Testimony Health Services Committee Wednesday, October 30, 2013 North Dakota Department of Health

Good morning, Chairwoman Lee and members of the Health Services Committee. My name is Krista Fremming, and I am the Tobacco Prevention and Control Program Director at the North Dakota Department of Health (NDDoH).

Newspaper/Media Campaigns

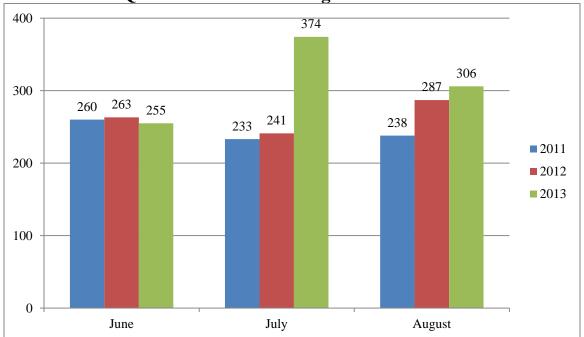
During the last Health Services Committee meeting in July, a recent newspaper campaign ran by the NDDoH was discussed. I have more information for you on the results of this campaign.

Historically, the NDDoH has not run paid television advertisements for NDQuits in the summer months because fewer people watch television when the weather is nice. NDQuits enrollment numbers have also been lowest during the summer months. In an effort to increase summer enrollment numbers, the NDDoH ran a newspaper and outdoor billboard campaign. The campaign ran from mid-June through July. The total cost of the newspaper campaign was \$455,360 and outdoor billboard campaign was \$12,247 for a total of \$467,607.

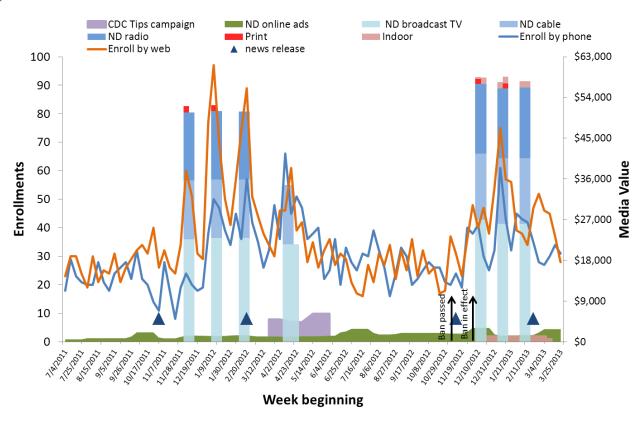
According to the North Dakota Newspaper Association, over 85 percent of North Dakotans read a local newspaper and each copy reaches about two readers. Of those ages 18-34, 83 percent read a local newspaper. These readers are much more likely than older readers to purchase newspapers from a news rack or store or to get a copy passed along to them. Younger readers are also more likely to subscribe to the electronic edition of the newspaper, which contains the same content as the print version.

The following chart outlines NDQuits summer enrollment numbers over the past three years. As you can see, there was a 47 percent increase in enrollments from June to July of this year. While we know that multiple factors influenced this increase, there is reason to believe that the newspaper and billboard campaigns played a large role.

Number of NDQuits Enrollments During Summer Months



In general, NDQuits enrollments are quite sensitive to media campaigns. The chart below shows media dollars spent and NDQuits enrollments over the same time period.



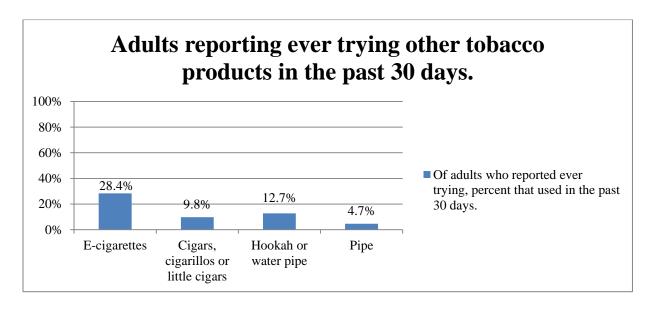
<u>Trends in Tobacco Products (Smokeless, Electronic Cigarettes, Alternative Products)</u>

We have data from 2011 and 2012 on adult tobacco use rates in the state. Because of the change in the Behavioral Risk Factor Surveillance Survey (BRFSS) and Adult Tobacco Survey (ATS) methodologies in 2011, we cannot compare data from before 2011.

