference (March 2004). The 1,200 students who are current members of Indiana's DECA program were provided information about the VOICE movement and an opportunity to become involved at the high school level. At the statewide convention held in Indianapolis, DECA students learned about working in the business world in such fields as marketing, advertising and retail. Our goal with this partnership is to impact the DECA students to spread our VOICE message and stop big tobacco's marketing efforts targeting teens. Future plans with DECA include having them help to develop an advertising campaign for VOICE.

In June 2004, approximately 30 VOICE youth staged a youth sit-in in the downtown Indianapolis Steak 'n Shake Restaurant in an effort to persuade business owners to go smoke free. Video interviews were conducted with the youth about the importance of smoke free workplaces. While these local and regional events continued the message of VOICE, the state youth summits that were offered the previous two years, were not held. Due to this budget cut, this one year of down-time negatively impacted the forward momentum of the youth tobacco prevention movement.

Voice.tv

In February 2004, Rick Stoddard strengthened his tie with VOICE when he began writing an on-line journal on www.Voice.tv. His travels to schools throughout Indiana bring him in touch with thousands of students who hear firsthand how he has dealt with his wife's death from tobacco use. His on-line journal offers an extension of his presentation and visitors to the site can share their stories about how they have been affected by tobacco use. Currently, over 1.4 million hits have been logged to the website since its launch in May 2002.

VOICE Youth Advisory Board

To support local efforts, the Youth Advisory Board (YAB) continued its integral role in the VOICE movement. The board, comprised of roughly 35 high school students from throughout Indiana, met three times throughout the year via conference calls or daylong meetings. During these meetings, the YAB served as a review board for new creative materials, assisted in developing statewide events, and offered feedback on community news and activities. One exciting outcome of the YAB meetings was the development of a VOICE video and sound-track. Footage captured the diversity of VOICE youth and the array of activities that include the VOICE message. The YAB speaks to adults and youth in their local communities and serve as media spokespersons for ITPC.

Ethnic Marketing

ITPC realizes the importance of specifically reaching out to the African American and Latino communities due to the fact that these groups are targeted more heavily by tobacco companies to use their products. The belief is that by educating these targeted groups there will be a significant shift in the social acceptance of tobacco use and in the tolerance of tobacco company tactics.

Through a series of grassroots efforts, Promotus Advertising and its Street Marketing Crew reached thousands of Hoosiers in minority communities during events such as the Family Fun Fest in Terre Haute, Fiesta Indianapolis, and Fiesta Bloomington. Additional outreach includes addressing crowds of over 2,500 families at the Celebracion de la Familia Hispana (Hispanic Family Celebration) in Indianapolis and an estimated 6,000 people at the Labor Day Blues Fest in Gary.

Promotus Advertising worked in conjunction with local partners to execute events such as a sponsorship with the Gary Railcats baseball team, smoke free nightclub events, smoke free bowling tournaments, back to school rallies, VOICE Friday night high school football games in central Indiana, Women's Health Fair in Madison County and the on-air Martin University/Commit 2 Quit/Radio One Cessation Campaign.

In addition to those events, over 30,000 people were exposed to WhiteLies.tv and tobacco control initiatives through advertising, promotions and giveaways during the Coca-Cola Circle City Classic weekend. ITPC's marketing team also capitalized

on opportunities to promote its message during the 33rd annual IBE Summer Celebration July 17-20, 2003. Highlights from the week included:

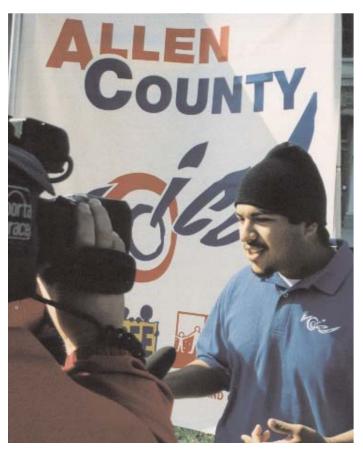
- Attracting over 12,000 people to the Radio One-Indianapolis Block Party, this promoted WhiteLies.tv and Commit 2 Quit by encouraging people to go smoke free and to take the Not in Mamma's House pledge.
- Connecting with thousands of people as they visited the WhiteLies.tv booths in the Exhibit Hall and the Minority Health Fair.
- Addressing an estimated crowd of 80,000 with a smoke free message during the free WhiteLies.tv concert featuring Patti LaBelle.
- Utilizing counter-marketing tactics for VOICE as the VOICE youth spoke with teens gathering on the street as well as those in attendance at the B2K concert.
- Distributing over 3,000 smoke free home and car kits.
- Reaching more than 2,000 people during the Commit 2 Quit Kick-off Party.
- Promoting the Commit 2 Quit campaign during the Tom Joyner Morning Show national broadcast.

Nix Kool Mixx

This campaign which ran in May and June 2004 was designed to inform and educate influential people across the state on how the tobacco companies are still targeting youth through the use of urban culture and cartoon illustrations. Over 40 information kits, containing tobacco industry-related articles and ads, as well as Kool cigarettes pack examples, were sent out to media, educators, policymakers and coalition partners to encourage them to take an active stand against tobacco companies.

PARTNERING WITH OUR MESSAGE THROUGH EVENTS

Well-aligned sponsorships throughout the state allowed ITPC to promote its WhiteLies.tv and VOICE brands to the fullest extent by combining a grassroots approach with existing events. The partnership between ITPC and the Indiana State Fair has blossomed to become one of the largest grassroots efforts to educate Hoosiers about the dangers of tobacco use. Over the 12-day event in August, ITPC's partners were able to reach over 875,000 fairgoers with the message of WhiteLies.tv, including the dangers of secondhand smoke and offering cessation resources. In addition, the second annual Tobacco Free Day was a huge success, due in part to the VOICE Xtreme air Show that resulted in the largest-recorded Tuesday attendance in record keeping history, up 64% over the previous year's attendance. The Indiana State Fair events provide a model for our community partners to emulate at county fairs and local festivals to help change the cultural perception about tobacco use in Indiana.



MEDIA ADVOCACY

Indiana news media outlets continue to devote newsprint and airtime to ITPC stories. In addition to stories pitched by the media team and local partners, reporters and editors are seeking out ITPC staff members and grantees for other news pieces related to tobacco use and prevention. Through statewide efforts and assistance from coalitions at the local level, a renewed focus has been given to media advocacy; that is advancing toward public policy goals through the use of earned media coverage. Unpaid media coverage about local coalition activities and issues, especially surrounding smoke free air policies and ordinances-continued to grow this year. ITPC's grassroots programs are increasing awareness of the ills of tobacco use and related health issues throughout Indiana. ITPC generated eight statewide news releases in SFY 2004 that can be viewed at the ITPC website under "Press Releases" http://www.in.gov/itpc/news.asp. Stories told through the news media included:

- General coverage about ITPC and its programs
- Coverage of the media campaign
- Pieces outlining and supporting smoke-free policies
- Local stories highlighting the efforts of ITPC grantees
- Stories featuring ITPC programs, events and initiatives
- Statewide coverage of new statistical data

• Health stories for which ITPC staff and local coalition members have been established as credible resources

EARLY FINDINGS

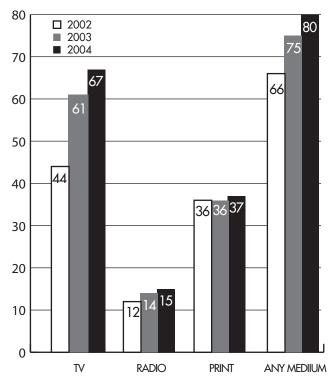
Advertisement awareness is the first major step in an effective media campaign because the audience must be aware of advertisements to be influenced by them. Findings from other state (e.g., Florida) and national (e.g., Legacy's truthsm) campaigns suggest that advertisement awareness increases antitobacco knowledge, attitudes, and beliefs, leading to reductions in cigarette smoking.

Results from the ITPC media tracking surveys, conducted annually since 2001, indicate that the media campaign has had a positive influence on youth and adult knowledge, attitudes, and beliefs each year.

Impact on Youth

- Overall, 80% of Indiana youth are aware of at least one advertisement from the ITPC media campaign in 2004, a significant increase from 67% in 2002. Two-thirds (67%) of youth were aware of at least one ITPC TV advertisement. This also is a significant increase from 2002 where awareness of an ITPC TV ad was 44%.
- Youth have a strong level of knowledge regarding tobacco dangers, but those youth who have seen an ITPC ad are 59% more likely to have this understanding of tobacco's ill effects.

Chart 22: Awareness by Indiana Youth of at Least one ITPC Advertisement by Medium, 2002-2004



Eight out of ten youth have seen an ITPC ad in 2004, a significant increase since 2002.

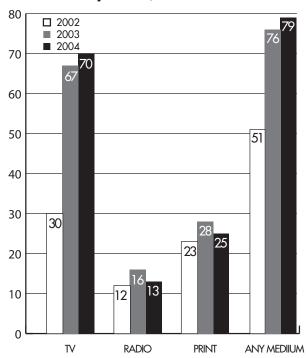
- Messages related to tobacco industry manipulation themes were prominent in ITPC advertisements. As a result, youth that have seen an ITPC ad are 80% more likely to hold anti tobacco industry beliefs and 82% more likely to perceive tobacco use as a problem.
- Youth reporting confirmed awareness of at least one ITPC print/billboard ad is 37%. Hoosier youth who have confirmed awareness of a newsprint or billboard ad have increased knowledge that tobacco is harmful, and are empowered to talk with family and friends about not smoking and participate in antitobacco community events compared to youth who report not seeing any ITPC print ads or billboards.

The media campaign messages coupled with the community efforts of local and statewide youth serving organizations, prevention and cessation programs, and VOICE will continue to change social norms around tobacco use.

Media Campaign Influence on Adults

- Confirmed awareness of the ITPC ads has steadily increased of the past few years. The awareness levels have significantly increased for any media and for TV ads since 2001. Overall, 79% of adults reported awareness of at least one advertisement from the ITPC media campaign, compared to just 51% in 2002. The percent of adults that demonstrated awareness of at least one ITPC TV advertisement doubled, when only 30% of adults confirmed awareness of a ITPC TV ad in 2002, 70% of adults saw an ITPC TV ad in 2004.
- An adult seeing an ITPC ad was 56% more likely to agree that secondhand smoke is a serious problem and that indoor worksites should be smoke free, compared to adults who did not confirm awareness of an ad.
- Adults that have confirmed awareness of TV ads were 76% more likely to understand the dangers of tobacco use.
- Adult smokers who had confirmed awareness of an ITPC TV ad were more than twice as likely to try to quit smoking in the past year compared to those who did not see an ad. This finding indicates the media campaign is having an effect of intentions to quit smoking.
- Adults reporting confirmed awareness of at least one ITPC print/billboard ad is 25%. Hoosier adults who have confirmed awareness of a newsprint or billboard ad are 46% more likely to have knowledge that tobacco is harmful compared to adults who report not seeing any ITPC print or billboards.

Chart 23: Awareness by Indiana Adults of at Least one ITPC Advertisement by Medium, 2002-2004



Nearly 80% of Hoosier adults have seen an ITPC ad, a significant increase in confirmed awareness since 2002.

As a first step toward understanding tobacco-related issues and toward changing key attitudes and beliefs, these results are on target with the goals established by ITPC. Changes are already evident as those who were aware of ITPC advertisements were consistently more likely to know about tobacco dangers and to agree with anti-tobacco attitudes, both key to changing behaviors, reducing prevalence, and improving the lives of Hoosiers. Because of these positive outcomes, we expect to see reductions in adult cigarette smoking that can be attributed to the ITPC media campaign as one part of the comprehensive approach to tobacco prevention and cessation being implemented in Indiana.

News Media

ITPC's mission is to change the cultural norms in Indiana around the issue of tobacco. One the most effective ways to do that is through earned media coverage. Since May 2002, Indiana has generated nearly 4,800 clips. A substantial number of stories have occurred at the local level demonstrating how the local coalitions are working with the news outlets in their communities to keep local tobacco control in the news.

A majority of the news stories was hard news. Other types of news items of these are opinion pieces such as editorials and letter to the editor. 82% of these were anti-tobacco in message in 2004. The most frequent topics of news coverage were coalition partner activities, clean indoor air, and health consequences. (See Analysis of News Media in the Evaluation section for additional information.)

ENFORCEMENT

PURPOSE

Enforcement of tobacco laws can deter violators and send a message that community leaders believe these policies are important for protecting Indiana's youth. Youth access laws set up an environment in which tobacco is unacceptable. Youth who do not use tobacco products by the age of 19 are less likely to start later in life. Enforcement of Indiana's tobacco laws deters youth from trying to obtain tobacco products and retailers from illegally selling tobacco products to minors.

INDIANA'S EFFORTS

In SFY 2004, ITPC continued its Memorandum of Understanding with the Indiana Alcohol and Tobacco Commission (ATC) to investigate and enforce Indiana's tobacco laws with an annual budget of \$750,000.

After more than three years of activity, enforcement of Indiana's tobacco laws has become a priority for the law enforcement community due to the efforts of ATC. The ITPC/ATC agreement has continued to:

- Provide 13 additional state excise officers and one administrative support staff;
- Make resources available for training law enforcement officers on the investigation and enforcement of Indiana's tobacco laws
- Allow ATC to contract with various local law enforcement agencies and/or officers to assist in enforcing those laws.

Throughout SFY 2004, 13 Tobacco Retailer Inspection Program (TRIP) officers were out in the field conducting inspections. In addition, 62 Excise officers worked throughout the State reporting tobacco law violations. At the Law Enforcement Academy close to 311 law enforcement officers received tobacco laws training. This year this training includes review of all Indiana tobacco laws including signage, retail sales including implications to the clerk and establishment, possession by a minor and vending machines restrictions.

ATC is also responsible for conducting training for retail owners and clerks to prevent the sales of tobacco to minors. ATC has performed 649 retailer trainings reaching nearly 21,000 people from July 2003 to June 2004. As part of these trainings and in other opportunities, ATC has produced and distributed written materials relating to the sale of tobacco products to minors and Indiana's tobacco laws. The ATC is out at various events with literature regarding the tobacco laws, required signage and other items promoting the "ID on Demand" message. ATC also is encouraging use of the statewide toll free number to report retailers and vendors who violate Indiana's tobacco laws. Citizens who witness illegal sales of tobacco products to minors can call 1-866-2STOPEM. All calls are confidential. There was an increase in the number of call from SFY 2003;

however, use of the hotline remains low with 25 calls occurring in SFY 2004.

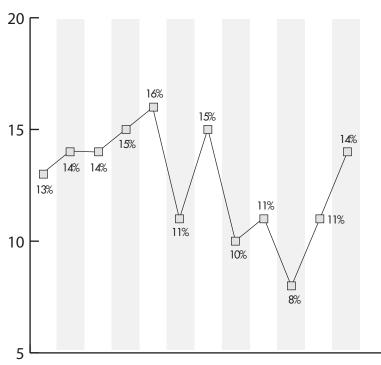
PROGRAM CHANGES IN SFY 2004

The Alcohol and Tobacco Commission (ATC) instituted a tobacco retailer certificate program through PL 250, requiring a certificate fee of \$50. As of June 2004, 8,430 tobacco retailers registered for certificates. Revenue from this program goes to ATC, therefore, the ITPC Executive Board recommended that funding be continued but at a reduced level. ATC and ITPC have made great strides in reducing the sales of tobacco to youth and we hope to continue this. However, the budgeted amount to ATC for enforcement was reduced to \$750,000 in SFY 2004 and to \$500,000 in SFY 2005.

EARLY FINDINGS

The primary focus of ATC's work is conducting random inspections of tobacco retailers throughout Indiana. The Memorandum of Understanding with ITPC outlined a minimum of 375 tobacco retail inspections to

Chart 24: Noncompliance Rate of Indiana Tobacco Retailers Inspected by TRIP, SFY 2004



JUL AUG SEP OCT NOV DEC JAN FEB MAR APR MAY JUN The noncompliance rate dropped from 29% in October 2001 to 14% in June 2004.

be performed each month. Focusing on the efforts in SFY 2004, TRIP officers conducted 6,400 inspections of retail tobacco outlets, averaging over 530 inspections per month. TRIP enforcement activities have resulted in sales rates to youth at an average of 13% for SFY 2004. Throughout SFY

2003 and SFY 2004, the noncompliance rate of Indiana's tobacco retailers consistently remained below 20%. The Federal Synar study requires Indiana to have a noncompliance rate below 20% or risk losing millions of dollars for substance abuse treatment to the Division of Mental Health and Addiction.

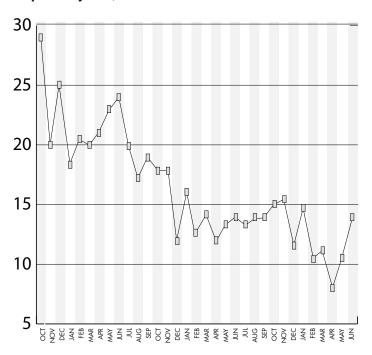
From October 2001, through June 2004, TRIP officers conducted 21,571 inspections of retail tobacco outlets, averaging over 650 inspections per month. TRIP enforcement activities have resulted in sales rates to youth at an average of 16% from October 2001 through June 2004.

Beginning in May 2002, results of these inspections have been posted on the ATC website (www.in.gov/atc/isep/TriplOR.htm) as a way to promote to the public those retailers who violate and those retailers who consistently comply with Indiana's tobacco laws.

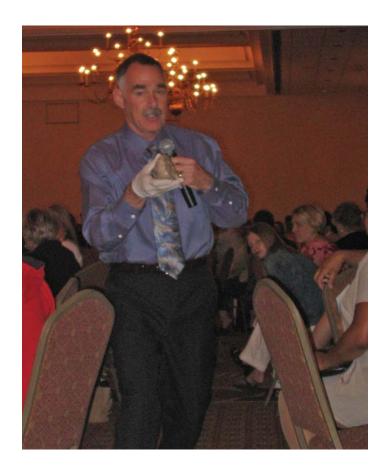
Other data supporting the lower noncompliance rates comes from the Indiana YTS. In 2000, approximately 30% of current high school smokers trying to buy cigarettes were refused due to age. This percentage increased significantly to nearly 40% in 2002. While this can be improved, this is an indication that fewer youth are obtaining tobacco in retail establishments. Difficulty in obtaining cigarettes may be a barrier to smoking behavior encouraging some smokers to quit. If obtaining cigarettes is likely to involve the embarrassment of being asked for proof of age, and having to face possible legal consequences, it may simply be seen as not worth the effort. It also sends a strong message that smoking by youth is not acceptable. In 2000, 24% of middle school smokers trying to buy were asked to show proof of age. This percentage increased significantly to 42% in 2002.

In addition, ATC has worked with ITPC to conduct regional training for ITPC community-based and minority-based partners. Some ITPC community partners have included local enforcement of tobacco laws in their coalition's plans and ATC is working closely with them to ensure the coalitions have proper training and resources to conduct these retailer compliance checks in their communities and to prosecute those noncompliant retailers through State and local systems.

Chart 25: Noncompliance Rate of Indiana Tobacco Retailers Inspected by TRIP, October 2001 to June 2004



The noncompliance rate dropped from 29% in October 2001 to 14% in June 2004.



EVALUATION AND SURVEILLANCE

PURPOSE

A comprehensive tobacco control program must have a strong evaluation component in order to measure program achievement, improve program operations, manage program resources, ensure funds are utilized effectively, and demonstrate accountability to policymakers and other stakeholders. Program evaluation is conducted in two ways: Surveillance and Evaluation research. Surveillance is the monitoring of tobaccorelated behaviors, attitudes, and health outcomes in which data is collected on a routine basis. Evaluation research employ surveys or data collection systems specifically designed to measure specific program activities. These two methods complement each other to allow program administrators to assess progress toward program objectives.

INDIANA'S EFFORTS

The commitment to evaluation is center to ITPC programs. The ITPC Executive Board has maintained its commitment in SFY 2004 to evaluation however at a reduced funding level due to budget cuts. ITPC continued to work with an independent Evaluation and Research Coordinating Center, American Institutes for Research (AIR). AIR team includes: AIR. Research Triangle Institute, and The McCormick Group. AIR developed and implemented the evaluation plan for Indiana's comprehensive program. With the guidance of the 2005 objectives and the vision and mission statements outlined by the ITPC Executive Board, AIR developed a set of measures with various data sources to evaluate the impact programs are making in achieving the ITPC mission and objectives. In addition to continuous program monitoring, ITPC has secured the services of the State Board of Accounts' Field Auditors to conduct compliance checks of fiscal responsibilities of all tobacco control program grant dollars.

All information gathered through the ITPC Evaluation and Research Coordinating Center is used to improve programs by making adjustments when needed and enhancing components in areas that are already working.

PROGRAM CHANGES IN SFY 2004

Tobacco control experts recommended maintaining a strong commitment to evaluation. Evaluation data are extremely important in verifying program results. Some cost cutting measures were put into place while still maintaining integrity to evaluation results. These changes include a budget reduction of 50% and the State Board of Accounts Monitoring Engagements Agreement were reduced relative the number of grantees.

EARLY FINDINGS

Indicators the ITPC's evaluation plan is measuring demonstrate that Indiana is on track to reducing tobacco use among all

Hoosiers. We are working to change social norms around tobacco and make tobacco use unacceptable in Indiana. These long held attitudes must be changed before we see our tobacco use behaviors change. We are seeing these attitudes shift as coalitions are working in their communities and all Hoosiers are learning more about the burden tobacco places on us all.

Much of the data collected in SFY 2003 and 2004 continues to be disseminated and complement ongoing evaluation efforts to demonstrate that Indiana is making progress in the battle against tobacco. The following includes highlights from major components of the ITPC Program Evaluation efforts.

Media Tracking Surveys

Media Tracking Surveys are annually conducted to evaluate the effectiveness of the statewide media campaign. This survey has adult and youth components and serves to evaluate the progress of the Voice youth movement, "WhiteLies" campaign and sponsorship activities of these campaigns.

Baseline data was collected prior to the launch of the statewide media campaign and follow up surveys are conducted annually to see what knowledge and attitude changes had occurred in youth and adults. Two surveys were developed, youth and adult, with approximately 1000 people surveyed in each survey, including an oversample of African Americans and Latinos. These additional respondents allow ITPC to evaluate its ethnic marketing focus.

The survey measured overall campaign awareness, as well as knowledge, attitudes and beliefs on tobacco-related issues as the media campaign works to shift these beliefs to anti-tobacco. Advertisement awareness is the first major step in an effective campaign because people must be aware of advertisements to be influenced by them. Findings from other state and national campaigns suggest that advertisement awareness increases anti-tobacco knowledge, attitudes, and beliefs, leading to reductions in cigarette smoking.

Results from the 2004 Adult Media Tracking Survey Include:

- Confirmed awareness of the ITPC ads has steadily increased of the past few years. The awareness levels have significantly increased for any media and for TV ads since 2002. In 2004, 79% of adults saw at least one ITPC ad compared to 50% in 2002.
- Television was the most recognized medium with 70% of adults confirming awareness of a TV ad in 2004 compared to 30% in 2002.
- Adults seeing an ITPC ad were 56% more likely to agree that secondhand smoke is a serious problem and that indoor worksites should be smoke free, compared to adults who did not confirm awareness of an ad.

- Adults that have confirmed awareness of TV ads were 76% more likely to understand the dangers of tobacco use.
- Smokers who had confirmed awareness of an ITPC TV ad were more than twice as likely to try to quit smoking in the past year compared to those smokers not seeing the ads. This finding indicates the media campaign is having an effect on intentions to quit smoking.

