

Tobacco Prevention and Cessation Commission (TPC)

2021-2023 Request for Applications (RFA)

Resource Guide

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| Community Indicator | | 2021-2023 TPC Community Grants | |
|--|---|--------------------------------|--|
| Priority Area: Decrease youth and young adult tobacco use rates | | | |
| Middle and High School Prevention (1) <i>optional</i> | Increase the proportion of Indiana middle and high schools that support and implement a comprehensive school strategy against all tobacco use | | |
| Youth Empowerment/VOICE (2) <i>optional</i> | Extent of community activism among youth to support community change that includes youth involved in the VOICE movement | | |
| Point-of-Sale (3) | Extent of broad-based community support for commercial tobacco Point-of-Sale (POS) strategies at the local level | | |
| Priority Area: Increase proportion of Hoosiers not exposed to secondhand smoke | | | |
| Tobacco-Free Health Care Facilities (4) <i>optional</i> | Proportion of comprehensive tobacco-free campus policies for health systems, including community health centers, mental health centers and clinics, addiction treatment centers, facilities for people with disabilities, and senior living facilities | | |
| Tobacco-Free Worksites (5) | Proportion of local smoke-free air ordinances for all worksites, including restaurants, bars, membership clubs, and gaming facilities | | |
| Tobacco-Free Schools (7) | Proportion of school districts with comprehensive tobacco-free campuses | | |
| Multi-Unit Housing (8) | Proportion of comprehensive smoke-free policies in multi-unit housing | | |
| Tobacco-Free Colleges and Universities (9) <i>optional</i> | Proportion of college and university campuses with comprehensive tobacco-free campus policies that includes the usage, sales, marketing, and sampling in indoor and outdoor spaces such as student housing, classroom buildings, and athletic facilities of all tobacco products including e-cigarettes | | |
| Priority Area: Decrease adult smoking rates | | | |
| Quitline (11) | Extent of utilization of the Indiana Tobacco Quitline (ITQL) throughout the community | | |
| Cessation Systems (12) <i>optional</i> | Extent of health system implementation of the Clinical Practice Guidelines for Treating Tobacco Use and Dependence including integration of electronic referrals to the Indiana Tobacco Quitline | | |
| Employers (13) | Extent of tobacco cessation benefits provided by employers | | |
| Priority Area: Protect and maintain a state and local infrastructure necessary to lower commercial tobacco use rates | | | |
| Coalition (14) | Extent of intersectional partnerships within the broad-based coalition | | |
| Marginalized Populations (15) | Extent of participation by groups serving marginalized populations in the community | | |
| Tobacco-Free Families (16) | Extent of organizations serving marginalized populations that have received training on the Breathe: Healthy Steps to Living Tobacco Free education program | | |

Writing SMART Objectives

SMART OBJECTIVES are statements that describe the results to be achieved and how they will be achieved.

Developing SMART Work Plans

- Specific
- Measurable
- Achievable
- Relevant
- Time-bound

Specific-identifies a specific event or action that takes place

- What is expected to change?
- Where will change occur?

Measurable-quantifies the amount of change to be achieved

- How much change?
- How does the change compare to baseline?

Achievable-is realistic given available resources and plans for implementation

- With a reasonable amount of effort and application, can the objective be achieved? Are you attempting too much?

Relevant-is logical and relates to program and goals

- Is the objective important or worthwhile to the stakeholders?
- When in doubt, refer to the TPC Priority areas, Community Indicators, and contract deliverables (and [CDC's Best Practices](#))!

Time-bound-specifies a time by which it will be achieved

- When will change occur? Is there a time limit? When will this objective be accomplished?

SAMPLES:

Electronically embed the Indiana Tobacco Quitline fax referral into EMR/EHR of one healthcare system in Prince Edward County by June 30, 2022.

Pass and implement a comprehensive smoke-free indoor air policy within two local market rate multi-unit housing complexes by June 30, 2022.

| Priority Area 1: Decrease Youth and Young Adult Tobacco Use Rates | | | | | | | |
|--|--|--|--|----------------------------|------|--------------------------|------|
| Indicator 2: Youth Empowerment/VOICE | | | | | | | |
| SMART Objective for Indicator: | | Establish and support youth empowerment in Jones County by adding 15 members to the Action Squad, maintaining a Core Team of at least 5 members, and completing 8 days of action by June 30, 2023. | | | | | |
| Baseline measurement for this indicator: | | Jones County currently has 5 members in the Core Team and 8 members in the Action Squad. They conducted 6 days of action in 2019-2021. | | | | | |
| Data source for baseline measurement: | | Past VOICE meeting minutes and activity reports | | | | | |
| Timeframe for Activities | | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Complete a recruitment plan and monthly meeting schedule for Year 1 for established VOICE Core Team and Action Squad. DUE: AUGUST 31, 2021 | <input type="checkbox"/> Data | Educate coalition members on VOICE and a youth empowerment model | Coalition coordinator, Youth Coordinator | July | 2021 | August | 2021 |
| | <input checked="" type="checkbox"/> Education | Establish a partnership agreement with the Boys & Girls Club to provide staff member as the youth coordinator | Coalition coordinator Boys and Girls Club | July | 2021 | August | 2021 |
| | <input type="checkbox"/> Media & Communication | Ensure youth coordinator is trained on Voice model | Coalition coordinator Boys and Girls Club | July | 2021 | August | 2021 |
| | <input checked="" type="checkbox"/> Partnership Building | Develop a list of potential local groups and a key contact for youth engagement | Boys and Girls Club Youth Coordinator Existing Core Team members | July | 2021 | August | 2021 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Establish a VOICE Core Leadership Team and submit online intake and roster forms. - Minimum of 5 and maximum of 10 youth allowed in core team - Must be 13-18 years old DUE: SEPTEMBER 30, 2021 | <input checked="" type="checkbox"/> Data | Assess the level of engagement and commitment among youth who are involved in the Core Team and Action Squad | Youth coordinator Adult allies from committed organizations | August | 2021 | September | 2021 |
| | <input checked="" type="checkbox"/> Education | Recruit youth committed to Core Team. | Youth coordinator, Existing Core Team | August | 2021 | September | 2021 |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|---|---|--|----------------------------|------|--------------------------|------|
| Execute 4 National Day of Action Activities in partnership with VOICE Core Leadership Team. DUE: (See VOICE Calendar document) October- Red Ribbon Week; November- Great American Smoke Out; March- Taking Down Tobacco National Day of Action; May- World No Tobacco Day | <input type="checkbox"/> Data | Work with TPC Director of Youth Programs to plan youth training | Youth coordinator Youth Core Team TPC Director of Youth Programs | July | 2021 | September | 2021 |
| | <input type="checkbox"/> Education | Core Team will draft plans for each Day of Action, including activity, giveaway items, and goals. | Youth coordinator Youth Core Team | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Youth Coordinator will provide youth empowerment activity calendar to Core Team and Action Squad and work to gain participation from all VOICE Youth in each opportunity. | Youth coordinator Youth Core Team | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Participate in ALL required VOICE statewide youth empowerment meet ups and capacity building opportunities: - 4 Regional Action Squad and Core Team Meet Ups - 3 Statewide Core Team Trainings - 3 Adult Ally Trainings/webinars DUE: QUARTERLY | <input type="checkbox"/> Data | Hold a capacity building training for newly engaged youth and organizations. | Youth coordinator TPC Director of Youth Programs | July | 2021 | September | 2021 |
| | <input checked="" type="checkbox"/> Education | Youth Coordinator will participate in all adult ally trainings. | Youth coordinator | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Media & Communication | Youth coordinator and core team will promote training calendar and work to ensure attendance from core team and action squad members at all training events. | Youth coordinator Core team | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|--|--|---|---|----------------------------|------|--------------------------|------|
| Provide a letter of recommendation for at least one youth from your core team to serve on the statewide youth leadership team for VOICE Youth Ambassador Program DUE: DECEMBER 31, 2021; DECEMBER 31, 2022 | <input type="checkbox"/> Data | Assess commitment and level of engagement among core leadership team members. | Youth coordinator, coalition members | September | 2021 | December | 2022 |
| | <input checked="" type="checkbox"/> Education | Provide an opportunity for 1-2 youth on the core team to join the state leadership team. | Youth coordinator, coalition members | September | 2021 | December | 2022 |
| | <input type="checkbox"/> Media & Communication | Support them with the application process. | Youth coordinator, coalition members | September | 2021 | December | 2022 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Hold monthly core team/action squad meetings that honor and adhere to the youth empowerment model and positive youth development best practices. DUE: MONTHLY | <input type="checkbox"/> Data | Organize, promote, and support monthly core team and action squad meetings according to the calendar approved by the core team. | Youth coordinator, Youth; coalition members | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | | | | | | |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|--|---|--------------------------------|----------------------------|------|--------------------------|------|
| Implement the UpRISE Social Justice Youth Tobacco Control Curriculum and execute required modules with core youth for VOICE programming and project planning . DUE: QUARTERLY | <input type="checkbox"/> Data | Participate in UpRISE training and implement program with youth. | Youth coordinator Core Team | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | | | | | | |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Support the transition of Core Team leaders into the VOICE Alumni Network (young adult programming). DUE: ANNUALY | <input type="checkbox"/> Data | Recruit youth to participate with VOICE Alumni Network. | Youth coordinator Core Team | April | 2022 | June | 2023 |
| | <input type="checkbox"/> Education | Support youth membership and participation in the Alumni Network. | Youth coordinator Core Team | April | 2022 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Priority Area 2: Increase the Proportion of Hoosiers Not Exposed to Secondhand Smoke | | | | | | | |
|---|---|--|--|----------------------------|------|--------------------------|------|
| Indicator 8: Multi-Unit Housing | | | | | | | |
| SMART Objective for Indicator: | | Pass and implement a comprehensive smoke-free indoor air policy with two local market rate housing communities by June 30, 2023. | | | | | |
| Baseline measurement for this indicator: | | After a review of the Parker community, it was determined Brentwood Apartments, Elmwood Apartments and Elmhurst Residential Living do not have a comprehensive smoke-free indoor air policy | | | | | |
| Data source for baseline measurement: | | Our current Parker community database of multi-unit housing shows Brentwood Apartments, Elmwood Apartments and Elmhurst Residential Living do not have comprehensive smoke-free indoor air policies. The Covington County Tobacco Control Coalition contacted the 3 properties and verified there is currently no comprehensive policy. It was determined that our community already has 5 smoke-free apartment complexes. | | | | | |
| Timeframe for Activities | | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct an assessment of current policies regarding smoking in all public and market rate multi-unit housing in your community and develop a written work plan that incorporates results of the completed assessment. DUE: DECEMBER 31, 2021 | <input checked="" type="checkbox"/> Data | Create/update a list of market rate multi-unit housing in your community; Prioritize housing complexes based on number of units, readiness to adopt smoke-free air policy, or other criteria | Coalition coordinator, American Lung Association, coalition members, property administration and staff | August | 2021 | November | 2021 |
| | <input type="checkbox"/> Education | Set a goal number of completed surveys in the first quarter of the grant cycle | Coalition coordinator, American Lung Association, coalition members, regional director | August | 2021 | November | 2021 |
| | <input type="checkbox"/> Media & Communication | Access the SurveyMonkey link to enter responses for each market rate multi-unit housing property that is assessed | Coalition coordinator, coalition members | November | 2021 | December | 2021 |
| | <input checked="" type="checkbox"/> Partnership Building | Reference survey results and develop a written work plan for the rest of the grant cycle based on the multi-unit housing properties represented in the assessment | Coalition coordinator, American Lung Association, coalition members, regional director | December | 2021 | January | 2022 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct at least one presentation to the public housing authority board, market-rate multi-unit housing management, or trade associations on the importance of smoke-free policies for public housing and multi-unit housing. DUE: JUNE 30, 2022; JUNE 30, 2023 | <input type="checkbox"/> Data | Collect and use positive stories and research on smoke-free public housing to educate residents, the public housing authority, and property management | Coalition coordinator, tenants association, property administration and staff, apartment association | January | 2022 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Conduct one-on-one meetings with the public/market rate housing board on the importance of smoke-free multi-unit housing and the ITQL using TPC resources | Coalition coordinator, coalition members | January | 2022 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Recruit a resident champion and/or champion from the housing property(s) to share their story | Coalition coordinator, tenants association, property administration and staff | January | 2022 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|---|--|--|----------------------------|------|--------------------------|------|
| Assist public housing authority and market rate housing management with: - implementation by providing resources including Indiana Tobacco Quitline materials and other assistance - enforcement and strengthening of current policy to include e-cigarettes and smoke-free grounds DUE: QUARTERLY | <input type="checkbox"/> Data | Communicate passage of policy with appropriate signage and written materials. Educate residents and staff on the Indiana Tobacco Quitline. Encourage coalition members and housing residents to submit letters to the community newsletter on the importance of smoke free homes for the health of the family, asthma, negative health effects of third hand smoke, federal disability laws, economic benefits, etc., in addition to letters to property | Coalition coordinator, property administration and staff | May | 2022 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | | tenants association, coalition members (list them) | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Media & Communication | Celebrate/Host an event to mark the anniversary of the smoke-free policy. | coalition coordinator, property administration and staff, coalition members (list them) | June | 2022 | August | 2022 |
| | <input type="checkbox"/> Partnership Building | Conduct survey about the policy to determine residents' attitude one year after policy is passed and implemented (assess residents' level of support for a stronger policy if applicable) | coalition coordinator, property administration and staff | March | 2022 | May | 2022 |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | Encourage and provide materials for property to promote the smoke-free air policy throughout the resident community | Coalition coordinator, property administration and staff | July | 2021 | June | 2022 |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Maintain a database of all public and market rate multi-unit housing in your community and complete the following activities: - Outreach with all new multi-unit housing properties that open within your community - Track and monitor outreach to the database obtained through assessment DUE: QUARTERLY | <input checked="" type="checkbox"/> Data | Use multi-unit housing survey results to update database Conduct outreach with any new properties that open in the county | Coalition coordinator, American Lung Association, coalition members (list them) | January | 2022 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Identify and recruit key stakeholders at new market rate housing properties | Coalition coordinator, coalition members (list them), property administration and staff, tenants | January | 2022 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Conduct key informant interview with new market rate housing management | Coalition coordinator | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Survey residents of the multi-unit housing properties to assess the level of support for a smoke-free air policy | Coalition coordinator, property administration and staff | January | 2022 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | Record all outreach activities in the housing database | Coalition coordinator | July | 2021 | June | 2023 |

