## **Tobacco Use Prevention**

2017 REPORT TO THE MINNESOTA LEGISLATURE



#### Tobacco Use Prevention: 2017 Report to the Minnesota Legislature

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PROTECTING, MAINTAINING AND IMPROVING THE HEALTH OF ALL MINNESOTANS

February 6, 2017

Dear Legislators:

Thanks to the collective efforts of Tobacco Use Prevention grantees and other partners in the state, many of them described in this report, adult smoking is declining and Minnesota continues to make steady progress in reducing youth tobacco use. This past October, new Minnesota Student Survey data showed our youth smoking rates at their lowest in state history.

It is clear our statewide efforts are working. We attribute the progress to policies such as Minnesota's comprehensive clean indoor air law, policies increasing the cost of tobacco, and laws that protect youth. We have also used Tobacco Use Prevention funds to harness the expertise and passion of local public health and community-based partners to positively impact thousands of Minnesotans.

However, tobacco use continues to be the leading preventable cause of death and disease. Smoking claims the lives of over 5,000 Minnesotans each year, and it costs Minnesota over \$3.2 billion each year in excess health care costs.

Furthermore, many communities are more likely to suffer the death and harms caused by tobacco. Our American Indian, African American, low income, as well as our lesbian, gay, bisexual, transgender, and queer (LGBTQ) populations, to name a few, all use tobacco at significantly higher rates. We are hopeful lessons learned from a 2016 statewide community input process will lead to new solutions and approaches that work for these communities.

Unfortunately, tobacco companies and e-cigarettes threaten to keep our kids hooked on nicotine. New student data shows that 1 in 5 Minnesota youth now smoke electronic cigarettes, twice the rate of combustible tobacco. Industry marketing tactics are continually changing and our efforts must adapt to keep pace. To respond to new threats, we must continue Tobacco Use Prevention funding. The tobacco industry already outmatches our tobacco prevention and control dollars 6-to-1 with industry promotion dollars. Research shows the more we invest in such programs, the greater and quicker our impact on reducing tobacco harms.

Minnesota is uniquely positioned to capitalize on this moment in the fight against tobacco. We are seeing the payoff of previous prevention efforts against smoking, and must use this momentum to address new and ongoing threats from e-cigarettes and smoking disparities related to race, income and geography. The Minnesota Comprehensive Tobacco Control Framework, 2016-2021, outlines bold steps we can take to move forward.

Looking back on Minnesota's half century of progress in tobacco prevention, I am optimistic we can build on our strengths and implement new approaches to protect our children, grandchildren and future generations from the devastating health and financial burdens caused by tobacco. Sincerely,

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Edward P. Ehlinger, MD, MSPH Commissioner P.O. Box 64975 St. Paul, MN 55164-0975 www.health.state.mn.us

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## **Executive Summary**

Minnesota has achieved great progress in reducing tobacco<sup>1</sup> use; both youth and adult smoking rates are at the lowest ever recorded in our state. However, tobacco control and prevention efforts must remain strong. While cigarette use has fallen dramatically overall, many Minnesota communities continue to use tobacco at significantly higher rates. Culturally appropriate, tailored, and community-led efforts are needed to close these gaps.

Additionally, new nicotine-containing products, like electronic cigarettes (e-cigarettes), are increasingly popular among youth with 2016 e-cigarette use rates



Results from the Minnesota Student Survey

now more than double that of conventional cigarettes. This surge in e-cigarette use by youth is particularly concerning as nicotine is highly addictive and has negative implications for adolescent brain development. Furthermore, Minnesota youth are continually exposed to e-cigarette marketing and promotions, many seeing on ads TV and where they shop in convenience and other stores.

Minnesota Statutes, section 144.396, Tobacco Use Prevention (TUP), supports efforts statewide to reduce tobacco's harm. TUP strengthens Minnesota communities' capacity to address tobacco use locally by funding a network of grantees and technical assistance and training organizations that work toward engagement and education efforts and policy, systems, and environmental changes.

In fiscal years 2015 and 2016 grantees made significant strides in protecting their communities. Together, they further restricted youth access tobacco products by updating and strengthening ordinances in 17 cities spanning from Farmington and St. Paul in the Metro, to Alexandria and Eagle Lake in Greater Minnesota. Collectively, this work has impacted nearly 690,000 Minnesotans.

Grantees have also worked to adopt and implement 120 smoke-free housing policies across the state, protecting nearly 8,500 people from exposure to secondhand smoke in their homes.

However, the work does not end here. To address tobacco-related disparities and inform tobacco prevention work moving forward, the Minnesota Department of Health engaged over 300 community members in a statewide community input process with over 17 in-person meetings to address the disproportionately higher rates of commercial tobacco use and secondhand smoke exposure among many Minnesota communities. Input was compiled into the *Community Voices: Reducing Tobacco-Related Health Inequities*<sup>2</sup> report, which highlights the need for culturally competent, tailored, and community-led efforts and provides recommended actions for future tobacco control work in Minnesota.

<sup>2</sup> Minnesota Department of Health. (2016). Community Voices: Reducing Tobacco-Related Health Inequities.

<sup>&</sup>lt;sup>1</sup> "Tobacco" refers to commercial tobacco products (cigarettes, cigars, chew, etc.) and not tobacco used for spiritual or ceremonial purposes.

http://www.health.state.mn.us/divs/hpcd/tpc/initiatives/input.html

## Overview

### Tobacco use continues to decline in Minnesota.

Both adults and youth in Minnesota are smoking less. In 2016, just 8.4 percent of 11 graders reported smoking cigarettes, compared to 12.2% in 2013; a 31% reduction.<sup>3</sup> Similarly, adults who smoke dropped by 35 percent since 1999; in 2014 just 14.4 percent of adults reported smoking.<sup>4</sup> These are the lowest smoking rates ever recorded in Minnesota.

## Tobacco prevention efforts must remain strong.



Results from the Minnesota Student Survey

Tobacco use is still the primary cause of

preventable death and disease, claiming the lives of over 6,300 Minnesota adults annually and incurring \$3.2 billion annually in medical costs.<sup>5</sup> Furthermore, nearly one in five non-smoking students is repeatedly exposed to secondhand smoke,<sup>6</sup> which causes early death and disease in both children and adults who do not smoke, and nearly 102,100 Minnesota youth are projected to die from smoking.<sup>5</sup>

### Many communities still use tobacco at higher rates.



disparities remain among populations historically targeted by the Tobacco Industry. The 2016 Minnesota Student Survey revealed American Indian, African American, Hispanic students, as well as students that identify as bisexual, gay, or lesbian, students experiencing severe economic hardship, and those that suffer from mental health and substance use disorders, continue to use tobacco at significantly higher rates.