Results from the 2004 Youth Media Tracking Survey Indicate:

- Confirmed awareness of the ITPC ads has steadily increased in the past few years. The awareness levels have significantly increased for any media and for TV ads since 2002. In 2004, 80% of youth saw at least one ITPC ad, compared to 66% in 2002.
- Television continues to be the most recognized medium with 67% of youth confirming awareness of a TV ad in 2004, compared to 44% in 2002.
- Youth have a strong level of knowledge regarding tobacco dangers, but those youth who have seen an ITPC ad are 59% more likely to have this understanding of tobacco's ill effects.
- In addition, youth who have seen an ITPC ad are 80% more likely to hold anti tobacco industry beliefs and 82% more likely to perceive tobacco use as a problem.
- The social acceptability of using tobacco among youth has declined significantly since 2001.

Youth are also exposed to pro-smoking messages through portrayals of smoking in the mass media glamorizing the behavior and sending a message that smoking is socially acceptable. In 2002, over 80% of middle school and high school smokers and non-smokers reported seeing actors smoke when they watched television programs or movies most or all of the time. This stresses the importance of counter-marketing messages such as those conveyed by ITPC's mass media campaigns.

Indiana Adult Tobacco Survey and Indiana Youth Tobacco Survey

The Indiana Adult Tobacco Survey (ATS) and the Indiana Youth Tobacco Survey (YTS) were administered in 2002 and will be repeated in the fall 2004. The ATS was the first survey of its kind in Indiana surveying over 1,900 Hoosier adults about their tobacco use behaviors; attitudes toward tobacco and tobacco companies; desires to quit smoking; support of smoke free air policy; and many other topics. This survey allowed ITPC to gather and use in depth information to better develop programs.

ITPC conducted the YTS throughout the State from grades 6-12. The samples are divided between middle school (grades 6-8) and high school (9-12). In 2002, we had 83 middle and high schools participate statewide. As shown in **Tobacco Use Burden on Indiana** pages, high school smoking declined significantly by 26%: from 31.6% in 2000 to 23.4% in 2002.In 2002, the smoking rate among Indiana high school students was

similar to the national average of 23%. Smoking among middle school students (those in grades 6 through 8) declined 12% (from 9.8% in 2000 to 8.6% in 2002). Although this difference for middle school youth is not statistically significant, it indicates a trend in the right direction. The smoking rate among Indiana middle school students is similar to the national average of 10%.

Additional data from the ATS and YTS is presented in **Tobacco Use Burden on Indiana** pages and at "Research and Evaluation" on the website (www.itpc.in.gov/research.asp).

Community Program Tracking and Impact Evaluation

As mentioned in the **Community Programs** section, ITPC monitors the programs that occur at the local level. The activities occurring in the local communities are tracked to ensure the programs are executed properly and to assess the level of activity at the local level. Local coalitions enter their program reports through the ITPC website with a unique userID. Coalitions select from a set of activity types and answer a series of questions based on the activity type they select.

In addition to some results shared in the Community Programs section:

- Over 10,200 tobacco prevention and cessation activities have been conducted at the local level through ITPC grantees and staff in the past two years.
- ITPC partners are raising awareness on tobacco control issues delivering a total of 2,186 presentations locally, since 2002.
- Training community members to influence tobacco control policies. A total of 863 training activities were recorded for SFY 2003 and 2004.

Analysis of News Media

ITPC's mission is to change the cultural norms in Indiana around the issue of tobacco. One the most effective ways to do that is through earned media coverage. ITPC's evaluation and research coordinating center is tracking information on news media coverage that is generated throughout the State.

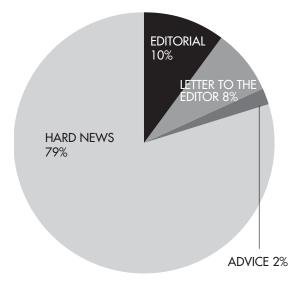
In SFY 2004¹¹³, Indiana generated 2,181 newspaper clips, slightly lower than SFY 2003 of 2,379 clips. However, we have logged nearly 4,800 clips since we began tracking in May 2002. During SFY 2003 and 2004:

- Approximately 25% of the stories had a national origin
- One-third (30-34%) of the stories originating at the state level
- Over 40% of the stories began at the local level

This substantial number of stories occurring at the local level demonstrates how the local coalitions are working with the news outlets in their communities to keep local tobacco control in the news.

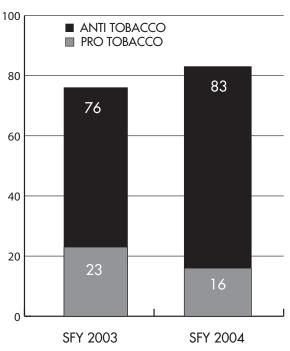
As illustrated in Chart 32: Type of News Item Covered in Indiana Newspapers, SFY 2004, a majority of the news stories were hard news. While there were fewer opinion pieces such as editorials and letter to the editor in SFY 2004, a greater proportion were anti-tobacco in message (79% in SFY 2004 to 76% in SFY 2003). The most frequent topics of news coverage were coalition partner activities, secondhand smoke, and health consequences.

Chart 32: Type of News Item Covered in Indiana Newspapers, SFY 2004



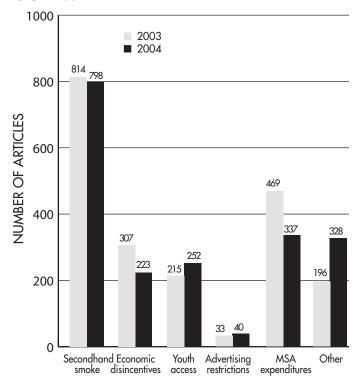
Nearly eight out of ten news items were hard news articles with the remaining items opinion pieces for SFY 2004.

Chart 33: Slant of Opinion Items in Indiana News Media Coverage, SFY 2003-2004



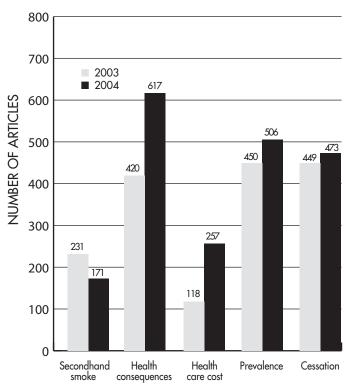
Over 80% of the opinion pieces skewed toward anti-tobacco attitudes and beliefs in SFY 2004, a slight increase from SFY 2003.

Chart 34: Tobacco Control Policy Articles by Topic, SFY 2003 vs. SFY 2004



The number of articles on specific tobacco control policy. The most frequent topic includes secondhand smoke.

Chart 35: Articles on Health Consequences by Topic, SFY 2003 vs. SFY 2004



The number of articles on health consequences of tobacco use. The most frequent topics include prevalence and cessation.

Also tracked is the number of articles by county, as illustrated in Table 10: Number of news articles by county, SFY 2004. The number of clips per county varies from 1 to 153 clips. These data show the number of articles covered in newspapers based in a certain county; therefore a county's coalition may have been covered by a neighboring county's newspaper (the newspaper may serve more than one county). The following counties nearly doubled or tripled their newsprint coverage of tobacco topics: Bartholomew, Franklin, LaGrange, St. Joseph, Sullivan, and Tippecanoe.



Table 10: News Clips by County, SFY 2004

County # Ar	ticles	County #	Articles	County	# Articles	County	# Articles	County #	# Articles
Adams	27	Elkhart	61	Jefferson	36	Ohio	0	Steuben	33
Allen	63	Fayette	7	Jennings	4	Orange	23	Sullivan	15
Bartholomew	67	Floyd	26	Johnson	44	Owen	7	Switzerland	4
Benton	0	Fountain	4	Knox	25	Parke	7	Tippecanoe	55
Blackford	7	Franklin	8	Kosciusko	14	Perry	13	Tipton	16
Boone	26	Fulton	28	LaGrange	13	Pike	11	Union	2
Brown	2	Gibson	32	Lake	38	Porter	35	Vanderburgh	39
Carroll	3	Grant	67	LaPorte	41	Posey	17	Vermillion	15
Cass	16	Greene	20	Lawrence	43	Pulaski	0	Vigo	15
Clark	46	Hamilton	22	Madison	38	Putnam	22	Wabash	11
Clay	5	Hancock	34	Marion	153	Randolph	16	Warren	10
Clinton	11	Harrison	18	Marshall	21	Ripley	12	Warrick	8
Crawford	0	Hendricks	2	Martin	11	Rush	19	Washington	38
Daviess	7	Henry	16	Miami	14	St. Joseph	h 54	Wayne	17
Dearborn	7	Howard	15	Monroe	78	Scott	5	Wells	28
Decatur	4	Huntington	16	Montgomery	/ 38	Shelby	14	White	16
DeKalb	28	Jackson	18	Morgan	46	Spencer	8	Whitley	18
Delaware	60	Jasper	13	Newton	9	Starke	1	Out of State	50
Dubois	24	Jay	14	Noble	36				

Dissemination of results

With the magnitude of information and data generated, ITPC is producing many fact sheets and reports to share these findings with others. These data are presented in a variety of media adapted for diverse audiences. ITPC, with the its evaluation and research coordinating center present data to the ITPC Executive Board and Evaluation Committee, among other audiences and produced reports such as Seeing is believing—How exposure to ITPC's media campaign affects tobacco knowledge, attitudes, and beliefs among Hoosier adults and youth. In addition, several fact sheets have been developed and are available on the ITPC website at www.itpc.in.gov/research.asp

- Indiana Adult Smoking
- Adult Smoking Rates by State
- Indiana's Tobacco Burden
- Smoking Attributable Deaths by State

- Smoking Attributable Health Care Costs by State
- Indiana Adult Smoking Cessation
- It's Never Too Late to Quit Smoking!
- Tips on How to Quit Smoking
- State Cigarette Taxes
- Increasing Indiana's Tobacco Tax Results in Lower Health Care Costs for Hoosiers
- The Facts on Increasing Tobacco Taxes
- Indiana Latinos and Smoking
- Indiana African Americans and Smoking
- American Indians and Alaska Natives and Tobacco (CDC)
- Asian Americans and Pacific Islanders and Tobacco (CDC)
- Tobacco Industry Manipulation and Reduced Risk Products

- Spit Tobacco Use in Indiana
- Protecting Hoosiers from Secondhand Smoke
- Health Effects of Secondhand Smoke
- Secondhand Smoke: Youth Exposure and Rules about Smoking in the Home
- Burden of Tobacco on Your Workplace/Benefits of Smoke Free Workplaces
- Pregnant Women and Smoking
- Smoking and Indiana Women
- Women and Tobacco Use (CDC)
- Tobacco Use and Harms Among Women and Girls (Campaign for Tobacco Free Kids)
- Indiana Youth Smoking
- Living with a Tobacco User: Influences on Youth

ITPC staff and its partners frequently give presentations on its programs and the fundamentals of tobacco control throughout the State. In addition, research and evaluation abstracts from staff and partners were selected for the 2003 National Conference on Tobacco or Health. Presentations given include:

- Cessation Strategies for Minority Communities
- Getting Communities Ready for Clean Indoor Air Policy
- Advancing Cessation Strategies through Comprehensive Tobacco Control Programs
- Promoting Your Program to Policymakers, the Public, and the Media

ITPC staff frequently share their expertise with other state and national programs:

American Public Health Association Annual Meeting-November 17th, 2003 San Francisco, CA. Designing a Statewide Comprehensive Tobacco Control Evaluation.

Kansas Public Health Association-September 25, 2003. Why We Need Comprehensive Tobacco Control Programs.

ITPC Executive Director, member of the Louisiana Scientific Advisory Board for Tobacco Control

FISCAL ACCOUNTABILITY

In May 2002, the ITPC Executive Board entered into a Memorandum of Understanding (MOU) with the State Board of Accounts (SBOA) to perform reviews of Tobacco Trust Fund grants that are awarded from ITPC to local entities. ITPC desires to ensure that local entities properly accounted for and spent the grant funds in accordance with grant requirements.

ITPC determined that it was necessary to secure the services of a professional staff with the requisite expertise to undertake the reviews at the local level. From July 1, 2003 to June 30, 2004, the SBOA completed 77 monitoring engagements. All grant recipients have had at least one monitoring engagement to review the tobacco grant documents. ITPC's goal for the SBOA is to review all grant recipients' documents for compliance with contractual guidelines for the entire contract period and to conduct a final review upon the conclusion of the grant cycle period.

As a result of these reviews, the SBOA issues an agreed-upon procedures report to ITPC which provides ITPC the opportunity to target technical assistance efforts to the partners that demonstrate the greatest need, as well as, adhering to the overriding goals of ensuring funds are utilized effectively. The SBOA field auditors also provide training to partners and are available to answer entity specific questions regarding fiscal issues.

As a component of evaluation in the comprehensive tobacco control program, the ITPC Executive Board has chosen an innovative approach to monitoring its programs through a collaborative effort between two separate, yet distinct state agencies. This collaborative effort enhances and reinforces ITPC's sincere desire to demonstrate accountability to policymakers and other stakeholders.



ADMINISTRATION/MANAGEMENT

PURPOSE

An effective tobacco control program requires a strong management structure. Experience in other states has shown the importance of having all of the program components coordinated and working together. Because a comprehensive program involves multiple state agencies (e.g., health, education, and law enforcement) and levels of local government, as well as numerous health-related voluntaries, coalitions, and community groups, program management and coordination is a challenging task. Furthermore, coordinating and integrating major statewide programs, such as counter-marketing campaigns with local program efforts require adequate staffing and communication systems. Finally, state agencies need sufficient contract administration staff to provide fiscal and program monitoring. Funding a large number of statewide and local partners requires a well-designed request for proposals and grant application processes, a well-managed review system and local project management. Administration and management activities include the following:

- Recruiting and developing qualified and diverse technical, program, and administrative staff.
- Awarding and monitoring program contracts and grants, coordinating implementation across program areas, and assessing program performance.
- Implementing an effective internal and external communication system.
- Implementing a sound fiscal management system.
- Providing support through training and technical assistance.

INDIANA'S EFFORTS

ITPC is administering nearly 130 grants and contracts with an annual overall budget of \$10.8 million. The CDC's Best Practices for Comprehensive Tobacco Control Programs recommends that Indiana spend 5% of our total budget on administrative expenses. Indiana's total budget for SFY 2004 and SFY 2005 came to a total of \$27.5 million, which included carryover of \$16.7 million from previous years. ITPC has administered its programs for less than 5% of our total budget as recommended by the CDC and maintains the 26% administrative and management expense budget reduction proposed in SFY 2004.

ITPC currently has 11 employees and 9 vacant positions. (See organizational chart).

In order to manage the large number of grants ITPC established a Memorandum of Understanding with the State Board of Accounts (SBOA) to assist with the fiscal monitoring of each grant. The SBOA conducts an onsite review of each grantee

with reports to be filed with ITPC. From July 1, 2003 to June 30, 2004, the SBOA completed 77 monitoring engagements. All grant recipients have had at least one monitoring engagement to review the tobacco grant documents. ITPC's goal for the SBOA is to review all grant recipients' documents for compliance with contractual guidelines for the entire contract period and to conduct a final review upon the conclusion of the grant cycle period.

Through IC 4-12-4, ITPC was charged with coordinating tobacco prevention and control efforts throughout the State. ITPC works with many state agencies and organizations to efficiently provide services and to pool resources to combat this huge problem in Indiana.

PROGRAM CHANGES IN SFY 2004

For State Fiscal Years 2004 and 2005, ITPC proposed and adhered to a 26% budget cut for administrative and management expenses. With the new budget, staff will take on significant additional work that will need to be handled centrally; therefore the following actions are being taken to achieve the budget cut in this category:

- ITPC did not fill any of the current 8 vacant positions that exist from the original staffing structure.
- Staff assumed additional responsibilities relative to providing training and advocacy efforts statewide.
- Staff will take on more centralized functions to advance the ITPC Policy agenda in the state as compared to a current decentralized model.
- Travel expenditures were closely monitored.
- Staff will aggressively pursue grant and policy options to provide complementary funding.

BUDGET

June 30, 2004

Budget Item	Fiscal Year 2004	% of FY04 Budget	Expenses from FY04 to be paid in FY05	Fiscal Year 2005	% of FY05 Budget
* STATEWIDE MEDIA CAMPAIGN	\$5,353,114	19%	\$929,302	\$3,500,000	33%
* ENFORCEMENT OF YOUTH ACCESS	\$750,000	3%	\$-	\$500,000	5%
* COMMUNITY BASED PROGRAMS	\$18,486,991	67%	\$5,585,302	\$4,071,523	39%
Local Community Based Partnerships	\$8,869,332		\$2,141,483	\$2,643,200	
2. Minority Based Partnerships	\$4,244,637		\$2,294,911	\$1,250,000	
3. State, Regional and Pilot Partnerships	\$5,373,022		\$1,148,908	\$178,323	
* Grants	\$4,415,616		\$530,050	\$0	
* Training	\$512,406		\$258,858	\$178,323	
* Technical Assistance	\$-		\$0	\$0	
* Statewide Quit Line	\$-		\$0	\$0	
* Clearinghouse for Materials	\$-		\$0	\$0	
* Sponsorships	\$-		\$0	\$0	
* Exhibits, Speaker Support	\$-		\$0	\$0	
4. Emerging Programs	\$85,000		\$0	\$0	
5. Voice Hubs	\$360,000		\$360,000	\$0	
* EVALUATION	\$1,960,059	7%	\$692,867	\$1,300,000	12%
* ADMINISTRATION/MANAGEMENT	\$1,200,000	4%	\$7,000	\$1,200,000	11%
TOTALS	\$27,750,164	100%		\$10,571,523	100%

¹ Budget for FY 2004 & 2005 updated at November 13, 2003 and February 19, 2004 Executive Board meeting.

IC 4-12-4-10 states that dollars, including interest, in the Tobacco Prevention and Cessation Trust fund do not revert to the General Fund or any other fund at the end of the fiscal year and remain available for use by the ITPC Executive Board.

Note 1. Summary of Significant Accounting Policies

A. Introduction

The Indiana Tobacco Prevention and Cessation Agency is part of the executive branch of government. As an agent of the Indiana Tobacco Use Prevention and Cessation Executive Board, the Agency is responsible for expending funds and making grants to significantly improve the health of the citizens of the State of Indiana by overseeing the development of tobacco use prevention and cessation programs throughout the State.

B. Reporting Entity

The Indiana Tobacco Prevention and Cessation Agency was created by IC 4-12-4, to establish policies, procedures, standards, and criteria necessary to carry out the duties of the staff of the executive board. Funds needed to operate the Agency are obtained through appropriation by the General Assembly from the Master Settlement Agreement IC 24-3-3-6. The

Agency received its initial funding during fiscal year 2000-2001, with a \$35 million dollar appropriation. Additional appropriations made to the Agency include \$5 million in 2001-2002, \$25 million in 2002-2003, of which only \$15 million was actually received, and \$21.6 million in 2003-2004.

Note 2. Deposits and Investments

Deposits, made in accordance with IC 5-13, with financial institutions in the State of Indiana at year-end were entirely insured by the Federal Depository Insurance Corporation or by the Indiana Public Deposit Insurance Fund. This includes any deposit accounts issued or offered by a qualifying financial institution. The Treasurer of State shall invest money in the fund not currently needed to meet the obligations of the fund.

Note 3. Net Appropriation

Appropriations presented are net of reversions to the Indiana Tobacco Use Prevention and Cessation Trust Fund at year-end.

INDIANA TOBACCO PREVENTION AND CESSATION

STATEMENT OF RECEIPTS, DISBURSEMENTS AND CASH AND INVESTMENT BALANCES

For the Period Ended June 30, 2004

Cash and Investments, July 1, 2003		\$14,187,436.06
Receipts:		
Donations in Memory of Mr. Roger Fey	100.00	
Interest on Investments	927,567.19	
Transfer from Master Settlement Fund	10,800,000.00	
Total Receipts		11,727,667.19
Disbursements:		
Advertising Expenditures		4,423,812.25
Enforcement of Youth Access - Alcohol Tobacco Beverage Commission		750,000.00
Community Grants		6,477,849.45
Minority Grants		1,949,725.51
State, Regional and Pilot Partnerships Grants	794,949.70	
Training Expenditures -	196,943.25	
Sponsorships (FY2003 Commitments) DECA, MVOV, ISDH - Health Fair	29,000.00	
Clearinghouse Materials	27,604.64	
Subtotal Statewide, Regional and Pilot Partnership Grants		1,048,497.59
Program Evaluation - American Institute for Research, YTS, & St Brd of Accts		1,267,191.67
Administration and Management		1,020,916.84
Total Disbursements		16,937,993.31
Excess of Receipts over (under) Disbursements		(5,210,326.12)
Fund Balance July 1, 2003	14,187,436.06	
Cash and Investments, June 30, 2004		\$8,977,109.94

ITPC COMMUNITY-RASED AND MINORITY-RASED COALITIONS BY COUNTY

County Buildings: Any county facility (buildings, grounds, and/or vehicles) stated are completely smoke free for the areas noted.

City Buildings: Any city/town facility (buildings, grounds, and/or vehicles) stated are completely smoke free for the areas noted.

School districts with tobacco free campuses: School policy prohibits against any tobacco use by students, all school staff, parents, and visitors on school property, in school vehicles, and at school sponsored functions away from school property 24 hours a day.

Parks/recreation facilities: This could be any policy restricting smoking, even in designated areas. The facility listed is smoke free completely, unless stated otherwise.

Other: This would include any other major destinations or points of interest in the community.

Adams County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Northeast: 21.3%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

11.1%

Allen County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Northeast: 21.3%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

13.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

None Reported

City Buildings

City Hall Offices

Decatur City Buildings

Adams County Service Complex

School Districts with Tobacco-free Campuses

Adams Central Community Schools

Parks/Recreational Facilities

Riverside Center/Fitness Center

Other

None Reported

County Funding 01/01/03-12/31/03: \$53,000 County Funding 01/01/04-06/30/05: \$43,600

COMMUNITY-BASED TOBACCO CONTROL COALITION

4-H of Adams County

Adams Central Community Schools

Adams County Health Department

Adams County Memorial Hospital

Boys and Girls Club of Adams County

Behavioral Health Center

FFA of Adams County

Governor's Commission for a Drug-Free Indiana

Healthy Families

Park Center Counseling Center

South Adams Community Schools

Coalition Coordinator: Boys & Girls Club of Adams County

Beth Ralston

410 Winchester Street Decatur, IN 46733 260.724.9128 (Phone) 260.424.7883 (Fax) bralston@bgcac.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

East Allen County Schools

Fort Wayne Community

MSD Southwest Allen County

Parks/Recreational Facilities

No Policy

Other

Indiana Purdue University at Fort Wayne

Fort Wayne Zoo

County Funding 01/01/03-12/31/03: \$332,400 County Funding 01/01/04-06/30/05: \$398,800

COMMUNITY-BASED TOBACCO CONTROL COALITION

After School Rocks Program

Allen County Health Deptartment

American Cancer Society

American Heart Association

American Lung Association

Ask Clinic Inc.

Benito Juarez Cultural Center, Inc.

Black Medical and Dental Assoc. Inc.

Chamber of Commerce

Dental Alliance Inc.

East Allen County Schools

El Mexicano Newspaper

Family Practice Center

Fort Wayne Community Schools

Frost Newspaper Inc.

GlaxoSmithKline Inc.

Greater Progressive Baptist Church

Harmony Health Plans

VOICE

Indiana Purdue University

Ink. Newspaper Lutheran Hospital Managed Health Care Mathew 25 Clinic Mayor's Youth Council

Minority Health Coalition of Allen County, Inc.