| Priority Area 3: Reduce Adult Smoking | | | | | | | |
|---|--|--|--|----------------------------|------|--------------------------|------|
| Indicator 13: Employers | | | | | | | |
| SMART Objective for Indicator: | | Identify 8 employers and work to implement best practices for tobacco cessation at 6 of those locations by June 30, 2023. | | | | | |
| Baseline measurement for this indicator: | | In reviewing the Seminole County Preferred Employer Network there are 6 employers currently enrolled. | | | | | |
| Data source for baseline measurement: | | Seminole County Preferred Employer Network/Database, Review of Coalition Members | | | | | |
| Timeframe for Activities | | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Develop and maintain a database of employers in your county (Reference Employer Database Template). DUE: SEPTEMBER 30, 2021 | <input checked="" type="checkbox"/> Data | Build current database using Employer Database Template and Preferred Employer Network Information. Include information such as: main point of contact, current policy status, current cessation benefits offered, and ongoing updates on outreach activities. Explore larger employers in Seminole County | TPC Coordinator Coalition Members Chamber of Commerce | July | 2021 | December | 2021 |
| | <input checked="" type="checkbox"/> Education | Monitor number of employers implementing best practice components. Conduct ongoing maintenance of Employer Database. | TPC Coordinator Coalition Members | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Educate coalition members on the Employer Toolkit and best practices for healthy workplace and tobacco cessation. | TPC Coordinator | October | 2021 | October | 2022 |
| | <input checked="" type="checkbox"/> Partnership Building | Target Employers that coalition has existing relationships with including local health system, local non-profit and local manufacturer with regular outreach activities. | TPC Coordinator, Coalition Members, Chamber of Commerce, Economic Development | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Work with designated TPC staff to assess employer readiness and develop employer outreach strategy. DUE: SEPTEMBER 30, 2021; MARCH 31, 2022; SEPTEMBER 30, 2022 | <input type="checkbox"/> Data | Create a plan for outreach and communication to the employer database. | TPC Coordinator Coalition Members TPC QL manager and RD | September | 2021 | September | 2022 |
| | <input checked="" type="checkbox"/> Education | | | | | | |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|---|--|---|----------------------------|------|--------------------------|------|
| Conduct a presentation and/or face-to-face meeting for employers, business professional organizations, chambers of commerce, economic development groups, etc. to address the burden of tobacco on employers and to provide steps for employers to address tobacco use (Reference the TPC Employer Toolkit for resources). DUE: QUARTERLY | <input type="checkbox"/> Data | Based on the database of employers, target 4 employers to conduct initial outreach (Year 1, repeat Year 2). Set up initial meetings with targeted employers - tentatively target local health system, local county/city government and local car manufacturer. | Coalition Members, TPC Coordinator, Chamber of Commerce, Economic Development | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Present to employers on best practices for healthy workplace and tobacco cessation (Reference Employer Toolkit - Powerpoint and Talking Points Document). | coordinator | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Identify needs of each targetted employer and work to implement best practices. Provide ongoing follow-up to employers as they work on implementing best practices. | Coalition Members, TPC Coordinator | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Attend local Chamber of Commerce events to network. | Coalition Members, TPC Coordinator | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | Share successes of employers with coalition and other local businesses. | Coalition Members, TPC Coordinator | January | 2022 | May | 2023 |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct outreach to employers: -Outreach with all new contacts on the Quit Now Indiana Preferred Employer Network list to determine interest level and intensity of follow up needed -Intense outreach to Quit Now Indiana Preferred Employer Network members with a high interest level through ongoing follow-up (by phone or in person) -Track outreach to Quit Now Indiana Preferred Employer Network and Quitline referrals from employers contacted -Educate the leadership of local businesses on offering health insurance benefits with tobacco cessation coverage -Educate the leadership of local businesses on the importance of implementing a comprehensive tobacco-free grounds policy including electronic nicotine delivery systems. -Assist employers with promoting cessation benefits and the Quitline to employees. -Assist employers with implementing tobacco-free grounds policy. DUE: MONTHLY | <input checked="" type="checkbox"/> Data | Survey coalition member organizations and employers in database to determine what they offer to their employees compared to best practices. | TPC Coordinator, Coalition Members | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Track monthly outreach to Quit Now Indiana Preferred Employer Network and Quitline referrals from employers contacted. Monitor the Indiana Tobacco Quitline referrals and accepted services from employers, report this information back to employers. Monitor number of trainings held and attended with employers or local organizations that work with employers. | TPC Coordinator | June | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Conduct key informant interviews with new business contacts and ongoing one-on-one meetings with employers with a high interest level in tobacco control. Conduct presentations to local businesses and employer groups on offering health insurance benefits with tobacco cessation coverage and on the | TPC Coordinator, Coalition Members | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Distribute monthly media and communication items to educate employers and employees, including letters to the editor or press releases to local media highlighting success of employers. | TPC Coordinator, Coalition Members | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | Host an event to celebrate and recognize a champion employer. | TPC Coordinator, Coalition Members, Chamber of Commerce | March | 2022 | March | 2023 |