Despite declines in tobacco use overall, significant

Results from the Minnesota Student Survey. Horizontal line of 8.4 percent is the statewide average.

<sup>&</sup>lt;sup>3</sup> Minnesota Department of Health. (2016). Minnesota Student Survey. http://www.health.state.mn.us/divs/chs/mss/

<sup>&</sup>lt;sup>4</sup> ClearWay Minnesota and Minnesota Department of Health. (2015). Tobacco Use in Minnesota: 2014. Minneapolis.

http://www.mnadulttobaccosurvey.org/

<sup>&</sup>lt;sup>5</sup> BlueCross and BlueShield of Minnesota. (2017). Health Care Costs and Smoking in Minnesota.

<sup>&</sup>lt;sup>6</sup> Minnesota Department of Health. (2014). Teens and Tobacco in Minnesota: 2014 Update. http://www.health.state.mn.us/divs/chs/tobacco/

## Culturally competent, tailored, and community-led efforts are needed.

The 2016 Community Voices report<sup>2</sup> affirmed the deeply embedded social norm about tobacco use in many communities. Often, tobacco products are widely available, easily accessible, and marketed to target specific communities. Additionally, tobacco use is often seen as a lesser threat compared to other issues that are reported as more serious or imminent. Communities are often best suited to identify and address their own tobacco-related needs and priorities.

The report also notes that when quitting, community members wish to use services that are provided by members of their own communities, which are not necessarily available. There is a shortage of culturally specific and language-appropriate tobacco-related outreach and education efforts and services, which contributes to misconceptions about tobacco. Culturally relevant and peer-to-peer messaging is most effective. Additionally, community-based organizations experience significant barriers in the grant process that funds much of Minnesota's tobacco work.

## E-cigarettes are increasingly popular among youth.

While the use of cigarettes, cigars, and smokeless tobacco have all declined, e-cigarettes are increasingly popular. Among youth, e-cigarette use is now more than double that of cigarettes.<sup>3</sup>

This new data is particularly alarming as most ecigarettes contain nicotine, which is highly addictive and may be damaging to adolescent brain development.<sup>7</sup> No amount of nicotine is safe for youth.



Results from the Minnesota Student Survey

## Tobacco marketing is persistent and pervasive.

Youth are continually exposed to tobacco marketing and promotions. While cigarette advertising hasn't been allowed on TV, radio or billboards for decades, e-cigarettes aren't subject to the same restrictions. Most Minnesota high school students have seen ads for e-cigarettes on TV in the past 30 days, while nearly half of high school students have seen ads in convenience stores and other stores.<sup>6</sup>

In Minnesota, tobacco prevention and control efforts are outmatched 6-to-1 by Tobacco Industry promotion dollars, which amounted to nearly \$156.3 million in marketing expenditures alone in 2013.<sup>8</sup>

<sup>&</sup>lt;sup>7</sup> Minnesota Department of Health. (2015, July 8). Health Risks of Nicotine for Youth. http://www.health.mn.gov/nicotine

<sup>&</sup>lt;sup>8</sup> Campaign for Tobacco-Free Kids. (2016, November 28). State-specific estimates of tobacco company marketing expenditures.

http://www.tobaccofreekids.org/research/factsheets/pdf/0271.pdf

### **Tobacco Use Prevention funding supports statewide prevention efforts.**

Minnesota Statutes, section 144.396, Tobacco Use Prevention (TUP), provides the funding for two grant programs, a system of statewide technical assistance and training, and special evaluation, and community engagement efforts. Grantees work to reduce tobacco's harm by implementing local tobacco control policies, systems, and environmental changes through a range of evidence-based strategies, while statewide technical assistance and training helps to build their capacity for doing the work. Additionally, special evaluation further measures tobacco's harm in our communities.

#### Tobacco Free Communities in Minnesota (9 Grantees)

- Retail environment restrictions
- Smoke-free housing
- Smoke-free child adult care
- Tobacco-free postsecondary campuses
- Tobacco-free outdoors
- Health systems changes for tobacco treatment

#### American Indian Grant Program (10 Grantees)

- Cessation programs
   implementation
- Health systems changes for tobacco treatment
- Cultural awareness and education activities
- Community smoke-free policies

#### Statewide Technical Assistance and Training (4 Grantees)

- Individual consultation
  Group trainings and peer learning
- Development of online resources and education materials

#### **Community Engagement**

- Community Partnership Meetings
- Community Voices, a community input process

## Tobacco Use Prevention's Community Impact

Tobacco Use Prevention funding makes possible the Tobacco Free Communities in Minnesota (TFC) and American Indian Grant Programs, as well as a network of statewide training and technical assistance. These programs provide capacity for a range of 27 organizations, including local public health agencies, community-based organizations, non-profit partners, and tribal governments and organizations, to engage and educate communities and work toward local solutions for reducing tobacco's harm.

## **Reducing youth access**

Grantees worked to reduce youth access to tobacco by updating and strengthening ordinances to restrict the sale and use of tobacco products in:

- 6 cities in the metro area: Coon Rapids, Farmington, Maplewood, Rosemount, St. Paul, Vadnais Heights.
- 11 greater Minnesota cities: Alexandria, Barrett, Brandon, Brooks, Eagle Lake, Lake Crystal, Lakefield, Oklee, Plummer, Red Lake Falls, and Wendell.
- 6 counties: Douglas, Kittson, Pope, Red Lake, Roseau, and Stevens.

Overall, updated tobacco ordinances have impacted more than 689,399 people across Minnesota.

## Protecting people from secondhand smoke

Grantees worked to create smoke- and tobacco-free environments, reducing exposure to harmful secondhand smoke. Working with property managers, colleges, counties and more, they achieved:

- 120 smoke-free housing policies across Minnesota, protecting over 8,478 people from exposure to secondhand smoke in their homes. Grantees focused on housing that impacts vulnerable populations, including those living in low-income or public housing.
- Over 2,062 subsidized or affordable housing units are now smoke free.
- Two colleges, Minnesota State University-Mankato and Macalester College, with strengthened tobacco-free post-secondary campus policies, helping to prevent tobacco initiation, reduce exposure to tobacco use, and promote a clean-air environment on campus for over 20,165 college students.
- 135 tobacco-free grounds and or events policies. These policies reach priority populations, such as youth and the LGBTQ community, protecting them from exposure to tobacco smoke.
- Six counties, Cottonwood, Steele, Traverse, Douglas, Pope and Olmsted counties, with a tobaccofree grounds policy at their public health building grounds.
- Six counties, Ramsey, Pope, Stevens, Marshall, Roseau, and Kittson counties, with updated clean indoor air ordinances that prohibits e-cigarettes wherever conventional cigarettes are used.