Nation of Miami Indian Tribe Neighborhood Health Clinic

Outspoken Inc. for LGBT Community

Parkview Hospital PBS TV 39

Pine Hills Country Day School Southwest Allen County Schools

St. Joe Hospital
Stop the Madness Inc.
SWAT Parent Volunteer
Women's Cancer Center

Coalition Coordinator:

Smokefree Allen County, Inc.

Marie Washington

2000 North Wells Street, Building #1

Fort Wayne, IN 46808 260.424.7883 (Phone) 260.424.2942 (Fax) mariesf@fwi.com

United Hispanic-Americans, Inc./Benito Juarez Cultural Center

County Funding 01/01/03-12/31/03: \$80,300 County Funding 01/01/04-06/30/05: \$115,751

MINORITY-BASED TOBACCO CONTROL COALITION

Ericka Garcia, United Hispanic Americans Patricia Cordero, United Hispanic Americans Rosa A. Gerra, United Hispanic Americans

Coalition Coordinator: Rosa Gerra

1210 Broadway Street Fort Wayne, IN 46802 260.422.2651 (Phone) 260.420.2272 (Fax) Rosa.gerra@verizon.net

Bartholomew County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

20.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Bartholomew County School Corporation Flat Rock-Hawcreek School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$76,100 County Funding 01/01/04-06/30/05: \$91,320

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
American Lung Association

Bartholomew Consolidated Schools Bartholomew County Court System Bartholomew County Public Health

Bartholomew County Sheriff's Department

Columbus City Police Department Columbus Regional Hospital Foundation

Foundation for Youth Healthy Communities Indiana State Excise Police Insight Communication

SIHO

Wellness Program

Coalition Coordinator: Columbus Regional Hospital Foundation

Peggy Voelz

2400 East 17th Street Columbus, IN 47201 812.375.3194 (Phone) 812.376.5916 (Fax) pvoelz@crh.org

Proyecto Salud Action Team

County Funding 01/01/03-12/31/03: \$16,700 County Funding 01/01/04-06/30/05: \$14,085

MINORITY-BASED TOBACCO CONTROL COALITION

Action Team Alejandra Carretro

Amanda Noyola

Amparo Cardell

Bartholomew Co. Consolidated School Corp. –Health Services Bartholomew Co. Consolidated School Corp. –Student Assistance

Bartholomew County Perinatal Network

Bud Kencaid

Columbus Regional Hospital El Correo Spanish Newspaper

Elizabeth Partrige

Elizabeth Siegmann, LPC

Elsa Miller

Frank and Carolyne Souza

Healthy Communities

Healthy Communities Tobacco Awareness

Juan Ĝarcia, Ph. D. Laura Hurt, RN Maria Fritz

Marta Boriss Mary Ellen Nelson

Mayor's Diversity Task Force

NAACP

PUENTES, Spanish bilingual group Su Casa, Columbus Hispanic Center

Victor Burgos

Coalition Coordinator: Columbus Regional Hospital Foundation

Juan Garcia

2400 East 17th Street Columbus, IN 47201 812.376.5836 (Phone) 812.376.5916 (Fax)

jgarciacolumbus@hotmail.com

Benton County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School-8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

13.9%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Otterbein Town Hall

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free campuses

Parks/Recreational Facilities

4-H Buildings at County Fairgrounds

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$27,615

COMMUNITY-BASED TOBACCO CONTROL COALITION

4-H Extension Educators 4-H Junior Leaders

American Cancer Society Lafayette Chapter
Coalition Drug-free Benton County LCC

Indiana Criminal Justice Institute

Indiana National Guard Drug Demand Reduction Program

Coalition Coordinator: Community Action Program, Inc.

of Western Indiana Janie Petersen 5065 North 600 East Fowler, IN 47944 219.261.2871 (Phone) 219.261.2871 (Fax) Petersen@ffni.com **Blackford County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: **Boone County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-Indy: 26.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

13.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Blackford County Courthouse Blackford County Jail

City Buildings

Hartford City City Buildings

School Districts with Tobacco-free Campuses

Blackford County Schools

Parks/Recreational Facilities

No Policy

Other

Bils Foods

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$31,560

COMMUNITY-BASED TOBACCO CONTROL COALITION

4-H Blackford County

Blackford County Commissioners

Blackford County Health Department

Blackford County Hospital Blackford County Schools

Blackford County Sheriff's Department Division of Family Service

Hartford City Police Ministers Association

Montperlier Police Department

Pacesetter Bank Step Ahead Workone

Coalition Coordinator: St. Vincent Randolph Hospital

Debbie McGriff-Tharp 473 Greenville Avenue Winchester, IN 47394 765.584.0745 (Phone) 765.584.0470 (Fax)

tobaccofreerandolph@hotmail.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

29.9%

Lebanon City Buildings

School Districts with Tobacco-free Campuses

Zionsville Community Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$60,600 County Funding 01/01/04-06/30/05: \$66,047

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Boone Circuit Court

Boone County Cancer Society Boone County Health Department

Boone County Sheriff's Department

Boone County Youth

Cowan's Pharmacy

Indiana Criminal Justice Institute

Indiana State Excise Police

James Haines, OD

Jim and Shirley Maines

Lebanon Boys and Girls Club

Lebanon Community Schools

Lebanon Golden K

Lebanon Kiwanis

Lebanon Sports and Fitness

Lebanon Sun Times

Purdue Extension Club of Boone County Western Boone Community Schools Witham Cardiac Support Group

Witham Health Services

Youth Action Community Council Zoinsville Boys and Girls Club

Zionsville Community Schools

Coalition Coordinator: Youth Action Community Council

of Boone County Julie Gilliam

1122 North Lebanon Street Lebanon, IN 46052 765.482.6099 (Phone) 765.483.4450 (Fax)

tfbcjulie@frontiernet.net

Brown County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Southwest: 25.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: Carroll County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: North-central: 23.8% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

17.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Brown County Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$25,110

COMMUNITY-BASED TOBACCO CONTROL COALITION

Brown County Health Department Brown County High School Newspaper Brown County High School - Students

Brown County Jr. High School - Students

Brown County Literacy Coalition

Brown County Local Coordinating Council Brown County Office of Family and Children Brown County Schools – Administration Brown County Sheriff's Department

Even Start Family Literacy

Home School Parents and Students Indiana Criminal Justice Institute

New Life Community Church - Youth Minister

Coalition Coordinator: Brown County Government-Auditor

Linda Hobbs P.O. Box 1311 Nashville, IN 47448 812.988.7997 (Phone) 812.988.5487 (Fax) LindaLHobbs@sbcglobal.net TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Mayor's Office Police Department

Library

23.4%

Post Office

School Districts with Tobacco-free Campuses

Carroll Consolidated School Corporation Delphi Community School Corporation

Parks/Recreational Facilities

None Reported

Other

10 Smoke-free Restaurants in Delphi and Flora

County Funding 01/01/03-12/31/03: \$44,800 County Funding 01/01/04-06/30/05: \$47,040

COMMUNITY-BASED TOBACCO CONTROL COALITION

4-H

Carroll Consolidated School Corporation Carroll County Health Department Carroll County Sheriff's Department Delphi School Corporation Family Health Clinic of Carroll County

YMCA

Coalition Coordinator: Carroll County Health Department

Rebecca Lohmiller

101 West Main Street. Courthouse

Delphi, IN 46923 765.564.3420 (Phone) 765.564.6161 (Fax) nurses@carlnet.org

Cass County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

20.7%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Mayor's Office

School Districts with Tobacco-free Campuses

Logansport Community School Corporation Pioneer Regional School Corporation Southeastern School Corporation Parks/Recreational Facilities

No Policy

Other

TM Morris and Modine Factories

County Funding 01/01/03-12/31/03: \$58,045 County Funding 01/01/04-06/30/05: \$69,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

Cass County Health Department Four County Counseling Center Logansport Memorial Hospital

Coalition Coordinator: Four County Counseling Center

Amy Sweet

1015 Michigan Avenue Logansport, IN 46947 574,722,5151 ext. 354 (Phone)

574.722.9523 (Fax) asweet@fourcounty.org

Diversity Dynamics, Minority Tobacco-Free Partnership of Cass

County

County Funding 01/01/03-12/31/03: \$11,500

MINORITY-BASED TOBACCO CONTROL COALITION

Dave Miller, Landmark Adult Learning Center

Joyce Gebhardt, United Way of Cass Co., Diversity Dynamics

Deborah Thompson, Native American Deacon Juan Rodriques, All Saints Parish Guadalupe Nevarez, Minority Coordinator Melanie Shepherd, Community Coordinator

Janie Reyes, Logansport Community School Corporation

Kathy Pattee, Logansport Memorial Hospital

Richard Farrer, Deputy Mayor

Sandy Dillman, Cass County Health Department Bonnie Riggle, Cass County Community Health Center

Coalition Coordinator: Guadalupe Nevarez

321 9th Street Logansport, IN 46947 574.722.7407 (Phone) 574.735.0429 (Fax) gnewstar@verizon.net Indiana Latino Institute - ICP

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Guadalupe Nevarez, Latino Tobacco Control of Cass County

Amy Sweet, Four County Counseling Center Fr. Michael Mckinney, All Saints Catholic Church

Joyce Gebhardt, Diversity Dynamics

Dave Miller, Landmark Adult Learning Center

Celeste Ott, Cass County Community Health Center

Jull Walters, Cass County WIC

Carrie Kasten, Cass County Community Health Center

Coalition Coordinator: Guadalupe Nevarez

321 9th Street Logansport, IN 46947 574.722.7407 (Phone) 574.735.0429 (Fax) gnewstar@verizon.net

Clark County

Indiana adult smoking prevalence:
Regional smoking prevalence:
Indiana youth smoking prevalence:

Southeast: 33.0%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

22%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

Jeffersonville Fire Department

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$123,800 County Funding 01/01/04-06/30/05: \$130,547

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Boys and Girls Club of Jeffersonville

Clark County Health Department

Clark County Youth Coalition

Clark County Youth Shelter & Family Services

Clark Memorial Hospital

Clark-Floyd Minority Tobacco Prevention Coalition

Clarksville Community School Corporation Communities in Schools of Clark County Community Action of Southern Indiana

Drug Free Indiana

Grassroots Prevention Coalition of Clark County

Greater Clark County School InfoLink of Southern Indiana Jeffersonville NAACP Jeffersonville Youth Commission Sacred Heart Parish School Sellersburg Police Department Southern Indiana Minority Health Initiative Twenty-First Century Scholars

West Clark Community Schools YMCA of Southern Indiana

Coalition Coordinator: Clark Memorial Hospital

Jason Ramsey 1220 Missouri Avenue Jeffersonville, IN 47130 812.283.2649 (Phone) 812.283.2479 (Fax)

jason.ramsey@clarkmemorial.org

Community Action of Southern Indiana

County Funding 01/01/03-12/31/03: \$54,700 County Funding 01/01/04-06/30/05: \$21,169

MINORITY-BASED TOBACCO CONTROL COALITION

Boys and Girls Club

Community Action of Southern Indiana

Clark County Youth Coalition Clark Memorial Hospital

Deptartment of Workforce Development Floyd County Youth Services Coalition

Floyd Memorial Hospital

Grassroots Prevention Coalition

Hispanic Ministries

Howard Chapel Baptist Church Indiana University Southeast Jeffersonville Housing Authority

Jeffersonville NAACP
New Albany NAACP

Our Place Drug and Alcohol Education Services

Rauch, Inc. Healthy Families Second Baptist Church

Southern Indiana Minority Enterprise Initiative Southern Indiana Minority Health Initiative

Tri-County Health Coalition Twenty First Century Scholars Wesley United Methodist Church

Coalition Coordinator: Channelle Ragland

1613 East 8th Street Jeffersonville, IN 47130 812.288.6451 ext. 133 (Phone)

812.284.8314 (Fax)

minoritytobacco@hotmail.com

Clay County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

28.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings
County Courthouse
Sheriff's Department
City Buildings

City Hall

School Districts with Tobacco-free Campuses

Clay Community Schools

Parks/Recreational Facilities

Fairgrounds Buildings

Other

None Reported

County Funding 01/01/03-12/31/03: \$48,700 County Funding 01/01/04-06/30/05: \$10,440

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Brazil City Police Brazil County Council

Clay City Center for Family Medicine

Clay City Police Clay City Voices

Clay County Health Department

Clay County LCC Clay County Sheriff

Governor's Commission for Drug-Free Indiana

Hamilton Center Northview Voices School Nurse Shaw Chiropractic St. Vincent Clay Hospital

Coalition Coordinator: Clay County Commissioners

Lori Knight

3 West Knight Drive Brazil, IN 47834 812.448.1530 (Phone) 812.442.0608 (Fax) eelsrock@aol.com Clinton County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

20.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Clinton County Courthouse

City Buildings

Office of the Mayor

School Districts with Tobacco-free Campuses

Clinton Prairie School Corporation

Parks/Recreational Facilities

Clinton County Boys & Girls Club Clinton County Family YMCA

Other

None Reported

County Funding 01/01/03-12/31/03: \$53,200 County Funding 01/01/04-06/30/05: \$63,840

COMMUNITY-BASED TOBACCO CONTROL COALITION

Big Brothers/Sisters of Clinton County

Clinton Boys and Girls Club

Clinton County Drug & Alcohol Coalition

Clinton County Health Department

Clinton County Probation Department

Clinton County Step Ahead Community Counseling Center Frankfort Police Department

Prevent Child Abuse Council

Rainbow Connection Childcare, Inc.

Rainbow Haven

Shining Stars Youth Programs

Purdue Extension Services of Clinton County

-Have a Healthy Baby Program

-Mommy & Me Program

YWCA Domestic Violence Intervention & Prevention Program YMCA SACC Program

Coalition Coordinator: Clinton County Government

Brandie Oliver 3718 West 705 South Rossville, IN 46065 765.379.2314 (Phone) boliver@geetel.net

Indiana Latino Institute – La Coalicion Latina de Tippecanoe

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding

for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Aida Muñoz, La Coalición Latina de Tippecanoe Jasmine Alvarez, St. Vincents Hospital Juan Martinez, Iglesia Metodista Veronica E. Trejo, Hispanic Center Gilma Hernandez, Hispanic Center Rachel Galllichan, YWCA Brandie Oliver, TCP

Susie Michael, Boys and Girls Club

Donn Walling, Farmers Bank

Saundra Sheets, Safety Kids of Indiana

Libbi Smitt. Vincent Hospital

Erin Kleindorfer, Community Counseling Center Howard

Community Hospital

Rita Williams, Schooll Principal Kyger Elementary School

Fr. Joe

Coalition Coordinator: Aida Munoz

905 Brown Street Lafayette, IN 47904 765.420.7902 (Phone) aidam8@msn.com

Crawford County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

33.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse and Complex

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

Youth Services Bureau

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,600 County Funding 01/01/04-06/30/05: \$27,615

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Crawford County Health Department Crawford County High School Crawford County Probation

Crawford County Youth Service Bureau

Hoosier Uplands

Lincoln Hills Development Patoka Healthcare Family Clinic

Coalition Coordinator: Hoosier Uplands Economic

Development Corp.
Matthew Lee Smith
1602 | Street, Suite 2
Bedford, IN 47421
812.275.3182 (Phone)
812.275.5116 (Fax)
msmith@hoosieruplands.org

Daviess County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Southwest: 25.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: **Dearborn County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Southeast: 33.0% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

22.6%

TOBACCO-RELATED POLICIES AND ORDINANCES-NONE REPORTED

County Buildings

No Policy City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$50,700 County Funding 01/01/04-06/30/05: \$50,840

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Barr-Reeve Community Schools Daviess Community Hospital

Daviess County Step Ahead/Adult Literacy Council

Daviess County YMCA Health Department

Hoosier Uplands - Lead Agency North Daviess Community Schools

Power House Youth Center

Purdue Co operable Extension Services

Washington Catholic Schools Washington Community Schools

Coalition Coordinator: Hoosier Uplands Economic

Development Corp. Matthew Lee Smith 1602 | Street, Suite 2 Bedford, IN 47421 812.275.3182 (Phone) 812.275.5116 (Fax)

msmith@hoosieruplands.org

County Buildings

No Policy

16.2%

City Buildings

No Policy

School Districts with Tobacco-free Campuses

TOBACCO-RELATED POLICIES AND ORDINANCES

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$60,600 County Funding 01/01/04-06/30/05: \$52,500

COMMUNITY-BASED TOBACCO CONTROL COALITION

Citizens Against Substance Abuse Community Mental Health Center, Inc.

Directions! of CMHC Family Connections

Coalition Coordinator: Dearborn County Government

Donna Thacker

451 Park Avenue, P.O. Box 3851

Aurora, IN 47001 812.926.6236 (Phone) dow323@yahoo.com

Decatur County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

DeKalb County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Northeast: 21.3%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

TOBACCO-RELATED POLICIES AND ORDINANCES-NONE

Percent of women in County who report smoking during pregnancy:

24%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Decatur County Community Schools Greensburg Community Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$47,500 County Funding 01/01/04-06/30/05: \$40,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Carousel Play & Learn Center

Decatur County Community Action Coalition

Decatur County Extension Office Decatur County Family YMCA Decatur County Memorial Hospital Decatur County Prevention Coalition Decatur County Health Department

Decatur County Sep Ahead
Greensburg Daily News
Greensburg High School
Greensburg Police Department
North Decatur High School

Ponderosa

South Decatur High School Student Representatives

Coalition Coordinator: Decatur County Treasurer

Tina Hoeing

6152 East State Road 46 Greensburg, IN 47240 812.662.6096 (Phone) 812.663.4220 (Fax) thoeing@yahoo.com

REPORTED

County Buildings

None Reported

City Buildings

None Reported

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

None Reported

Other

31.4%

None Reported

County Funding 01/01/03-12/31/03: \$57,100 County Funding 01/01/04-06/30/05: \$33,520

COMMUNITY-BASED TOBACCO CONTROL COALITION

Auburn Police Department

Children First Center - H.O.M.E.

DeKalb County Community Foundation

DeKalb County DARE

DeKalb County Probation Department DeKalb County Sheriff's Department

DeKalb High School

DeKalb Memorial Hospital - EMS Director

Division of Family and Children

Drug Free Indiana Eastside High School

Families First

Filling Station Youth Center Four Co. Transitional Living Garrett Community Center

Gateway Counseling Service

GKB Head Start

GKB High School - SADD

Northeastern Center

Purdue Extension - DeKalb County

Serenity House Inc.
Shelter Ministries Inc.
United Way of DeKalb County
YMCA Women's Shelter & Outreach

Coalition Coordinator: United Way of DeKalb County, Inc.

Tara Marks

215 East 9th Street, Suite 100

Auburn, IN 46706 260.927.0995 (Phone) 260.927.0996 (Fax) tad@unitedwaydekalb.org **Delaware County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: Coalition Coordinator: Family Services of Delaware County, Inc.

Tonya Miller-Bailey 806 West Jackson Street Muncie, IN 47305 765.284.7789 (Phone) 765.281.2733 (Fax)

tb@familyservicesmunice.org

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All Muncie City Buildings except City Hall

School Districts with Tobacco-free Campuses

Cowan Community School Corporation

Daleville Community Schools

Harrison-Wash Community School Corporation Liberty-Perry Community School Corporation Mt. Pleasant Twp Community School Corporation

Parks/Recreational Facilities

Skateboard Park at Tuney Park

Other

Ball State University

County Funding 01/01/03-12/31/03: \$137,400 County Funding 01/01/04-06/30/05: \$164,880

COMMUNITY-BASED TOBACCO CONTROL COALITION

21st Century Scholars

American Cancer Society

Ball Memorial Hospital Respiratory Therapy Department

BMH Patient Education

BSU Department of Nursing

BSU Department of Physiology and Health Sciences

Bulev Center

Cancer Services of Delaware County - Little Red Door

Center Township Trustee Community Volunteers

Delaware County Coordinating Council to Prevent Alcohol and

Other Drug Abuse

Delaware County Health Department

Delta High School

Education TASCC Force

Family Services of Delaware County

Fisher Institute for Wellness and Gerontology, BSU

Future Choices

Governor's Council for a Drug Free Indiana

LifeStream Services

Maternal Child Health Services and WIC

Minority Health Coalition

Motivate Our Minds

Muncie Center for the Arts

Muncie Commission for the Social Status of Black Males

Muncie Police Department

Newspapers In Education (NIE) Star Press

Open Door/BNH Health Center

Planned Parenthood

South Madison Community Center

TEAMwork for Quality Living

Future Choices, Inc.

24.3%

County Funding 01/01/03-12/31/03: \$41,400 County Funding 01/01/04-06/30/05: \$39,650

MINORITY-BASED TOBACCO CONTROL COALITION

Community Alliance(TO) Promote Education

Precious Hearts Day Care

Project Care

Wapehani Girl Scouts Council

Indiana Academy

South Madison Community Center

Minority Health Coalition, Delaware County

Motivate Our Minds **Educational TASCC Force** BSU - Early Outreach BSU - Minority House

Coalition Coordinator: Erika Quarles

309 North High Street Muncie, IN 47305 765.741.8332 (Phone) 765.741.8333 (Fax) Emquarles@aol.com

Dubois County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Elkhart County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

17.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Greater Jasper School Corporation Northeast Dubois County School Corporation Southeast Dubois County School Corporation Southwest Dubois County School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$56,700 County Funding 01/01/04-06/30/05: \$40,050

COMMUNITY-BASED TOBACCO CONTROL COALITION

St. Joseph's Hospital American Cancer Society

American Cancer Society Advocates

DC Broadcasting, WBDC, WAXL, and Channel 27

Dubois County Health Department Dubois High School Students Forest Park High School Students Greater Jasper School Corporation Hispanic Outreach Coalition Jasper High School Students

Memorial Hospital & Health Care Center Southeast Dubois County School Corporation

Southridge High School Students Tri-Cap's PSUPP Program Tri-Cap's Teen Wellness Program

Coalition Coordinator: St. Joseph's Hospital

Shannon Hildebranski 1900 Medical Arts Drive Huntington, IN 47542 812.683.6441 (Phone) 812.683.6403 (Fax) shilderbranski@dsjh.org

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

14.2%

Elkhart City Buildings Goshen City Buildings Wakarusa City Buildings

School Districts with Tobacco-free Campuses

Baugo Community Schools Concord Community Schools Elkhart Community Schools Goshen Community Schools Middlebury Community Schools Wa-Nee Community Schools Parks/Recreational Facilities

Elkhart Park Buildings Goshen Park Buildings Nappanee Park Buildings Wakarusa Park Buildings

Other

Goshen College

County Funding 01/01/03-12/31/03: \$241,500 County Funding 01/01/04-06/30/05: \$95,463

COMMUNITY-BASED TOBACCO CONTROL COALITION

Addictions Recovery Centers, Inc.

American Cancer Society

Association for the Disabled of Elkhart County

Bashor Children's Home

Boys and Girls Club of Goshen, Inc.