| Priority Area 4: Maintain Infrastructure | | | | | | | |
|--|--|--|---|----------------------------|------|--------------------------|------|
| Indicator 14: Coalition | | | | | | | |
| SMART Objective for Indicator: | | Increase active participation in the coalition by at least 8 new members by June 2023 focusing on recruiting members from the following sectors of the community: business, veterans, and faith-based. | | | | | |
| Baseline measurement for this indicator: | | We currently have eight active members on the coalition; however, we do not have representation from the business, veterans, and faith-based sectors. | | | | | |
| Data source for baseline measurement: | | Coalition meeting attendance records. | | | | | |
| Timeframe for Activities | | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct ongoing assessment of coalition recruitment and development. Work with TPC and Regional Director to develop a growth plan. (Reference Coalition Assessment document) DUE: DECEMBER 31, 2021; JUNE 30, 2022; DECEMBER 31, 2022 | <input type="checkbox"/> Data | Survey coalition members to determine their areas of interest, meeting schedule, and opportunities for engagement. | coordinator, coalition members, regional director | November | 2021 | December | 2022 |
| | <input type="checkbox"/> Education | Complete the coalition assessment document and share results with Regional Director. Work with Regional Director to set recruitment goals. | coordinator, regional director | November | 2021 | December | 2022 |
| | <input type="checkbox"/> Media & Communication | Identify portions of community not currently represented on coalition. | coordinator, coalition members | December | 2021 | December | 2022 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct ongoing coalition development and maintenance activities to involve participation from all sectors of the community. (Reference the Recommended Coalition Maintenance Activities) DUE: MONTHLY | <input type="checkbox"/> Data | Coalition will receive education on health equity and apply health equity lens to all activities during planning and implementation. | Coalition members | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Create a coalition database and update the database once a year. Establish regular communication channels with coalition members in the database via e-mail and monthly newsletter. | coordinator, coalition communications committee | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Media & Communication | Ensure action items are assigned to coalition members at each meeting. | coordinator, coalition chair, lead agency | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Incorporate coalition leadership structure and bylaws, regular meeting schedule, and prepare agendas prior to each meeting. | coordinator, lead agency, coalition chair | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|--|---|--|----------------------------|------|--------------------------|------|
| Complete at least one earned media submission (letter to the editor, op-ed, or news release) to a local media outlet. (Reference the Recommended Communications Outreach in the Resource Guide) DUE: MONTHLY | <input type="checkbox"/> Data | Utilize earned media during national events and other timely opportunities (Kick Butts Day, Great American Smokeout, etc). Publish articles about the coalition in publications produced by various community organizations (Chamber of Commerce, church bulletins, etc). | Current coalition members, local media, chamber of commerce, local churches, school administration | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Recruit coalition members to sign and submit 1 LTE each month. | coordinator, coalition communications committee | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Media & Communication | Provide coalition recruitment tools throughout community utilizing current coalition member organizations. | coordinator, coalition communications committee | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Utilize social media weekly to highlight coalition activities and promote coalition meetings and events. | coordinator, coalition communications committee | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Conduct at least one face-to-face meeting or key informant interview with a prospective coalition member or partner in order to recruit from sectors of the community not well represented on the coalition. DUE: QUARTERLY | <input type="checkbox"/> Data | Establish a policy and create a plan of action so that all coalition members will actively recruit one new member each year | Coalition members, recruitment committee | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Participate in community events to provide information about coalition and actively recruit new members. | Coalition members; community organizations; food pantries, Chamber of Commerce; | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Participate in other community group meetings to network and educate about the coalition and tobacco control. | coordinator, recruitment committee | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | Network with local chambers, church groups, food pantries, and veterans organizations. | coordinator, recruitment committee | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|--|---|--|--|----------------------------|------|--------------------------|------|
| Educate state and local policy makers about your program and tobacco control, and the burden of tobacco use on Indiana. DUE: QUARTERLY | <input type="checkbox"/> Data | Identify current state and local policy makers and conduct outreach to provide education about current coalition and tobacco control issues. | coordinator, coalition, youth coordinator, VOICE core team | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Education | Identify coalition members to form a legislative outreach committee that works in coordination with local VOICE team to conduct quarterly educational activities with state and local policy makers. | coordinator, coalition, VOICE core team, youth coordinator | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input type="checkbox"/> Partnership Building | | | | | | |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Send a letter of thanks to state policy makers for your community grant funding and outline the coalition's accomplishments and goals for the 2021-2023 grant. DUE: SEPTEMBER 30, 2021; September 30, 2022 | <input type="checkbox"/> Data | Utilize template provided by TPC to send letter to state policy makers. Include coalition successes and goals. | Coalition Members; TPC | September | 2021 | September | 2022 |
| | <input checked="" type="checkbox"/> Education | | | | | | |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input type="checkbox"/> Partnership Building | | | | | | |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|---|---|--|---|----------------------------|------|--------------------------|------|
| Conduct at least one presentation or meeting per year with the board or administrators of the lead agency to educate on evidence-based tobacco control practices, as well as coalition accomplishments and goals. DUE: ANNUALLY | <input type="checkbox"/> Data | Schedule annual time to present to board of directors and actively reach out to administration when applicable. | coordinator | February | 2022 | February | 2023 |
| | <input checked="" type="checkbox"/> Education | Share quarterly dashboard reports with supervisor and lead agency leadership. | coordinator | July | 2021 | June | 2023 |
| | <input type="checkbox"/> Media & Communication | Ensure a lead agency representative (besides the TPC coordinator) attends all coalition meetings. | lead agency | July | 2021 | June | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |
| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
| Provide training to coalition members on health equity and social justice in commercial tobacco control. DUE: ANNUALLY | <input type="checkbox"/> Data | Coordinator will receive training on health equity and social justice in commercial tobacco control and share with coalition | coordinator, TPC, lead agency | October | 2021 | October | 2022 |
| | <input checked="" type="checkbox"/> Education | Invite local minority health coalition to present to coalition about local health equity and social justice issues. | coalition, coordinator, local minority health coalition | February | 2022 | March | 2022 |
| | <input type="checkbox"/> Media & Communication | Coalition will draft and approve a non-discrimination statement, and review annually. | coalition, coordinator, lead agency | March | 2022 | March | 2023 |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input checked="" type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

| Deliverable | Strategies | Activities | Partners | Start Date (Month/Year) | | End Date (Month/Year) | |
|--|--|--|---|----------------------------|------|--------------------------|------|
| Celebrate coalition successes. Recognize coalition members for their hard work and accomplishments. DUE: ANNUALLY | <input type="checkbox"/> Data | Host an annual even to recognize success of coalition activities and coalition members | Lead agency; coalition members; recruitment committee | November | 2021 | November | 2022 |
| | <input type="checkbox"/> Education | | | | | | |
| | <input type="checkbox"/> Media & Communication | | | | | | |
| | <input checked="" type="checkbox"/> Partnership Building | | | | | | |
| | <input type="checkbox"/> Policy Implementation & Maintenance | | | | | | |

Recommended Communication Outreach Frequency and Topic Suggestions

Recommended Communication Outreach Frequency:

- Letter to the editor (LTE) or Op-Ed submissions: At least once per month (refer below to recommended topics and timing)
 - TPC provides at least one LTE sample per month for partners to distribute
- Social media postings: At least once per week, per registered social media channel (Facebook, Twitter, Instagram)
 - TPC provides social media topics and some draft postings
- Guest article in local/business/company newsletter (online or print), blog, newspaper: At least 2 times per year
 - Reach out to coalition member networks and see what local media distributions exist
 - TPC can assist with brainstorming and drafting guest article submissions

Middle and High School Prevention, Youth Empowerment/VOICE and Point of Sale Indicators:

- Topics
 - General point of sale/retail environment
 - Youth targeting (price, flavor, marketing)
 - Other tobacco products (chew/spit tobacco, e-cigarettes, hookah, little cigars, etc.)
- Ideal LTE distribution times (2 LTEs per year)
 - Back to school season (end of July to September)
 - Halloween (flavored products)
- Social media accounts to follow:
 - Counter Tobacco, Counter Tools, Voice, Campaign for Tobacco Free Kids, Truth Initiative, FDA The Real Cost, Truth, Fresh Empire, American Academy of Pediatrics

Tobacco-Free Worksite Indicator:

- Topics
 - Dangers of secondhand smoke
 - Benefits of comprehensive smoke-free air laws/local authority
 - Worker protection
 - Economic impact of secondhand smoke/Business leader perspective
- Ideal LTE distribution times (At least 3 LTEs per year; more if working on local campaign)
 - Before and during any local campaign work
- Social media accounts to follow:
 - Americans for Nonsmokers Rights, Tobacco Free Indiana

Tobacco-free Schools

- Topics
 - Importance of comprehensive tobacco-free campuses, including e-cigarettes
 - Best practices for schools for how to address timely issues, such as e-cigarette and JUUL usage
 - Vape Free Indiana – additional resources for parents, teachers, and healthcare providers

Multi-Unit Housing Indicator:

- Topics
 - Benefits of smoke-free MUH (resident health, economical for property owners)
 - Legality of smoke-free MUH

Recommended Communication Outreach Frequency and Topic Suggestions

- At least 1 LTE per year
- Social media accounts to follow:
 - Smoke-Free Housing Indiana, Americans for Nonsmokers Rights

Quitline Indicator:

- Topics
 - Cessation
 - Health observances (i.e. American Heart Month, Lung Cancer Awareness Month, Great American Smokeout)
 - “Talk to your doctor”
 - Quitline services (Phone counseling, Web Coach, eQuit, Text2Quit, Individual Services)
- Ideal LTE distribution
 - During health observances (TPC sends notifications on upcoming observances)
 - At least 3 LTEs per year
- Social media accounts to follow
 - CDC Tobacco Free, America Lung Association, American Heart Association, American Cancer Society, American Medical Association

Employers Indicator:

- Topics
 - Tobacco-free workplaces/employee health
 - Tobacco use costs for employers
 - Employer provided tobacco cessation benefits
- Ideal LTE distribution (At least 1 LTE per year)
 - Open enrollment (October to November)

Marginalized Populations Indicator:

- Topics:
 - Medicaid tobacco use rates/Quitline services
 - Mental health population tobacco use rates/cessation benefits
 - LGBTQ+ tobacco use rates/cessation benefits
 - Women of child-bearing age/pregnant women tobacco use rates/Quitline services
- At least 2 LTEs per year
- Social media accounts to follow:
 - Indy Pride Inc., National LGBT Cancer Network, Indiana Latino Institute, Latino Health Organization, Indiana Black Expo, SAMHSA, Smoking Cessation Leadership Center (SCLC)

Tobacco-Free Families Indicator:

- Topics:
 - Protecting children from secondhand smoke
 - Tobacco-free homes and cars
- 1 LTE per year
- Social Media Accounts to follow:
 - Campaign for Tobacco Free Kids
 - Breathe: Healthy Steps to Living Tobacco Free group on Facebook

Recommended Coalition Maintenance Activities

- Develop leadership structure and decision-making processes (bylaws) within the coalition.
- Schedule meetings at a regular time and place each month.
- Send coalition meeting notices and reminders in advance of the meeting each month.
- Share coalition meeting details (location, time) on coalition social media channels. Create Facebook events for upcoming coalition meetings.
- Prepare agendas and record minutes for each coalition meeting. Share minutes with members within one week of meeting.
- Ensure each meeting results in action items for coalition members to complete.
- Provide training to the coalition on topics relevant to the workplan and evidence-based tobacco control practices. (Reference CDC Best Practices.) This can include sharing news items, fact sheets, or other relevant pieces at each meeting that help educate the coalition on various aspects of tobacco control.
- Share the workplan with the coalition, discuss progress, and ask for their input and assistance on deliverables that interest them.
- Survey any new members to determine interests, skills and possible networks for outreach.
- Develop a coalition brochure or other coalition recruitment tool for prospective coalition members and partners.
- Develop a coalition newsletter and distribute among appropriate communication channels. Newsletters can include recent coalition activity, current events in tobacco control, goals for the year, guest article submissions, coalition member highlights, etc.

Recommended Resources

Coalition Roles and Job Descriptions:

http://coalitionsworld.com/wp-content/uploads/coalition_roles_and_job_descriptions.pdf

Coalition Bylaws:

<http://coalitionsworld.com/wp-content/uploads/Coalition-Bylaw-Contents.pdf>

Coalition Meeting Checkup:

http://coalitionsworld.com/wp-content/uploads/coalition_meeting_checkup.pdf

Coalition Member Survey:

http://coalitionsworld.com/wp-content/uploads/coalition_member_survey.pdf

Steps to Coalition Building & Developing the Team

Steps to Coalition Building

1. Identify the core group of tobacco control champions in your community. These are the people who are known to be passionate and committed to tobacco control and put aside their own agendas for the greater good.
2. Including non-traditional partners will help make your planning effort more representative as well as enlarge your base of support. Non-traditional partners will vary with each community and may include: youth, seniors, business leaders, people from different neighborhoods and population groups, and religious leaders.
3. Ask each person/group what they think they can bring to the effort – that is, what skill, perspectives, and resources they have to contribute. Learn how they want to be involved and how they will not/cannot be involved (e.g., some people cannot be part of any policy work).
4. Develop leadership structure and decision-making processes (bylaws) within the coalition.

Steps to Coalition Building & Developing the Team

Increasing the Diversity of Your Tobacco Control Team

Who else will help to make your planning efforts more representative of your community? Consider including people and organizations that you may not usually include in your planning efforts and programs. Including others will help to enlarge your base of support and bring additional resources to your tobacco control efforts. Use this chart to help you identify additional people and organizations and what each has to offer to your community's tobacco control efforts.

| | Person's Name and Organization | What they have to offer to the tobacco control efforts |
|--|--------------------------------|--|
| Youth-led groups | | |
| Youth Advocacy Organizations (ie: PTOs, PTAs, Boys Clubs, Girls Clubs) | | |
| Ethnic Specific Community Groups | | |
| Seniors | | |
| Business leaders | | |
| Religious leaders | | |
| Environmental groups | | |
| Drug prevention organizations | | |
| Survivor support groups | | |

Steps to Coalition Building & Developing the Team

| | Person's Name and Organization | What they have to offer to the tobacco control efforts |
|--|--------------------------------|--|
| Labor/employee unions | | |
| Restaurant owners | | |
| Neighborhood associations | | |
| Hospitals that serve the area | | |
| Local health departments | | |
| County nursing services | | |
| Local medical associations | | |
| Local dental associations | | |
| Other health care professionals | | |
| Law enforcement | | |
| Schools, including colleges and universities | | |
| Media | | |

Steps to Coalition Building & Developing the Team

| Person's Name and Organization | | | What they have to offer to the tobacco control efforts |
|--------------------------------|--|--|--|
| Parent groups | | | |
| Former tobacco users | | | |
| Others | | | |

Key Informant Interview Guide

Prospective Coalition Member

Purpose of the Interview:

Engage prospective coalition members in the community to come together and work on a comprehensive tobacco control effort.

Process for Setting up Interviews:

Contact the potential interviewee and request a one-hour meeting to complete the interview. At the time the interview is being scheduled, provide the interviewee with the following information:

- Name and explanation of your organization
- Describe your partnership with TPC
- Explain that the interviewee is seen as a prospective coalition member in the community and you believe they can provide valuable information related to comprehensive tobacco control.
- Tell the interviewee that the interview will take approximately 45 minutes
- Explain that specific answers will not be attributed to interviewees so they are comfortable that the information they share will be confidential
- Ask if they have any questions at this time

Preparing for the Interview:

- Bring state and local data on smoking
- Bring copies of basic fact sheets on burden of tobacco use
- Bring a coalition information page that includes:
 - Contact Information
 - Meeting Schedule
 - Coalition goals / strategic plan

Key Informant Interview Guide

Prospective Coalition Member

**What sector of the community does the prospective coalition member represent?
(ie. faith-based, school, business, medical)**

Name of Interviewee:

Position/Title:

Date Interviewed:

Interviewer:

I represent _____ and we work with Indiana Tobacco Prevention and Cessation (TPC) on tobacco control issues in our community. As I explained on the phone, we think that this is an excellent opportunity for us to gain a better understanding of your thoughts and ideas related to tobacco use prevention and cessation in our community. As a key public health leader, we value your input. We greatly appreciate you taking the time to meet with us.

[As you may know, smoking in our state/community is a critical problem (provide data). We are working to do everything we can to help Hoosiers quit smoking.]

- 1. What do you know about tobacco use in our community? (ie. smoking rates, local ordinances, school policies)**

- 2. How does tobacco use in the community impact you and your organization?**

Key Informant Interview Guide

Prospective Coalition Member

3. What are your personal experiences with tobacco or tobacco control?

4. What community events have you heard about or participated in that were sponsored by our tobacco control coalition?

5. What are some ways our local tobacco control coalition could assist you and your organization?

6. Are you interested in partnering with our coalition? What are you willing to do? Is there anything you are unable to do? (ie. legal restrictions)

7. Do you know anyone else who might be interested in participating in the coalition?

8. Other comments or suggestions?

Thank you for taking time for this interview. If you have additional questions or concerns, I can be reached at _____

Fundamentals for Strong Smoke-free Air Policies

The Indiana Model Smoke-free Ordinance is adapted from the Americans for Nonsmokers' Rights Model Ordinance which is developed in consultation with legal and policy subject matter experts, consulting the latest research and incorporating relevant case-study from the field. It is updated on a regular basis with the most recent version updated in 2019.

The purpose of passing a comprehensive smoke-free indoor air law is to fully protect employees, residents, and visitors from exposure to dangerous secondhand smoke in workplaces and public places. The only way to ensure everyone is protected no matter where they work is by implementing laws that are strong, simple, and fair and that apply to 100 percent of indoor workplaces including bars, restaurants, and casinos.

Sample Job Descriptions

TPC Local Youth Coordinator (VOICE Adult Ally):

Will be responsible for working ____ per week in the community, available to travel in-county and to other locations in the state several times per year for statewide training and meetings (See VOICE Calendar).

Will be responsible for overseeing the execution of activities for Priority Area 1 (Decrease Youth and Young Adult Tobacco Use Rates) and required deliverables for the following Indicators:

1. Middle and High School Prevention
2. Youth Empowerment/VOICE
3. Point-of-Sale

Responsibilities

- Managing and convening County-wide VOICE Core Leadership Team
- Youth coordinator will submit periodic electronic reports as required and respond to local and state needs for information as directed by the TPC Youth Program Director.
- Youth coordinator will be responsible for recruiting public schools selected to conduct the Youth Tobacco Survey in Fall 2022.
- Youth coordinator will recruit and organize a diverse group of individuals and organizational representatives of youth related organizations from the community.
- The coordinator will support the coalition to strategize action to reduce youth commercial tobacco use in the county through policy and programs.
- Expand reach by participating in local/regional/state community events, conferences and/or fairs within assigned geographic areas to promote VOICE programs, campaigns/initiatives, and services.
- Youth coordinator will commit to support youth engagement strategies and study CDC's Best Practices model in commercial tobacco control. The Youth coordinator will use proven, evidence-based actions to reduce commercial tobacco use and exposure to secondhand smoke, and to prevent commercial tobacco use in the community.
- Youth coordinator will accept training and technical assistance and fully participate in the local and statewide youth empowerment program and initiatives.