## Helping people quit

Grantees worked to reduce the number of people that smoke by working to improve the assessment of patient tobacco use and increase referrals to cessation support.

 Two TFC Grantees worked with 9 health systems to assess their tobacco cessation protocols with the goal to improve the assessment of patient tobacco use and provide cessation resources. These health systems serve patients with mental health conditions, patients who are East African, or youth who are at higher risk of tobacco and other drug use.

### Engaging and educating our communities

Grantees worked to educate and engage members of their communities through a multitude of activities, including meetings and presentations, as well as outreach communications via paid and earned media.

- Educated and engaged stakeholders through an estimated 1800 activities, including meetings, presentations, and outreach communications.
- Organized and distributed more culturally based programming, materials, and tobacco resources for grant work in the American Indian community.
- Provided culturally specific commercial tobacco prevention education and teachings to American Indian communities around sweat lodge ceremonies, singing and drumming, harvesting of plants and wild rice.

Additionally, MDH engaged over 300 community members in a statewide community input process to address the disproportionately higher rates of commercial tobacco use and secondhand smoke exposure among many Minnesota communities. Input was gathered through 17 in-person group sessions, individual interviews, and an online survey. Sessions were largely convened by region (rural and metro) and based on the populations most impacted by the harms of commercial tobacco, including: African American, American Indian, Asian American, East African, Hispanic/Latino, LGBTQ, and West African.

Findings from this process were published in a report *Community Voices: Reducing Tobacco-Related Health Inequities*, which can be viewed at <u>http://www.health.mn.gov/communityvoices</u>.

## **Building community capacity**

Technical assistance and training providers delivered a multitude of tools and resources to help grantees move forward in their local work.

- Provided 31,480 hours of technical assistance and training for communities.
- Received 3,400 individual technical assistance requests by phone, email, or training.
- Conducted 150 group trainings, webinars, and conference calls.

Produced or updated 50 pieces of informational material (guidance documents, fact sheets and handouts, toolkits, newsletters, signage, videos, sample power points and surveys, etc.)

## Tobacco-Free Communities in Minnesota (TFC)

TFC grantees include four nonprofit organizations and five local public health agencies working with community groups and coalitions to address tobacco-related health disparities. Grantees work to implement local tobacco control policy, systems, and environmental changes through a range of evidence-based strategies and promising practices. Working through local coalitions and community partnerships they build community awareness and conduct community education and media advocacy activities to support policy efforts.

Grantees work on evidence-based strategies that include: implementing retail environment restrictions, increasing the availability of smoke-free housing, implementing smoke-free policies for foster care or licensed childcare homes, increasing tobacco-free post-secondary campuses, increasing tobacco-free grounds and outdoor spaces, and increase access to tobacco treatment though health systems changes.

The TFC grant programs outline below ended in October 2016. A redesigned Tobacco-Free Communities Grant Program<sup>9</sup> launched in November 2016 with a new round of 11 community grantees whose progress will be described in future reports.

## East African Smoke-Free Program (WellShare International)

The East African Smoke-Free Program (EASFP) conducts community engagement and health education activities, trainings for community and religious leaders, and media advocacy efforts to change social norms and increase awareness about the dangers of tobacco use and exposure among Somali and East African communities. EASFP also works to increase smoke-free multi-unit housing and tobacco-free outdoor space policies.

#### Highlights

- Assisted in the implementation of 2 public housing buildings with a total of 640 units impacting about 1,600 residents to decrease secondhand smoke exposure and change social norms around tobacco use.
- Assisted in the adoption and implementation of tobacco-free grounds policies at 17 mosques and Somali- or East African-owned businesses and events to decrease secondhand smoke exposure and change social norms around tobacco use.
- Worked with 6 community clinics to conduct assessments of their tobacco cessation strategies and assess use of clinical practice guidelines.

EASFP also provided tobacco-specific education directly to middle-school and high-school youth through Metro Schools and the Young Achiever's after-school program. In 2015, these programs cultivated 20 Youth Tobacco Advocates. In June 2015, the Young Achiever's hosted an event including skits and poetry around tobacco use. Nearly 250 Somali and other East African youth attended the event, with several of

<sup>&</sup>lt;sup>9</sup> Minnesota Department of Health. (2016, November 2016). Tobacco-Free Communities Grant Program. http://www.health.mn.gov/tfc

the skits and presentations about the harms of tobacco. Many of these youth now approach their peers and family to further educate on the harms of tobacco and urge relatives to quit.

## Four Corners Partnership (Goodhue County Health and Human Services)

The Four Corners Partnership is a project of the local Public Health Services in Dodge, Goodhue, Rice and Steele counties. The project focuses on increasing the availability of smoke-free multi-unit housing and increasing tobacco-free outdoor spaces in the four-county area.

#### Highlights

- Assisted with the implementation of smoke-free policies for 20 multi-unit rental buildings with a total of 338 units, in which 294 are subsidized or affordable housing units.
- Provided assistance to the Steele County Fair Board to adopt and implement a smoke-free policy for the Steele County Free Fair, the largest county fair in Minnesota.
- Assisted with the adoption and implementation of 48 tobacco-free and smoke-free outdoor space policies that includes parks, recreational areas, fairgrounds and county grounds.

The Four Corners Partnership also worked with the Rice County Fair Board to help adopt and implement a tobacco-free fairgrounds policy, which took effect on May 17, 2016. The fairgrounds are used year-round for a variety of activities.

"I like having this policy in place to help make it a healthier environment for our youth and adults. Especially during fair week, it's nice to be able to walk around and not have to inhale the secondhand smoke that you may come across," said the 4-H Program Manager. "It also makes for a cleaner grounds with people not having the cigarette butts to throw on the ground when they are finished."

### **Olmsted County Public Health Services**

Olmsted County Public Health Services works with community organizations to update and strengthen local tobacco ordinances, increase tobacco-free ground policies for county grounds, and implement health systems change among mental health care clinics that include targeted cessation efforts and resources.

