

HHS COMMITTEE #3  
June 18, 2009

**MEMORANDUM**

June 16, 2009

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst 

SUBJECT: **Discussion - Impacts from Reductions in Cigarette Restitution Funds**

Expected for this discussion:

Uma Ahluwalia, Director, DHHS  
Dr. Ulder Tillman, County Health Officer

The Executive's March budget assumed that the county would receive \$1,050,900 for the Tobacco Prevention and Education Grant and \$883,450 Cancer Prevention, Education, Screening and Training Grant. Actions by the Governor and the General Assembly reduced statewide funding for prevention and education efforts about \$19 million and shifted these funds to backfill for general fund reductions in the Breast and Cervical Cancer program and Medicaid. The impact on Montgomery County is a 74% reduction in prevention and education funding. For FY10, DHHS will receive \$271,000 in state funds for these purposes. The Department of Health and Human Services provided the Committee and Council with a summary of the impacts of these reductions but because it was very late in the budget process, the Committee did not have time for a detailed discussion and asked that a fuller briefing be scheduled to discuss the impacts for FY10.

The Council approved \$45,000 in county funds to retain some smoking prevention programs for at-risk youth and for young mothers.

The Department has provided an updated impact statement and summary of the plan it has proposed to the State for approval (© 1-2). The county has had a very robust array of programs and services that involve many community partners and the public schools. Attached at © 3-12 is information from the website for the Montgomery County Cancer and Tobacco Program,

including information on the minority health initiatives, Primary Care Coalition, and enforcement provided by the Department of Liquor Control, as well as, addiction treatment services and cancer screening recommendations and services.

Also attached for your information is a briefing provided by the Maryland Department of Health and Mental Hygiene to the General Assembly in February 2009 (© 13-27). Information on © 18 indicates that cigarette smoking has declined for both middle school and high school aged youth in Maryland from 2000 to 2006. Age adjusted cancer mortality has declined statewide as well and, while there is still a significant disparity between whites and African Americans, the disparity has been substantially reduced. The briefing notes that Montgomery College is one of three colleges that have implemented a tobacco-free campus policy (© 19). Circles 23-24 highlight the prevention and outreach and cessation efforts, including those in the public schools.

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## **Montgomery County's CRF Tobacco Use Prevention Program,**

For FY10, the state has reduced the Tobacco Prevention & Education Grant by 74%, from \$1.05M to \$271,000. In 2008, the Tobacco Use Prevention program provided education, outreach, and prevention services for youth, minorities and adults to reduce tobacco use disparities. In FY 09 Montgomery County educated 11,000 people on the harmful effects of smoking, trained 200 community leaders; educated 80,000 K-12 students; and the Enforcement Officer educated and checked 2,000 merchants on Youth Access Law and Product Placement. In comparison in FY10, the County outreach and training will be reduced significantly to approximately 200 people educated; no trainings for community leaders, no access to education to K-12 students; and the enforcement education and merchant checks will remain the same.

### **Impact of the lost of CRF funds**

The CRF Program cut represents the loss of the:

- Vacant Program Director, Manager III position
- Vacant Office Services Coordinator position
- Full Time Program Manager to a Part Time position
- Program Specialist
- Enforcement Officer for the Office of Liquor Control
- School –Based Tobacco Specialist for Montgomery County Public School System
- Funding for special projects, such as surveys and needs assessments, and funding for language appropriate materials and meeting translations.
- Close to 80% of the funding to the county minority initiatives for outreach and cessation.
- Contractors for tobacco coordination, outreach worker, and cessation counselors
- Five (5) community outreach vendors that outreach to youth, teens, and minorities, and more than ½ of the funding to 2 cessation vendors.

### **Proposed Program FY10 Tobacco Use Prevention Grant - \$271, 966 ((Pending approval of the Grantor)**

The Maryland Department of Health and Mental Hygiene has given local health departments discretion as to allocation of resources among the required elements of the local public health program (i.e. smoking cessation, school-based, community-based and enforcement). Where possible, however, the DHMH has suggested that counties maintain funding in smoking cessation and enforcement. Reduced funding for tobacco control activities is expected to remain through FY10 and FY11.

### **Personnel**

- Program Manager will assume the responsibilities of the CRF program with the support of the MLS supervisor to include administrative oversight, monitoring and management of the tobacco program contracts.
- Program Specialist will be responsible for enforcement activities to support merchant education on youth access placements and product placement and will conduct community-based outreach campaigns, faith-based educational programs and second hand smoke education

The Department of Liquor Control will continue to fulfill its local ordinance through its Licensure, Regulation, and Education (LRE) Tobacco Compliance program which went into effect in 1999 as a response to Montgomery County Code 24-9C (distribution of tobacco products to minors). The enforcement specialists work with minors (under the age of 18) who attempt to purchase tobacco products. LRE partners with the county Attorney's office and will continue to participate with the CRF tobacco coalition. LRE will assist CRF Tobacco program in its trainings and educations as necessary. Montgomery County remains a national leader in preventing the distribution of tobacco products to minors.

### **Program Activities**

- A part-time contractor, tobacco cessation specialist, will provide group cessation classes to the uninsured and medically underserved in the community.
- Washington Adventist Hospital Cessation and Caron Foundation will provide smoking cessation.
- Nicotine Replacement Therapy (NRT) will be provided to all the cessation programs through the CRF program.