The ideal candidate should have:

- Leadership skills especially in the area of youth engagement
- Community organizing skills; experience recruiting and organizing volunteers
- Marketing and networking skills; experience with developing community relationships
- Familiarity with social media and online meeting platforms
- An understanding of public health principles and best practices
- The ability to work independently
- Excellent written and oral communication, including public speaking skills
- Passion for the youth empowerment model
- Passion for the pursuit of health equity for all

Sample Job Descriptions

TPC Local Program Coordinator:

- Will be responsible for working ____ per week in the community, available to travel in-county and to other locations in the state several times per year for training or meetings (see Lead Agency Profile Form).
- Physical lifting may be required for materials or AV equipment.
- Coordinator will submit periodic electronic reports as required and respond to local and state needs for information as directed.
- Coordinator will be responsible for recruiting public schools selected to conduct the Youth Tobacco Survey Fall 2022.
- Media responsibilities include developing partnerships with local news venues and providing accurate local, state, national and international information on tobacco control to the news media as is necessary for education of the public on tobacco issues.
- Coordinator will recruit and organize both individuals and organizational representatives from the community to form a coalition representing diverse interests and backgrounds.
- The coordinator will lead the coalition to strategize action to reduce commercial tobacco use in the county through policy and programs.
- Coordinator will fully engage community and coalition members, including specific task force groups, in the business of commercial tobacco control. For this purpose, coordinator is an excellent written and oral communicator. The coordinator will be able to work with healthcare providers, businesses, and other organizations to educate them about evidence-based commercial tobacco control practices, assist them with policy development and implementation, and collaborate with them with to increase referral and acceptance rates to the Indiana Tobacco Quitline.
- Coordinator will commit to study CDC's Best Practices models in commercial tobacco control. Coordinator will use proven, evidence-based actions to reduce commercial tobacco use and exposure to secondhand smoke, and to prevent commercial tobacco use in the community.
- Coordinator will monitor completion of activities contracted in the written work plan submitted with this proposal by the coalition of _____ County.

The ideal candidate should have:

- Leadership skills especially in the area of coalition building
- Community organizing skills; experience recruiting and organizing volunteers
- Marketing and networking skills; experience with developing community relationships
- Experience with media, policy advocacy, and/or political campaigns
- An understanding of public health and/or political science
- The ability to work independently
- Public speaking skills
- Basic computer skills

Other TPC positions:

Detail specific functions that support TPC tobacco control contract for positions paid with TPC funds: i.e. funds management (hours, review, and budget development), supervising (hours, face-to-face, and electronic communication).

Online Resource List

Tobacco and Health Data – County, State, and National Resources

Indiana Tobacco Data and Information:

- Indiana Tobacco Control 2020 Strategic Plan:
https://www.in.gov/isdh/tpc/files/2020%20Strategic%20Plan_PDF_FINAL.pdf
(2025 Strategic Plan soon to be released)
- TPC Fact Sheets: <http://www.in.gov/isdh/tpc/2341.htm>
- TPC County Pages – select county from drop-down menu: <https://www.in.gov/isdh/tpc/2350.htm>
- Data sources for County Pages:
https://www.in.gov/isdh/tpc/files/Data%20Sources%20for%20County%20Pages%2002_04_2020.pdf
- TPC Smoke-free communities maps and resources: <https://www.in.gov/isdh/tpc/2333.htm>
- Campaign for Tobacco-Free Kids – The Toll of Tobacco in Indiana:
<https://www.tobaccofreekids.org/problem/toll-us/indiana>

General Tobacco-related Information and Statistics:

- Centers for Disease Control and Prevention (CDC), Office on Smoking and Health
<https://www.cdc.gov/tobacco/>
- The Health Consequences of Smoking - 50 Years of Progress: A Report of the Surgeon General, 2014: https://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/#report
- Smoking Cessation: A Report of the Surgeon General, 2020:
https://www.cdc.gov/tobacco/data_statistics/sgr/2020-smoking-cessation/index.html

County-level health data:

- Indiana Indicators: <http://www.indianaindicators.org/>
 - Access county-level data through the “Community Dashboards”

Tobacco Control Best Practices

- CDC – Best Practices for Comprehensive Tobacco Control Programs, 2014:
https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf
- Tobacco Control Network (TCN): <http://tobaccocontrolnetwork.org/>
 - TCN - 2016 Policy Recommendations Guide: <http://tobaccocontrolnetwork.org/tcn-policy/#policy/>

Online Resource List – By Indicator

Priority Area: Decrease youth and young adult tobacco use rates

Indicator 1 – Middle and High School Prevention

- TPC – Highlights from the 2018 Indiana Youth Tobacco Survey https://www.in.gov/isdh/tpc/files/Highlights%20from%20the%202018%20IYTS_FINAL.pdf
- Smokefree.gov Smoke-free Teen site <https://teen.smokefree.gov/>
- Quit Now Indiana (Quitline website) www.quitnowindiana.com
 - Teen resources: www.quitnowindiana.com/teens
- E-cigarette resources on TPC website <https://www.in.gov/isdh/tpc/2340.htm>
- Truth Initiative – This Is Quitting/Become An Ex resource for quitting e-cigarettes https://truthinitiative.org/research-resources/quitting-smoking-vaping/quitting-e-cigarettes?utm_campaign=fb75ef3469&utm_source=Truth%20Initiative%20Mailing%20List
- SGR on E-cigarettes and Youth <https://e-cigarettes.surgeongeneral.gov/>
- SG advisory on E-cigarettes epidemic <https://e-cigarettes.surgeongeneral.gov/documents/surgeon-generals-advisory-on-e-cigarette-use-among-youth-2018.pdf>

Indicator 2 – Youth Empowerment/VOICE

- VOICE Indiana website <https://www.voiceindiana.org/>
- CDC’s Best Practices user guide: Youth Engagement <https://stacks.cdc.gov/view/cdc/5628>

Indicator 3 – Point-of-Sale

- Campaign for Tobacco-Free Kids - Tobacco Marketing to Kids Fact Sheets https://www.tobaccofreekids.org/facts_issues/fact_sheets/toll/tobacco_kids/marketing/
- CounterTobacco.org www.countertobacco.org
- TPC – Results from the 2018 Indiana Youth Tobacco Survey (see especially Section 5 – Youth Access and Purchasing and Section 8 – Tobacco Marketing) https://www.in.gov/isdh/tpc/files/2018%20Indiana%20IYTS%20Report_08_2019.pdf

Priority Area: Increase proportion of Hoosiers not exposed to secondhand smoke

Indicators 4, 5, 7, 8, 9 – Tobacco-Free Health Care Facilities, Worksites, Schools, Multi-Unit Housing, and Colleges and Universities

- TPC – Local Community Smoke Free Air Policy (maps and fact sheets) <http://www.in.gov/isdh/tpc/2333.htm>
- TPC – Indiana’s State Smoke Free Air Law <http://www.in.gov/isdh/tpc/2684.htm>
- TPC – Fact Sheets (See specifically Secondhand Smoke and Tobacco and the Workplace fact sheets) <http://www.in.gov/isdh/tpc/2341.htm>
- Americans for Nonsmokers’ Rights <http://www.no-smoke.org/>

Online Resource List – By Indicator

- Partnership for Prevention – Smoke-Free Policies: Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke in Indoor Worksites and Public Places
<http://chfs.ky.gov/nr/rdonlyres/16c97ad9-0f0a-4684-8465-5531cc49d30d/0/smokefreepolicies.pdf>
- Smoke-Free Housing Indiana <http://insmokefreehousing.com/>
- U.S. Department of Housing and Urban Development (HUD) – Smoke-Free Housing Toolkits
<https://portal.hud.gov/hudportal/HUD?src=/smokefreetoolkits1>
- Tobacco-free Campus - <http://tobaccofreecampus.org/>
- Student Commercial Tobacco Use in School – Alternative Measures, Public Health Law Center
<https://www.publichealthlawcenter.org/sites/default/files/resources/Student-Commercial-Tobacco-Use-in-Schools-Alternative-Measures-2019.pdf>

Priority Area: Decrease Indiana adult smoking rates

Indicator 11 – Quitline

- Quit Now Indiana (Quitline website) www.quitnowindiana.com
- CDC – Best Practices for Comprehensive Tobacco Control Programs (see Section III: Cessation Interventions)
https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf
- North American Quitline Consortium <http://www.naquitline.org/?page=whatisquitline>

Indicator 12 – Cessation Systems

- U.S. Public Health Service Clinical Practice Guideline for Treating Tobacco Use and Dependence
<https://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/references/quickref/index.html>
- CDC – Best Practices for Comprehensive Tobacco Control Programs (see Section III: Cessation Interventions)
https://www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf
- CDC – Academic Detailing: Frequently Asked Questions
https://www.cdc.gov/tobacco/quit_smoking/cessation/pdfs/academic-detailing-faq508.pdf
- CDC Behavioral Health Resource – *What We Know: Tobacco Use and Quitting Among Individuals with Behavioral Health Conditions* <https://www.cdc.gov/tobacco/disparities/what-we-know/behavioral-health-conditions/>

Indicator 13 – Employers

- TPC Fact Sheets – Tobacco and the Workplace <http://www.in.gov/isdh/tpc/2341.htm>
- CDC – Save Lives, Save Money: Make Your Business Smoke-Free
https://www.cdc.gov/tobacco/basic_information/secondhand_smoke/guides/business/
- TPC Employer Toolkit for Community Partnerships
https://gallery.mailchimp.com/e2ecfa3177b9b23ea13cde495/files/228e9f15-d895-4a7f-8310-fd7ec7c65d5e/Employer_Toolkit_final.pdf

Online Resource List – By Indicator

Priority Area: Protect and maintain a state and local infrastructure necessary to lower tobacco use rates

Indicator 14 – Coalition

- CDC – Coalitions: State and Community Interventions ftp://ftp.cdc.gov/pub/fda/fda/user_guide.pdf
- Community Tool Box – Coalition Building I: Starting a Coalition <http://ctb.ku.edu/en/table-of-contents/assessment/promotion-strategies/start-a-coalition/main>
- Community Tool Box – Coalition Building II: Maintaining a Coalition <http://ctb.ku.edu/en/table-of-contents/assessment/promotion-strategies/maintain-a-coalition/main>
- See also [Recommended Coalition Maintenance Activities](#) (page 11)