Concord Township Trustee

ECADAP

Elkhart Chapter, Indiana Black Expo

Elkhart Community Schools

Elkhart County Health Department

Elkhart General Hospital

Elkhart Park + Recreation Department

Elkhart Youth Services Bureau Goshen General Hospital Heart City Health Center Hispanic/Latino Health Coalition

Maternal Child Health Services and WIC Minority Health Coalition of Elkhart County

Oaklawn Mental Health Center Purdue Extension Office Recovery Journey, Inc. Women's Care Center

Coalition Coordinator: Elkhart County

Mark Potuck 608 Oakland Avenue Elkhart, IN 46516 574.523.2117 (Phone) 574.523.2158 (Fax)

mpotuck@elkhartcountyhealth.org

Minority Health Coalition of Elkhart County

County Funding 01/01/03-12/31/03: \$86,800 County Funding 01/01/04-06/30/05: \$90,300

MINORITY-BASED TOBACCO CONTROL COALITION

Agape Missionary Church American Cancer Society Bethany Chapel

Canaan Baptist Church

City of Elkhart

Community Missionary Baptist Church

El Divino Redentor

El Faro

Elkhart Black Expo

Elkhart Community School

Elkhart County Health Department

Elkhart Hospital

Elkhart Housing Authority

Greater Bethany Church

La Casa

Maple City Health Care Center

North Side Coalition

Pilgrim Rest Missionary Baptist

St. James AME Church Tolsn Community Center

United Methodist Church of Goshen

Coalition Coordinator: Tarra Morris

315 Wagner Avenue Elkhart, IN 46515 574.522.0128 (Phone) 574.293.1403 (Fax) elkmhc@aol.com

Indiana Latino Institute - Elkhart

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding

for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Guadalupe Zepeda, Youth Service Bureau

Maria Diaz, Hispanic Latino Minority Health Coalition of

Elkhart County

Coalition Coordinator: Youth Services Bureau

Guadalupe Zepeda

330 West Lexington Avenue

Elkhart, IN 46516 574.294.3549 ext. 112 574.389.3149 mujicajef@msn.com

Fayette County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

29.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Fayette County School Corporation

Parks/Recreational Facilities

Miller Building in Roberts Park

Fayette Memorial Hospital

County Funding 01/01/03-12/31/03: \$48,100 County Funding 01/01/04-06/30/05: \$57,720

COMMUNITY-BASED TOBACCO CONTROL COALITION

Area 9

Community Education Coalition Connersville School Corporation Connersville City Fire Department County Health Department Creative Counseling

Family Nutrition Program Office of Family Division of Children

Purdue Extension office

Step Ahead Vistion

White Water Valley Care Pavilion

Coalition Coordinator: Community Education Coalition

Karolyn Buckler

3013 Virginia Avenue, P.O. Box 225

Connersville, IN 47374 765.825.7633 (Phone) 765.825.1693 (Fax)

kbuckler@comedcoalition.org

Floyd County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Fountain County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

25.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

County Parks

Other

None Reported

County Funding 01/01/03-12/31/03: \$75,700 County Funding 01/01/04-06/30/05: \$78,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Aebersold Jazz. Inc.

Brandon's House Counseling Center

Clark/Floyd County Minority Tobacco Prevention and

Cessation Coalition

Family Health Center of Floyd County

Floyd County Alcohol, Tobacco & Other Drug Task Force

Floyd County Health Department Floyd County Step Ahead Council

Floyd County Teen Court

Floyd County Youth Services Bureau

Floyd Memorial Hospital

First Baptist Church of Sellersburg Interfaith Community Council, Inc New Albany/Floyd County Schools

New Albany/Floyd County Parks and Recreation Our Place Drug and Alcohol Education Services

Rauch Healthy Families Initiative Youth Development Advisory Council

New Albany/Floyd County Parks and Recreation

Coalition Coordinator: Our Place Drug and Alcohol

Education Services, Inc. MeriBeth Adams-Wolf

101 Saint Anthony Drive, P.O. Box 8

Mt. St. Francis, IN 47146 812.923.3400 (Phone) 812.923.9870 (Fax) ourplace@iglou.net

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

20.9%

Fountain County Courthouse

Fountain County Jail

Fountain County Ambulance Service

Fountain/Warren County Health Department

City Buildings

Covington City Hall Williamsport Town Hall

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

County Funding 01/01/03-12/31/03: \$69,800

County Funding 01/01/04-06/30/05: \$83,760 (amount divided

between Fountain and Warren counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Attica Consolidated School Corp.

Community Action Program, Inc. of Western Indiana

Covington Community School Corp.

Governor's Commission for a Drug Free Indiana

(Fountain & Warren Co.)

Metropolitan School District of Warren Co.

Southeast Fountain School Corp

Super Test Oil Company

St Vincent Williamsport Hospital

Warren County CAPE Initiative

Coalition Coordinator: Community Action Program, Inc.

of Western Indiana Kathy Walker

418 Washington Street, P.O. Box 188

Covington, IN 47932 765.793.4881 (Phone) 765.793.4884 (Fax) kwalker@capwi.org Franklin County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-east: 30.4%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Fulton County

Indiana adult smoking prevalence:
Regional smoking prevalence:
Indiana youth smoking prevalence:

North-central: 23.8%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

30.3%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$46,000 County Funding 01/01/04-06/30/05: \$31,500

COMMUNITY-BASED TOBACCO CONTROL COALITION

Community Mental Health
Creative Counseling
Healthy Families
Maternal Child Health Services and WIC
Purdue Extension office
Southeastern YMCA
Stayin' Alive- Franklin Co. LCC

Coalition Coordinator: Franklin County Commissioners

Kim Linkel 1057 Morris Road Batesville, IN 47006 812.934.3069 (Phone) Stayin_alive24@hotmail.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

24%

Rochester City Buildings

Akron Town Hall

Fulton Town Hall

Kewanna Town Hall

School Districts with Tobacco-free Campuses

Caston School Corporation

Rochester Community School Corporation

Tippecanoe Valley Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$45,000 County Funding 01/01/04-06/30/05: \$54,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

Akron Elementary School American Cancer Society

Caston & Tippecanoe Valley Schools

Chamber of Commerce
FFA Clubs of Rochester
First Baptist Church
First Federal Savings Bank
Four County Counseling Center
Fulton County Commissioners
Fulton County Health Department

Fulton County Sheriff

Fulton County Wellness Center

Healthy Families

Local Coordinating Council for a Drug Free Indiana

Peterson and Waggoner Attorneys at Law

Purdue Extension Service Rochester City Clerk's Office Rochester Metal Products Rochester Police Department Rochester School Corporation Woodlawn Hospital

Coalition Coordinator: Fulton County Health Department

Linda Lukens Petersen 125 East 9th Street Rochester, IN 46975 574.224.5152 (Phone) 574.223.2335 (Fax) linlukpetersen@yahoo.com Gibson County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Grant County

Indiana adult smoking prevalence:
Regional smoking prevalence:
Indiana youth smoking prevalence:

Central-east: 30.4%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

27.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Princeton Mayor's Office

School Districts with Tobacco-free Campuses

North Gibson School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$52,300 County Funding 01/01/04-06/30/05: \$62,760

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Catholic Diocese Schools
Commissioner's Office
Community Corrections

Doulos Ministries

East Gibson School Corporation

First Steps

Gibson County ARC

Gibson County Extension Office Gibson County Health Department Gibson County Sheriffs's Office Gibson General Hospital North Gibson School Corporation

Step Ahead Youth First

Southwest Indiana Mental Health Center

Tulip Tree Family Health Services

United Way

Visiting Nurse Association Women Infants and Children

YMCA

Coalition Coordinator: Gibson County Health Department

Martha Caine

614 Southeast Third Street Evansville, IN 47713 1-866-200-6791 (Phone) 812.401.4199 (Fax) itpcsmokefree@hotmail.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All Offices

24%

School Districts with Tobacco-free Campuses

Oak Hill United School Corporation

Parks/Recreational Facilities

Hogin Park

Other

None Reported

County Funding 01/01/03-12/31/03: \$77,300 County Funding 01/01/04-06/30/05: \$92,760

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Cancer Services of Grant County
Marion General Hospital
Minority Health Coalition
St. Joseph's Hospital
Taylor University
Grant County Health Department
Indiana Wesleyan University

Coalition Coordinator: Cancer Services of Grant County

Lisa Rapp

305 South Norton Avenue Marion, IN 46952 765.664.6815 (Phone) 765.664.1636 (Fax) tobacco101@sbcglobal.net

Minority Health Coalition of Grant County

County Funding 01/01/03-12/31/03: \$31,000

MINORITY-BASED TOBACCO CONTROL COALITION

City of Marion – Office of the Mayor Grace Missionary Baptist Mayor's Hispanic Round Table McMulloch Middle School Minority Health Coalition St. Paul Human Services

Coalition Coordinator: Tanya E. Smith

1608 South Washington Street

Marion, IN 46953 765.664.7850 (Phone) 765.674.9489 (Fax) thealthy007@aol.com **Greene County**

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Hamilton County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

6.7%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

None Reported

School Districts with Tobacco-free Campuses

Bloomfield School District Eastern Greene Schools

Linton-Stockton School Corporation White River Valley School District

MSD Shakamak Schools

Parks/Recreational Facilities

No Policy Other

None Reported

County Funding 01/01/03-12/31/03: \$52,000 County Funding 01/01/04-06/30/05: \$47,430

COMMUNITY-BASED TOBACCO CONTROL COALITION

Greene County General Hospital Greene County Home Health Care Greene County Probation Department Boys and Girls Club of Greene County Step Ahead

Coalition Coordinator: Sarah Riggins

31 West Main Street Bloomfield, IN 47424 812-384-4538 (Phone)

tobaccofreeingreene@earthlink.net

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

Government and Judicial Center

City Buildings

25.2%

Cicero Government Buildings Noblesville Government Buildings Fishers Government Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

4-H Buildings

Highway Department Sheriff's Department

County Funding 01/01/03-12/31/03: \$239,272 County Funding 01/01/04-06/30/05: \$119,153

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Boys and Girls Club of Noblesville

Carmel Schools
Carmel City Court
Carmel Mayor's Office

Carmel Police Department

Governor's Commission for a Drug Free Indiana Hamilton County Community Corrections Hamilton County Health Department Hamilton County Probation Department Hamilton County Prosecutor's Office Hamilton County Sheriff's Department Hamilton County Superior Courts Hamilton County Youth Services Bureau

Kristo Psychological Services

Lifestyle Consulting Noblesville City Court Noblesville Schools Riverview Hospital Westfield Schools

Coalition Coordinator: Hamilton County

George Kristo

One Hamilton County Square, Suite 29

Noblesville, IN 46060 317.776.8429 (Phone) 317.776.8413 (Fax) glk@co.hamilton.in.us

Indiana Latino Institute – Hamilton Latino Tobacco Control

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Coalition Coordinator: Gloria Dehney

2918 East 136th Street Carmel, IN 46033 317.848.9378 (Phone) glorydehne@hotmail.com

Hancock County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

15.9%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Buck Creek Township Government Buildings and Grounds

Fortville Town Buildings Greenfield City Buildings

Greenfield Fire Department Buildings

New Palestine Town Buildings

Sugar Creek Fire Department Buildings

School Districts with Tobacco-free Campuses

Greenfield-Central Community Schools

Southern Hancock Co. Community School Corp.

Parks/Recreational Facilities

Greenfield Parks Department Buildings

The Blaze Roller Rink Building

Other

Hancock Memorial Hospital – Buildings and Grounds Eli Lilly and Company – Buildings and Grounds

County Funding 01/01/03-12/31/03: \$66,300 County Funding 01/01/04-06/30/05: \$79,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

American Heart Association

American Red Cross

Boys & Girls Club of Hancock County

Brandywine Dental Group

Buck Creek Township Fire Department

Community School Corp of Southern Hancock Co

Eastern Hancock School Corporation

Eli Lilly and Company

Fist Step/Steps Ahead Hancock County

Greenfield Fire Department Hancock County D.A.R.E.

Hancock County Health Department

Hancock Hope House

Hancock Memorial Hospital and Health Services

Hancock OB/GYN

Mental Health Association of Hancock County Mount Vernon Community School Corporation Neighborhoods Against Substance Abuse (NASA)

Purdue Extension of Hancock County

Coalition Coordinator: Hancock Memorial Hospital and

Health Services Brandee Bastin 801 North State Street Greenfield, IN 46140 317.468.4162 (Phone) 317.468.4194 (Fax) bbastin@hmhhs.org

Harrison County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who

report smoking during pregnancy: 23.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All Government Buildings

City Buildings

Buck Creek City Buildings

School Districts with Tobacco-free Campuses

Lanesville Community School Corporation North Harrison Community School Corporation South Harrison Community Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$53,400 County Funding 01/01/04-06/30/05: \$63,876

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Governor's Commission for a Drug Free Indiana

Harrison County Circuit Court Probation Harrison County Community Services Harrison County Health Department

Harrison County Hospital

Harrison County Hospital Foundation Harrison County Maternal Health Harrison County Step Ahead Council

Harrison County Substance Abuse and Prevention Coalition-LCC

JWC Appraisal, Inc.

Lanseville Community Schools

The Corydon Democrat

Coalition Coordinator: Harrison County Hospital

Jennifer Riley 245 Atwood Street Corydon, IN 47112 812.738.8708 (Phone) 812.738.7829 (Fax) iriley@harrisoncohosp.org **Hendricks County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-Indy: 26.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: **Henry County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

23.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Avon City Buildings Brownsburg City Buildings Danville City Buildings Plainfield City Buildings

School Districts with Tobacco-free Campuses

Brownsburg Community School Corporation Mill Creek Community School Corporation Plainfield Community School Corporation

Parks/Recreational Facilities

Parks

Other

None Reported

County Funding 01/01/03-12/31/03: \$128,500 County Funding 01/01/04-06/30/05: \$27,271

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society American Health Network Avon United Methodist Church Brownsburg Community School Corporation

Cummins Mental Health Center

Hendricks County Health Department Hendricks County Sheriff's Department Hendricks County Step Ahead Council

Hendricks Regional Health

Mental Health Association of Hendricks County

Sheltering Wings Sports and More

Coalition Coordinator: Hendricks County Health Department

Michael McDonald

355 South Washington Street, #210

Danville, IN 46122 317.828.9248 (Phone) 317.745.9218 (Fax) hcctip32@hotmail.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

12.6%

All City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$62,100 County Funding 01/01/04-06/30/05: \$74,520

COMMUNITY-BASED TOBACCO CONTROL COALITION

Blue River Schools

Charles A. Beard Schools

Henry County Commissioners

Henry County Foundation

Henry County Health Department

Henry County Library

Henry County Memorial Hospital

Henry County Mental Health

Henry County Ministerial Association

Henry County Planning Council

Henry County Prosecutor

Henry County United Fund

Henry County YMCA

New Castle Area Vocational

New Castle Schools

Shenandoah Schools

South Henry Schools

WKPW-FM

Coalition Coordinator: Henry County LCC/ARIES

Patricia Smith 108 Tara Lane

New Castle, IN 47362 765.529.5017 (Phone) 765.345.5101 (Fax) tsmith@cabeard.k12.in.us **Howard County**

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Huntington County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Northeast: 21.3%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

24.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

None reported

School Districts with Tobacco-free Campuses

Western School Corporation Parks/Recreational Facilities

None reported

Other

None reported

County Funding 01/01/03-12/31/03: \$84,300 County Funding 01/01/04-06/30/05: \$100,911

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Family Service Association Howard Community Hospital

Mayor's Community-Based Council on Substance Abuse Prevention

New Perspectives Minority Health Coalition St. Joseph Hospital and Health Center

Coalition Coordinator: American Cancer Society

Deanna Ancil 2723 Albright Road Kokomo, IN 46902 765.457.9173 (Phone) Deanna.ancil@cancer.org

New Perspectives Minority Health Coalition of Howard County, Inc.

County Funding 01/01/03-12/31/03: \$33,800 County Funding 01/01/04-06/30/05: \$21,410

MINORITY-BASED TOBACCO CONTROL COALITION

Babies Delight

Barber and Beautician Group Bonavista – Kid's Solution

BIT Consulting Gilead House

Indiana Health Center at Kokomo

NAACP

Second Missionary Baptist Church

Straitgate Ministries Tonca Watters Texas Migrant Council

Coalition Coordinator: Ronald H. Stubbs

220 East Sycamore Street, Suite L

Kokomo, IN 46901 765.868.9804 (Phone) 765.868.9807 (Fax) rstubbs@comteck.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Huntington Co. Community School Corporation

Parks/Recreational Facilities

No Policy

Other

22.9%

Huntington College

County Funding 01/01/03-12/31/03: \$55,700 County Funding 01/01/04-06/30/05: \$56,840

COMMUNITY-BASED TOBACCO CONTROL COALITION

Andrew Town Marshall

Bill Lucker Bowen Center

Boys Scouts of America

City Police Curt Cooley Curt Crago Dr. Lisa Wodey Dr. Ringenberg Dwight Brautigam Extension Office Gwen Ruppert

HCCSC
Health Department
Huntington County Council
Huntington General Practice
Huntington Parks Department

Jan Williams
John Kreiger
Kent Farthing
Linda Aldrige
Mike Mettler
Parkview Hospital
Probation
Rodney Scott
Sarah Moreman
Scott Gibbons

Scott Gibbons
Sheriff
Van Juillerat

Youth Services Bureau

Coalition Coordinator: Youth Services Bureau of

Huntington County, Inc. Melissa Phillips P.O. Box 5204 Huntington, IN 46750 260.358.0175 (Phone) 260.356.9683 (Fax)

cmphillips5@comcast.net

Jackson County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Jasper County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Northwest: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

20.7%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Brownstown Community School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$57,700 County Funding 01/01/04-06/30/05: \$69,240

COMMUNITY-BASED TOBACCO CONTROL COALITION

Boys & Girls Club of Seymour Brownstown Central Middle School Brownstown Presbyterian Church Crothersville FFA Eyes on you – Dr. Kevin & Linda Fischer Jackson County Drug-Free Council, Inc. Jackson County Sheriff's Department Purdue University Extension Office Schneck Medical Center Seymour Mayor Step-Ahead Council

Coalition Coordinator: Boys & Girls Club of Seymour

Jeff Joray 950 North O'Brien Seymour, IN 47274 812.524.1208 (Phone) 812.524.1856 (Fax) bgcsey@compuage.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

23.5%

City Buildings

Rensselaer City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

None Reported

Other

St. Joseph College Jasper County Hospital

County Funding 01/01/03-12/31/03: \$50,800

County Funding 01/01/04-06/30/05: \$99,440 (amount divided

between Jasper and Newton counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

Rensselaer Police Department

Jasper County Step Ahead and Purdue Cooperative

Extension Services

Rensselaer Central School Corporation

Jasper County Hospital Ryan & Ryan Consulting

Jasper County Prosecutor's Office

Jasper County Sheriff's Department

Hillcrest Family Dental Center

Kankakee Valley School Corporation

Tri-County School Corporation

Partners for a Drug Free Jasper County

Wabash Valley Hospital Kankaee Valley High School

Coalition Coordinator: Jasper Foundation Inc.

Joan Ginter P.O. Box 361 Monticello, IN 47960 574.583.9864 (Phone) 574.583.4706 (Fax) notobacco91@hotmail.com Jay County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-east: 30.4%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Jefferson County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

28.9%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$45,800 County Funding 01/01/04-06/30/05: \$34,579

COMMUNITY-BASED TOBACCO CONTROL COALITION

Alphabet Inc.
DARE Program
Dr. Mark Haggenjos
Jay County Health Department
Jay County Hospital
Jay School Corporation
Portland Area Chamber of Commerce
Portland Forge Federal Credit Union
Portland Police Department
Several Local Restaurants

Coalition Coordinator: Jay County Hospital

Josh Gibson

500 West Votaw Street Portland, IN 47371 260.726.7131 (Phone) 260.726.1975 (Fax)

jgibson@jaycountyhospital.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Government Buildings

City Buildings

No Policy

19.5%

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$51,800

County Funding 01/01/04-06/30/05: \$79,720 (amount divided

between Jefferson and Switzerland counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

Girl's Incorporated
Hanover College
Hanover Police Department
Indiana State Police
Jefferson County Sheriff's Department
King's Daughters Cardio-Pulmonary Services
King's Daughters' Wellness Committee
King's Daughters' Hospital and Health Services
Lifesprings Mental Health
Lide White Memorial Boy's and Girls's Club

Coalition Coordinator: King's Daughters' Hospital &

Health Services

Kim Crawford

One King's Daughters' Drive Madison, IN 47250 812.265.0598 (Phone) 812.265.0291 (Fax) crawfordk@kdhhs.org **Jennings County**

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Johnson County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

17.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

North City Hall

North Vernon Police Department

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

None Reported

Other

None Reported

County Funding 01/01/03-12/31/03: \$49,300 County Funding 01/01/04-06/30/05: \$50,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Health Families

Jennings County Extension Office

Jennings County Family Care

Jennings County Health Department

Jennings County High School student

Jennings County Parks and Recreation

Jennings County WIC

Jennings County YMCA

Maternal Child Health Services and WIC Ministerio de laRoca (Spanish Church) North Vernon Parks and Recreation

North Vernon Police Department

Pride

St. Vincent Jennings Hospital

Coalition Coordinator: St. Vincent Jennings Hospital

Jennifer Hernandez 945 Veterans Drive North Vernon, IN 47265 812.346.3284 (Phone) jctobaccofree@yahoo.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

No Policy

28%

School Districts with Tobacco-free Campuses

Edinburgh Community School Corporation Nineveh-Hensley-Jackson School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$135,300 County Funding 01/01/04-06/30/05: \$162,360

COMMUNITY-BASED TOBACCO CONTROL COALITION

Adult and Child Health Center American Cancer Society American Health Network Boys & Girls Club of Franklin City of Franklin Police Department

Community Health Network Edinburgh/Trafalgar Family Health Centers

Franklin College

Governor's Commission for a Drug Free Indiana

Indiana Heart Associates Johnson County Clerk

Johnson County Juvenile Probation
Johnson County Community Corrections

Johnson County Health Department Johnson County Internal Medicine

Johnson Memorial Hospital

Reach for Youth Richard Huber, M.D.