- Programs that require language appropriate materials and meeting translations will be available through the Department funds in order to be in compliance with State and Federal Law.
- The minority health initiatives will provide culturally appropriate tobacco cessation group counseling.
- For FY10, the County Council funded two youth prevention programs, one includes a community based educational program for high-risk and out of school Montgomery County youth (ages 6-18yrs), the other will involve the implementation of an educational program for Montgomery County young pregnant women and mothers (under the age of 25yrs) who are at risk of using tobacco or who live with individuals who use tobacco products.
- In FY09, the County Council provided \$63,000 in support of the Tobacco Program funded through CRF to support a school-based school nurse program to develop student peer programs as well as to support media outreach and education to minority populations. In FY10, these funds will be reduced by 50% to \$31,000 to cover media campaigns, training programs, nicotine replacement therapy to support cessation programs, interpreter services, etc.

### **Maryland Office of Minority and Technical and Assistance Program (MOTA)**

#### **Impact of State Cuts: FY 09, \$145,000 to \$99,000 in FY 10. Holy Cross is currently waiting on the response to their proposal.**

Holy Cross Hospital has been the lead entity for the *Minority Communities Empowerment Project (MCEP)*, a multi-organizational community collaborative for the last 5 years. The *MCEP* addresses the marked and growing disparities in health status among racial and ethnic groups and strives to eliminate health disparities to improve health in the communities of Montgomery County

HCH submitted a proposal requests for funding for fiscal year 2010 to sustain its multi-organizational community collaborative and to continue to build organizational and community capacity through culturally tailored technical assistance trainings on cancer, tobacco product control and community empowerment. HCH plans to continue to work with community partners – the Montgomery County Asian American Health Initiative (AAHI) and African American Health Program (AAHP), CASA of Maryland, Inc. (CASA), Community Ministries of Rockville (CMR), and the Maryland Commission on Indian Affairs (MCIA).

The *MCEP's* community capacity building is done in collaboration with Montgomery County Cigarette Restitution Fund Program and through its collective outreach by ethnic health promoters who embrace, recognize and respect cultural diversity, social beliefs and mores, and community awareness about health and wellness (i.e., cancer and tobacco control). The health promoters educate the community where they live and work about financial and geographical accessible services for cancer screenings, tobacco products cessation, support groups for cancer, and other information as needed.

# Montgomery County Cancer and Tobacco Program

1335 Piccard Drive, Lower Level - Rockville, Maryland 20850 - (240)-777-1222



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www.1800quitnow.com

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## TOBACCO PROGRAM

### Montgomery County Tobacco Use Prevention and Cessation Program

Montgomery County is one of the largest counties in Maryland with one of the most diverse populations. In fact, approximately 44% of residents in Montgomery County consider themselves a minority. This includes approximately 16.8% African American. About 13.8% Hispanic/Latino, 13.4% Asian/Pacific Islander and .4% American Indian/Alaskan Native.

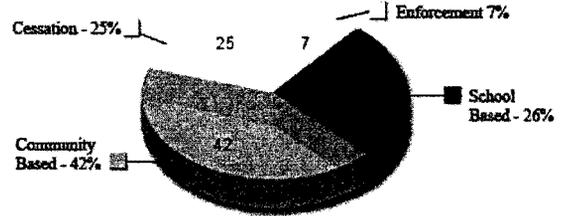
One of the goals of the Montgomery County Department of Health and Human Services is to promote programs that are culturally and linguistically appropriate to address and eliminate tobacco disparities. Program activities are carried out by health department staff, contractors, community partners, county organizations.

#### Community Coalition

The Montgomery County Tobacco Free Coalition meets every other month with additional evening coalition meetings in October and April. In fiscal year 2008, the "Breathe Free" newsletter was created to facilitate the sharing of tobacco control information and community activities. To view our newsletters, please click here. If you like to join us our coalition meeting, please click here

<input type="checkbox"/>	QUIT SMOKING
<input type="checkbox"/>	COMMUNITY PARTNERS WHO EDUCATE TO PREVENT TOBACCO USE <ul style="list-style-type: none"> <li>• Community Based Organizations</li> <li>• School Based Education</li> <li>• Enforcement</li> </ul>
<input type="checkbox"/>	EDUCATION ON THE DANGERS OF SECOND HAND SMOKE
<input type="checkbox"/>	TEST YOUR TOBACCO IQ

### FY08 - Montgomery County Tobacco Use Prevention & Cessation Program



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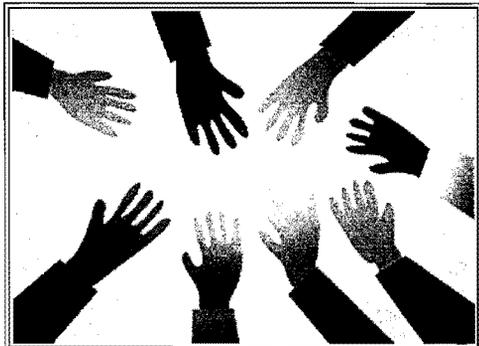


## TOBACCO PROGRAM

### COMMUNITY PARTNERS

Montgomery County has many community-partners to reach out to target populations and at-risk groups. These partners conduct culturally appropriate education on the dangers to tobacco use and second hand smoke. These partners include:

Community Based Organizations	
<input checked="" type="checkbox"/>	Asian American Health Initiative
<input checked="" type="checkbox"/>	CASA of Maryland
<input checked="" type="checkbox"/>	Community Ministries of Rockville
<input checked="" type="checkbox"/>	Community Health Consulting
<input checked="" type="checkbox"/>	G.O.S.P.E.L
<input checked="" type="checkbox"/>	Korean Community Services Center for Greater Washington
<input checked="" type="checkbox"/>	Primary Care Coalition