Indicator 15 – Marginalized Populations

- CDC – Health Equity in Tobacco Prevention and Control <https://www.cdc.gov/tobacco/stateandcommunity/best-practices-health-equity/pdfs/bp-health-equity.pdf>
- TPC – Fact Sheets on Marginalized Populations <http://www.in.gov/isdh/tpc/2341.htm>
- Disparity Impact Statement (Examples and Guidance):
 - Centers for Medicaid & Medicare Services: <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Disparities-Impact-Statement-508-rev102018.pdf>
 - Substance Abuse and Mental Health Services Administration: <https://www.samhsa.gov/sites/default/files/disparity-impact-statement-example-services.pdf>
 - Prevention Technology Transfer Center Network <https://pttcnetwork.org/media/1601>

Indicator 16 – Tobacco-Free Families

- Indiana Head Start: <https://www.in.gov/fssa/carefinder/2679.htm>
- Indiana Tobacco Quitline – kids’ asthma and smoking: <https://www.quitnowindiana.com/kids-asthma-smoking/>
- Indiana WIC Clinic locations: <https://www.in.gov/isdh/20424.htm>
- *Breathe: Health Steps to Living Tobacco Free* curriculum: <https://justbreathein.org/>

County-level Tobacco Data

| Table 1. | Population | | | Adult Smoking | | Smoking-related illnesses and deaths | |
|-----------------|---------------------------------------|--------------------------------------|--|--|--|---|---|
| County | Total population (2010 census) | Population under 18 years old | Population 18 years old and older | Estimated adult smoking prevalence, 2014-2018 | Estimated number of adult smokers | Estimated number of people living with a smoking-related illness | Estimated annual number of deaths due to smoking |
| Adams | 34,387 | 10,714 | 23,673 | 24.8% | 5,882 | 1,617 | 54 |
| Allen | 355,329 | 95,958 | 259,371 | 22.0% | 56,932 | 17,715 | 591 |
| Bartholomew | 76,794 | 19,360 | 57,434 | 24.0% | 13,804 | 3,923 | 131 |
| Benton | 8,854 | 2,284 | 6,570 | 33.8% | 2,221 | 449 | 15 |
| Blackford | 12,766 | 2,914 | 9,852 | 27.9% | 2,744 | 673 | 22 |
| Boone | 56,640 | 15,917 | 40,723 | 14.3% | 5,834 | 2,781 | 93 |
| Brown | 15,242 | 3,172 | 12,070 | 20.4% | 2,466 | 824 | 27 |
| Carroll | 20,155 | 4,957 | 15,198 | 14.3% | 2,180 | 1,038 | 35 |
| Cass | 38,966 | 10,093 | 28,873 | 30.1% | 8,702 | 1,972 | 66 |
| Clark | 110,232 | 26,109 | 84,123 | 22.9% | 19,232 | 5,746 | 192 |
| Clay | 26,890 | 6,441 | 20,449 | 21.5% | 4,404 | 1,397 | 47 |
| Clinton | 33,224 | 8,849 | 24,375 | 25.9% | 6,304 | 1,665 | 55 |
| Crawford | 10,713 | 2,495 | 8,218 | 34.1% | 2,805 | 561 | 19 |
| Daviess | 31,648 | 9,120 | 22,528 | 14.1% | 3,170 | 1,539 | 51 |
| Dearborn | 50,047 | 12,515 | 37,532 | 23.1% | 7,181 | 2,563 | 85 |
| Decatur | 25,740 | 6,560 | 19,180 | 15.4% | 5,773 | 1,310 | 44 |
| DeKalb | 42,223 | 11,136 | 31,087 | 26.2% | 5,029 | 2,123 | 71 |
| Delaware | 117,671 | 23,573 | 94,098 | 21.7% | 20,403 | 6,427 | 214 |
| Dubois | 41,889 | 10,669 | 31,220 | 15.1% | 4,704 | 2,132 | 71 |
| Elkhart | 197,559 | 56,175 | 141,384 | 19.2% | 27,091 | 9,657 | 322 |
| Fayette | 24,277 | 5,818 | 18,459 | 33.0% | 6,085 | 1,261 | 42 |
| Floyd | 74,578 | 17,931 | 56,647 | 21.5% | 12,153 | 3,869 | 129 |
| Fountain | 17,240 | 4,174 | 13,066 | 26.6% | 3,477 | 892 | 30 |
| Franklin | 23,087 | 6,033 | 17,054 | 19.7% | 3,367 | 1,165 | 39 |
| Fulton | 20,836 | 5,163 | 15,673 | 16.4% | 2,578 | 1,070 | 36 |
| Gibson | 33,503 | 8,145 | 25,358 | 18.0% | 4,557 | 1,732 | 58 |
| Grant | 70,061 | 15,169 | 54,892 | 30.8% | 16,928 | 3,749 | 125 |
| Greene | 33,165 | 7,883 | 25,282 | 28.4% | 7,193 | 1,727 | 58 |
| Hamilton | 274,569 | 82,938 | 191,631 | 9.9% | 18,927 | 13,089 | 436 |

County-level Tobacco Data

| Table 1. | Population | | | Adult Smoking | | Smoking-related illnesses and deaths | |
|-----------------|---------------------------------------|--------------------------------------|--|--|--|---|---|
| County | Total population (2010 census) | Population under 18 years old | Population 18 years old and older | Estimated adult smoking prevalence, 2014-2018 | Estimated number of adult smokers | Estimated number of people living with a smoking-related illness | Estimated annual number of deaths due to smoking |
| Hancock | 70,002 | 18,338 | 51,664 | 14.4% | 7,446 | 3,529 | 118 |
| Harrison | 39,364 | 9,307 | 30,057 | 22.0% | 6,604 | 2,053 | 68 |
| Hendricks | 145,448 | 39,908 | 105,540 | 13.4% | 14,099 | 7,208 | 240 |
| Henry | 49,462 | 11,044 | 38,418 | 25.9% | 9,946 | 2,624 | 87 |
| Howard | 82,752 | 19,585 | 63,167 | 30.3% | 19,145 | 4,314 | 144 |
| Huntington | 37,124 | 8,795 | 28,329 | 25.1% | 7,098 | 1,935 | 64 |
| Jackson | 42,376 | 10,416 | 31,960 | 21.9% | 6,998 | 2,183 | 73 |
| Jasper | 33,478 | 8,594 | 24,884 | 19.0% | 4,728 | 1,700 | 57 |
| Jay | 21,253 | 5,644 | 15,609 | 28.8% | 4,502 | 1,066 | 36 |
| Jefferson | 32,428 | 7,334 | 25,094 | 33.5% | 8,418 | 1,714 | 57 |
| Jennings | 28,525 | 7,530 | 20,995 | 30.8% | 6,473 | 1,434 | 48 |
| Johnson | 139,654 | 36,900 | 102,754 | 22.6% | 23,202 | 7,018 | 234 |
| Knox | 38,440 | 8,192 | 30,248 | 21.3% | 6,439 | 2,066 | 69 |
| Kosciusko | 77,358 | 19,817 | 57,541 | 24.9% | 14,330 | 3,930 | 131 |
| LaGrange | 37,128 | 12,806 | 24,322 | 21.5% | 5,236 | 1,661 | 55 |
| Lake | 496,005 | 127,273 | 368,732 | 21.3% | 78,698 | 25,185 | 839 |
| LaPorte | 111,467 | 25,382 | 86,085 | 29.0% | 24,986 | 5,880 | 196 |
| Lawrence | 46,134 | 10,872 | 35,262 | 28.3% | 9,964 | 2,408 | 80 |
| Madison | 131,636 | 30,389 | 101,247 | 27.9% | 28,244 | 6,915 | 231 |
| Marion | 903,393 | 226,505 | 676,888 | 22.3% | 150,621 | 46,232 | 1,541 |
| Marshall | 47,051 | 12,649 | 34,402 | 31.0% | 10,677 | 2,350 | 78 |
| Martin | 10,334 | 2,481 | 7,853 | 20.8% | 1,637 | 536 | 18 |
| Miami | 36,903 | 8,393 | 28,510 | 34.0% | 9,682 | 1,947 | 65 |
| Monroe | 137,974 | 22,471 | 115,503 | 20.3% | 23,426 | 7,889 | 263 |
| Montgomery | 38,124 | 9,139 | 28,985 | 19.8% | 5,725 | 1,980 | 66 |
| Morgan | 68,894 | 17,328 | 51,566 | 22.5% | 11,595 | 3,522 | 117 |
| Newton | 14,244 | 3,279 | 10,965 | 42.7% | 4,686 | 749 | 25 |
| Noble | 47,536 | 12,850 | 34,686 | 22.6% | 7,855 | 2,369 | 79 |
| Ohio | 6,128 | 1,300 | 4,828 | 29.1% | 1,404 | 330 | 11 |