St Francis Hospital and Health Centers United Way of Johnson County

Coalition Coordinator: Johnson County Health Foundation

Jane Blessing

1125 West Jefferson Street, Suite V

FrankllN IN 46131 317.736.2657 (Phone) 317.346.3738 (Fax)

jblessing@johnsonmemorial.org

Latino Resources Development Team/Partnership for a Healthier Johnson County

County Funding 01/01/03-12/31/03: \$14,400 County Funding 01/01/04-06/30/05: \$14,700

MINORITY-BASED TOBACCO CONTROL COALITION

Access Johnson County Adult and Child Health Center

C & C Laundry

City of Franklin Police Department Edinburgh Family Health Center

Emmanuel Baptist Church

Franklin College

Johnson County Courts

Franklin Insurance Agency

Gateway Services

Johnson Memorial Hospital

Johnson County Community Corrections Johnson County Health Department

Johnson County Public Library

OB/GYN of South Central Indiana

Partnership For a Healthier Johnson County

St. Francis Hospital & Health Centers

Turning Point

United Way of Johnson County

Coalition Coordinator: Jane Blessing

1125 West Jefferson, Suite V

FranklIN IN 46131 317.736.2657 (Phone) 317.346.3738 (Fax)

jblessing@johnsonmemorial

Knox County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

32.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Jail

City Buildings

Vincennes City Hall

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

Vincennes Park and Recreational Building

Other

None Reported

County Funding 01/01/03-12/31/03: \$56,400 County Funding 01/01/04-06/30/05: \$50,760

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Girl Scouts of Shagbark Council
Good Samaritan Hospital
Indiana State Excise Police
Knox County Sheriffs Department
Knox County Tobacco Users Anonymous
South Knox High School
Vincennes Community Schools
Vincennes University
Wabash Valley Human Services

Wabash Valley Human Services
Wabash Valley Respiratory Clinic
YMCA

Vincennes Fire Department

Coalition Coordinator: Good Samaritan Hospital

Donna Sturgeon 525 North Fourth Street Vincennes, IN 47591

812.882.7927 ext. 235 (Phone)

812.895.9223 (Fax) dsturgeo@wvhs.org

Kosciusko County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

19.7%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Justice Building County Courthouse

City Buildings

None Reported

School Districts with Tobacco-free Campuses

Tippecanoe Valley School Corporation

Parks/Recreational Facilities

None Reported

Other

Grace College

County Funding 01/01/03-12/31/03: \$77,700 County Funding 01/01/04-06/30/05: \$63,240

COMMUNITY-BASED TOBACCO CONTROL COALITION

Bobbi Burkhart, Boys & Girls Club

David Morales, School Police, Warsaw High School Joe Hawn, Warsaw Police Department (DARE)

Timothy Sammons, Pierceton Police Department (DARE)

Malcolm Gilbert, Winona Lake Police Department

Ruchele Sammons, Kosciusko Coalition on Drug Education

Danny Hall, Winona Lake Police Department

Lance Grubbs, Governors Council on Impaired and Dangerous

Viv Eidemiller, Edgewood Middle School (Health/Physical Education)

Deborah Frank, Kosciusko County Health Department

Mary Arnott, Bowen Center

Denise Ferguson, Governors Commission for a Drug Free Indiana

Kristin Everett, American Cancer Society

Marsha Streby, Bowen Center

Rich Miotto, Milford Police Department

Connie Overmeyer, Tippecanoe Valley Schools Nurse Megan Lukenbill, Kosciusko Community Hospital Health &

viegan Eukenbiii, Rosciusko Community Hospitai Health Wellness Center

Jolene Morrow, Kosciusko Leadership Academy / Mutual Federal Savings Bank

Brett Boggs, Tippecanoe Valley Schools

Craig Allebach, Warsaw Community School Board / Winona Lake Town Manager

Tracey George, Kosciusko County 4-H / Purdue Extension Office

Coalition Coordinator: Kosciusko County Government

Bobbi Burkhart

800 North Park Avenue Warsaw, IN 46580-2941 574.268.1155 (Phone) 574.268.1370 (Fax) schroder42@hotmail.com Cardinal Center for Sus Amigos

County Funding 01/01/03-12/31/03: \$32,400 County Funding 01/01/04-06/30/05: \$16,800

MINORITY-BASED TOBACCO CONTROL COALITION

Paul J. Pegues, IV

Bobbi Burkhart, Boys & Girls Club

Julia Fugate

Hallie Pierce

Kurt Carlson-CEO, Bowen Center Martha Sell, East Center Dental Ralph Villalon, Lake City Bank

Sister Joan Hasteiter, Spanish Ministry Steve Swinehart

Yesenia Cruz

Coalition Coordinator: Yesenia Cruz

850 North Harrison Street Warsaw, IN 46580 574.267.7169 (Phone) 574.269.3995 (Fax)

yesenia.cruz@bowencenter.org

LaGrange County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Northeast: 21.3%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

9.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Prairie Heights Community School Corporation

Parks/Recreational Facilities

No Policy

Other

LaGrange Healthy Families My Father's Business Bookstore Schlemmers Do-It-Best Hardware Vistula Head Start

County Funding 01/01/03-12/31/03: \$53,800 County Funding 01/01/04-06/30/05: \$36,490

COMMUNITY-BASED TOBACCO CONTROL COALITION

Drug Free Council of LaGrange County

LaGrange County 4-H Youth Leadership Council LaGrange County Circuit Court Probation

LaGrange County Community Economic Development

LaGrange County Community Foundation

LaGrange County Department of Parks and Recreation

LaGrange County Sheriff's Department LaGrange Ministerial Association

Northeastern Center

Prairie Heights Community School Corporation

Youth Assets Council

Coalition Coordinator: LaGrange County Government

Dave Bell

229 River Run Court Columbia City, IN 46725 260.336.9349 (Phone) 260.248.4799 (Fax)

tobaccofreelagco@netusa1.net

Lake County

Indiana adult smoking prevalence:
Regional smoking prevalence:
Indiana youth smoking prevalence:

Northwest: 33.0%
Middle School- 8.6%
High School-23.4%
Percent of women in County who

report smoking during pregnancy:

ring pregnancy: 15.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Gary Community School Corporation

Parks/Recreational Facilities

No Policy Other

None Reported

County Funding 01/01/03-12/31/03: \$425,600 County Funding 01/01/04-06/30/05: \$510,720

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Christina Unity Ensemble, Inc. Clark Road Genesis Family Center

Crisis Center

East Chicago Housing Authority Gary Chamber of Commerce Gary Community Health Foundation

Gary Neighborhood Services

Golden Recognition

Healthy East Chicago Holy Family Child Care Center Lake County Sheriff's Office

Partnership for a Drug Free Lake County Pilgrim Education Community Outreach

Prenatal Insight Saint Anthony Prenatal Saint Mary Medical Center Salvation Army ARC

Tri City Community Mental Health Center

Coalition Coordinator: Southlake Tri City Management

Corporation DBA Geminus

Cynthia Sampson 8400 Louisiana Merrillville, IN 46410 219.757.1866 (Phone) 219.757.1856 (Fax)

cynthia.sampson@geminus.org

County Funding 01/01/04-06/30/05: \$561,200

MINORITY-BASED TOBACCO CONTROL COALITION

Awareness Foundation, Inc. Calumet Township Trustee

Clark Road Genesis Family Center Gary Community Health Foundation

Gary Fire Department
Gary Health Department
Gary Neighborhood Services
Gary Police Department
Geminus Corporation
Golden Recognition
Health Visions Midwest

Hillcrest Selfology Institute
Images of Hope/First Baptist Church

Interfaith Clergy Council of Gary and Vicinity

KnB Enterprise Midnight Basketball

National Medical Association of NWI Partnership for a Drug-free Lake County

Provisions Educational Network

Salvation Army Adult Rehabilitation Center

Smokefree Indiana TTI America

Coalition Coordinator: Terri Martin

3300 West 15th Avenue Gary, IN 46404 219.977.8171 (Phone) 219.977.1955 (Fax) gchfinc@jorsm.com

ILI - International Institute LACASA

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Roger Cavascos, Boys and Girls Club Mara Reardon-Candelaria, Drug Free Alliance Eliza Vela, Gary Neighborhood Services

Will Fredricks, Geminus

Tamiza Singh, Girl Scouts of the Calumet Council

Cynthia Rivas, Healthy East Chicago Sara Lopez, International Institute Su Casa Raul Sanchez, International Institute Su Casa Victoria Varela, International Institute Su Casa

Guadalupe Valtierra, Chancellor, Ivy Tech State Collage, Gary Campus

Sheila George, MOTTEP Minority Organ Tissue Transplant Education Program

Guadalupe Gutierrez, Promotora de Salud

Eva Quiroz, Promoters de Salud Maternal e Infantil Angelica Quiñonez, Sigma Lamda Gamma Sorority

Martha Cortes-Perez, The Aliveness Project of Northwest Indiana

Coalition Coordinator: Raul Sanchez

4433 Broadway Gary, IN 46409 219.980.4636 (Phone) chito26@hotmail.com LaPorte County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Northwest: 33.0% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

Lawrence County

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Southwest: 25.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

25.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$132,200 County Funding 01/01/04-06/30/05: \$158,640

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Drug Free Partnership Healthcare Alliance for Value & Effectiveness Healthy Communities of LaPorte County Healthy Families/PSUPP programs Juvenile Services Center LaCrosse Schools LaPorte Community School Corporation LaPorte Regional Health System

Coalition Coordinator: Healthy Communities of LaPorte County

Sandra Parker 800 Lincolnway Suite 201 LaPorte, IN 46350 219.326.6260 (Phone) 219.326.2512 (Fax) sandy@laportecounty.net

Helping Our People Excel, Inc.

County Funding 01/01/03-12/31/03: \$54,700 County Funding 01/01/04-06/30/05: \$56,700

MINORITY-BASED TOBACCO CONTROL COALITION

Commission on the Social Status of African American Males El Puente Community Center Helping Our People Excel, Inc. Images Human Services Network Martin Luther King Center Minority Health Coalition Operation Fellowship Superior Family Health Services

Coalition Coordinator: Rebecca Williams

P.O. Box 164, 112 York Street Michigan City, IN 46361 219.874.4606 (Phone) 219.874.4641 (Fax) hopeprogram@skynet.net

County Buildings

No Policy

24.2%

City Buildings

City of Bedford Buildings

School Districts with Tobacco-free Campuses

TOBACCO-RELATED POLICIES AND ORDINANCES

Mitchell Community Schools

North Lawrence Community Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$60,500 County Funding 01/01/04-06/30/05: \$72,600

COMMUNITY-BASED TOBACCO CONTROL COALITION

Bedford Public Library

Bedford Regional Medical Center

Dunn Memorial Hospital/Community Health and Wellness Center

Hoosier Uplands - Lead Agency Lawrence County Health Department Lawrence County Sheriff's Department

Mitchell Community Schools

Mitchell Memorial Chapter of SADD Mitchell Urban Enterprise Association North Lawrence Community Schools REDIRECT/Juvenile Drug Court

Shawswick Elementary/Middle School PTO

Coalition Coordinator: Hoosier Uplands Economic

Development Corp. Matthew Lee Smith 1602 | Street, Suite 2 Bedford, IN 47421 812.275.3182 (Phone) 812.275.5116 (Fax) msmith@hoosieruplands.org Madison County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Coalition Coordinator: Anderson University Karesa Knight

Aaresa Kright 707 West 8th Street Anderson, IN 46016 765.683.0452 (Phone) 765.683.0462 (Fax) kmichellek29@hotmail.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

No Policy

School Districts with Tobacco-free Campuses

South Madison Community School Corporation Elwood Community School Corporation

Parks/Recreational Facilities

Boys and Girls Club of Madison County

Other

Munstin Center for Women

Munstin Shelter

Anderson Fine Arts Center

Alexandria Community Center

Pendleton Historical Museum

State Theatre of Anderson

Paramount Theatre Center

Anderson Roll Arena

County Funding 01/01/03-12/31/03: \$146,300 County Funding 01/01/04-06/30/05: \$119,450

COMMUNITY-BASED TOBACCO CONTROL COALITION

Alternatives, Inc. of Madison County

American Cancer Society

American Heart Association

Anderson Center, St. John's

Anderson Community Hospital

Anderson Community Schools

Anderson Fire Department

Anthem Blue Cross/Blue Shield

Chemical People Task Force

City of Anderson

Elwood Community Schools Elwood Police Department Frankton-Lapel School Corp. Indiana State Excise Police

Life Steam Services, Inc. M Plan Health Care Group

Madison County Community Foundation

Madison County Community Foundation

Madison County Health Department

Madison County Minority Health Coalition

Madison County Sheriff's Department

Madison Health Partners

Maternal Child Health Services and WIC

Pendleton Police Department

Pregnancy Plus of Community Hospitals

St. John's Hospital

St. Vincent's Hospital

South Madison Community School Corp.

The Center for Mental Health

UAW-GM Lifesteps Program

Minority Health Coalition of Madison County

County Funding 01/01/03-12/31/03: \$49,400 County Funding 01/01/04-06/30/05: \$51,450

MINORITY-BASED TOBACCO CONTROL COALITION

Allen Chapel A.M.E Church

Alternatives, Inc. Madison County

American Cancer Society

Anderson Black Expo

27.3%

Anderson Center, St. John's

Anderson Community Hospital

Anderson Community Schools

Anderson Fire Department

Anderson Police Department

Anthem Blue Cross/Blue Shield

Boys and Girls Club

Chemical People Task Force

Chesterfield Police Department

Indiana State Excise Police

Life Steam Services, Inc.

Madison County Community Foundation

Madison County Health Department

Madison Health Partners

Madison Child Health Services and WIC

Pregnancy Plus Community Hospitals

Sherman Street Church of God

St. John's Hospital

Sowers of Seeds Counseling Inc.

Urban League

Wallace Temple AME

Youth Jam

YWCA Young Womens Christian Association

Coalition Coordinator: Natalie Carter

903 South Madison Avenue

Anderson, IN 46016 765.641.8075 (Phone) 765.641.8076 (Fax) applecar757@yahoo.com **Marion County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-Indy: 26.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: YMCA-Urban Mission Branch

St. Florian Center

Wishard Hospital

18.2%

Coalition Coordinator: Health & Hospital Corporation

St. Francis Hospital and Community Health Center

Sandra Cumminas 3838 North Rural Street Indianapolis, IN 46205 317.221.2096 (Phone) 317.221.3114 (Fax) scumming@hhcorp.org

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings All County Buildings

City Buildings

Indianapolis City Buildings

Indianapolis Fire Department Buildings

School Districts with Tobacco-free Campuses

Flanner House Elementary Schools

Flanner House Learning Inc.

Franklin Township Community School Corporation

MSD Decatur Township MSD Lawrence Township MSD Perry Township MSD Warren Township MSD Washington Township School Town of Speedway

Parks/Recreational Facilities

No Policy

Other

Conseco Fieldhouse Indianapolis Airport

Indianapolis Convention Center

RCA Dome Victory Field

County Funding 01/01/03-12/31/03: \$654,900 County Funding 01/01/04-06/30/05: \$785,234

COMMUNITY-BASED TOBACCO CONTROL COALITION

Alliance for Health Promotion American Cancer Society American Heart Association Asthma Alliance of Indianapolis Citizens Health Center Clarian Health Partners

Drug Free Marion County

HealthNet Inc. Indiana Black Expo

Indiana Academy of Family Physicians Indiana University Department of Public Health

Indiana University Nicotine Dependence Program

Indianapolis Black Expo Indianapolis Public Schools Indiana Latino Institute Indiana Youth Group Martin University

Martin Luther King Multi-Service Center Minority Health Coalition of Marion County

Parents for Affordable Childcare

Perry Township School Raphael Health Center Reach for Youth

Ruth Lilly Health Education Center

Shalom Health Center Smokefree Indiana

of Marion County

St. Florian Center Inc.

County Funding 01/01/03-12/31/03: \$150,000 County Funding 01/01/04-06/30/05: \$130,500

MINORITY-BASED TOBACCO CONTROL COALITION

Christ Church of Holiness

East 10th United Methodist Children + Youth Center, Inc.

Indianapolis Black Firefighters Association Mary Rigg Neighborhood Center

McClendon Tabernacle CME Church

Phillips Temple CME Church S.E.E.D. Program

The St. Florian Center

Coalition Coordinator: St Florian Center

Anthony Williamson

2511 East 46th Street, Suite P-1

Indianapolis. IN 46205 317.545.6580 (Phone) 317.545.6588 Fax) firefightert@iquest.net

Minority Health Coalition of Marion County

County Funding 01/01/03-12/31/03: \$150,000 County Funding 01/01/04-06/30/05: \$150,000

MINORITY-BASED TOBACCO CONTROL COALITION

Hispanic/Latino Minority Health Organization

Indianapolis Recorder

United Way: Youth As Resources WHY - We're Helping Youth

Coalition Coordinator: Tiffany Nichols

2855 North Keystone Suite 140

Indianapolis, IN 46228 317.924.6068 (Phone) 317.924.9794 (Fax) tknichol@yahoo.com

Flanner House

County Funding 01/01/03-12/31/03: \$138,000 County Funding 01/01/04-06/30/05: \$152,400

MINORITY-BASED TOBACCO CONTROL COALITION

Indianapolis Chapter, Indiana Black Expo Martin University St. Florian Center Clarian Health

Ruth Lilly Health Education Center Flanner Elementary School Flannerhouse Higher Learning Center Flannerhouse Multi-service Center American Heart Association American Red Cross

Coalition Coordinator: Ann Winston

2424 Dr. Martin Luther King Jr. Street

Indianapolis, IN 46208 317.925.4231 ext.227 (Phone)

317.920.4461 (Fax) awinston@flannerhouse.com

Indiana Black Expo

County Funding 01/01/03-12/31/03: \$132,000 (Indianapolis Chapter only)

County Funding 01/01/04-06/30/05: \$802,333

(Indiana Black Expo has 10 chapters throughout the state to better accommodate the citizens of Indiana. The IBE chapters serve as a tool to better communicate, thus carry out the IBE mission as a service oriented organization. The IBE chapter cities are: Anderson, East Chicago, Elkhart, Evansville, Fort Wayne, Gary, Indianapolis, Kokomo, Muncie and South Bend. These chapter cities also received funding for IBE/ITPC programming.)

MINORITY-BASED TOBACCO CONTROL COALITION

Christ Missionary Baptist Church
Corinthian Missionary Baptist Church
Ebenezer Missionary Baptist Church
First Free Will Baptist Church
Kaleidoscope Youth Center
Mt. Pisgah Missionary Baptist Church
Robinson AME Church
Shiloh Missionary Baptist Church
Stewart Memorial CME Church
Womack Memorial CME Church

Coalition Coordinator: Kara Endsley

3145 North Meridian Street, Suite 100

Indianapolis, IN 46208 317.925.2702 ext. 45 (Phone)

317.925.6624 (Fax) kendsley@ibeonline.com

Indiana Latino Institute, Inc.

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Carol Johnston, Christian Theological Seminary Juventino Estrada, Community Volunteer Ricardo Parra, Community Volunteer Rodolfo Peñalosa, Community Volunteer Ricardo Rosales, Community Volunteer Hector Serato, Community Volunteer Gloria Berlanga-King, El Centro Hispano

Jenny Sarabia, Governor's Commission for Hispanic Latino Affairs Cecilia Acosta, Hispanic Latino Health Coalition of Greater

Indianapolis

Juan Manuel Pimentel, High School Student Patricia Feliciano, Indiana Latino Institute Aida McCammon, Indiana Latino Institute Oscar Morales, Indiana Latino Institute Amelia Muñoz, Indiana Latino Institute Maria Luisa Tishner, Indiana Latino Institute Nora Wilman, Indianapolis Public Schools

Nives Vian, IU & Wishard Hospital, Assistant Admin. Director

Pathology

Jose Martinez, Ivy Tech College Student

John Cortes, John Edward
David Parra, La Liga Hispana
Enrique Ruiz, La Liga Hispana
Rev. Samuel Ruiz, Lutheran Church
Olga Villa Parra, OVP and Associates
Primo Pimentel, Parent Volunteer
Liz Farfan, Shalom Health Center

Eva Morales, St. Patricks Catholic Chruch Religious Education

Coord.

Cynthia Perez, Student

Yolanda Tlatoa, St. Vincents Society of St. Patricks Catholic

Church

Guadalupe Lewis, Urban League

Ricardo Iman, Wishard Hispanic Health Project

Vanesa Peñalosa, Y.A.H.O.P. St. Mary's Catholic Church

Anna Hail, Asociación de Mujeres Mexicana

Coalition Coordinator: Amelia Munoz

445 North Pennsylvania Street, Suite 800

Indianapolis, IN 46204 317.472.1055 (Phone) amunoz@indianalatino.com

Martin University

County Funding 01/01/03-12/31/03: \$200,000 County Funding 01/01/04-06/30/05: \$210,000

MINORITY-BASED TOBACCO CONTROL COALITION

Blackburn Clinic Neighborhood Advisory Group

Emmanuel Baptist Church

Flanner House

Indiana University Nicotine Dependence Program

Indianapolis Chapter Indiana Black Expo

Indianapolis Public School Little Red Door Cancer Agency Marion County Health Department

Martindale Brightwood Neighborhood Organization

Oasis of Hope Baptist Church

Overcoming Church

Parents for Affordable Childcare Perry Meridian Middle School

St. Rita's Parish

Wishard Stop Smoking Program

Coalition Coordinator: Raymone Pierce

2171 Avondale Place Indianapolis, IN 46218 317.917.3344 (Phone) 317.917.3371 (Fax) raymondop@prodigy.net

Parents for Affordable Child Care

County Funding 01/01/03-12/31/03: \$75,200 County Funding 01/01/04-06/30/05: \$70,000

MINORITY-BASED TOBACCO CONTROL COALITION

Auntie Mame's Child Development Center Fahondzi Sugar Plum Day Care Center

Fuzzie Bear Child Care Center Dena's Child Care Center

Laurelwood Family Investment Child Care Center

Eastern Star Church Day Care Ministry

Christ Temple Jones Tabernacle

Dena's Airport Child Care Center

Coalition Coordinator: Arlana N. Jordan

8307 North Perimeter Road Indianapolis, IN 46241 317.481.0410 (Phone) 317.481.0004 (Fax) Dellis9908@aol.com

Martin Luther King Multi-Service Center

County Funding 01/01/04-06/30/05: \$105,570

MINORITY-BASED TOBACCO CONTROL COALITION

Clarian Health Forest Manor Middle School Forest Manor Multi-Service Center Martin Luther King Multi-Service Center

Shortridge Middle School

Coalition Coordinator: P. Diane Jackson

40 West 40th Street Indianapolis, IN 46208 317.923.4581 (Phone) 317.923.4583 (Fax) pdJacksonMLK@aol.com

Indiana Latino Institute - Wishard Hispanic Health Project

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Carol Johnston, Christian Theological Seminary Juventino Estrada, Community Volunteer

Juventino Estrada, Community Volunteer Ricardo Parra, Community Volunteer

Rodolfo Peñalosa, Community Volunteer Ricardo Rosales, Community Volunteer

Hector Serato, Community Volunteer

Gloria Berlanga-King, El Centro Hispano

Jenny Sarabia, Governor's Commission for Hispanic Latino Affairs

Cecilia Acosta, Hispanic Latino Health Coalition of Greater Indianapolis

Juan Manuel Pimentel, High School Student Patricia Feliciano, Indiana Latino Institute

Aida McCammon, Indiana Latino Institute

Oscar Morales, Indiana Latino Institute

Amelia Muñoz, Indiana Latino Institute Maria Luisa Tishner, Indiana Latino Institute

Nora Wilman, Indianapolis Public Schools

Nives Vian, IU & Wishard Hospital, Assistant Admin. Director Pathology

Jose Martinez, Ivy Tech College Student

John Cortes, John Edward David Parra, La Liga Hispana Enrique Ruiz, La Liga Hispana Rev. Samuel Ruiz, Lutheran Church Olga Villa Parra, OVP and Associates

Primo Pimentel, Parent Volunteer Liz Farfan, Shalom Health Center

Eva Morales, St. Patricks Catholic Chruch Religious Education Coord.

Cynthia Perez, Student

Yolanda Tlatoa, St. Vincents Society of St. Patricks Catholic Church

Guadalupe Lewis, Urban League

Ricardo Iman, Wishard Hispanic Health Project

Vanesa Peñalosa, Y.A.H.O.P. St. Mary's Catholic Church

Anna Hail, Asociación de Mujeres Mexicana

Coalition Coordinator: Ricardo Iman

101 West 10th Street Indianapolis, IN 46202

317.639.6671 ext. 5804 (Phone) ricardo.iman@wishard.edu

Marshall County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Martin County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:
Southwest: 25.6%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

27.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Plymouth City Buildings

School Districts with Tobacco-free Campuses

Argos Community Schools

Plymouth Community School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$60,000 County Funding 01/01/04-06/30/05: \$62,080

COMMUNITY-BASED TOBACCO CONTROL COALITION

Bremen Hospital

Cancer Association of Marshall County Marshall County Health Department

Saint Joseph's Regional Medical Center, Plymouth

Triton School System Women's Care Center

Coalition Coordinator: Women's Care Center - Plymouth, Inc.