#### Asian American Health Initiative

The Asian American Health Initiative was established to help eliminate health disparities that exist among Asians and Asian Americans living in Montgomery County MD. The AAHI is part of the Montgomery County DHHS, Office of Minority and Multicultural Health. The Asian American Health Program currently offers a diverse selection of services to the Asian and Asian American community including an Asian American Cancer Program, a Hepatitis B Program, an Osteoporosis Education and Screening Program, and Diabetes Awareness. The AAHI also has a Health Promoter Program which recruits and trains bi-lingual health promoters who in turn perform community outreach and education aimed at reducing cultural and linguistic barriers among Asian communities in order to offer better access to health care.

In partnership with Montgomery County Cancer and Tobacco Initiatives and the Cigarette Restitution Fund, AAHI's Tobacco Control program provides culturally and linguistically appropriate tobacco education services as well as providing individual tobacco use cessation counseling services. For more information on the Asian American Health Initiative visit the AAHI website.

#### CASA of Maryland (CASA of MD)

CASA of Maryland's Health Program works to address public health and primary care needs in the community. This includes health education and improved access to screening and treatment services for HIV, cancer and tobacco use prevention. Find out more at their website.

#### Community Ministries of Rockville/CASA of Maryland

Community Ministries of Rockville serve the most vulnerable and underserved people in the community with a wide variety of programs. Visit their website.

Both community-based-organizations in partnership with Montgomery County Cancer and Tobacco Initiatives CMR and CASA implement community tobacco prevention programs that target the Latino population of Montgomery County. In addition CMR/ CASA recruits and trains health promoters who deliver Project TNT (Towards No Tobacco), an evidence-based program to prevent youth tobacco initiation and focuses on youth aged 10-15.

#### Community Health Consulting

**Community-Based Tobacco Prevention for Youth** - This community-based program has been designed to provide targeted tobacco use prevention and outreach to out of school youth. Through this program, youth leaders are trained to conduct tobacco prevention activities in the community to increase awareness of the dangers of tobacco use, second hand smoke exposure and alternative tobacco products.

**Community-based Tobacco Prevention for young mothers, pregnant teens and families** - This community based program was designed to recruit and involve young mothers, pregnant teens and families in implementing tobacco control and prevention activities in the community settings. Through peer education and intervention activities, this program will result in the increased awareness of the dangers of tobacco use, second hand smoke exposure and alternative tobacco products.

#### G.O.S.P.E.L.

The G.O.S.P.E.L Program, which stands for Glorifying Our Spiritual and Physical Existence, is a faith-based program managed by the Montgomery County Department of Health & Human Services, in collaboration with the Black Minister's Conference of Montgomery County. The program was developed to increase knowledge and awareness among African Americans regarding health disparity issues, especially those related to tobacco. Through a collaborative effort between the Office of Health Promotion and Substance Abuse Prevention and the Black Minister's Conference, the G.O.S.P.E.L. program reaches eleven African American churches and has a team of twenty-three community outreach workers.

#### Korean Community Services Center of Greater Washington

The Korean Community Services Center assists and empowers Asian Americans and new immigrants to become well-adjusted and fully contributing members of the United States through social services, education, advocacy, and development of resources. The KCSC offers several programs including a Social Service Program, an Immigration Program, a Health Program, a Domestic Violence Program, and an Education Program.

In partnership with Montgomery County Cancer and Tobacco Initiatives the KCSC implements tobacco education and cessation services and perform outreach to the Asian and Asian American community in Montgomery County. For more information the Korean Community Services Center please visit the KCSC website.

**Primary Care Coalition of Montgomery County**

The Primary Care Coalition is a private, non-profit, charitable organization working with public/private partners to provide high-quality, accessible, equitable, efficient, and outcome-driven health care services for low-income, uninsured Montgomery County residents. For more information, please check their website.

**Enforcement**

**Montgomery County Department Of Liquor Control**

The Montgomery County Department of Liquor Control, Division of Licensure, Regulation and Education conducts a Tobacco Enforcement Program. The tobacco enforcement program includes surveillance investigations of the approximately 800 Maryland State Retail Cigarette licensed facilities located in Montgomery County to ensure compliance with Montgomery County's Distribution of Tobacco Products to Minors law, and the tobacco product placement law. Board Alcohol/Tobacco Enforcement Specialists issue civil citations to retail cigarette license holders and their clerks for tobacco distribution and/or display violations. Board Alcohol/Tobacco Enforcement Specialists must also appear and testify in District Court regarding the tobacco civil citations issued. For more information on the Montgomery County Department of Liquor Control please email George Woo or visit the website.

# Montgomery County Cancer and Tobacco Program

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## TOBACCO PROGRAM

### School-based Tobacco Prevention and Education

Montgomery County Public Schools train teachers to provide the curriculum for Project TNT and Project Alert to 6th, 7th, and 8th graders in 38 Middle Schools in the County.

In addition, the Caron Foundation works with youth people who smoke to help them to develop a cessation strategy that works for them. The Community Health Consulting group empowers youth to become tobacco control advocates through after-school programs and partnerships with local school groups.

Through a partnership with Montgomery College, students are educated on the dangers of using tobacco products. The College will become a smoke free campus in the summer of 2008.