County-level Tobacco Data

| Table 1. | Population | | | Adult Smoking | | Smoking-related illnesses and deaths | |
|-----------------|---------------------------------------|--------------------------------------|--|--|--|---|---|
| County | Total population (2010 census) | Population under 18 years old | Population 18 years old and older | Estimated adult smoking prevalence, 2014-2018 | Estimated number of adult smokers | Estimated number of people living with a smoking-related illness | Estimated annual number of deaths due to smoking |
| Orange | 19,840 | 4,887 | 14,953 | ** | ** | 1,021 | 34 |
| Owen | 21,575 | 5,011 | 16,564 | 30.6% | 5,061 | 1,131 | 38 |
| Parke | 17,339 | 3,713 | 13,626 | 26.0% | 3,538 | 931 | 31 |
| Perry | 19,338 | 4,143 | 15,195 | 22.0% | 3,339 | 1,038 | 35 |
| Pike | 12,845 | 2,880 | 9,965 | ** | ** | 681 | 23 |
| Porter | 164,343 | 39,921 | 124,422 | 21.1% | 26,235 | 8,498 | 283 |
| Posey | 25,910 | 6,138 | 19,772 | 25.1% | 4,964 | 1,350 | 45 |
| Pulaski | 13,402 | 3,198 | 10,204 | ** | ** | 697 | 23 |
| Putnam | 37,963 | 7,996 | 29,967 | 24.6% | 7,373 | 2,047 | 68 |
| Randolph | 26,171 | 6,383 | 19,788 | 20.0% | 3,963 | 1,352 | 45 |
| Ripley | 28,818 | 7,590 | 21,228 | 21.6% | 4,575 | 1,450 | 48 |
| Rush | 17,392 | 4,307 | 13,085 | ** | ** | 894 | 30 |
| Scott | 24,181 | 5,812 | 18,369 | 30.0% | 5,504 | 1,255 | 42 |
| Shelby | 44,436 | 10,845 | 33,591 | 20.1% | 6,762 | 2,294 | 76 |
| Spencer | 20,952 | 5,063 | 15,889 | 13.5% | 2,147 | 1,085 | 36 |
| St. Joseph | 266,931 | 65,851 | 201,080 | 21.1% | 42,412 | 13,734 | 458 |
| Starke | 23,363 | 5,696 | 17,667 | 29.8% | 5,272 | 1,207 | 40 |
| Steuben | 34,185 | 7,835 | 26,350 | 26.7% | 7,035 | 1,800 | 60 |
| Sullivan | 21,475 | 4,590 | 16,885 | 13.1% | 2,220 | 1,153 | 38 |
| Switzerland | 10,613 | 2,722 | 7,891 | 33.9% | 2,674 | 539 | 18 |
| Tippecanoe | 172,780 | 35,717 | 137,063 | 18.5% | 25,313 | 9,361 | 312 |
| Tipton | 15,936 | 3,703 | 12,233 | 15.6% | 1,906 | 836 | 28 |
| Union | 7,516 | 1,885 | 5,631 | ** | ** | 385 | 13 |
| Vanderburgh | 179,703 | 39,896 | 139,807 | 19.7% | 27,569 | 9,549 | 318 |
| Vermillion | 16,212 | 3,744 | 12,468 | ** | ** | 852 | 28 |
| Vigo | 107,848 | 23,049 | 84,799 | 23.9% | 20,268 | 5,792 | 193 |
| Wabash | 32,888 | 7,459 | 25,429 | 22.0% | 5,588 | 1,737 | 58 |
| Warren | 8,508 | 1,996 | 6,512 | 43.8% | 2,853 | 445 | 15 |
| Warrick | 59,689 | 15,431 | 44,258 | 18.6% | 8,235 | 3,023 | 101 |

County-level Tobacco Data

| Table 1. | Population | | | Adult Smoking | | Smoking-related illnesses and deaths | |
|-----------------|---------------------------------------|--------------------------------------|--|--|--|---|---|
| County | Total population (2010 census) | Population under 18 years old | Population 18 years old and older | Estimated adult smoking prevalence, 2014-2018 | Estimated number of adult smokers | Estimated number of people living with a smoking-related illness | Estimated annual number of deaths due to smoking |
| Washington | 28,262 | 7,126 | 21,136 | 25.5% | 5,396 | 1,444 | 48 |
| Wayne | 68,917 | 15,883 | 53,034 | 22.0% | 11,663 | 3,622 | 121 |
| Wells | 27,636 | 6,899 | 20,737 | 17.1% | 3,547 | 1,416 | 47 |
| White | 24,643 | 5,960 | 18,683 | 16.3% | 3,047 | 1,276 | 43 |
| Whitley | 33,292 | 8,183 | 25,109 | 18.4% | 4,618 | 1,715 | 57 |
| Indiana | 6,483,802 | 1,608,298 | 4,875,504 | 19.2%* | 936,097 | 333,000 | 11,100 |

*The statewide adult smoking prevalence estimate is for 2019 only and is not directly comparable to county-level estimates. See the [data source page](#) for additional information.

** Unstable estimate. Data not shown.

| Table 2. | Smoking during Pregnancy | | | | Secondhand Smoke (SHS) | |
|-----------------|------------------------------------|---|---|--|--|---|
| County | Number of live births, 2019 | Percentage of live births to mothers who smoked during pregnancy, 2019 | Estimated number of births affected by smoking, 2019 | Estimated cost of smoking-affected births, 2019 | Estimated number of deaths due to SHS, 2018 | Estimated cost of SHS due to medical costs and premature death, 2018 |
| Adams | 683 | 6.6% | 45 | \$ 61,110 | 9 | \$11.6 Million |
| Allen | 5299 | 8.5% | 453 | \$ 615,174 | 97 | \$120.3 Million |
| Bartholomew | 1036 | 15.2% | 157 | \$ 213,206 | 21 | \$26.0 Million |
| Benton | 109 | 24.8% | 27 | \$ 36,666 | 2 | \$3 Million |
| Blackford | 125 | 30.4% | 38 | \$ 51,604 | 3 | \$4.3 Million |
| Boone | 850 | 7.6% | 65 | \$ 88,270 | 15 | \$19.2 Million |
| Brown | 101 | 15.8%* | 16 | \$ 21,728 | 4 | \$5.2 Million |
| Carroll | 212 | 10.8% | 23 | \$ 31,234 | 6 | \$6.8 Million |
| Cass | 461 | 14.1% | 65 | \$ 88,270 | 11 | \$13.2 Million |
| Clark | 1414 | 10.8% | 153 | \$ 207,774 | 30 | \$37.3 Million |
| Clay | 318 | 20.1% | 64 | \$ 86,912 | 7 | \$9.1 Million |
| Clinton | 456 | 15.1% | 69 | \$ 93,702 | 9 | \$11.2 Million |
| Crawford | 123 | 23.6% | 29 | \$ 39,382 | 3 | \$3.6 Million |
| Daviess | 572 | 7.9% | 45 | \$ 61,110 | 9 | \$10.7 Million |
| Dearborn | 526 | 16.5% | 87 | \$ 118,146 | 14 | \$16.9 Million |
| Decatur | 291 | 23.7% | 69 | \$ 93,702 | 7 | \$8.7 Million |
| DeKalb | 547 | 17.9% | 98 | \$ 133,084 | 12 | \$14.3 Million |

County-level Tobacco Data

| Table 2. | Smoking during Pregnancy | | | | Secondhand Smoke (SHS) | |
|-----------------|------------------------------------|---|---|--|--|---|
| County | Number of live births, 2019 | Percentage of live births to mothers who smoked during pregnancy, 2019 | Estimated number of births affected by smoking, 2019 | Estimated cost of smoking-affected births, 2019 | Estimated number of deaths due to SHS, 2018 | Estimated cost of SHS due to medical costs and premature death, 2018 |
| Delaware | 1053 | 19.7% | 207 | \$ 281,106 | 32 | \$39.8 Million |
| Dubois | 532 | 10.7% | 57 | \$ 77,406 | 11 | \$14.2 Million |
| Elkhart | 3029 | 9.0% | 273 | \$ 370,734 | 54 | \$66.9 Million |
| Fayette | 245 | 22.4% | 55 | \$ 74,690 | 7 | \$8.2 Million |
| Floyd | 850 | 8.1% | 69 | \$ 93,702 | 20 | \$25.2 Million |
| Fountain | 184 | 15.8% | 29 | \$ 39,382 | 5 | \$5.8 Million |
| Franklin | 237 | 17.7% | 42 | \$ 57,036 | 6 | \$7.8 Million |
| Fulton | 242 | 20.7% | 50 | \$ 67,900 | 6 | \$7.1 Million |
| Gibson | 382 | 11.8% | 45 | \$ 61,110 | 9 | \$11.3 Million |
| Grant | 759 | 32.7% | 248 | \$ 336,784 | 19 | \$23.7 Million |
| Greene | 320 | 20.9% | 67 | \$ 90,986 | 9 | \$11.2 Million |
| Hamilton | 3682 | 2.0% | 73 | \$ 99,134 | 75 | \$92.9 Million |
| Hancock | 850 | 7.9% | 67 | \$ 90,986 | 19 | \$23.7 Million |
| Harrison | 408 | 14.0% | 57 | \$ 77,406 | 11 | \$13.3 Million |
| Hendricks | 1657 | 5.8% | 96 | \$ 130,368 | 40 | \$48.6 Million |
| Henry | 460 | 22.2% | 102 | \$ 138,516 | 14 | \$16.7 Million |
| Howard | 991 | 19.3% | 191 | \$ 259,378 | 23 | \$28.0 Million |
| Huntington | 389 | 18.3% | 71 | \$ 96,418 | 10 | \$12.6 Million |
| Jackson | 626 | 18.8% | 118 | \$ 160,244 | 12 | \$14.3 Million |
| Jasper | 363 | 15.7% | 57 | \$ 77,406 | 9 | \$11.3 Million |
| Jay | 297 | 17.5% | 52 | \$ 70,616 | 6 | \$7.2 Million |
| Jefferson | 389 | 24.2% | 94 | \$ 127,652 | 9 | \$11.0 Million |
| Jennings | 314 | 29.3% | 92 | \$ 124,936 | 8 | \$9.7 Million |
| Johnson | 1852 | 10.4% | 192 | \$ 260,736 | 38 | \$47.3 Million |
| Knox | 416 | 20.7% | 86 | \$ 116,788 | 10 | \$13.0 Million |
| Kosciusko | 949 | 14.3% | 136 | \$ 184,688 | 21 | \$26.2 Million |
| LaGrange | 739 | 6.1% | 45 | \$ 61,110 | 10 | \$12.6 Million |
| Lake | 5684 | 6.3% | 358 | \$ 486,164 | 135 | \$167.9 Million |
| LaPorte | 1175 | 18.6% | 218 | \$ 296,044 | 30 | \$37.7 Million |
| Lawrence | 505 | 25.9% | 131 | \$ 177,898 | 13 | \$15.6 Million |
| Madison | 1414 | 19.0% | 268 | \$ 363,944 | 36 | \$44.6 Million |
| Marion | 14045 | 8.4% | 1,184 | \$ 1,607,872 | 247 | \$305.8 Million |