Jennifer Hunsberger 112 East Washington Street Plymouth, IN 46563 574.936.5141 (Phone)

574.935.3842 (Fax) hunsberger01@aol.com

Indiana Latino Institute - La Casa de Amistad

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Martha Brace, Latino Tobacco Control of Marshall County

Ken Brace, Volunteer

Coalition Coordinator: Martha Brace

11176 Pottawatomie Trail Walkerton, IN 46574 574-586-9837 (Phone) County Buildings

All County Buildings

City Buildings

No Policy

17.8%

School Districts with Tobacco-free Campuses

TOBACCO-RELATED POLICIES AND ORDINANCES

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$27,754

COMMUNITY-BASED TOBACCO CONTROL COALITION

Community Learning Center Daviess Community Hospital

Governor's Commission for a Drug Free Indiana

Hoosier Uplands - Lead Agency

Loogootee Community School Corporation

Loogootee Christian Church Loogootee Police Department Martin County 4-H Council

Martin County Chamber of Commerce
Martin County Extension Service
Martin County Community Foundation
Martin County Health Department & WIC
Martin County Local Coordinating Council
Martin County Office Family & Children
Martin County Sheriff's Department

Memorial Hospital (of Jasper)/Martin County Health Care Center

Shoals Community School Corporation

State Excise Police Workforce Development

Coalition Coordinator: Hoosier Uplands Economic

Development Corp.
Matthew Lee Smith
1602 | Street, Suite 2
Bedford, IN 47421
812.275.3182 (Phone)
812.275.5116 (Fax)

msmith@hoosieruplands.org

Miami County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

22.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Maconaquah School Corporation North Miami School Corporation Peru School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$54,500 County Funding 01/01/04-06/30/05: \$49,118

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Bryan Steam

Dukes Memorial Hospital Governor's Commission

Keller's Computer Specialist

LCC

Maconaquah School Corporation

Miami County Courts

Miami County Health Department

Miami County Physicians

Miami County Pre-Natal Clinic

Miami County Youth Probation Office New Life United Methodist Church

North Miami School Corporation

Peru Police Department
Peru School Corporation

Purdue Cooperative Extension, Youth Development YMCA

Coalition Coordinator: Andria Helm

P.O. Box 366 Mexico, IN 46958 765.985.3700 (Phone) 765.985.3700 (Fax)

imsmokefree@insightbb.com

Miami Nation of Indians of the State of Indiana, Inc.

County Funding 01/01/03-12/31/03: \$10,500

MINORITY-BASED TOBACCO CONTROL COALITION

Miami Nation of Indians of the State of Indiana

Wayman AME Church

Mount Herman Baptist Church

New Perspective MHC

Coalition Coordinator: Miami Nation of Indians

80 West 6th Street, P.O. Box 41

Peru, IN 46970 765.473.9631(Phone) 765.472.4162

pen_finance@yahoo.com

Monroe County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:
Southwest: 25.6%
Middle School- 8.6%
High School-23.4%

Percent of women in County who

report smoking during pregnancy: 15.5%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Monroe County Community School Corporation Richland-Bean Blossom Community School Corporation

Parks/Recreational Facilities

Cascades Parks

Griffy Lake Park

Crestmont Park Ninth Street Park

Miller-Showers Park

University Park

Highland Village Park

Twin Lakes Park

Wapehani Park

. Bryan Park

Olcott Park

Sherwood Oaks Parks

Winslow Woods Park

Other

All Public Places, including restaurants and bars

All Bars Smoke-free (January 1, 2005)

County Funding 01/01/03-12/31/03: \$138,500 County Funding 01/01/04-06/30/05: \$161,400

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Bloomington Hospital

Bloomington Housing Authority
Bloomington Parks and Recreations

CARES

City of Bloomington Comm. & Family Resources Department

Hoosiers Advocating a Tobacco-free Society Indiana University Alcohol & Drug Info Center Indiana University Health and Wellness Indiana University Applied Health Sciences Monroe County Community School Corp.

Monroe County Health Department Monroe County Prevention Coalition

Monroe County Prosecutor

Monroe County Youth Services Bureau

Rhino's Youth Center Southern Indiana Pediatrics

Wonder Lab

Coalition Coordinator: Bloomington Hospital, Inc.

Heidi Martin P.O. Box 1149

Bloomington, IN 47402 812.353.9491 (Phone) 812.353.5220 (Fax)

heidimartin@bloomhealth.org

Montgomery County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

28.3%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Crawfordsville City Buildings

School Districts with Tobacco-free Campuses

Crawfordsville Community Schools

North Montgomery Community School Corporation South Montgomery Community School Corporation

Parks/Recreational Facilities

Crawfordsville Parks and Recreation

Boys and Girls Club

Other

None Reported

County Funding 01/01/03-12/31/03: \$55,500 County Funding 01/01/04-06/30/05: \$66,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Health Network Athens Medical Group Boys & Girls Club of Montgomery County

Crawfordsville Community Schools
Cummins Mental Health Centers, Inc.

Even Start

Journal Review Newspaper

Coalition Coordinator: Montgomery County AHEAD Coalition, Inc.

Kelly Trusty

R.R. #4, P.O. Box 251 Crawfordsville, IN 47933 765.339.7987 (Phone) 765.339.7966 (Fax) ahead@tctc.com Morgan County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Central-Indy: 26.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

24.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Martinsville City Buildings

School Districts with Tobacco-free Campuses

Eminence Community School Corporation

MSD Martinsville Schools

Monroe-Gregg School District

Mooresville Consolidated School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$73,200 County Funding 01/01/04-06/30/05: \$60,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Barbara B. Jordan YMCA

Community Service Center of Morgan County

Eminence High School Family Service Coordination Gleam & Glimmer Antiques Juvenile Officer's Association Martinsville Police Department

Metropolitan School District of Martinsville

Monroe-Gregg Schools

Mooresville Consolidated School Corporation

Morgan County Office of Family Morgan County Sheriff's Department Morgan Hospital and Medical Services Morgantown Town Marshall

Paragon Town Marshall
The Haven Youth Center

Coalition Coordinator: Prime Time of Morgan County

Sandra Theibe

61 North Jefferson, Suite 5 Martinsville, IN 46151 765.342.1013 (Phone) 765.349.9021 (Fax) primetime@rnetinc.net **Newton County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Northwest: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

None Reported

Other

26.9%

County Funding 01/01/03-12/31/03: \$60,700 County Funding 01/01/04-06/30/05: \$63,613

COMMUNITY-BASED TOBACCO CONTROL COALITION

Central Noble Schools
Drug-Free Noble County
East Noble Schools
Noble County Health Department
Noble County Sheriffs Department
Noble County Superior Court
Noble County Teen Court
Parkview Noble Hospital
Purdue Extension Office

Coalition Coordinator: Drug Free Noble County

Mick Newton 100 East Main Street Albion, IN 46701 260.636.2320 (Phone) 260.636.6861 (Fax) jstork@dfnc.org

Templo Betel

County Funding 01/01/03-12/31/03: \$12,000

MINORITY-BASED TOBACCO CONTROL COALITION

Drug Free Noble County
El Paraiso
Gilberto Perez, Northeastern Center
Honorable Judge Michael Kramer
Jose Marin
Leti's Tacos
Prevention Partners
Templo Betel Assemblies of God

Coalition Coordinator: Dina Peña

Tobacco Free Noble County

P.O. Box 313 Ligonier, IN 46767 260.894.7234 (Phone) 260.894.7722 (Fax) drpmart@yahoo.com

Indiana Latino Institute - Noble Latino Tobacco Control

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Frank Pizana, Latino Tobacco Control of Noble County

Gilberto Perez, Northeastern Center Oscar Morales, Trinity Lutheran

Michael Heinball

20.3%

Mike Newton, Noble County Teen Court Pat Gensic, Noble County Health Department Marilyn Alligood, DFNC Volunteer Coordinator

Dr. Terry Gaff, Parkview Noble

Doug Harp, Noble County Sheriff Department Stan Jacobs, Central Noble School Corporation

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

Beaver Township Parks

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300

County Funding 01/01/04-06/30/05: \$99,440 (amount divided

between Jasper and Newton counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

Faithworks of Newton County Jasper County Step Ahead

Newton County Economic Development Newton County Health Department Partners for a Drug Free Jasper County Wabash Valley Mental Health Center

Coalition Coordinator: Jasper Foundation Inc.

Joan Ginter P.O. Box 361

Monticello, IN 47960 574.583.9864 (Phone) 574.583.9864 (Fax) notobacco91@hotmail.com

Noble County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Northeast: 21.3%
Middle School- 8.6%
High School-23.4%

Percent of women in County who

report smoking during pregnancy:

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Central Noble Community School Corporation

East Noble School Corporation

Parks/Recreational Facilities

Kendallville's New Recreation Area's Bleachers

Coalition Coordinator: Frank Pizana

701 Marilyn Avenue Ligonier, IN 46767 260.636-2970 fpizana@ligtel.com

Ohio County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

23%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

No Policy

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$5,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Big Brother/Big Sister Community Mental Health Historic Downtown Learning Tree of Ohio County

Ohio County Community Foundation

Ohio County/Rising Sun Chamber of Commerce

Ohio County Department of Family and Children

Ohio County Extension Service Ohio County Health Department

Ohio County Library

Rising Sun Ohio County School Corp. Rising Sun Police Department Rising Sun/Ohio County Park Board Rising Sun/Ohio County Tourism Bureau

Coalition Coordinator: Ohio County Community Foundation, Inc.

Beth Terrill

2779 Stewart Ridge Road Rising Sun, IN 47040 812.438.2373 (Phone) 812.438.3228 (Fax) bterrill@seidata.com **Orange County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

26.5%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

7 Resturants in Paoli, French Lick, and Orleans

County Funding 01/01/03-12/31/03: \$44,300 County Funding 01/01/04-06/30/05: \$52,892

COMMUNITY-BASED TOBACCO CONTROL COALITION

Bloomington Hospital of Orange County

Child Health Project Families in Action Hoosier Hills PACT

Mid-Southwestern Area of the American Cancer Society

Orange County Extension Office Orange County Relay of Life

Coalition Coordinator: Prisoner and Community Together, Inc.

Lou Getman

205 East Main Street, Suite 3

Paoli, IN 47454 812.723.2621 (Phone) 812.723.4308 (Fax) Isgpact@yahoo.com **Owen County**

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School-8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Parke County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

29.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$45,800 County Funding 01/01/04-06/30/05: \$41,220

COMMUNITY-BASED TOBACCO CONTROL COALITION

Center for Behavioral Health
First Steps/Step Ahead
Governor's Commission, Drug Free You and Me
Hamilton Center
Hometown Healthcare
Johnson-Nichols Health Clinic
Owen Circuit Court

Owen County Court Services
Owen County Health Department

Coalition Coordinator: Owen County Family YMCA

Teena Jennings 1111 Highway 46 West Spencer, IN 47460 812.828.9622 (Phone) 812.828.9329 (Fax) Teejenn@yahoo.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Sheriff's Department and Jail

City Buildings

23.6%

Rockville Town Board Office Rockville Fire Department

School Districts with Tobacco-free Campuses

Rockville Community School Corporation

Parks/Recreational Facilities

No Policy

Other

5 Smoke-free Restaurants = 18% of Resturants

County Funding 01/01/03-12/31/03: \$43,000 County Funding 01/01/04-06/30/05: \$51,595

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Billie Creek Village Chances for Indiana Youth Family Health & Help Center Hamilton Center

Parke County Health Department Nursing Division

Parke County Local Coordination Council Parke County Sheriff's Department Purdue Cooperative Extension Office Rockville Community Schools Southwest Parke Community Schools Turkey Run Community Schools

Coalition Coordinator: Indiana Communities for Drug-Free Youth,

dba C.H.A.N.C.E.S. Angela Taylor P.O. Box 14 Newport, IN 47966 812.208.5708 (Phone) ATTAYLOR@peoplepc.com **Perry County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Pike County

28.4%

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:
Southwest: 25.6%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

22.7%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

Jail

City Buildings

Tell City Hall

School Districts with Tobacco-free Campuses

Cannelton City Schools

Perry Central Community Schools Corporation Tell City-Troy Township School Corporation

Parks/Recreational Facilities

No Policy

Other

Branchville Correctional Facility
Lincoln Hills Development Corporation
Southern Hills Counseling Center

County Funding 01/01/03-12/31/03: \$44,000 County Funding 01/01/04-06/30/05: \$52,800

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Cannelton City Schools

Lincoln Hills Development Corporation

Perry / Spencer Step Ahead Perry Central Schools

Perry County Health Department Perry County Memorial Hospital

Perry County Substance Abuse Committee

Purdue Extension

Southern Hills Counseling Center, Inc. Tell City-Troy Township School Corporation

Tell City Police Department

Coalition Coordinator: Lincoln Hills Development Corporation

Jan Sprinkle

302 Main Street, P.O. Box 336 Tell City, IN 47586-0442 812.547.3435 (Phone) 812.547.3466 (Fax) jan@lhdc.org

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Petersburg City Hall

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$31,560

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Governor's Commission, local Consultants

Indiana State Police

Pike County Health Department

Pike County Office - Division of Family and Children

Pike County School Corporation
Purdue Extension Office - Pike County

Southwest Health Center

Coalition Coordinator: Pike County Tobacco Coalition

Renea Kroeger

801 Main Street, Courthouse Petersburg, IN 47567 812.354.8797 (Phone) 812.354.2532 (Fax) rkroeger@localhealth.in.gov **Porter County**

Indiana adult smoking prevalence:

26.1% Regional adult smoking prevalence: Northwest: 33.0%

Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

Union Township Schools Valparaiso Community Schools

Valparaiso University College of Nursing

Valparaiso YMCA

Smokefree Indiana

Washington Township Schools Wellness Council of Indiana

17%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Kouts Buildings Bums Harbor Buildings Porter Buildings Portage Buildings Ogden Dunes Buildings

School Districts with Tobacco-free Campuses

Duneland School Corporation

East Porter County School Corporation Porter Township School Corporation Union Township School Corporation Valparaiso Community Schools

Parks/Recreational Facilities

None Reported

Other

Aberdeen Banquet Hall The Inn at Aberdeen The Memorial Opera House

PC Expo Center

Environmental Learning Center

Camp Good Fellow

County Funding 01/01/03-12/31/03: \$154,500 County Funding 01/01/04-06/30/05: \$185,358

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Boone Grove Schools

Boy Scouts Dunes Moraine District Boys and Girls Clubs of Porter County

Care Counseling

Christian Community Action Coalition

Duneland School Corporation

Duneland YMCA

East Porter County Schools

Governor's Commission for a Drug Free Indiana

Hilltop Community Health Center Indiana Regional Council of Carpenters

Kouts School Corp.

League of United Latin American Citizens

Moraine House

Morgan Township High School Opportunity Enterprises, Inc.

Portage Adult Education

Portage Community School Corp.

Portage Park Department

Portage Township YMCA

Porter County Health Department

Porter County Substance Abuse Council

Porter County VOICE

Porter Memorial Health Systems

Porter - Starke Services

Coalition Coordinator: The Lutheran University Association, Inc.

dba Valparaiso University

Natalie Rivich 836 LaPorte Avenue

Valparaiso, University, LeBien Hall

Valparaiso, IN 46383 219.464.6823 (Phone) 219.464.5425 (Fax) Natalie.Rivich@valpo.edu

League of United Latin American Citizens, Council #5016

County Funding 01/01/03-12/31/03: \$27,800

MINORITY-BASED TOBACCO CONTROL COALITION

CAPABLE Program LULAC #5016 Portage Adult Education Portage Township Schools Portage Food Pantry Smokefree Indiana

Coalition Coordinator: Linda Lundewall

6116 Canary Avenue Portage, IN 46368 219.763.1061 (Phone) pantrylin@aol.com

Indiana Latino Institute - Porter

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Alicia Jackson, Latino Tobacco Control of Porter County

Coalition Coordinator: Sophia M. Rodriguez

1721 171st Place Hammond, IN 46324 219.741-3474 fia711@aol.com

Posey County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Pulaski County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

North-central: 23.8%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

35.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Mt. Vernon City Buildings

School Districts with Tobacco-free Campuses

MSD Mount Vernon

Parks/Recreational Facilities

No Policy

Other

Mt. Vernon Alexandrian Library

County Funding 01/01/03-12/31/03: \$49,000 County Funding 01/01/04-06/30/05: \$58,800

COMMUNITY-BASED TOBACCO CONTROL COALITION

1st Church of Nazarene
American Cancer Society
Mt. Vernon Police Department
Mt. Vernon School District
Mayor of Mt. Vernon Office
New Harmony School District
North Posey School District
Parks and Recreation Department

Posey Co. 4-H Posey County Health Department Posey County Probation Office Posey County Sheriff's Office

Promoting A Drug Free Community In Posey County, Inc.

Prosecutor's Office
Purdue Extension Office
Solid Waste District
Step Ahead Council

S.W. Indiana Mental Health Center The American Red Cross - Posey County

Visiting Nurse Association Women Infants and Children

Youth First

Youth Service Bureau

Coalition Coordinator: Promoting a Drug Free Community in

Posey County, Inc Martha Caine

614 Southeast Third Street Evansville, IN 47713 812.476.1471 (Phone) 812.401.4199 (Fax) itpcsmokefree@hotmail.com

County Buildings

County Jail

22.7%

County Annex Building

Courthouse

City Buildings

No Policy

School Districts with Tobacco-free Campuses

TOBACCO-RELATED POLICIES AND ORDINANCES

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$16,560

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Chamber of Commerce
Division of Family and Children
Drug Free Local Coordinating Council
Eastern Pulaski Schools
Four County Counseling
Health Department
Juvenile Justice Enforcement Coalition
K V Works

Probation Department

Coalition Coordinator: Pulaski Memorial Hospital

Jean Widup P.O. Box 279 Winamac, IN 46996 574.946.6017 (Phone) 574.946.3209 (Fax) fawfsw@pwrtc.com **Putnam County**

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School-8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Coalition Coordinator: Ann Newton

501 North Arlington Street Greencastle, IN 46135 765.653.3856 (Phone) robertnewton@tds.net

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Putnam County Courthouse
Putnam County Courthouse Annex

City Buildings

Greencastle City Hall Greencastle City Jail

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

Big Walnut Sports Park Emerald Palace Playground

Robe-Ann Park Aquatic Center, Basketball Court, Skatepark, and

Tennis Court

Other

DePauw University - All University Owned Buildings

County Funding 01/01/03-12/31/03: \$54,500 County Funding 01/01/04-06/30/05: \$65,400

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Cummins Mental Health Association Johnson-Nichols Health Clinic

Maternal Child Health Services and WIC

Mental Health Association of Putnam County

NAACP

PIE Coalition, Putnam County Office of Family and Children

Putnam County Board of Health Putnam County Hospital

Putnam County Youth Development

Coalition Coordinator: Putnam County Hospital

Amy Robinson

1542 South Bloomington Street

Greencastle, IN 46135 765.655.2697 (Phone)

866.653.6565 (Toll free phone)

765.655.2625 (Fax) arobinson@pchosp.org

National Association for the Advancement of Colored People

MINORITY-BASED TOBACCO CONTROL COALITION

Annual County Funding 2004-2005:\$9,450

Bonner Scholars DePauw University

DePauw University

Health Advisory Committee Johnson Nichols Health Clinic

NAACP

Putnam County Hospital

Putnam County Step Ahead/First Steps

Putnamville Correctional Facility

Randolph County

27.1%

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

27.5%

Tobacco-Related Policies and Ordinances

County Buildings

Randolph Center for Family Opportunities

Randolph County Courthouse

City Buildings

Ridgeville City Buildings and Police Department Parker City Buildings and Police Department Ridgeville Fire Department and Library Building

School Districts with Tobacco-free Campuses

Randolph Central School Corporation Randolph Eastern School Corporation

Parks/Recreational Facilities

Soccer Field of YMCA

Other

Rickert Oil

Tharp's Marathon

Silvertowne

County Funding 01/01/03-12/31/03: \$49,200 County Funding 01/01/04-06/30/05: \$54,031

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Cardiopulmonary Services
Fiddler Memorial Medical Pavilion
Randolph County Health Department
Randolph County Sheriff Department
Ridgeville Police Department
St. Vincent/Randolph Hospital
Union City High School
Wellness Services

YMCA

Coalition Coordinator: St. Vincent Randolph Hospital

Debbie McGriff-Tharp 473 Greenville Avenue Winchester, IN 47394 765.584.0745 (Phone) 765.584.0470 (Fax)

tobaccofreerandolph@hotmail.com

Ripley County

Indiana adult smoking prevalence: 26.1% Southeast: 33.0% Regional adult smoking prevalence: Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy: **Rush County**

Indiana adult smoking prevalence: 26.1% Regional smoking prevalence: Central-east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

24.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All Government Buildings

City Buildings

None Reported

School Districts with Tobacco-free Campuses

Batesville Community School Corporation Jac-Cen-Del Community School Corporation Milan Community Schools South Ripley Community School Corporation

Parks/Recreational Facilities

None Reported

Other

Southern Indiana YMCA

County Funding 01/01/03-12/31/03: \$48.700 County Funding 01/01/04-06/30/05: \$43,440

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Batesville Community School Batesville Tool and Die, Inc. Eagle Radio Station

Family Connections Farm Bureau Insurance

Jac Cen Del School Corporation Margaret Mary Community Hospital Maternal Child Health Services and WIC

Milan School Corporation

Osgood Kiwanis

Purdue Coop Extension Agency

Ripley City Emergency Medical Services Ripley County Child Abuse Prevention Ripley County Sheriff's Department

Ripley Publishing Office

South Ripley School Corporation

St. Louis Catholic School

Sunman Elementary School

The Community Mental Health Center The Ripley County Commissioners The Ripley County Health Department

Coalition Coordinator: Ripley County Auditor

Pat Thomas

311 Hunterville Road Batesville, IN 47006 812.933.1013 (Phone) 812.689.3909 (Fax) PatThomas54@msn.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

City Hall

22.2%

Police Department

Fire and Street Department

School Districts with Tobacco-free Campuses

Rush County Schools

Parks/Recreational Facilities

None Reported

Other

Parks Department

County Funding 01/01/03-12/31/03: \$43,600 County Funding 01/01/04-06/30/05: \$40,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

Boys and Girls Club of Rush County Indiana State Police

Local Coordinating Council

Parent

Rush County Chamber of Commerce

Rush County Schools Rushville Fire Department Rush Memorial Hospital Rushville Police Department Step Ahead

Coalition Coordinator: Rush County Schools

Tammy Jackman 6513 South Base Road Milroy, IN 46156 765.932.5316 (Phone) stepahead@lightbound.com **Scott County**

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Southeast: 33.0% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

Shelby County

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Central-Indy: 26.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

29.3%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Scott County School District 1 Scott County School District 2 Parks/Recreational Facilities

No Policy

Other

25% of Resturants

County Funding 01/01/03-12/31/03: \$46,500 County Funding 01/01/04-06/30/05: \$54,460

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Austin City Police Department Austin Elementary School Austin High School Austin Middle School

Citizens Against Substance Abuse

Jeeves & Company

Lexington Elementary School Ohio Valley Opportunities

Scott County Children's Health Clinic

Scott County Family YMCA Scott County Health Department Scott County Ministerial Association

Scott County Prosecutors Office Scott County Sheriff's Department

Scottsburg Elementary School

Scottsburg Mayors Office Scottsburg McDonald's

Scottsburg Middle School Scottsburg Police Department

Scottsburg SADD High School

Vienna ElementarySchool

Youth for Christ

Coalition Coordinator: Scott County Family YMCA

Sondra Hook P.O. Box 511

Scottsburg, IN 47170 812.752.7239 (Phone) 812.752.3260 (Fax) shookymca@hotmail.com

County Buildings

County Courthouse Criminal Justice Center

City Buildings

Jail

36.8%

Shelbyville City Hall

School Districts with Tobacco-free Campuses

Northwestern Consolidated School Corporation

Shelby Eastern Schools Shelbyville Central Schools

Southwestern Consolidated School of Shelby County

TOBACCO-RELATED POLICIES AND ORDINANCES

Parks/Recreational Facilities

No Policy

Other

Shelbyville Boys Club

Girls Inc.