School Based Education	
<input checked="" type="checkbox"/>	Caron Treatment Center
<input checked="" type="checkbox"/>	Community Health Consulting
<input checked="" type="checkbox"/>	Montgomery County Public Schools
<input checked="" type="checkbox"/>	Montgomery College

**Education on the dangers of second hand smoke**

Secondhand smoke can be harmful in many ways. In the United States alone, second-hand smoke can be responsible for:

- An estimated 35,000 deaths from heart disease and 3,400 lung cancer deaths in non-smoking adults
- Other breathing problems in non-smokers, including coughing, mucus, chest discomfort, and reduced lung function
- 150,000 to 300,000 lung infections (such as pneumonia and bronchitis) in children younger than 18 months of age, which result in 7,500 to 15,000 hospitalizations, increases in the number and severity of asthma attacks in about 200,000 to 1 million children who have asthma more than 750,000 middle ear infections in children

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Cancer LiveHelp Chat

1-800-QUIT-NOW

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### CARON Comprehensive Addiction Treatment

Caron is a not-for-profit organization whose mission is to provide an enlightened and caring treatment community in which all those affected by drug addictions may begin a new life. Now in its sixth decade of providing quality services, Caron offers a number of gender specific chemical dependency treatment programs, including tobacco cessation for youth.

Montgomery County has partnered with Caron to provide professional facilitation of youth tobacco prevention, cessation and reduction services through weekly sessions of teen peer groups in most public high schools and alternative schools throughout the County. Working within Montgomery County Public Schools, Caron works closely with each student to develop individual student treatment strategies that are both personally and culturally appropriate. These support groups meet weekly to best connect and coach students through tobacco cessation or tobacco reduction by assisting students in recognizing their own stages of change, the consequences of engaging in risky health behaviors and how to use their newly acquired skills to stay tobacco free. For more information on the Caron and its school based student assistant programs, visit the CARON website

### Community Health Consulting

Community Health Consulting targets youth with both community and school based programs. The Teen Tobacco Prevention Initiative is CHC's community based program whose goal it is to promote youth advocacy and implement educational programs for youth at risk of using tobacco, youth who are targeted by the tobacco industry, and pregnant teens. The Teen Tobacco Prevention Initiative is designed to educate young people in Montgomery County, ages 6-18, about the health risks of tobacco use and the dangers of secondhand smoke. Educational activities focus on tobacco industry tactics and include outreach, media advocacy, and leadership trainings. The Teen Tobacco Prevention Initiative also holds Chalk Out The Smoke, a yearly event consisting of talent, art, and dance contests, all of which focus on the ability to use your talents to promote an anti-tobacco message.

Community Health Consulting (CHC) school based program organizes and facilitates school-based educational programs in middle and high schools that are both youth inspired and youth led. These programs include the organization of school-based clubs, training program for youth leaders, peer education and intervention activities and education for pregnant teens on the dangers of second hand smoke. There are many youth led initiatives and opportunities to get involved. Students receive service learning hours and training to become leaders. For more information on Community Health Consulting and its program please contact Wendy Norcross at (301) 469-8678 or email.

### Montgomery County Public Schools

The Montgomery County MD Public School System, Department of Curriculum and Instruction, Health Curriculum, implements Project TNT (Towards No Tobacco Use), Project ALERT (Adolescent Learning Resistance Training), and tobacco prevention curriculum in all 38 MCPS middle schools as well as in all 25 MCPS high schools. The goal of both Project TNT and Project ALERT is to increase student knowledge of tobacco use. Students in grade 6 receive the Project TNT curriculum; students in grade 7 receive the Project ALERT training curriculum, and grade 8 students complete Project TNT and Project ALERT booster sessions. Grade 10 students participate in a five day tobacco prevention unit. For more information on the Montgomery County Public School's Tobacco Curriculum please email Elizabeth K. Green or visit the MCPS website.

### Montgomery College

Montgomery College focuses much of its tobacco control efforts on preventing the initiation of tobacco products and protecting young adults from second hand smoke. The College organizes campus-wide tobacco use prevention programs and encourages cessation through high profile events such as the 'Great American Smoke Out,' "Give the Perfect Gift" (smoking cessation as a holiday gift), and "If not now, When?"

In 2008, Montgomery College will be a smoke free campus!

For more information on the programs offered at Montgomery College or its efforts to become smoke free, email Kathy Dayton.

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## TOBACCO PROGRAM

### QUIT SMOKING

- Reasons to quit
- Resources to help (Free Patches and NRT)
- Self Help Materials
- Useful Websites to help you quit
- Contact Us
- Test your to Tobacco IQ



All residents of Montgomery County are eligible to receive Free Nicotine Replacement Therapy (i.e. patches, gums...) and prescription medications as prescribed by your physician. For more information, call us at 240.777. 1222 or email.

#### Reasons to Quit

#### For your health

There are more than 4,000 chemicals in tobacco and tobacco smoke. More than 60 of these chemicals are known or suspected to cause cancer. Tobacco use is a major cause of cancers of the lung, larynx (voice box), oral cavity, pharynx (throat), esophagus (swallowing tube connected to the stomach), and bladder, and it contributes to the development of cancers of the pancreas, cervix, kidney, stomach, and also some leukemia. Smoking is also responsible for about 87% of lung cancer deaths. Lung cancer is the leading cause of cancer death in both men and women, and is one of the most difficult cancers to treat.