County-level Tobacco Data

| Table 2. | Smoking during Pregnancy | | | | Secondhand Smoke (SHS) | |
|-------------|-----------------------------|--|--|---|---|--|
| County | Number of live births, 2019 | Percentage of live births to mothers who smoked during pregnancy, 2019 | Estimated number of births affected by smoking, 2019 | Estimated cost of smoking-affected births, 2019 | Estimated number of deaths due to SHS, 2018 | Estimated cost of SHS due to medical costs and premature death, 2018 |
| Marshall | 518 | 12.7% | 66 | \$ 89,628 | 13 | \$15.9 Million |
| Martin | 119 | 21.8% | 26 | \$ 35,308 | 3 | \$3.5 Million |
| Miami | 407 | 21.4% | 87 | \$ 118,146 | 10 | \$12.5 Million |
| Monroe | 1084 | 12.9% | 140 | \$ 190,120 | 38 | \$46.7 Million |
| Montgomery | 451 | 16.4% | 74 | \$ 100,492 | 10 | \$12.9 Million |
| Morgan | 741 | 16.5% | 122 | \$ 165,676 | 19 | \$23.2 Million |
| Newton | 143 | 16.1% | 23 | \$ 31,234 | 4 | \$4.8 Million |
| Noble | 632 | 14.1% | 89 | \$ 120,862 | 13 | \$16.1 Million |
| Ohio | 50 | 28.0%* | 14 | \$ 19,012 | 2 | \$2.1 Million |
| Orange | 238 | 25.2% | 60 | \$ 81,480 | 5 | \$6.7 Million |
| Owen | 216 | 19.0% | 41 | \$ 55,678 | 6 | \$7.3 Million |
| Parke | 193 | 11.4% | 22 | \$ 29,876 | 5 | \$5.9 Million |
| Perry | 180 | 23.3% | 42 | \$ 57,036 | 5 | \$6.5 Million |
| Pike | 133 | 18.8% | 25 | \$ 33,950 | 4 | \$4.3 Million |
| Porter | 1642 | 9.0% | 148 | \$ 200,984 | 45 | \$55.6 Million |
| Posey | 257 | 13.2% | 34 | \$ 46,172 | 7 | \$8.8 Million |
| Pulaski | 132 | 22.0% | 29 | \$ 39,382 | 4 | \$4.5 Million |
| Putnam | 368 | 18.8% | 69 | \$ 93,702 | 10 | \$12.8 Million |
| Randolph | 257 | 22.6% | 58 | \$ 78,764 | 7 | \$8.9 Million |
| Ripley | 382 | 16.8% | 64 | \$ 86,912 | 8 | \$9.8 Million |
| Rush | 201 | 15.9% | 32 | \$ 43,456 | 5 | \$5.9 Million |
| Scott | 276 | 26.4% | 73 | \$ 99,134 | 7 | \$8.2 Million |
| Shelby | 482 | 22.0% | 106 | \$ 143,948 | 12 | \$15 Million |
| Spencer | 217 | 11.1% | 24 | \$ 32,592 | 6 | \$7.1 Million |
| St. Joseph | 3437 | 8.7% | 298 | \$ 404,684 | 73 | \$90.4 Million |
| Starke | 265 | 19.6% | 52 | \$ 70,616 | 6 | \$7.9 Million |
| Steuben | 375 | 19.5% | 73 | \$ 99,134 | 9 | \$11.6 Million |
| Sullivan | 209 | 15.8% | 33 | \$ 44,814 | 6 | \$7.3 Million |
| Switzerland | 110 | 18.2%* | 20 | \$ 27,160 | 3 | \$3.6 Million |
| Tippecanoe | 2066 | 11.3% | 233 | \$ 316,414 | 47 | \$58.5 Million |
| Tipton | 152 | 11.2%* | 17 | \$ 23,086 | 4 | \$5.4 Million |
| Union | 99 | 20.2%* | 20 | \$ 27,160 | 2 | \$2.5 Million |

County-level Tobacco Data

| Table 2. | Smoking during Pregnancy | | | | Secondhand Smoke (SHS) | |
|-----------------|------------------------------------|---|---|--|--|---|
| County | Number of live births, 2019 | Percentage of live births to mothers who smoked during pregnancy, 2019 | Estimated number of births affected by smoking, 2019 | Estimated cost of smoking-affected births, 2019 | Estimated number of deaths due to SHS, 2018 | Estimated cost of SHS due to medical costs and premature death, 2018 |
| Vanderburgh | 2173 | 13.0% | 282 | \$ 382,956 | 49 | \$60.8 Million |
| Vermillion | 140 | 23.6% | 33 | \$ 44,814 | 4 | \$5.5 Million |
| Vigo | 1188 | 18.1% | 215 | \$ 291,970 | 29 | \$36.5 Million |
| Wabash | 323 | 18.0% | 58 | \$ 78,764 | 9 | \$11.1 Million |
| Warren | 75 | 9.3%* | 7 | \$ 9,506 | 2 | \$2.9 Million |
| Warrick | 618 | 9.1% | 56 | \$ 76,048 | 16 | \$20.2 Million |
| Washington | 331 | 13.6% | 45 | \$ 61,110 | 8 | \$9.6 Million |
| Wayne | 785 | 17.7% | 139 | \$ 188,762 | 19 | \$23.3 Million |
| Wells | 335 | 19.1% | 64 | \$ 86,912 | 8 | \$9.4 Million |
| White | 311 | 15.4% | 48 | \$ 65,184 | 7 | \$8.3 Million |
| Whitley | 377 | 12.5% | 47 | \$ 63,826 | 9 | \$11.3 Million |
| Indiana | 80,851 | 11.8% | 9,543 | \$ 12,959,394 | 1,770 | \$2.1 Billion |

*Unstable rate.

County-level Tobacco Data Data Sources and Methodology

Adult smoking prevalence

Indiana prevalence: Indiana Behavioral Risk Factor Surveillance System (BRFSS), 2019.

County-level prevalence: Indiana Behavioral Risk Factor Surveillance System (BRFSS), 2014-2018.

Note: County-level adult smoking prevalence estimates were calculated using combined landline and cell phone BRFSS data from 2014-2018. The statewide landline and cell phone weight was used to calculate county-level estimates. Because the statewide weight is based on the demographics of Indiana's statewide adult population, it may not reflect the demographics of individual counties. County estimates are suppressed when the relative standard error is greater than 30% or when there were fewer than 100 respondents in the county. For 2014-2018, six counties' estimates were suppressed. Because the county-level adult smoking prevalence estimates are based on different years of data (2014-2018) than the state and national estimates (2019 only), the county-level estimates should not be directly compared to the state or national data.

Estimated number of adult smokers

Calculated using the following formulas:

Indiana: (Indiana 2010 adult population)*(Statewide adult smoking prevalence from 2019 BRFSS)

County-level: (County 2010 adult population)*(County-level adult smoking prevalence from 2014-2018 BRFSS)

Deaths attributable to smoking

Source for statewide data: Centers for Disease Control and Prevention (CDC). *Best Practices for Comprehensive Tobacco Control Programs – 2014*. Atlanta: 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, 2014.

- Statewide estimated deaths attributable to smoking: 11,100 per year

County-level deaths attributable to smoking represent the county's pro-rata share of the statewide smoking-attributable deaths based on the county's 2010 adult population. Estimates are calculated as follows: (County 2010 adult population/Indiana 2010 adult population)*11,100

Smoking-related illnesses

Source: Centers for Disease Control and Prevention. Smoking & Tobacco Use: Fast Facts. Accessed December 18, 2018 from http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/. (Original source: U.S. Department of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*. Atlanta: 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, 2014.)

- According to the Centers for Disease Control and Prevention, for every person who dies because of smoking, at least 30 people live with a serious smoking-related illness.
- Statewide estimated tobacco-related illnesses are calculated by multiplying the statewide estimated number of tobacco related deaths (11,100) by 30.
- County estimates represent the county's pro-rata share of tobacco-related illnesses based on the county's 2010 adult population. Estimates are calculated using the following formula: (County 2010 adult population/Indiana 2010 adult population)*333,000

County-level Tobacco Data

Data Sources and Methodology

Smoking during pregnancy and births affected by smoking

Indiana State Department of Health, Vital Records. Natality Dataset, 2019.

Note: Smoking during pregnancy rates are from 2019 birth certificate data. Estimated number of births affected by smoking are calculated by multiplying the county-level smoking during pregnancy prevalence by the total number of live births in the county.

Cost of smoking-related births

Miller DP, Villa KF, Hogue SL, Sivapathasundaram D. Birth and first-year costs for mothers and infants attributable to maternal smoking. *Nicotine Tob Res.* 2001; 3(1):25-35.

Note: County-level costs of smoking-affected births are estimates based on 2019 birth certificate data. Costs are calculated by multiplying the estimated number of smoking-affected births by \$1,358 (the estimated cost per smoking-affected birth as calculated by Miller et al., [2001]).

Deaths due to secondhand smoke and economic burden of SHS

Source for statewide data: Lewis CK, Zollinger T. *Estimating the economic impact of secondhand smoke in Indiana in 2018*. Cynthia K. Lewis & Associates, LLC. 2020.

- Statewide annual estimated deaths attributable to SHS: 1,770
- Estimated annual economic costs of SHS in Indiana: \$2.1 billion (\$2,194,68,195)
- Estimates of county-level deaths attributable to SHS represent the county's pro-rata share of SHS-related deaths based on the county's 2010 total population and are calculated as follows: $(\text{County 2010 total population} / \text{Indiana 2010 total population}) * 1,770$
- Estimates of county-level economic costs due to secondhand smoke represent the county's pro-rata share of SHS-related costs based on the county's 2010 total population are calculated as follows: $(\text{County 2010 total population} / \text{Indiana 2010 total population}) * \$2,194,68,195$.

Note: Costs related to secondhand smoke include health care costs and costs due to premature death from diseases causally linked to secondhand smoke.

Population Data

All population counts used to calculate statewide and county-level estimates are from the 2010 U.S. Census. Statewide and county-level data are available from

http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPDP1&prodType=table.