- Coordinated 11 tobacco-related workshops and trainings in Olmsted County for healthcare providers and professionals, such as social workers, school personnel, public health nurses, Licensed Drug and Alcohol Counselors, and educators. Over 100 health professionals attended these trainings, showing their great interest in these topics.
- Educated decision makers on the importance and health benefits of also prohibiting the use of electronic cigarettes in workplaces. On November 18, 2014, the Olmsted County Board of Commissioners unanimously passed amendments to the County Smoke-free Workplace Ordinance

to prohibit e-cigarette use wherever smoking is already prohibited. E-cigarette use is no longer allowed in public places, workplaces, outdoor dining and bar areas or patios.

Olmsted County Public Health Services also actively works with community agencies, programs, and providers working toward policy or systems for tobacco prevention, education, cessation and referral. The Von Wald Shelter, which houses approximately 150 youth residents annually, noticed many resident youth struggle with tobacco addiction. To help these youth, the Von Wald Shelter redesigned their health screening intake form to include tobacco-, dependence-, and cessation-specific questions. They trained staff to use the form and created a comprehensive program focusing on healthy lifestyles, good decision-making, and supports for those who use tobacco.

"My hope is that they will be empowered to stay tobacco free after leaving Von Wald after having made it through the first days, weeks, or months of withdrawal," said a youth worker who helped implement this change. "My plan is that we will come out of this with more knowledge and skills on how to approach youth about tobacco and hopefully push Von Wald staff to de-normalize teen tobacco use."

### **Quin Community Health Services**

Quin Community Health Services works across Kittson, Marshall, Pennington, Red Lake, and Roseau counties to implement policies to update and strengthen local tobacco ordinances, increase foster care and licensed child care homes and vehicles covered by smoke-free policies, and implement tobacco-free outdoor space policies.

#### Highlights

- Assisted 4 cities and 3 counties in updating their Tobacco Ordinances in which 2 counties also adopted Clean Indoor Air ordinances to reduce youth access and protect residents from secondhand smoke.
- Assisted with adopting and implementing 26 smoke-free policies for outdoors spaces such as city and county parks, public shelters, tennis courts, skating rinks and other recreational spaces.

Additionally, Quin Community Health Services spent the past three years educating local decision makers on the importance of tobacco-free outdoor spaces and parks in protecting children and youth from the harms of secondhand smoke and exposure to tobacco litter. While initially there was little awareness and support, the five-county community now has a number of knowledgeable decision makers who strongly support tobacco-free outdoor spaces for children and youth.

## Ramsey Tobacco Coalition (Association for Nonsmokers – Minnesota)

The Ramsey Tobacco Coalition comprises diverse youth-serving agencies, local public health, and schools, and works throughout Ramsey County and surrounding areas. The Coalition focuses on updating and strengthening local tobacco ordinances, assessing the availability and marketing of little cigars and other tobacco products, and increasing smoke-free multi-unit housing. The Coalition continues to educate the community on flavored tobacco, including menthol.

## Highlights

- Assisted Ramsey County Public Health with the enforcement of the Clean Indoor Air Ordinance and 25-foot setback (protected smoke-free area 25 feet from the entrance).
- Supported Macalester and the University of Minnesota in maintaining and enforcing 100% tobaccofree campus policies so more than 53,000 students can learn on campuses with less tobacco litter, less exposure to secondhand smoke, strong cessation support, and a diminished likelihood that they will become regular tobacco users. Macalester and the University of Minnesota are now known "Best Practices" examples for tobacco-free campus work.
- Assisted with the education and enforcement of strong tobacco licensing laws, in partnership with St. Paul Department of Safety and Inspections. Over 250 Saint Paul vendors received educational visits and materials with information on flavored tobacco restrictions, minimum price of cigars, child-resistant packaging, sign code, youth access, and self-service and tobacco license revocation penalties.

Additionally, youth serving community partners representing African American, Asian and Pacific Islander, Latino and GLBTQ communities attended over 10 community events highlighting the harm of flavored tobacco, including menthol. Events included the annual Rondo Day Celebration, 36<sup>th</sup> Annual Hmong International Celebration, and Community Peace celebration. In addition to community events, The Coalition conducted educational outreach in schools, in ethnic media, and via peer to peer education. They increased awareness and cultivated youth advocates who continue to work towards reducing tobacco industry influences in communities that are heavily targeted by the tobacco industry.

## Shift MN (Rainbow Health Initiative)

Shift MN works to counter pro-tobacco influences and change norms around tobacco use in lesbian, gay, bisexual, transgender and queer (LGBTQ) communities through community engagement, leadership development, and media advocacy. LGBTQ people smoke at higher rates than the general population in Minnesota, yet there is little information on how to best support and encourage LGBTQ people to attempt to quit. A lack of information and very few cessation resources that are clearly accessible and competent for LGBTQ people may prevent people from quitting. This program works on implementing tobacco-free policies among businesses, organizations, and events that serve LGBTQ young people, assessing tobacco use and knowledge among LGBTQ communities, and providing culturally-specific education and materials in partnership with other communities and grantees.

- Assisted with the adoption and implementation of 9 events policies, which included promoting a smoke-free event and prohibited tobacco sponsorship of the event. These events impacted more than 1,676 participants.
- Collected 1,288 completed surveys from LGBTQ Minnesotans for the 2016 Voices of Health Survey. The Survey focuses on overall LGBTQ health and also includes tobacco related questions such as questions about current smoking, ever smoking, and about using tobacco products other than cigarettes.

## Start Noticing (Des Moines Valley Health and Human Services)

Start Noticing is a coalition working in Cottonwood and Jackson counties that focuses on implementing policies to update and strengthen local tobacco ordinances, increase smoke-free multi-unit housing, increase tobacco-free outdoor spaces.

#### Highlights

- Assisted with the adoption and implementation of 39 smoke-free housing policies in Cottonwood County, Jackson County and nearby communities impacting 283 units in which 272 are subsidized or affordable units protecting about 707 people from the harms of secondhand smoke exposure.
- Assisted with Cottonwood County to make all their county and city parks and recreational areas smoke-free.

Additionally, Start Noticing celebrates a tobacco-free Jackson Motorplex. Since the mid-1950's, Jackson Motorplex has been a staple in dirt track racing. The newly renovated track has bleachers from other NASCAR facilities, and many parts of the facility came from Daytona and Richmond, VA speedways. The Motorplex has a wide fan base attracting attendees from Canada to Texas.