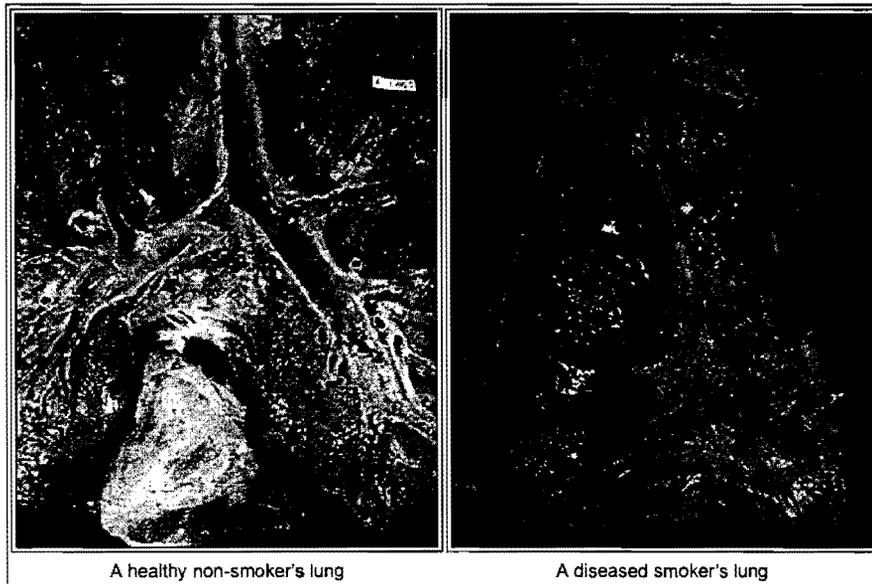
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Cancer LiveHelp Chat

1-800-QUIT-NOW

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A healthy non-smoker's lung

A diseased smoker's lung

(Photos courtesy of PresMark Publishing Co)

#### For Your Family

Cigarette smoking not only harms you as a smoker, but it also harms your loved ones, including pets, click here to find more information.

#### It's Your Money

Quit to save money or to buy those things you want or need. Click here to find out how much you can save (not including the medical expense you pay for tobacco related diseases)

#### It is Never Too Late

At 20 minutes after quitting

<ul style="list-style-type: none"> <li>• Blood pressure decrease</li> <li>• Pulse rate drops</li> <li>• Body temperature of hands and feet increases</li> </ul>
<b>At 8 hours</b> <ul style="list-style-type: none"> <li>• Carbon monoxide level in blood drops to normal</li> <li>• Oxygen level in blood increases to normal</li> </ul>
<b>At 24 hours</b> <ul style="list-style-type: none"> <li>• Chance of a heart attack decreases</li> </ul>
<b>At 48 hours</b> <ul style="list-style-type: none"> <li>• Nerve endings start regrowing</li> <li>• Ability to smell and taste is enhanced</li> </ul>
<b>At 1 year</b> <ul style="list-style-type: none"> <li>• Excess risk of coronary heart disease is half that of a smoker</li> </ul>

Source: www.lungusa.org

**Resources to help you QUIT** - For the resource guide list click here

**1-800-QUIT NOW**

**Program Description:** A telephone-based program where calls to **1-800-QUIT-NOW (1-800-784-8669)** are answered by coaches trained to improve a smoker's chances of successfully quitting smoking. For a limited time, callers can receive Free patches and gum.

**Tobacco Treatment Specialist**

**Program Description:** The program offers free individualized counseling and free pharmacotherapy, as needed. Counselors are fluent in English, Spanish and Cantonese.

**Contact Information:**

Montgomery County Department of Health and Human Services  
 1335 Piccard Dr, Lower Level  
 Rockville, MD 20850  
 240-777-1222 or 240-777-3298

**Washington Adventist Hospital**

**Program Description:** An in-patient program to assist those who use tobacco to quit. Behavioral counseling and free medications are provided.

**Contact Information:**

Washington Adventist Hospital  
 Takoma Park, Maryland  
 1-800-542-5096  
 www.adventisthealthcare.com

**Caron Treatment Centers**

**Program Description:** Caron is a treatment program that covers a range of addictions and substance abuse. In Montgomery County, the program focuses on youth cessation in a school-based setting.

**Contact Information:**

Caron Treatment Centers  
 301-829-4412 or email  
 www.caron.org

**Latino Health Initiative**

**Program Description:** A group cessation program designed to be culturally and linguistic appropriate and sensitive to the Latino community.

**Contact Information:**

Latino Health Initiative  
 240-777-4630

**Holy Cross Hospital**

**Program Description:** Adult group cessation.

**Contact Information:**

Holy Cross Hospital  
 Silver Spring  
 301-754-8800  
 www.holycrosshealth.org

**Suburban Hospital**

**Program Description:** Adult group cessation

**Contact Information:**

Suburban Hospital  
 Bethesda, Maryland  
 301-896-3939  
 www.suburbanhospital.org

**Montgomery General Hospital**

**Program Description:** Adult group cessation

**Contact Information:**

Montgomery General Hospital

Olney, Maryland  
301-774-8881  
www.montgomerygeneral.com

**G.O.S.P.E.L Program**

Program Description: Adult Group Cessation targeted to the African American community

Contact Information: Gospel Program – 301-879-7933 or email

**Tobacco Independence Campaign**

Program Description: One-on-one counseling in tobacco addiction targeted to the African American community

Contact information: Tobacco Independence Campaign – 301-879-7933 or email

# Montgomery County Cancer and Tobacco Program

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1-800-4-CANCER

Cancer LiveHelp Chat

1-800-QUIT-NOW  
Smoking cessation services

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## CANCER PROGRAM

According to the National Cancer Institute, as much as 80 percent of all cancers are caused due to identified factors, and thus are potentially preventable. It is estimated that only 5 to 10 percent of all cancer cases are inherited.