County Funding 01/01/03-12/31/03: \$59,000 County Funding 01/01/04-06/30/05: \$49,629

COMMUNITY-BASED TOBACCO CONTROL COALITION

City of Shelbyville Community Corrections

Family Services and Prevention Programs

Girls Inc.

Major Hospital

Northwestern Schools of Shelby County

Shelby Co Sheriff's Dept

Shelby County Drug Free Coalition

Shelby County Prenatal Care

Shelby County Prosecutors Office

Shelby County Relay for Life

Shelby County Step Ahead

Shelby Eastern Schools

Shelbyville Boys Club

Shelbyville Central Schools

Shelbyville Parks & Recreation

Shelbyville Police Dept

Southwestern Consolidated Schools

Coalition Coordinator: Shelby County Drug Free Coalition

Kim Herndon P.O. Box 652

Shelbyville, IN 46176 317.398.3135 (Phone) 317.398.7469 (Fax) shelbylcc@lightbound.com Spencer County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Southwest: 25.6%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

St. Joseph County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

North-central: 23.8%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

15%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

No Policy

School Districts with Tobacco-free Campuses

North Spencer County School Corporation South Spencer County School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$44,900 County Funding 01/01/04-06/30/05: \$41,880

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Lincoln Hills Development Corporation
North Spencer School Corporation
Perry / Spencer Step Ahead
South Spencer School Corporation
Spencer County Health Department
Spencer County Local Coordinating Council
Spencer County Office of Family & Children
Spencer County Purdue Extension Office
TRI-CAP

Coalition Coordinator: Perry/Spencer Step Ahead/Lincoln Hills

Development Corporation

Kaye Kleeman

1140 31st Street, P.O. Box 427

Tell City, IN 47586 812.547.2299 (Phone) 812.547.0939 (Fax) kgkleeman@psci.net

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

19.8%

St. Joseph County Library Buildings and Grounds

City Buildings

Mishawaka City Hall

School Districts with Tobacco-free Campuses

John Glenn School Corporation

Penn-Harris-Madison School Corporation

School City of Mishawaka Trinity School (Private School)

Parks/Recreational Facilities

No Policy

Other

Memorial Hospital of South Bend Morris Performing Arts Center

Potawatomi Zoo

Saint Joseph's Regional Medical Center – South Bend Campus Saint Joseph's Regional Medical Center – Mishawaka Campus South Bend Clinic Campuses (8 locations) Coveleski Regional Stadium (Smoking Prohibited in Stands)

County Funding 01/01/03-12/31/03: \$292,000 County Funding 01/01/04-06/30/05: \$350,400

COMMUNITY-BASED TOBACCO CONTROL COALITION

Alcohol and Addictions Resource Center

American Cancer Society Burkhart Advertising City of Mishawaka City of South Bend Clay Fire Territory

Coalition of Minority Organizations and Leaders Community Coordinated Child Care (4C's)

Community Religious Effort

CONNECT - Council of Clinics including:

- a. Chapin Street Clinic
- b. Healthy Families of Mishawaka
- c. Indiana Health Center
- d. Project Homecoming
- e. Southeast Clinic
- f. Center for the Homeless Clinic
- g. Family Practice and Residency Clinic
- h. Osteopathic Family Residency

Drug Free Community Council

Elkhart County Health Department

Indiana State Excise Police

Indiana University at South Bend

Juvenile Justice Center

Madison Center and Hospitals

Memorial Hospital and Health Systems, Inc.

Memorial's Leighton Center

Memorial's Health Discovery Center

Mishawaka Police Department

Neighborhood Council

Penn-Harris-Madison School Corp

Prenatal Exposure Prevention Project

Saint Joseph Regional Medical Center

South Bend Community School Corp.

South Bend District Hygienists Association

South Bend Police Department

South Bend Tribune

St. Joseph Chamber of Commerce

St. Joseph County Health Department

St. Joseph County Healthy Families

St. Joseph County Hospice

St. Joseph County Medical Society

St. Joseph County Minority Health Coalition St. Joseph County Prosecuting Attorney's Office

St. Joseph County Sheriff's Department

Strengthening Families Council

United Health Services

United Way

University of Notre Dame IRISHealth

University of Notre Dame Office of Alcohol and Drug Education

WNDU

Women's Alliance

Women's Care Center

WSBT

Youth Development Council

Coalition Coordinator: Healthy Communities Initiative of

St. Joseph County

Amy Clifford

401 East Colfax, Suite 310 South Bend, IN 46617

574.239.8585 ext. 317 (Phone)

574.289.0358 (Fax) Aclifford@hcisjc.org

St. Joseph County Minority Health Coalition

County Funding 01/01/03-12/31/03: \$163,800 County Funding 01/01/04-06/30/05: \$171,150

MINORITY-BASED TOBACCO CONTROL COALITION

Greater Holy Temple

Indiana Black Expo-South Bend Chapter

Interfaith Christian Union

LULAC (League of United Latin Americans Council)

Minority & Women Business Development Council

Pentecostal Cathedral

St. Joseph County Health Department

St. Joseph County Police Department

St. Joseph Regional Medical Center and Community Outreach

Urban Youth Services YMCA

St. Joseph Minority Health Coalition

Coalition Coordinator: Sheral Anderson

P.O. Box 4234

South Bend, IN 46634-4234 574.232.3464 (Phone) 574.239.4232 (Fax) SherlAnd@aol.com

Indiana Latino Institute - St. Joseph

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Anamilena Dillon, St. Joseph Regional Medical Center

Olga Larimer, La Casa de Amistad

Maritza Robles, South Bend Community School Corporation

Gregorio Chavez, LULAC

Eliud Villanueva, Sabor Latino Radio Station

Rosa Isela Hernandez, St. Adalbert's Catholic Church

Mercedes Moran, Prenatal Classes

Adriana Ros, St. Joseph Regional Medical Center

Coalition Coordinator: Sophia M. Rodriguez

1721 171st Place Hammond, IN 46324 219.741.3474 (Phone)

fia711@aol.com

Starke County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

North-Central: 23.8%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

30.5%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Annex County Library County Courthouse

City Buildings

Knox Post Office Koontz Lake

North Judson Libraries Hamlet Libraries

San Pierre Libraries

School Districts with Tobacco-free Campuses

North Judson-San Pierre School Corporation

Parks/Recreational Facilities

No Policy

Other

Knox Community Center

County Funding 01/01/03-12/31/03: \$46,900 County Funding 01/01/04-06/30/05: \$56,280

COMMUNITY-BASED TOBACCO CONTROL COALITION

Geoff Downie, Governor's Commission for a Drug Free Indiana

Anthony Jeffers, Indiana Point of Youth and Voice Kelly Jeffers, Indiana Point of Youth and Voice

Teri Schmidt, Knox High School Chris Ross, Knox Middle School

Gayle Healy, North Judson San Pierre High School Suzie Matzat. North Judson San Pierre Middle School

Jane Ellen Felchuck, North Judson Wayne Township Public Library

Coalition Coordinator: Starke United, Inc.

Camille Cummins

3415 East South Country Lane

Knox, IN 46534 574.772.3353 (Phone) 574.772.9159 (Fax)

camillecummins@earthlink.net

Steuben County

Indiana adult smoking prevalence: 26.1%
Regional smoking prevalence: Northeast: 21.3%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Sullivan County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School-8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

26.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Angola City Buildings Clear Lake Buildings Fremont City Buildings Hamilton City Buildings Hudson-Community Center Orland City Buildings

School Districts with Tobacco-free Campuses

Prairie Heights School Corporation

Parks/Recreational Facilities

YMCA

Pokagon State Park

Other

County Funding 01/01/03-12/31/03: \$52,800 County Funding 01/01/04-06/30/05: \$29,149

COMMUNITY-BASED TOBACCO CONTROL COALITION

Angola Police Department Breeden YMCA Cameron Memorial Community Hospital Four County Transitional Living Fremont Community Schools

Governor's Commission
Hamilton Community Schools

Indiana State Police MSD of Steuben County Northeastern Center Parents

Prairie Heights Schools Corporation St. Anthony of Padua Catholic Church

Steuben Step Ahead

Steuben Community Foundation

Steuben County Probation Department Steuben County Prosecutor's Office

Steuben County Sheriff's Department

Tri-State University
Turning Point Shelter

Coalition Coordinator: Steuben County Commissioners

Debra Pontecorvo

60 Lane 163, Crooked Lane

Angola, IN 46703

260.668.8861 (Phone & Fax) dpontecorvo@hotmail.com deb_pontecorvo@yahoo.com

County Buildings

All County Buildings except Highway Department

TOBACCO-RELATED POLICIES AND ORDINANCES

City Buildings

No Policy

22.8%

School Districts with Tobacco-free Campuses

Southwest School Corporation

Parks/Recreational Facilities

No Policy

Other

Hamilton Center

County Funding 01/01/03-12/31/03: \$45,800 County Funding 01/01/04-06/30/05: \$54,728

COMMUNITY-BASED TOBACCO CONTROL COALITION

Afternoon Rocks DSA 11 American Cancer Society

C.H.A.N.C.E.S... for Indiana Youth

Counsel

Milburn Pharmacy

Sullivan County Community Hospital Sullivan County Local Coordination Sullivan County Hamilton Center Sullivan High School Union High School

Coalition Coordinator: Indiana Communities for Drug-Free Youth,

dba C.H.A.N.C.E.S Shelly Ogsbury

Kelly Center, 444 South 6th Street

Terre Haute, IN 47807 812.232.5190 (Phone) 812.234.0711 (Fax) shelly@cfiy.org **Switzerland County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

28.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

None Reported

City Buildings

None Reported

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

None Reported

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300

County Funding 01/01/04-06/30/05: \$79,720 (amount divided

between Jefferson and Switzerland counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

Community Mental Health Center

Governor's Commission for a Drug Free Indiana

Kings Daughters Hospital

Kings Daughters Physician

Lifetime Resources

Maternal Child Health Services and WIC

School Nurse

Switzerland County Awareness Team (SCAT)

Switzerland County Extension Office

Switzerland County First Steps

Coalition Coordinator: King's Daughters' Hospital &

Health Services Kim Crawford

One King's Daughters' Drive

Madison, IN 47250 812.265.0598 (Phone) 812.265.0291 (Fax) crawfordk@kdhhs.org **Tippecanoe County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

13.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

Central Catholic Schools

Parks/Recreational Facilities

Park Buildings

Other

Eli Lilly

Suburu-Isuzu Automotive

Purdue University Buildings and Athletic Facilities

Ivy Tech Buildings

Over 100 Smoke-free Restaurants

Lafayette Lake

County Funding 01/01/03-12/31/03: \$155,900 County Funding 01/01/04-06/30/05: \$190,671

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Arnett Health Plans

Boys & Girls Club

Coalition for a Safe and Drug Free Tippecanoe County

Comm. & Family Resources Ctr: Hispanic Outreach Program

Community & Family Resources Center

Community Health Clinic

Carpenter's Union

Excise Police

Family Services, Incorporated

Greater Lafayette Health Services Great Skates Family Fun Center

Indiana State Police

Latino Coalition & Girl Scouts

Lincare, Inc. March of Dimes

Minority Health Coalition of Tippecanoe County Prenatal Substance Abuse Prevention Program

Purdue Employee Wellness

Purdue Student Health Center - Student Wellness Office

Purdue University School of Nursing Tecumseh Area Partnership, Incorporated Tippecanoe Community Health Clinic, Inc. Tippecanoe County Health Department

Tippecanoe School Corporation

United Way

West Lafayette Junior and Senior High Schools

Youth Advisory Council

Coalition Coordinator: Treasurer of Tippecanoe County

Laura Buccini

100 Saw Mill Road; Suite 2200 - D

Lafayette, IN 47905 765.471.4680 (Phone) 765.471.4679 (Fax) TCPtippecanoe@wintek.com

Minority Health Coalition of Tippecanoe County, Inc.

County Funding 01/01/03-12/31/03: \$32,000

MINORITY-BASED TOBACCO CONTROL COALITION

Abundant Love Outreach Church

Bethel A.M.E.

Community & Family Resource Center

Hanna Community Center Jefferson High School Second Baptist

Word of Life Fellowship Church

Coalition Coordinator: Thometra Foster

3884 Penbrook Lane Lafayette, IN 47905 765.446.7920 (Phone) 765.446.0121 (Fax) Minority.health@verizon.net

Community and Family Resource Center - Centro Hispano

County Funding 01/01/03-12/31/03: \$25,800 County Funding 01/01/04-06/30/05: \$50,000

MINORITY-BASED TOBACCO CONTROL COALITION

Latino Coalition of Tippecanoe County

Coalition Coordinator: Gabrial Colon

330 Fountain Street Lafayette, IN 47902-1186 765.742.5046 (Phone) gcolon@cfrc.org

Indiana Latino Institute - La Colicion Latina de Tippecanoe

County Funding 01/01/04-06/30/05: \$742,828 (Total ILI funding for coalitions in 11 counties)

MINORITY-BASED TOBACCO CONTROL COALITION

Aida Muñoz, La Coalición Latina de Tippecanoe Fr. Tim Alkire, St. Boniface Catholic Church Jose Muñoz, Deacon St. Boniface Catholic Church Gabriel Colon, Community and Family Resource Center Steve MarlN Latino Coalition of Tippecanoe County Ana Lopez, Latino Coalition of Tippecanoe County Laura Buccini, TCP

Tammy Lowe, Purdue University

Sonia Limon

Maria Coeto, Headstart Tristen Emery, VOICE

Mary Beth Joyner, Prenatal Substance Use Prevention Program

Coalition Coordinator: Aida Munoz

905 Brown Street Lafayette, IN 47904 765.420.7902 (Phone) aidam8@msn.com

Tipton County

Indiana adult smoking prevalence:
Regional smoking prevalence:
Indiana youth smoking prevalence:

Central-Indy: 26.6%

Middle School- 8.6%

High School-23.4%

Percent of women in County who report smoking during pregnancy:

15.5%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Tipton City Buildings

School Districts with Tobacco-free Campuses

Northern Community School of Tipton County

Parks/Recreational Facilities

No Policy Other

None Reported

County Funding 01/01/03-12/31/03: \$42,600 County Funding 01/01/04-06/30/05: \$48,385

COMMUNITY-BASED TOBACCO CONTROL COALITION

AcraLine, Inc.

American Cancer Society

Boys & Girls Club

Governor's Commission for a Drug Free Indiana

Individual Concerned Citizens

Mustard Seed

Northern Community School Corporation

St. John's Catholic School

Tipton At Home

Tipton Care & Counseling

Tipton Community School Corporation Tipton County Health Department Tipton County Health Ministry Tipton County Memorial Hospital Tipton County Ministerial Association Tipton County Teen Pregnancy Coalition

Tipton County Council on Alcohol, Tobacco and Other Drugs

Coalition Coordinator: Tipton County Memorial Hospital

Carolyn Townsend 1000 South Main Street Tipton, IN 46072 765.675.8256 (Phone) 765.675.1461 (Fax) ctownsend256@hotmail.com **Union County**

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Central-east: 30.4% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

Vanderburgh County

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Southwest: 25.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

22.8%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$26,300 County Funding 01/01/04-06/30/05: \$21,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

Community Care in Union County, Inc. Good Neighbor Society Kid's World/Head Start Child Care Liberty Presbyterian Church Union County FFA Union County Health Department Union County/College Corner Joint School District Women, Infants, and Children

Coalition Coordinator: Community Care in Union County, Inc.

Marilyn Sasser 302 Harrison Street Liberty, IN 47353 765.458.5553 (Phone) 765.458.7492 (Fax) mjj.sasser@verizon.net

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All Government Buildings

City Buildings

Evansville City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

Burdette Park Aquatic Center

Other

24.7%

120 Smoke-free Restaurants

American General Berry Plastics Crescent Plastics

Eastland Mall Indiana Business College

lvy Tech Buildings

Lowe's

Raben Tire **RC** Cola

USI Buildings **UE** Buildings

County Funding 01/01/03-12/31/03: \$234,498

County Funding 01/01/04-06/30/05: \$286,000 (amount divided

between Vanderburgh and Warrick counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society American Heart Association American Red Cross Deaconess Hospital ECHO Health Care Center **Empty Pack Coalition**

Evansville / Vanderburgh School Corporation

Family Partnership Against Drugs

Governor's Commission for a Drug Free Indiana

Home Run Against Drugs

Impact Ministries IU Med Center Kappa Alpha Psi Minority Health Coalition Patchwork Central

Coalition Coordinator: University of Evansville

Johnny Kincaid 1605 John Street Evansville, IN 47714 812.467.0728 (Phone) 812.467.0738 (Fax)

Johnny@smokefreecommunities.org

Evansville Minority Tobacco Prevention and Cessation Project

County Funding 01/01/03-12/31/03: \$65,600 County Funding 01/01/04-06/30/05: \$68,250

MINORITY-BASED TOBACCO CONTROL COALITION

American Cancer Society
Carver Community Organization
Community Action Program of F

Community Action Program of Evansville

Evansville Housing Authority

Evansville Minister's Wives Council

Fulton-Caldwell Resident Management Council Impact Ministries Impact Ministries

Memorial Community Development Corporation

NAACP

PharmASSIST

Respect, Inc.

Smokefree Communities

Vanderburgh County Corrections Complex

Vanderburgh County Grassroots Prevention Coalition

Vanderburgh County Minority Health Coalition

YMCA

Coalition Coordinator: RESPECT, INC.

Bonita Stewart/Diane Clements

500 Court Street Evansville, IN 47708 812.428.8500 (Phone) 812.435.0535 (Fax)

dclements@evansvillegov.org jbstewart123@aol.com **Vermillion County**

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

26.3%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

Clinton City Buildings

School Districts with Tobacco-free Campuses

South Vermillion Community School Corporation

Parks/Recreational Facilities

No Policy

Other

7 Smoke-free Restaurants = 32% of All Resturants

County Funding 01/01/03-12/31/03: \$42,700 County Funding 01/01/04-06/30/05: \$50,864

COMMUNITY-BASED TOBACCO CONTROL COALITION

Vic Porter, 4-H / Girl Scouts

Dawn Clinkenbeard, American Cancer Society Billie Kaufman, American Cancer Society Shelly Ogsbury, Chances for Indiana Youth

Dr. Greg Brock, Family Practice

Dawn Wadsworth-Wade, Governor's Commission for a Drug Free Indiana

Janet McBride, Hamilton Center

Local Coordinating Council for a Drug-Free Vermillion County Bill and Gail Duncan, Mr. Gatti's and Dairy Queen Restaurant Owners

Ellen J. Brown, Newport Church of God Rev. Tony Taylor, Newport Church of God

Jane Warmouth, Patti Spurr, North Vermillion School Corporation

Becky Holbert, Purdue University Extension Office Lori Porter, Purdue University Extension Office

Linda Underwood, Sandee Frey, South Vermillion School Corporation

Melissa Buhell, Vermillion County Health Department Sheriff Kim Hawkins, Vermillion County Sheriff's Department

Coalition Coordinator: Indiana Communities for Drug-Free Youth,

dba C.H.A.N.C.E.S. Angela Taylor P.O. Box 14 Newport, IN 47966 812.208.5708 (Phone) 765.492.5836 (Fax) ATTAYLOR@peoplepc.com Vigo County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Central-west: 32.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

27%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy
City Buildings

No Policy

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

No Policy

County Funding 01/01/03-12/31/03: \$129,000 County Funding 01/01/04-06/30/05: \$154,969

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Afternoons Rock in Indiana DSA 11

American Lung Association

C.H.A.N.C.E.S. for Indiana Youth's Teen Court Governor's Commission for a Drug Free Indiana

Indiana State University

Maternal Health Clinic of Union Hospital

Mental Health Association

SIG Coalition for Grassroots Prevention

Teen Court

Terre Haute City Police

Vigo County Health Department

Vigo County Local Coordinating Council

Vigo County Minority Health Coalition

Vigo County School Corporation

Youth as Resources

Coalition Coordinator: Indiana Communities for Drug-Free Youth,

dba C.H.A.N.C.E.S. Shelly Ogsbury

Kelly Center, 444 S. 6th Street

Terre Haute, IN 47807 812.232.5190 (Phone) 812.234.0711 (Fax) shelly@cfiy.org

Minority Health Coalition of Vigo County

County Funding 01/01/03-12/31/03: \$37,400 County Funding 01/01/04-06/30/05: \$20,000

MINORITY-BASED TOBACCO CONTROL COALITION

lla Churchill, Cessation Facilitator
Makeeba Henderson, Cessation Facilitator
Valerie Craig, Mentoring Mothers Program
LaNeeca R. Williams, Minority Health Coalition of Vigo County Inc.
Tiffany Johnson, Tobacco Control Administrative Assistant
Janice Williams, Tobacco Control Coordinator

Billie Kaufman, Tobacco Prevention and Cessation Sanae Glendening, Vigo County School Corporation Ann Smith, Vigo County School Corporation

Anjelica Dortch, Youth Programs

Coalition Coordinator: LaNeeca R. Williams

1628 Wabash Avenue Terre Haute, IN 47803 812.234.8713 (Phone) 812.234.8718 (Fax) VMHC002@aol.com

Wabash County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: North-central: 23.8%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

26.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

Jail

County Garage

City Buildings

All City Buildings

School Districts with Tobacco-free Campuses

MSD Wabash County Schools Manchester Community Schools

Wabash City Schools

Parks/Recreational Facilities

No Policy

Other

Manchester College

County Funding 01/01/03-12/31/03: \$53,800 County Funding 01/01/04-06/30/05: \$28,893

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

American Red Cross of Wabash County

Health Education, LLC

Manchester Police Department Peabody Retirement Home Wabash City Government Wabash City Police Department

Wabash City Schools

Wabash County Sheriffs Department

Wabash County YMCA

Coalition Coordinator: Wabash County WASA, Inc.

Beth Miller
P.O. Box 829
Wabash, IN 46992
260.563.4663 (Phone)
260.563.1554 (Fax)
wasa@kconline.com

Warren County

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Central-west: 32.0% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

Warrick County

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: Southwest: 25.6% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

16.1%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

Fountain/Warren County Health Department

Warren County Jail

Purdue University AG Extension Office (Warren County) Division of Family and Child Services (Warren County)

City Buildings

Covington City Hall Williamsport Town Hall

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

County Funding 01/01/03-12/31/03: \$26.300

County Funding 01/01/04-06/30/05: \$83,760 (amount divided

between Fountain and Warren counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society

Attica Consolidated School Corp.

Community Action Program, Inc. of Western Indiana

Covington Community School Corp.

Governor's Commission for a Drug Free Indiana (Fountain &

Warren Co.)