## **Tobacco-Free Greater Mankato (American Lung Association – Minnesota)**

Tobacco-Free Greater Mankato works in Nicollet and Blue Earth counties to update and strengthen local tobacco ordinances, increase smoke-free multi-unit housing, increase tobacco-free post-secondary campuses, and partner with residential mental health facilities to work toward system changes.

#### Highlights

- Assisted in the implementation of 51 smoke-free housing policies, covering 1453 units, with at least 434 of those units being subsidized or affordable housing. These policies protect more than 1085 residents from involuntary secondhand smoke exposure in their homes.
- Assisted the city of Lake Crystal in updating and strengthening tobacco ordinances to restrict the sale and use of tobacco products, including e-cigarettes, impacting over 2,500 people.
- Assisted the city of Lake Crystal in adopting an electronic cigarette indoor air ordinance to restrict the use of electronic cigarettes in any place the Minnesota Clean Indoor Air Act covers.

## **Tobacco-Free Horizon (Horizon Public Health)**

Tobacco-Free Horizon works across Douglas, Grant, Pope, Stevens, and Traverse counties to increase the availability of smoke-free multi-unit housing, update and strengthen local tobacco ordinances, and increase tobacco-free grounds and outdoor space policies.

- Assisted with the adoption of 5 point-of-sale policies, which include 3 updated county tobacco ordinances, 2 clean indoor air county ordinances, and 1 county policy revision on tobacco license fees.
- Assisted with adoption of smoke-free housing policies for 11 buildings. Provided education through multi-unit housing trainings for property managers, comprehensive paid media messages though billboards, social media, radio and local magazines and newspapers, an impact display with stories of those impacted by tobacco, and promotion of QUITPLAN<sup>®</sup> Services cessation resources.
- Assisted the Pope County Fair Grounds and Traverse County Government Grounds in going tobaccofree.

## American Indian Grant Program

The American Indian Grant Program provides a comprehensive approach to reducing commercial tobacco-related disparities among American Indians living in Minnesota by providing education and policy grant awards to tribal governments.

In Minnesota, tobacco use is highest in American Indian populations. The 2013 Tribal Tobacco Use Survey found 59 percent of American Indians in Minnesota smoke.<sup>10</sup> This program addresses the high prevalence of commercial tobacco use in tribal communities across the state by building strong, community-based tobacco control programs. Initiatives include cessation referral programs, systems changes, such as incorporating smoke-free policies in some community settings, and cultural awareness activities to educate community members about the harms of commercial tobacco. Many tribes are promoting healthy communities free of commercial tobacco and are growing Asema<sup>11</sup> for use as an offering, a gift, and for ceremonial use.

As required by the statute, some of these efforts are in coordination with our partners including ClearWay Minnesota<sup>SM</sup>. Additionally, the promising practice of passing tribal resolutions, laws, or policies that protect their members from tobacco smoke continues to spread throughout Minnesota's tribal communities.

### **Bois Forte Band of Chippewa**

The Bois Forte Band of Chippewa works to reduce commercial tobacco use among its members by educating them on healthier living. They involve the community in the development and implementation of tobacco messaging, engage community members in cultural education activities about the traditional use of tobacco, as well as provide smoking cessation referral services.

- Provided smoking cessation referral services.
- Engaged community members at presentations and educational booths hosted at health fairs and conferences.
- Assisted with project planning for an after school club where students learn language and participate in cultural activities.
- Hosted numerous events and activities to engage and educated families, including powwow wellness walks like the annual Couch Potato to 5k Walk/Run, the Healthy Family Fun Night event at Nett Lake School and Vermillion Boys and Girls Club, and a community walk and speaking event featuring Billy Mills in collaboration with our tribal radio station KBFT.

<sup>&</sup>lt;sup>10</sup> American Indian Community Tobacco Projects. (2013). *Tribal Tobacco Use Project Survey Report 2013*.

https://www.minnpost.com/sites/default/files/attachments/TTUPrpt.pdf

<sup>&</sup>lt;sup>11</sup> Asema is the word used for tobacco in the Ojibwe language. In the Dakota/Lakota language the word is can-sa-sa and in Ho-Chunk the word is da-nee

## Division of Indian Work (Greater Minneapolis Council of Churches)

The Division of Indian Work promotes the advancement of smoke-free policies in the Minneapolis American Indian community. They also work to decrease youth commercial tobacco use by providing education on spiritual use of tobacco, as well as engaging youth in cultural activities like wild rice harvesting, drumming and beading.

#### Highlights

- Assisted in the adoption and implementation of smoke free policies at 11 sites including the Minneapolis American Indian Center, Minnesota Indian Women's Resource Center, Minneapolis Indian Health Board, and the American Indian Community Development Corporation.
- Trained youth, as well as young adults in the Health Transition Program, in advocacy and presentation skills for participation in outreach activities regarding the dangers of secondhand smoke, commercial abuse of tobacco and traditional use of tobacco.
- Distributed educational materials made by American Indian youth at community events such as powwows, health fairs, school functions, family gatherings, etc.
- Partnered with Minneapolis Public Parks to conduct presentations on their ban on smoking on Minneapolis Park property during park events.
- Engaged Mashkiki youth to educate community members about the traditional use of tobacco, commercial abuse of tobacco and the effects of secondhand smoke at community events. Mashkiki youth gathered community support for restricting smoking in Minneapolis Public Parks by having community members sign a petition. Mashkiki also partnered with the American Indian-focused Freedom School in the summer of 2016 to educate students and families about the dangers of commercial tobacco use.

## Fond du Lac Band of Lake Superior Chippewa

The Fond du Lac Band of Lake Superior Chippewa administers a clinic-pharmacy tobacco cessation program. The TFC grant provides culturally specific education and outreach activities about the cultural teachings traditional tobacco and the hazards of commercial tobacco use. Additionally, they plan and implement activities to prevent and reduce the misuse of tobacco and decrease exposure to secondhand smoke. Recently, the Fond du Lac Reservation Business Committee voted for smoke-free foster care homes and vehicles.

- Participated in community events including Thirteen Moons Pow Wow, Veterans Pow Wow, and "Ziigwan" Spring Celebration which reached over 3000 people.
- Collaborated with Lincoln Park Community Center for Kick Butts Day 2016, and also organized Great Native American Smoke Out events to encourage people to quit commercial tobacco. They have also started planning and organizing cultural events around traditional tobacco for youth.
- Collaborated with clinic and pharmacy staff to implement I Quits program for tobacco cessation, and provided individuals with smoking cessation services through referrals to the Fond du Lac clinic.