Cancer risk can be drastically reduced by adopting healthier lifestyles such as end tobacco use, increase physical activity, maintain healthy weight, have a low fat diet, and avoid sun exposure.

Regular screening and self examination for certain cancers may not prevent cancer but it can increase your chances of discovering cancer early when treatment is more likely to be successful.

**Montgomery County Cancer Crusade**  
Targeted Cancer Screening Schedule with normal findings  
(Might be more frequent for those with a higher risk or family history)

Cancer	Age	Frequency	Type of Screening
Breast	40 yrs +	Annual	Mammogram
Cervical	40 yrs +	Annual	Pap Test
Colorectal	50 yrs +	Every 10 yrs	Colonoscopy
Oral	18 yrs +	Annual	Oral Cancer Exam
Prostate	40 yrs +	Annual	Digital Rectal Exam (DRE) & Prostate Specific Antigen (PSA) Blood test

### FACTS ABOUT CANCER IN MARYLAND \*

According to the Maryland Department of Health and Mental Hygiene Cancer Report 2006:

- Cancer is the second leading cause of death in Maryland, responsible for 23.6% of all deaths; 10,395 cancer deaths occurred in 2002.
- Males have higher incidence and mortality rates than females.
- Black males have the highest mortality rates, white females the lowest.
- Over 26,000 Marylanders were diagnosed with cancer in the year 2002, and more than 10,000 died from this disease.
- Lung cancer is the leading cause of death in both men and women, accounting for 28.5% of all cancer deaths.
- Tobacco use is the primary cause of lung cancer; tobacco smoking causes 90% of lung cancer in males and 78% of lung cancer in females.
- Colorectal Cancer is second leading cause of cancer death in Maryland.

Cancer in Montgomery County (data obtained for 2002) \*

- 1,229 people died of cancer in Montgomery County.
- 327 were diagnosed with lung and bronchus cancer and 262 died from this disease.
- 111 died of colorectal cancer.
- 1,667 were diagnosed with colorectal cancer.
- 575 Montgomery County residents had breast cancer and 100 died from this disease.
- 717 men were diagnosed with prostate cancer and 79 died from this disease.
- 345 were diagnosed with oral cancer and 20 died from this disease.

\* Data obtained from the Maryland Department of Health and Mental Hygiene Cancer Report 2006, Cigarette Restitution Fund – Cancer Prevention, Education, Screening and Treatment Program – www.dhnh.state.md.us

✓ The Montgomery County Cancer Crusade provides free cancer screenings for eligible County residents. For more information, call us at 240.777.1222

### TARGETED CANCERS

- [Breast \(read more\)](#)
- [Cervical \(read more\)](#)
- [Colorectal \(read more\)](#)
- [Oral \(read more\)](#)
- [Prostate \(read more\)](#)

### Barber Shop Program



# Montgomery County Cancer and Tobacco Program

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Cancer Questions?  
1-800-4-CANCER



## FREQUENTLY ASKED CANCER QUESTIONS

### Who is eligible for cancer screening?

Montgomery County Cancer Crusade provides free cancer screenings for eligible County residents. In order to qualify, you must meet certain eligibility requirements:

- Live in Montgomery County (must show proof)
- Be uninsured
- Low-income (must meet 250% Federal Poverty Guidelines)
- With no current or pre-existing cancer diagnosis
- Age
- Breast and Cervical - 40 yrs\*
- Colorectal - 50 yrs\*
- Prostate - 45 yrs\*
- Oral - 18 yrs\*

### What types of cancer do you screen?

Our targeted cancers are:

- Breast
- Cervical
- Colorectal
- Oral
- Prostate

### Do you offer cancer treatment?

Our program is designed to raise awareness and understanding of the importance of cancer prevention and early detection. **We provide cancer screenings for eligible clients who do not have a current diagnosis of cancer**, however if cancer is detected through our screening program, treatment will be provided. We do not treat those who have been already diagnosed with cancer but we can assist in linking them to health resources.

### How do I sign up for cancer screening?

If you meet our eligibility requirements, give us a call at 240.777.1222, we can help you.

### What is a colonoscopy?

The colonoscopy procedure is used to find early cancers and potentially cancerous polyps (growths on the colon lining). The doctor will look at the lining of the large bowel by using a lighted tube put into the rectum. If

### Is a colonoscopy painful?

You will usually be sedated so you will not feel any pain, while it may be slightly uncomfortable, it should not hurt. After the test, you might have some bleeding if polyps were removed. Complications are rare, but if they do occur, you can contact your doctor for treatment. Otherwise, you will just need to rest to recover from the sedative. You must have someone drive you home after the procedure. Some patients may be lethargic and forgetful afterwards, during this period; you should have someone check in on you to insure your safety. No driving, complicated or important decisions or alcoholic beverages are allowed on the day of the procedure. By next morning, most patients are able to continue with their daily activities.

### Is the colonoscopy procedure dangerous?

As with any invasive procedure, complications may occur. Complications related to colonoscopy include, but are not limited to, the following:

- Persistent bleeding after biopsy
- Peritonitis (inflammation of the lining of the abdominal cavity)
- Perforation of the intestinal wall (rare)

There may be other risks depending upon your specific medical condition. Be sure to discuss any concerns with your physician prior to the procedure. Overall, colonoscopy is a very safe procedure that has many benefits and few complications when done by an experienced gastroenterologist.

