

**Testimony**  
**Health Services Committee**  
**Tuesday, August 1, 2017**  
**North Dakota Department of Health**

Good afternoon, Chairwoman Lee and members of the Health Services Committee. My name is Krista Fremming and I am the Director of the Division of Chronic Disease for the North Dakota Department of Health (NDDoH). I am here today to provide testimony regarding the development of a statewide tobacco prevention and control plan that is consistent with the five components of the Centers for Disease Control and Prevention (CDC) *Best Practices for Comprehensive Tobacco Control Programs*.

Over the past three months, NDDoH tobacco program staff have been busy developing a new tobacco state plan in coordination with stakeholders and partners. Several meetings were held with partners including local public health units and other state/community organizations to solicit feedback on the direction of the state plan. Key informant interviews were conducted with partners, which provided detailed information on their perceptions of the strengths, weaknesses, opportunities and threats of the tobacco program.

Last week, the draft state plan was presented to a group of over 80 individuals. Strong consensus was obtained from these partners on the direction of the state plan and their roles within it.

The state plan is based on CDC *Best Practices for Comprehensive Tobacco Control Programs* and is organized into four goal areas: prevent initiation of youth and young adults; eliminate exposure to secondhand smoke; promote quitting tobacco use; and build capacity and infrastructure to implement a comprehensive evidence-based tobacco prevention and control program.

There are several objectives and strategies in the new state plan that are similar to the previous state plan. Key focus areas that will continue from the previous plan include:

- Educating the public and policymakers on the need to increase the price of tobacco products in order to decrease youth and adult smoking rates.
- Protecting North Dakota's statewide smoke-free indoor air law.
- Working with health systems to implement cessation protocols and referrals to NDQuits (the statewide phone/online cessation program).
- Delivering health communications messages that focus on changing social norms related to tobacco, although at a greatly reduced level from the previous biennium.
- Utilizing surveillance/evaluation to determine the effectiveness of the program.

New or expanded areas in the state plan include:

- Engaging youth at the local level in tobacco advocacy efforts.
- Increased collaboration with the North Dakota Department of Human Services on tobacco retailer compliance checks and cessation for the behavioral health population.
- Greater emphasis on implementing bi-directional referrals to NDQuits through electronic health records (EHRs) and sending updates back to primary care providers via the EHR.

The NDDoH is making final edits to the state plan, based on partner feedback from the strategic planning meeting held last week. The finalized state plan will be presented to this committee at a future meeting.

This concludes my testimony. I would be happy to answer any questions.