### Grand Portage Band of Lake Superior Chippewa

The Grand Portage Band of Lake Superior Chippewa works to decrease commercial tobacco within their community by providing smoking cessation referral services, engaging members in cultural education, activities around the traditional use of tobacco, and by planning and implementing activities that will help their community members live healthy lives.

They train their members to be advocates for a healthier community.

#### Highlights

- Held a community gathering for World No Tobacco Day.
- Started a smoking support group for community members.
- Helped implement a smoking ban within the powwow grounds and tribal government offices.

### Leech Lake Band of Ojibwe

The Leech Lake Band of Ojibwe promotes healthy communities by providing cultural education and prevention activities to Leech Lake youth. These youth conduct assessments of the readiness of pow-wow goers to accept the designation of smoke-free areas with the goal of implementing a smoke-free policy for at least one major community powwow.

#### Highlights

- Created and facilitated youth councils in each reservation community.
- Worked to integrate cultural teachings of asemaa (traditional tobacco) use and offerings into youth traditional activities of finding and making ricing poles and harvesting wild rice.
- Facilitated drum and dance activities in communities with five elders and area youth, where 80
  percent of the youth stepped up to make a commitment to stay drug, alcohol and commercial
  tobacco free.

### **Lower Sioux Indian Community**

The Lower Sioux Indian Community works on decreasing commercial tobacco within the community by engaging its members in cultural education and outreach activities, such as powwows, health fairs, annual diabetes awareness events, drum groups, and boxing practice. The Lower Sioux Indian Community also trains youth to promote smoke-free spaces in many settings, which has led to the Lower Sioux casino, Jackpot Junction, becoming smoke-free in all non-gaming areas of the facility.

- Facilitated programs to educate youth on tobacco use in their community and cultural American Indian ways and engaged them through workshops, camps, and classes.
- Organized and facilitated programs such as health fairs and workshops, to provide education and prevention resources to the American Indian community; reaching over 400 people.
- Sponsored a commercial tobacco-free Veterans Wacipi "Powwow" at Jackpot Junction Casino.

## Ninijanisag Tobacco Prevention Program (Ain Dah Young Center)

The Ninijanisag (Our Children) Tobacco Prevention Program works with youth to decrease the harms of non-traditional tobacco use by engaging them in cultural teachings centered in the traditional use of tobacco, health education, leadership and advocacy development.

#### Highlights

- Worked with Ninijanisag youth to help plan and facilitate the 6th Annual Tobacco Prevention and Wellness Symposium, attended by nearly 235 youth from around the state, which included several breakout sessions on diabetes, cardiovascular disease and tobacco prevention, as well as numerous fitness contests and wellness activities.
- Worked with youth to hold tobacco prevention booths at numerous powwows, including the annual Cherish the Children Powwow (attended by nearly 2,400 people) where youth also gave public service announcements regarding the sacredness of tobacco and the importance of smoke-free environments.
- Engaged youth in numerous traditional ceremonies and activities including Big Drum, Midewiwin, Tokala, and Water ceremonies, as well as two sundances, 18 sweats, 48 drum and singing groups, 29 medicine harvesting and planting groups and garden teachings, 20 American Indian Magnet School groups focused on tobacco prevention, and 85 groups through their emergency shelter (including Maawanji-idiwag).

## **Prairie Island Indian Community**

The Prairie Island Indian Community (PIIC) works to promote cultural awareness and revitalization as a form of commercial tobacco prevention and reduction. PIIC has made great strides in restoring important cultural plants across the land and within the community, thus working towards restoring cultural ties to the land and its medicines. PIIC also provides education through various outreach events, its Elder's Cultural and Medicinal Garden, and the community's Health Clinic on tobacco cessation and tobacco uses among American Indians.

#### Highlights

- Planted over 1,100 culturally significant plants on Earth Day to restore Prairie Island.
- Conducted tours and workshops out of the Elder's Cultural and Medicinal Garden teaching language, culture, medicines, and the use of traditional tobacco for ceremonial purposes; reaching over 150 people.
- Distributed culturally specific tobacco cessation education materials through the community's Health Clinic, annual health fair, and other outreach events; reaching over 175 community members.

## Mille Lacs Band of Ojibwe

The Mille Lacs Band of Ojibwe works to decrease commercial tobacco use within the community by engaging its members in cultural education and outreach activities about the traditional use of tobacco

which includes growing tobacco (asema), powwows, health fairs, and their community newsletter. Mille Lacs Band of Ojibwe also supports a clinic-pharmacy tobacco cessation program.

#### Highlights

- Assisted in adopting a smoke-free policy for the Mille Lacs Band Traditional Powwow arena.
- Hosted tobacco education events in all districts at community meetings and local school events.
- Ensures ongoing smoking cessation services are offered at clinics in all districts.
- Created a youth asema coloring book, in collaboration with Spiritual leaders, as well as Ojibwe bingo game to promote language, culture and education on traditional tobacco.

The Mille Lacs Band of Ojibwe also passed a 25-foot no-smoking policies in all the Health and Human Services buildings, as well as a no smoking policy for their State of the Band Address.

## **Red Lake Band of Chippewa**

The Red Lake Band of Chippewa Indians provides culturally specific services to their members, as well as cultural education activities at their annual diabetes prevention conference, annual teen health fair, and Smart Girl's program (youth sharing stories). At their employee health fair they provide education on the dangers of secondhand and third-hand smoke. The Red Lake Band of Chippewa Indians also trains youth to promote smoke-free policies in a variety of settings, which led to a smoke-free policy for all Boys and Girls Club events, including adult softball tournaments and a highly visible golf tournament.

#### Highlights

- Completed the "Freshstart" Smoking Cessation Facilitator Training.
- Delivered Commercial Tobacco Prevention education materials to schools.
- Provided pamphlets and updated materials to area tribal programs for smoking cessation and smoke-free homes and cars materials.
- Engaged community members by presenting at Red Lake Comprehensive Health Services's Wellness Camps and Annual Health Fair.

## **Upper Sioux Community**

The Upper Sioux Community provides cultural tobacco education at events like their Suicide Prevention community event, health fairs, and powwows. This Upper Sioux Community is also developing an incentive to quit program.

- Assisted in the implementation of a smoke-free policy including tribal vehicles, casino offices, as well as a policy which prohibits smoking within 25 feet of Tribal office buildings and community playgrounds.
- Facilitated or participated in 10 events, including a Youth Lock-In, the 2013 Health Fair, as well as multiple powwows; reaching nearly 1000 people.
- Provided 25 unique individuals with smoking cessation services through referrals to quitline support.