### What is the DRE ?

A digital rectal Exam or DRE is an examination of the lower rectum. The term "digital" refers to the clinician's use of a lubricated finger (digit) to conduct the exam. The test is used to screen for prostate cancer along with blood and other tests, because the doctor can feel the prostate gland for abnormalities. It is also used to evaluate for an enlarged prostate. There may be mild discomfort felt during this test.

*\*The following cancer screening ages are recommended for those people at average risk for cancer (unless otherwise specified) and without any specific symptoms. For those with a higher or increased risk, they may need to be screened at an earlier age, please call 240.777.1222 for more information.*



abnormalities are seen, biopsies or small pinches of tissue can be taken through the tube. In addition, most polyps or growths in the colon can be removed through the scope. Biopsies or polyps are then sent to the laboratory for review. In general, the colonoscopy procedure takes approximately 30 to 45 minutes to perform and may take longer depending upon the intervention that may be required for any individual patient. A colonoscopy is an outpatient procedure. This means you will get to go home after the procedure is finished.

# MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE



## **CIGARETTE RESTITUTION FUND PROGRAM BRIEFING**

- Tobacco Use Prevention and Cessation Program
- Cancer Prevention, Education, Screening and Treatment Program
- Minority Outreach and Technical Assistance (MOTA) Program

**2009 Session of the Maryland General Assembly  
February 2009**

# **CIGARETTE RESTITUTION FUND PROGRAM MISSION AND VISION**

## **Mission**

To reduce the use of tobacco products in Maryland, and thereby reduce the burden of tobacco-related disease

To reduce mortality from cancer in Maryland, and

To reduce disparities in mortality from tobacco use and cancer among ethnic and racial minorities in Maryland

## **Vision**

The Cigarette Restitution Fund Program envisions a future Maryland free of cancer and disability due to tobacco use and where health disparities are eliminated resulting in the highest level of health for all Marylanders.



# PROGRAM GOALS

## *Tobacco Use Prevention and Cessation Program*

- **Improve Health** – Decrease the use of tobacco products by Maryland youth and adults, thereby reducing tobacco-related disease.
- 
- **Increase Cessation** – Promote the importance of quitting smoking,
    - Provide assistance to all those who are ready to quit,
    - Help them to succeed in their attempts to quit.
  - **Increase Prevention** - Reduce the initiation of smoking and use of tobacco products by under-age youth and young adults.
  - **Reduce Secondhand Smoke** – Promote smoke-free environments and protect against involuntary exposure to secondhand smoke.
  - **Reduce Tobacco-Related Disparities** – Reduce harmful disparities in tobacco-use behaviors, particularly among high-risk populations.



# PROGRAM GOALS

## Cancer Prevention, Education, Screening and Treatment Program

- **Improve Health**
    - Decrease the number of new cases, the suffering and the deaths due to cancer.
    - Decrease racial/ethnic disparities in cancer.
- 
- **Increase Screening** – Increase cancer screening in all Maryland communities.
  - **Increase Prevention** – Increase cancer prevention and education activities, including a skin cancer prevention strategy.
  - **Develop Clinical Guidelines** – Develop and disseminate clinical guidelines for targeted cancers.
  - **Support Research in Cancer and Other Tobacco-Related Diseases**  
Fund translational cancer research, research in other tobacco-related diseases, and increase the number of and participation in clinical trials.