North Dakota Adult Tobacco Use Rates (BRFSS)

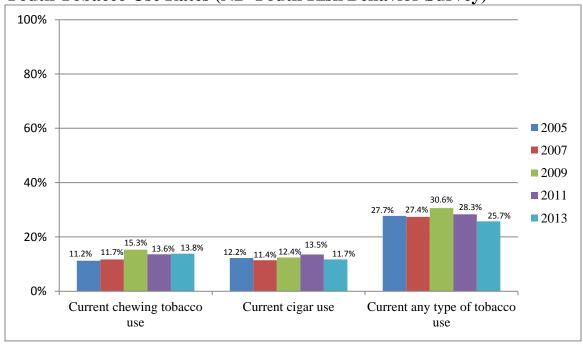
| All ND Adults | 2011 | 2012 |
|----------------------------|-------|-------|
| Smokeless Tobacco (chewing | 7.2% | 7.3% |
| tobacco, snuff or snus) | 1.270 | 7.570 |

2012 North Dakota Adult Tobacco Survey

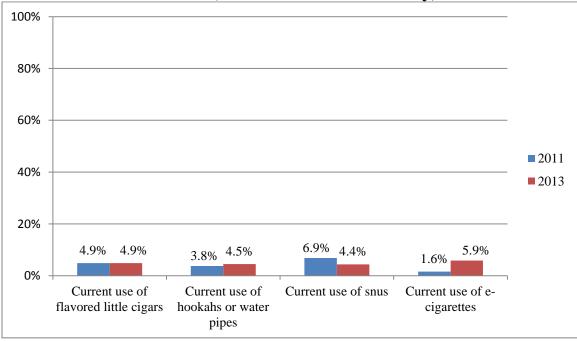


Chew, dip and snus continue to be the most popular choices of other tobacco products besides cigarettes in North Dakota. However, it will be increasingly important to monitor trends in use of other forms of tobacco, especially e-cigarettes.

Youth Tobacco Use Rates (ND Youth Risk Behavior Survey)



Youth Tobacco Use Rates (ND Youth Tobacco Survey)



Although overall youth tobacco use has decreased slightly among North Dakota youth, current chewing tobacco use has been trending upward and use of

e-cigarettes appears to be on the rise. Future surveys will show if this is a lasting trend. Until then, public education on e-cigarettes for both youth and adults is needed.

Over the past three years, approximately 9 percent of NDQuits participants were smokeless tobacco users. Although NDQuits provides assistance to all tobacco users, regardless of the type of tobacco used, we have not seen increases in the percentage of participants who use or want to quit e-cigarettes. The large majority of NDQuits members who reported e-cigarette use also reported using conventional cigarettes. This may be due to the widespread misunderstanding of the safety and efficacy of e-cigarettes, as well as the increased marketing and promotion of these products by the manufacturers. A large portion of the upcoming NDQuits media campaign will focus on reaching smokeless and dual tobacco users.

Program Funding by Focus Area

The 2013-15 NDDoH budget for Tobacco Prevention and Control Programs is as follows:

| | Total | \$5,544,251 |
|---|-----------------------------------|-------------|
| • | Administration and Management | 332,655 |
| • | Surveillance and Evaluation | 388,098 |
| • | Cessation | 3,880,976 |
| • | Health Communications | 0 |
| • | State and Community Interventions | \$ 942,522 |

NDDoH Cessation Programs

The NDDoH funds several cessation programs including NDQuits, NDPERS Tobacco Cessation Program, City-County Employee Cessation Program, and the Baby & Me – Tobacco Free Program. In fiscal year 2013, NDDoH cessation programs served 3,521 North Dakotans. The total cost to provide the programs during the same time period was \$1,543,614.

NDQuits has consistently exceeded national benchmarks in the quitting outcomes of its members. Data from FY13 shows that 31.2 percent of participants were abstinent from tobacco for 30 days or longer at the time of the follow-up survey seven months after enrollment.

To improve the outcomes of the Baby & Me-Tobacco Free Program, we have begun a partnership with the national program headquarters to collect and report the same data as other states that are implementing the program, so we are able to compare outcomes across the country.

The NDDoH also plans to work with NDPERS and Blue Cross Blue Shield on an enhanced evaluation of the NDPERS Cessation Program.

Tobacco Prevention and Control on North Dakota's Indian Reservations
The NDDoH provides funding and technical assistance to each tribe to implement tobacco prevention and control initiatives on each of the reservations. Each reservation has a Tribal Tobacco Prevention Coordinator, who is an enrolled member of the tribe. The primary objectives for each Tribal Tobacco Prevention and Control Program are:

- Evaluate readiness and implement tobacco taxes on reservations.
- Implement tobacco-free policies in public buildings, on school campuses and in tribal housing.
- Engage health-care personnel and tribal health stakeholders to manage chronic diseases adversely affected by tobacco use.
- Collaborate with the Northern Plains Tribal Tobacco Technical Assistance Center to educate Community Health Representatives using culturally-specific materials on motivational interviewing to assess tobacco use with their clients.
- Educate youth and the public on the dangers of commercial tobacco use.
- Educate reservation citizens on the dangers of secondhand smoke.
- Actively participate in the Intertribal Tobacco Abuse Coalition to coordinate statewide efforts to provide more effective tobacco prevention services and develop appropriate resources.
- Actively partner with Tribal Prevention Coordinators funded by the Department of Human Services to more effectively deliver prevention services.

This concludes my testimony. I will be happy to answer any questions you may have.