The Upper Sioux Community also worked to acquire two 12x36 "Sacred Medicine Shelters". These shelters will be used to process sacred medicines and host cultural education events for the passing on of traditions, stories and knowledge, and restoring generational teachings within the community. Culture is prevention and is key to rebuilding a healthier, self-reliant community for generations to come.

### White Earth Nation

The White Earth Nation has a vibrant tobacco coalition implementing and updating smoke-free policies at White Earth Nation. White Earth Nation's public health program also supports a clinic-pharmacy tobacco cessation program by assisting with follow-up patient calls for smoking cessation as well as referring people to the Indian Health Tobacco Cessation Program. The White Earth Nation also works to create tobacco-free environments by actively engaging youth and parents to be involved in tobacco-free efforts.

- Collaborates with Indian Health Services clinic to provide cessation follow up calls to patients.
- Assisted in the implementation of a smoke-free break room policy at the Shooting Star Casino.
- Assisted in the adoption of a smoke-free park policy in the city of Mahnomen and Callaway.
- Presented informational displays and provided one-on-one meetings at American Indian events, conferences, and powwows, including the State of the Band event and the Festival of Fathers and Families Event, reaching nearly 2,500 people.
- Expanded smoke-free hotels at Shooting Star Casino and Event Center and, long term, are aiming to make all hotel rooms 100% smoke free.
- Strengthened Indian Health Clinic and grounds policy, further restricting smoking to at least 50 feet away from entrances.
- Strengthened tribal building and grounds policies, posting additional signage and encouraging staff to smoke off grounds, with designated smoking areas located across the street.

# Statewide Technical Assistance and Training Grants

The Technical Assistance and (TA) Training grants help build capacity and skills of our other local and community grantees. This infrastructure is critical to achieving the goals of local grant programs as it is designed to address specific grantee needs, emerging tobacco control issues, and foster regional and statewide collaborations and partnerships. TA and training is central to the success of the local grants program and provides critical policy, systems and environmental change expertise for strategy implementation.

TA and training is provided for tobacco control best practices including smoke-free housing, tobaccofree outdoor spaces and event, worksites, schools, child care, and foster care, as well as point of sale strategies. TA and training is also provided on foundational skills, such as education on tobacco industry tactics, tobacco use disparities, community and youth engagement, media and communications, policy development, and leadership. TA and training is provided through individual consultation, group trainings, peer learning, online resources, as well as providing educational materials for both grantees and the general public. Individual consultation includes one-on-one conversations, email, or video conferencing. Group trainings are conducted through conference calls, webinars, lunch-and learns, presentations or workshops. Resources are developed for tobacco-specific strategies, as well as general policy or skills development. In addition, TA and training providers assist grantees in developing community-specific and culturally tailored resources, as needed.

Four TA and training providers assist grantees statewide, serving 50 local public health departments and community grantees, totaling 31,480 hours of TA and training to grantees. Additionally, 3,400 individual TA requests were processed through phone, email, or training.

## **Public Health Law Center**

The Public Health Law Center (PHLC) provides technical assistance and training to grantees working on a range of tobacco prevention and control strategies. PHLC created several helpful guides, fact sheets, tips and tools, toolkits, reports, trainings, and webinars that support the achievement of statewide health improvement goals.

#### Highlights

 Responded to a large volume of individual requests for technical assistance (TA) and provided grantees and partners with the depth and breadth of knowledge needed in a simple, understandable manner.

- Updated one of its seminal publications, Tracking Tobacco Laws,<sup>12</sup> a definitive digest of major tobacco-related laws and regulations in Minnesota, including overviews of federal laws, state statutes and regulations, and other legal restrictions on the tobacco industry.
- Developed the first pieces of the Minnesota Point-of-Sale Policy Toolkit,<sup>13</sup> which provides practical, Minnesota-specific information on local retail tobacco licensing and point-of-sale options to assist grantees with retail licensing initiatives.

### **Association for Nonsmokers – Minnesota**

The Association for Nonsmokers – Minnesota (ANSR) provides statewide technical assistance that includes community assessment, coalition development, community engagement and best practices. ANSR provides grantees with the TA and training necessary to educate the community about the tobacco industry's tactics to attract new consumers and maintain existing users.

#### Highlights

- Developed the Stop Sales to Minors<sup>14</sup> tobacco retailer training, an online tobacco vendor training that covers state and federal laws about the sale of tobacco. Stop Sales to Minors is available in English, Somali, and Spanish and provides an alternative to a tobacco industry-developed program. Grantees can use the training as a supporting resource to their point-of-sale work.
- Coordinated local media efforts among grantees, employing various paid media like TV, radio, billboards, transit, print and digital media. ANSR worked with grantees use of existing media campaign materials to lower costs and extend placement value for the grantees, while also tailoring efforts to the needs of their local communities.
- Increased collaboration among grantees working on smoke-free housing initiatives. ANSR led collaborative activities using both monthly in-person meetings and an online forum to coordinate outreach to management companies, share housing-related information, and partner on educational activities like lunch and learns.

### **American Lung Association of the Upper Midwest**

American Lung Association of the Upper Midwest (ALA) provides technical assistance and training on foundational skills, as well as strategy specific guidance. In addition, ALA staff has on-the-ground experience working on tobacco prevention and control issues across the state, notably in Greater Minnesota communities, and a wealth of "lessons learned" to share with grantees. They offer expertise in tobacco cessation best practices in the community setting and system changes in the health care setting.

<sup>&</sup>lt;sup>12</sup> Public Health Law Center. (2016, June). *Tracking Tobacco Laws*. http://www.publichealthlawcenter.org/sites/default/files/resources/tclc-tracking-tobacco-laws-2016.pdf

<sup>&</sup>lt;sup>13</sup> Public Health Law Center. (2016). Minnesota Tobacco Point-of-Sale Policy Toolkit. http://www.publichealthlawcenter.org/MNPOS

<sup>&</sup>lt;sup>14</sup> Association for Nonsmokers - Minnesota. (2016). Free Online Training on State and Federal Tobacco Laws. http://www.stopsalestominors.org/

#### Highlights

- Provided training and technical assistance to grantees representing all areas of the state.
- Responded to nearly 900 requests for support by grantees and other organizations working on tobacco policy, most of which were related to point-of-Sale (41%), tobacco cessation (14%), smokefree housing (13%), and smoke-free workplace (13%).
- Facilitated monthly point-of-sale networking calls inclusive of MDH, ClearWay Minnesota<sup>SM</sup>, and Blue Cross and Blue Shield of Minnesota grantees working at any phase of point of sale policy work. Attendance ranged from 15 to 30 participants per call, and each call included sharing of policy successes, barriers and requests for support from statewide organizations. Monthly POS calls were frequently mentioned by grantees as being valuable.