Metropolitan School District of Warren County

Southeast Fountain School Corp Super Test Oil Company

St Vincent Williamsport Hospital

Warren County CAPE Initiative

Coalition Coordinator: Community Action Program, Inc.

of Western Indiana

Kathy Walker

418 Washington Street, P.O. Box 188

Covington, IN 47932 765.793.4881 (Phone) 765.793.4884 (Fax) kwalker@capwi.org

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

No Policy

20.8%

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Warrick County School Corporation

Parks/Recreational Facilities

No Policy

Other

23 Smoke-free Restaurants

County Funding 01/01/03-12/31/03: \$64,499

County Funding 01/01/04-06/30/05: \$286,000 (amount divided

between Vanderburgh and Warrick counties)

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Alcoa, Warrick Operations Deaconess Women's Hospital

Governor's Commission for a Drug Free Indiana

Home Run Against Drugs

Mt. Gilead Baptist

Newburgh Police Department

Perinatal Advisory Board

St. John's Catholic School / Church

St. Mary's Warrick Hospital

Tri-State Dental Hygienist

Warrick County Drug Free Council Warrick County Health Department

Warrick County Police Department

Warrick County School Corporation

Warrick County Sheriff's Department

Coalition Coordinator: University of Evansville

Johnny Kincaid 1605 John Street Evansville, IN 47714 812.467.0728 (Phone) 812.467.0738 (Fax)

Johnny@smokefreecommunities.org

Washington County

Indiana adult smoking prevalence: 26.1%
Regional adult smoking prevalence: Southeast: 33.0%
Indiana youth smoking prevalence: Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

Wayne County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:

Middle School-8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

26.2%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

Pekin Town Hall

School Districts with Tobacco-free Campuses

Salem Community Schools

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$49,100 County Funding 01/01/04-06/30/05: \$14,250

COMMUNITY-BASED TOBACCO CONTROL COALITION

CARE

Child Care

Councilmen - County and City

Dr. E. R. Apple Hoosier Hills PACT

Lions Club

Ministerial Council

SIG Grant

Step Ahead Council Superior Court Judge

Washington County Child Abuse Council

Washington County Edition

Washington County Health Department

Washington County Hospital Washington County Probation Washington County Prosecutor Washington County Sheriff

YMCA Youth Council

Coalition Coordinator: Washington County Tobacco Coalition

Sharon Purlee

806 Marinsburg Road, Suite 203

Salem, IN 47165 812.883.1446 (Phone) 812.883.0400 (Fax) s_purlee@excite.com

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

26.7%

None Reported

School Districts with Tobacco-free Campuses

Centerville-Abington Community Schools

Nettle Creek School Corporation Northeastern Wayne Schools

Richmond Community School Corporation

Western Wayne Schools

Parks/Recreational Facilities

None Reported

Other

None Reported

County Funding 01/01/03-12/31/03: \$75,900 County Funding 01/01/04-06/30/05: \$37,950

COMMUNITY-BASED TOBACCO CONTROL COALITION

AGAPE
Dunn Center
Earlham College
Easter Seals
Girls Inc.
Hope House

Indiana University East Lincoln High School

Lions Club

Coalition Coordinator: Wayne County Government

David Bowers 2769 Stevens Road Centerville, IN 47330 765.855.3370 (Phone) 765.855.2482 (Fax) dbowers@parallax.ws

New Life Church of Nazarene

County Funding 01/01/03-12/31/03: \$47,600 County Funding 01/01/04-06/30/05: \$24,100

MINORITY-BASED TOBACCO CONTROL COALITION

Brenda Bentley, CEO, Agape Training Systems Dr. John Holbert, Bethel / A.M.E. Church

Bethesda Ministries Dream Center, Sharon Brandley & Pastor Rich McCarty

Coalition Coordinator: Pastor Ron Chappell

New Life Church of the Nazarene

56 Northwest "H" Street

P.O. Box 2238 Richmond, IN 47374 765.966.2797 (Phone) 765.973.9125 (Fax) newlifenazrich@aol.com

Wells County

Indiana adult smoking prevalence: 26.1%

Regional adult smoking prevalence: Northeast: 21.3% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

17.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

Bluffton City Buildings

School Districts with Tobacco-free Campuses

No Schools with Tobacco-free Campuses

Parks/Recreational Facilities

No Policy

Other

Bluffton Regional Medical Center

County Funding 01/01/03-12/31/03: \$49,300 County Funding 01/01/04-06/30/05: \$26,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Bluffton Police Department Bluffton Regional Medical Center Boys & Girls Club of Wells County

Caylor-Nickel Clinic Caylor-Nickel Foundation

Citizens Against Drug Abuse of Wells County Governor's Commission for a Drug Free Indiana

Purdue Extension, Wells County Southern Wells School Corporation

Wells County Cooperative Extension Services

Wells County Health Department Wells County Teen Court

Coalition Coordinator: Caylor-Nickel Foundation

Molly Lesnet

125 South Marion Street, Suite 103

Bluffton, IN 46714 260.824.5019 (Phone) 260.824.7054 (Fax) cnf@onlyinternet.net

White County

Indiana adult smoking prevalence: 26.1% Regional adult smoking prevalence: North-central: 23.8% Indiana youth smoking prevalence: Middle School- 8.6% High School-23.4%

Percent of women in County who report smoking during pregnancy:

18.6%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

County Courthouse

City Buildings

Monticello City Buildings

School Districts with Tobacco-free Campuses

North White School Corporation

Parks/Recreational Facilities

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$47,900 County Funding 01/01/04-06/30/05: \$30,000

COMMUNITY-BASED TOBACCO CONTROL COALITION

American Cancer Society Frontier School Corporation **FSSA**

ICJI

North White School Corporation

Probation Department

Tri County School Corporation Twin Lakes School Corporation Wabash Valley Mental Health Clinic White County Community Foundation White County Habitat for Humanity White County Health Department

White County Literacy Volunteers White County Step Ahead

White County United Way

Coalition Coordinator: Partners for a Drug Free White County

Joan Ginter P.O. Box 361 Monticello, IN 47960 574.583.9864 (Phone) 574.583.4706 (Fax) notobacco91@hotmail.com Whitley County

Indiana adult smoking prevalence:
Regional adult smoking prevalence:
Indiana youth smoking prevalence:
Southwest: 25.6%
Middle School- 8.6%
High School-23.4%

Percent of women in County who report smoking during pregnancy:

22.4%

TOBACCO-RELATED POLICIES AND ORDINANCES

County Buildings

All County Buildings

City Buildings

No Policy

School Districts with Tobacco-free Campuses

Smith-Green Community Schools Whitley County Consolidated Schools Whitko Community Schools

Parks/Recreational Facilities

Tarks/ Necreational I

No Policy

Other

None Reported

County Funding 01/01/03-12/31/03: \$51,200 County Funding 01/01/04-06/30/05: \$15,679

COMMUNITY-BASED TOBACCO CONTROL COALITION

Dale Moser, Clergy
Commission
Indiana State Excise Police
American Cancer Society
Bowen Center
Drug Free Indiana Gov.
Whitley Parkview Memorial Hospital
Probation Department
Gale Burkholder, Resident/Clergy
SADD Members
Tobacco Free Coalition
Youth Council Members

Coalition Coordinator: Drug Free Whitley County

Patty Weybright 111 North Main Street South Whitley, IN 46787 260.723.5911 (Phone) weybright@hoosierlink.net

FOOTNOTES

'The Behavior Risk Factor Surveillance Survey (BRFSS) is a national survey conducted at the state-level to monitor state-level prevalence of the major behavioral risks among adults associated with premature morbidity and mortality. The BRFSS defines "current smokers" as a person who has ever smoked 100 or more cigarettes. The Indiana State Department of Health conducts the BRFSS. The 2002 BRFSS data indicated that the smoking rate for adults was 27%. While ITPC will continue to use the BRFSS data as a primary prevalence measure, in 2002 the Indiana Adult Tobacco Survey (ATS) was conducted providing another valuable source of Indiana adult smoking rates. These data reported Indiana's adult smoking rate at 27%.

²National Youth Tobacco Survey (NYTS), 2002.

³The Youth Tobacco Survey (YTS) is a national survey endorsed by the Centers for Disease Control and Prevention (CDC) and the American Legacy Foundation. This survey will be conducted in alternating years to produce biannual prevalence rates for youth in grades 6th through 12th. These surveys define "current smoking" as is the student who smoked cigarettes one or more days in the past thirty (30) days. Indiana did not achieve the response rate (60% overall) required by CDC protocol. While this does not detract from the validity of the data or the weighting scheme, any statements made about the data must be made with this consideration.

⁴Mathews T. Smoking during pregnancy in the 1990s. National vital statistics repots; vol 49 no 7. Hyattsville, Maryland: National Center for Health Statistics. 2001. The national average of 12% is for 1999 when the Indiana rate was 21%. It is assumed that the national average for 2002 would be approximately 12%, as no new national data is available at this time.

⁵The Indiana Natality Report includes information on births to Indiana residents that occurred during 2002. Information is presented at the state, county, and city level (the 26 largest cities). This report includes data by age, race, and marital status of the parents; characteristics of the newborn such as birth order and congenital anomalies; and outcome indicators such as alcohol and tobacco use during pregnancy, gestation length, and birth weight.

⁶Compiled from 2004-2005 ITPC community-based partnership applications, October 2003

⁷The Youth Tobacco Survey does not specifically ask if a physician has discussed "cessation options" with the youth patient, but it does ask if the physician has discussed the "dangers of tobacco use" with the patient. This measure could be proxy to get information on physicians talking with youth about cessation.

⁸Tobacco Retailer Inspection Program (TRIP) is currently conducted through the Indiana Excise Police. TRIP is a routine surveillance system that inspects tobacco retailers throughout the year. The Synar amendment requires States to conduct compliance checks at a specific time period once a year.

⁹Current questions of the YTS ask if a student has smoked on smoking property in the past thirty (30) days. This may serve as a proxy to current tobacco use policies and enforcement of such policies.

¹⁰Smokefree Indiana. Colleges include: Ball State, Butler, Indiana State, Indiana University-B, IUPUI, IU-Northwest, Purdue University, Purdue-Calumet, Purdue-North Central, Valparaiso, and Vincennes.

"Smoking is restricted to designated areas in a public building licensed as a childcare home or registered as a child care ministry. IND. CODE §§ 16-41-37-1 et seq.

¹²Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002. Atlanta, GA: U.S. Department 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, 2002.

¹³Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002. Atlanta, GA: U.S. Department 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, 2002.

¹⁴Centers for Disease Control and Prevention, unpublished data, 2002

¹⁵Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002. Atlanta, GA: U. S. Department 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, 2002.

¹⁶U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004

 $^{\mbox{\tiny 17}}\mbox{Centers}$ for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002

¹⁸The Cost of Caring: Key Drivers in Hoosier Healthcare Spending, February 2004. Indiana Hospital and Health Association. PricewaterhouseCoopers.

¹⁹Data comparing other states was not available at the time of publication. Therefore, the comparison data is for 2002, while the Indiana specific data discussed in the text is for 2003.

²⁰2002 National Youth Tobacco Survey. NYTS is a comparable instrument conducted nationally by the American Legacy Foundation.

²¹Indiana did not achieve the response rate (60% overall) required by CDC protocol. While this does not detract from the validity of the data or the weighting scheme, any statements made about the data must be made with this consideration.

²²Centers for Disease Control and Prevention, Office on Smoking and Health, "African Americans and Tobacco", Fact Sheet

²³Centers for Disease Control and Prevention, Office on Smoking and Health, "African Americans and Tobacco", Fact Sheet Centers for Disease Control and Prevention. At-A-Glance.

Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Hispanics, Atlanta: CDC, 1998.

²⁴U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Latinos: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998

²⁵2002 Indiana Adult Tobacco Survey.

²⁶2002 Indiana Youth Tobacco Survey.

²⁷Centers for Disease Control and Prevention, Office on Smoking and Health, "African Americans and Tobacco", Fact Sheet U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Hispanics: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998.

²⁸Indiana Cancer Facts and Figures 2003.

²⁹Leistikow B. "Lung cancer death rates as an index of smoke exposures: validation against black male-non lung cancer death rates, 1969-2000. Preventive Medicine 38 (2004) 511-515.

³⁰U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Latinos: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998

³¹Centers for Disease Control and Prevention. "Smoking attributable mortality and years of potential life lost-United States, 1990", MMWR 42(33): 645-8.

³²U.S. Health and Human Services. Reducing the Health Consequences of Smoking: 25 Years of Progress. A report of the Surgeon General, 1989.

³³Glode WF. RJR puts on the Ritz, PM goes to Rio. Advertising Age 1985 (56.2):1, 78; Leviten P. Manufacturers send changing smoking signals. Supermarket Business 1985 (40.12):39-43; and Walters DKH. Cigarettes: Makers Aim at Special Niches to Boost Sales. Los Angeles Times 1985 Sept 15; Business Section:1 (col 3)

³⁴U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Latinos: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998.

³⁵U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Latinos: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998.

³⁶U.S. Department of Health and Human Services. Tobacco Use Among U.S. Racial/Ethnic Minority Groups — African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Hispanics: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 1998.

³⁷1999, 2000, and 2001 Indiana birth certificate data. Indiana State Department of Health.

³⁸Martin, J.A., et al. December 17, 2003. "Births: Final Data for 2002." National Vital Statistics Reports 52(10):1-113. Hyattsville, MD: National Center for Health Statistics.; U.S. Department of Health and Human Services (USDHHS). 2000. Healthy People 2010, 2nd Ed. U.S. Government Printing Office: Washington, DC.

³⁹Ventura, S.J. 2003. "Trends and Variations in Smoking during Pregnancy and Low Birth Weight: Evidence from the Birth Certificate, 1990-2000." Pediatrics 111(5 Part 2):1176-1180.

⁴⁰SDHHS. 2001. Women and Smoking: A Report of the Surgeon General. U.S. Department of Health and Human Services, Public Health Service: Rockville, MD, Office of the Surgeon General, U.S. Government Printing Office: Washington DC.; Gavin, N.I., et al. September 2001. Review and Meta-Analysis of the Evidence on the Impact of Smoking on Perinatal Conditions Built into AMMEC II. Final Report to the National Center for Chronic Disease Prevention and Health Promotion. Research Triangle Park: Research Triangle Institute.

412003 Indiana BRFSS

422002 Indiana Adult Tobacco Survey

⁴³U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.; Doll et al. Mortality in relation to smoking: 50 years' observations on male British doctors. BMJ, doi: 10.1136/bmj.38142.554479.AE

⁴⁴Centers for Disease Control and Prevention. "Cigarette Smoking-related Mortality" Fact Sheet. http://www.cdc.gov/tobacco/research_data/health_consequences/mortali.htm

⁴⁵American Lung Association Fact Sheet, 2000.

⁴⁶U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.

⁴⁷Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002. Atlanta, GA: U. S. Department 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, 2002.

- ⁴⁸U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.
- ⁴⁹US Department of Health and Human Services (HHS), Reducing the Health Consequences of Smoking: 25 Years of Progress. A report of the Surgeon General, DHHS Publication No 89-8911, 1989
- ⁵⁰Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002. Atlanta, GA: U. S. Department 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, 2002.
- ⁵¹U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.
- ⁵² "US Department of Health and Human Services (HHS), Reducing the Health Consequences of Smoking: 25 Years of Progress. A report of the Surgeon General, DHHS Publication No 89-8911, 1989.
- ⁵³U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.
- ⁵⁴U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004.
- 55 Centers for Disease Control and Prevention. Smoking-attributable mortality and years of potential life lost United States, 1990. Morbidity and Mortality Weekly Report 1993;42(33):645-8.
- ⁵⁶Indiana Cancer Facts and Figures, 2003.
- ⁵⁷Indiana Cancer Facts and Figures, 2003.
- 58 Indiana Cancer Facts and Figures, 2003.
- ⁵⁹Indiana State Department of Health Indiana State Cancer Registry and the Epidemiology Resource Center, Data Analysis Team, May 2003.
- ⁶⁰U.S. Environmental Protection Agency (1989). Indoor Air Facts: Environmental Tobacco Smoke; Centers for Disease Control and Prevention.
- ⁶¹Glantz et al.(1995). Journal of American Medicine, 273, 13: 1047-1053.

- ⁶²CRS Report for Congress, Environmental Tobacco Smoke and Lung Cancer Risk; EPA (1994). Secondhand smoke-Setting the Record Straight.
- $^{\mbox{\tiny 63}}\mbox{http://tobaccofreekids.org/reports/settlements/TobaccoToll.php 3?StateID=IN$
- ⁶⁴Misra, D.P., and R. Nguyen. 1999. "Environmental Tobacco Smoke and Low Birth Weight: A Hazard in the Workplace?" Environmental Health Perspectives 107(Suppl 6):897-904.
- ⁶⁵Secondhand Smoke Tearing Families Apart. The American Legacy Foundation. June 2004.
- ⁶⁶Centers for Disease Control and Prevention, "State-specific prevalence of cigarette smoking among adults, and children's and adolescent's exposure to environmental tobacco smoke-United States 1996", MMWR 46(44).
- 672002 Indiana Youth Tobacco Survey
- 682002 Indiana Youth Tobacco Survey
- ⁶⁹DiFranza , J.R. and R.A. Lew, "Effect of Maternal Cigarette Smoking on Pregnancy Complication and Sudden Infant Death Syndrome," Journal of Family Practice 40(4): 385-94.
- ⁷⁰Centers for Disease Control and Prevention.
- ⁷¹National Cancer Institute, National Institute of Health
- ⁷²Glantz S.A. Tobacco Biology and Politics: An Expose of Fraud and Deception. 1999.
- ⁷³Committee on the Assessment of Asthma and Indoor Air. 2000. Clearing the Air: Asthma and Indoor Air Exposures. Division of Health Promotion and Disease Prevention, Institute of Medicine, Chapter 7.; Gold, D.R. 2000. "Environmental Tobacco Smoke, Indoor Allergens, and Childhood Asthma." Environmental Health Perspectives 108(suppl 4):643-651.
- ⁷⁴Secondhand Smoke Tearing Families Apart. The American Legacy Foundation. June 2004.
- 752002 National Health Interview Study
- ⁷⁶DiFranza, J.R., and R.A. Lew. 1996. "Morbidity and Mortality in Children Associated with the Use of Tobacco Products by Other People." Pediatrics 97(4):560-568.; Secondhand Smoke Tearing Families Apart. The American Legacy Foundation. June 2004.
- ⁷⁷DiFranza, J.R., and R.A. Lew. 1996. "Morbidity and Mortality in Children Associated with the Use of Tobacco Products by Other People." Pediatrics 97(4):560-568.; Secondhand Smoke Tearing Families Apart. The American Legacy Foundation. June 2004.
- ⁷⁸Sargent RP, Shepard RM, Glantz SA. Reduced incidence of admission for myocardial infraction associate with public smoking ban: before and after study. BMJ 2004; 328: 977-80.
- ⁷⁹Repace, J., "Smoking in the workplace: ventilation. In: Smoking Policy: Questions and Answers, no. 5.," Seattle: Smoking Policy Institute.
- ⁸⁰U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004

- ⁸¹Centers for Disease Control and Prevention. Investment in Tobacco Control: State Highlights-2002
- ⁸²Campaign for Tobacco Free Kids Fact Sheet, "Increasing State Smoking-caused Medicaid Costs and Future Medicaid Savings from a 25% Reduction to State Smoking Rates".
- ⁸³Center for Health Promotion. http://www.chpcare.com/default.aspx?cid=14
- ⁸⁴Center for Health Promotion. http://www.chpcare.com/default.aspx?cid=14
- 85 Source: Dr. William L. Weis, Associate Professor of Business Administration, Albert School of Business, Seattle University
- 86 Marvin M. Kristein, PhD, American Health Foundation
- ⁸⁷July 2001, Journal of Occupational and Environmental Medicine; Study of over 3000 Xerox corp. employees
- 88 Tobacco Control, September 2001
- ⁸⁹Warner KE. Cost effectiveness of smoking-cessation therapies. Interpretation of the evidence and implications for coverage. Pharmacoeconomics 1997;11(6):538–49. ;Cummings SR, Rubin SM, Oster G. The cost-effectiveness of counseling smokers to quit. Journal of the American Medical Association 1989;261(1):75–79. ;Coffield AB, Maciosek MV, McGinnis JM, et al.. Priorities among recommended clinical preventive services. American Journal of Preventive Medicine 2001;21(1):1–9.
- ⁹⁰Schauffler HH, McMenamin S, Olsen K, Boyce-Smith G, Rideout JA, Kamil J. Variations in treatment benefits influence smoking cessation: results of a randomized controlled trial. Tobacco Control 2001;10:175–80.; Curry SJ, Grothaus MA, McAfee T, Pabiniak C. Use and cost effectiveness of smoking-cessation services under four insurance plans in a health maintenance organization. New England Journal of Medicine 1998; 339(10):673–79.
- ⁹¹Centers for Disease Control and Prevention. Annual smokingattributable mortality, years of potential life lost, and economic costs—United States, 1995_1999. Morbidity and Mortality Weekly Report 2002;51(14); 300–03.
- ⁹²Warner, K., et.al. cited in Business & Health, Vol. 15, #8, Supplement A, Medical Economics, Montvale, NJ.
- 94MMWR Effect of Ending an Antitobacco Youth Campaign on Adolescent Susceptibility to Cigarette Smoking – Minnesota 2002-2003. April 16, 2004 / Vol. 53 / No. 14
- ⁹³2004-2005 ITPC community-based partnership applications-top five employers by number of employees per county.
- 94 State-specific trends in smoke free workplace policy coverage. The Current Population Survey Tobacco Use Supplement, 1993 to 1999 National Cancer Institute.
- 95 Americans for Nonsmoker's Rights
- $^{\rm 96}2002$ Indiana Adult Tobacco Survey, all comparisons between current smokers and all other respondents were statistically significant, p <0.5.
- ⁹⁷National Campaign for Tobacco Free Kids Fact Sheet. http://tobaccofreekids.org/research/factsheets/pdf/0098.pdf

- 98 Tauras et al, "Effects of Price and Access Laws on Teenage Smoking Initiation: A National Longitudinal Analysis.
- ⁹⁹Chaloupka F. and Pacula R. "An examination of gender and race differences in youth smoking responsiveness to price and tobacco control policies," National Bureau of Economic Research, 1998.
- ¹⁰¹Campaign for Tobacco Free Kids fact sheet, "Recent State Cigarette tax increases and benefits from further increases."
- ¹⁰⁰National Campaign for Tobacco Free Kids Fact Sheet http://tobaccofreekids.org/research/factsheets/pdf/0097.pdf
- 102Compiled from 2004-2005 ITPC community-based partnership applications, October 2003
- 103http://www.tobaccofreekids.org/reports/fda/summary.shtml
- ¹⁰⁴Kozlowski LT, Pillitteri JS. Beliefs about "Light" and "Ultra Light" cigarette: an overview of early efforts and published research. Tobacco Control 2001; 10 (suppl I): i12-16.
- ¹⁰⁵Thun MS, Burns DM. Health impact of "reduced yield" cigarettes: a critical assessment of the epidemiological evidence. Tobacco Control 2001; 10 (suppl I): i4-11.
- ¹⁰⁶U.S. Department of Health and Human Services. The Health Consequences of Smoking: A Report of the Surgeon General. U.S. Department 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, 2004
- ¹⁰⁹Wakefield, M, et al., "Changes at the point of purchase for tobacco following the 1999 tobacco billboard advertising ban." University of Illinois at Chicago. Research Paper Series, No. 4, July 2000.
- 1102002 Indiana Youth Tobacco Survey.
- ¹⁰⁷2002 Indiana Adult Tobacco Survey.
- 1082002 Indiana Youth Tobacco Survey.
- 111http://www.gasp.org/firesafe.html
- ¹¹³With each activity reported, coalitions may be working on more than one ITPC goal area. Therefore, the number of activities under each goal area shown in Chart 21 exceeds the total number of activities reported.
- ¹¹⁵Number of clips August 3, 2004. There is often a delay of several weeks for news media clips; therefore, data available at the time of publication may not include all clips through June 2004.