ALA also provided eight day-long trainings attended by 650 individuals. Trainings included: Dr. Williams Day 1: Tobacco Use and Recovery Among Individuals with Mental Illness or Addition; Dr. Williams Day 2: Working with Low Motivated Smokers using the Learning about Healthy Living Approach; Freedom from Smoking; Pharmacotherapy; and Motivational Interviewing.

## **Counter Tools**

Counter Tools provides grantee web based interactive tobacco retailer mapping and store-auditing tools to aid in community assessment and to visually present the tobacco problem to the community. It is associated with CounterTobacco.org, which is a Centers for Disease Control and Prevention (CDC) funded website with information and resources for organizations working to counteract tobacco product sales and marketing at the point-of-sale.

- Developed the Minnesota Point-of-Sale Implementation Guide, which provides a set of recommendations on implementing point-of-sale work. Three data sources inform this strategic report: current and past tobacco control work in Minnesota, global tobacco control empirical evidence, and state- and local-level implementation case studies.
- Successfully trained 70 participants at a March 2016 Point-of-Sale Training. Participants were trained in software tools and provided specific next steps and overall goals to work toward. This in-person training was followed by a series of webinars on specific topics and processes related to the software tools.

## Community Engagement

## **Community Partnership Meetings (Side by Side Associates)**

Side by Side Associates in collaboration and consultation with MDH staff provided group facilitation for two community partnership meetings with state partners and community members. The meetings were designed as listening sessions to engage the community and identify tobacco-related health needs and opportunities in the African, African American, Asian, American Indian and Latino communities and the gay, lesbian, bisexual and transgender communities. This feedback is used in planning future tobacco-related programs and initiatives.

## **Community Voices: Reducing Tobacco Related Disparities**

In 2015, with the assistance of The Improve Group and DeYoung Consulting, MDH initiated the Community Voices input process to address the disproportionately higher rates of commercial tobacco use and secondhand smoke exposure among many of our communities.

This process involved extensive engagement and outreach strategies to build and strengthen relationships with partners and communities, contribute to building mutual capacity, and support effective community-specific efforts. From July 2015 to January 2016, input was



gathered from over 300 community stakeholders through in-person group sessions, individual interviews, and an online survey. Sessions were largely convened by region (rural and metro) and based on the populations most impacted by the harms of commercial tobacco, including: African American, American Indian, Asian American, East African, Hispanic/Latino, LGBTQ, and West African.

After the input process, a final report was compiled that includes input from community stakeholders on the harms of commercial tobacco, approaches to decrease commercial tobacco use and exposure, and strategies to address tobacco-related health inequities. It also includes findings and opportunities for action based on the input gathered. Recommendations from the project's advisory committed include the following:

- Use a health equity lens in all tobacco prevention and control work. This lens should include consistent use of several questions that address who is involved in advocacy and decision making.
- Tobacco prevention and control should be framed as a social justice issue, taking into consideration the continuum of tobacco use, as well as the multiple determinants of tobacco use.
- Relationships between MDH, other funders and community partners must be strengthened. These
  enhanced partnerships can promote mutual capacity building and opportunities to learn with, and
  from, each other. Sharing power with community-based organizations can provide them with the
  tools, training, and investment of resources needed to increase leadership and advocacy skills.
- There is also a need for both an increase in overall funding for tobacco prevention and control, as well as funding for community-based organizations to do the work within their own communities.

Funding opportunities should provide flexibility for programs to be designed and implemented with input from communities that recognizes and maximizes their strengths.

Input and findings have contributed to Minnesota's Comprehensive Tobacco Control Framework<sup>15</sup> and also guided the direction for the redesign and launch of the new 2016 Tobacco-Free Communities Grant Program.<sup>9</sup> This community input is also essential for planning all future tobacco-related programs or initiatives.

<sup>&</sup>lt;sup>15</sup> Minnesota Department of Health, ClearWay Minnesota, Blue Cross and Blue Shield of Minnesota. (2016). *Minnesota Comprehensive Tobacco Control Framework, 2016-2021*. http://www.health.state.mn.us/divs/hpcd/tpc/docs/MN\_tobacco\_control\_framework.pdf

## **Financial Report**

	SFY 2015 Awards	SFY 2016 Awards
Tobacco-Free Communities in Minnesota		
American Lung Association – Greater Mankato	250,885	112,500
Association for Nonsmokers – Minnesota (Ramsey Tobacco Coalition)	150,000	133,180
Des Moines Valley Health and Human Services	150,000	112,500
Goodhue County Health and Human Services	159,557	112,500
Horizon Public Health	176,724	112,500
Olmsted County Public Health Services	150,000	100,825
Quin Community Health Services	150,000	112,500
Rainbow Health Initiative	160,000	122,500
WellShare International	150,000	112,500
Subtotal	\$1,497,166	1,031,505
American Indian Grant Program		
Ain Dah Yung Center	187,500	115,000
Bois Forte Band of Chippewa	51,492	67,460
Fond Du Lac Band of Lake Superior Chippewa	54,398	81,991
Grand Portage Band of Lake Superior Chippewa	52,503	64,629
Greater Minneapolis Council on Churches	193,030	115,000
Leech Lake Band of Ojibwe	63,842	120,195
Lower Sioux Indian Community	50,902	64,511
Mille Lacs Band of Ojibwe	66,330	80,276
Prairie Island Indian Community	50,418	62,091
Red Lake Band of Chippewa	63,639	128,195
Upper Sioux Community	50,312	61,562
White Earth Nation	68,540	119,090
Subtotal	\$952,905	\$1,080,000
Technical Assistance and Tecining		
Technical Assistance and Training American Lung Association of the Upper Midwest	325,000	260,700
Association for Nonsmokers – Minnesota	, ,	,
	295,000	262,500
Counter Tools	20,000	91,500
Public Health Law Center	109,129	424,371
Subtotal	\$749,129	\$1,039,071
Community Engagement	-	-
Minnesota MAD (Community Voices)	20,000	70,424
Side by Side Associates	1,800	
Subtotal	\$21,800	\$70,424
Total Funds Awarded	\$3,221,000	\$3,221,000