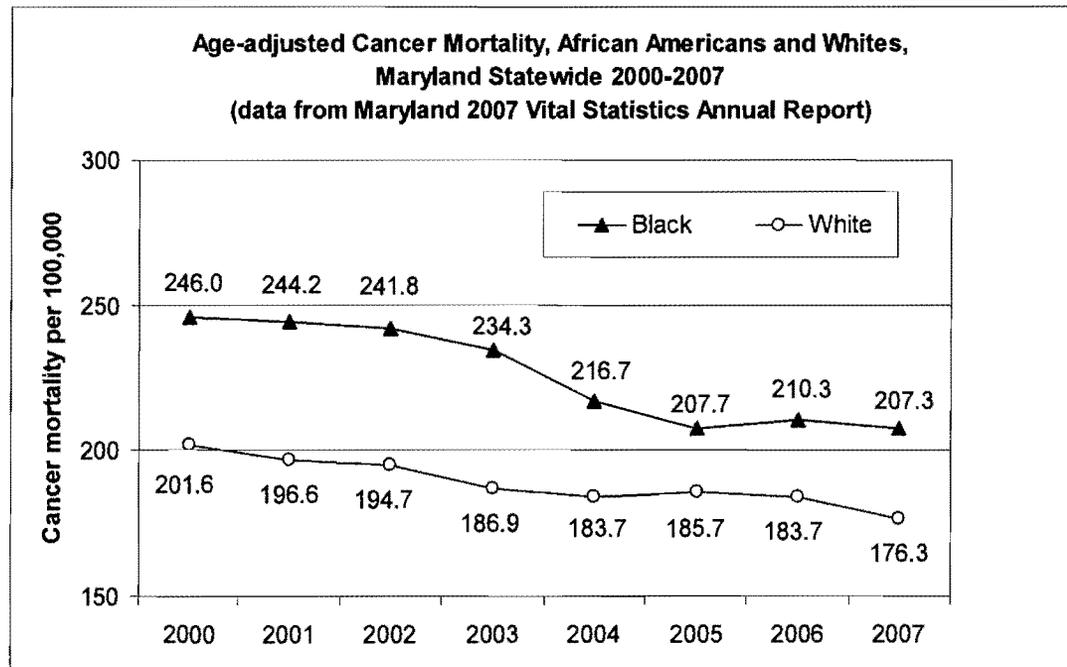
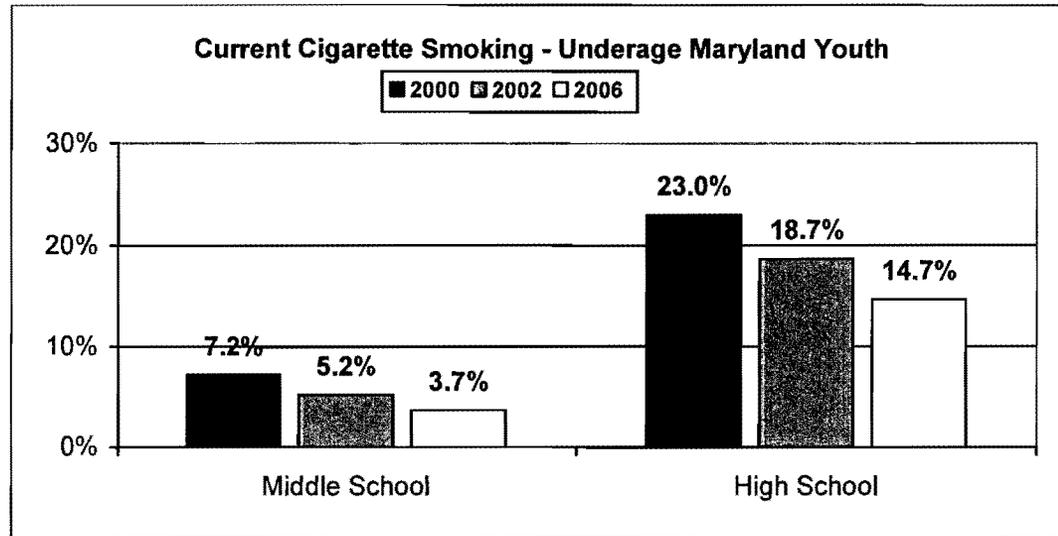
# PROGRAM GOALS

## Minority Outreach and Technical Assistance

- **Improve Minority Health and Decrease Health Disparities**
    - Decrease the number of new cases, the suffering and the deaths due to cancer and tobacco-related disease among minority populations.
    - Decrease minority disparities in cancer and tobacco-related disease.
- 
- **Increase Knowledge and Practice of Healthy Behaviors** – Promote cancer prevention and screening, and tobacco use prevention and cessation in minority communities.
  - **Increase Reach to all Communities** – Bring health education, cancer screening, and tobacco cessation programs to previously unreached minority populations.
  - **Improve Minority Focus and Impact of Local Cancer and Tobacco Plans:**
    - Increase Local Minority Participation** – Increase minority participation in county tobacco and cancer community health coalitions.
    - Enhance Local Linkages to Minority Communities** – Optimize the cooperation between county health departments and minority groups in their communities.



# Selected Achievements in Tobacco and Cancer Control



# TOBACCO PROGRAM ACHIEVEMENTS (2000 to 2008)

## Mortality Rate from Smoking Has Declined Significantly

- 11<sup>th</sup> largest decline in smoking-attributable mortality among the states (1996-99 vs. 2000-04).

## Reduced Smoking is Reducing Expenditures to Treat Disease

- \$48 million to treat cancers and disease caused by smoking is saved every year for each 1% decrease in smoking.
- Reductions in smoking between 2000 and 2007 are estimated to have reduced spending to treat smoking-caused disease by \$153.6 million in 2007 alone.

## Policy Successes

- Three college campuses – Montgomery College and Harford and Carroll Community colleges have implemented tobacco-free campus policies.
- With support from resources developed by and distributed through DHMH tobacco control program, the Clean Indoor Air Act (CIAA) was successfully implemented across the state.
- DHMH effectively promoted cessation resources to help smokers quit in light of the CIAA and an increase in the tobacco tax – Quitline calls increased 116% (2/08 vs. 2/07).



## **Significant Challenges and Potential Savings Remain**

- **Despite decreases in mortality rate, an average of 6,861 Maryland adults still die prematurely every year due to their smoking**
- **Another 149,600 Maryland adults are estimated to be living with the effects of a smoking-caused cancer or disease that requires medical treatment.**
- **\$2.2 billion is spent annually in Maryland to treat smoking-related cancers and disease.**



# CANCER PROGRAM ACHIEVEMENTS (2000-2008)

- 15% reduction in overall cancer mortality in Maryland from 1999 to 2007
- Maryland's national ranking in total cancer mortality has improved from 9<sup>th</sup> highest (1995-1999) to 19<sup>th</sup> highest (2001-2005)
- 39% reduction in Black vs. White cancer mortality disparity from 1999 to 2007

## Colorectal Cancer (CRC)

- 20,134 individuals received colorectal cancer screening from 2000-2008 – 127 diagnosed
- 66% of Maryland adults age 50+ ever had screening by sigmoidoscopy or colonoscopy (2006)
- 23% reduction in CRC mortality (between 1999 and 2007)

## Breast Cancer

- 7,968 women received CRF-funded breast cancer screening from 2000 to 2008  
63 of these women were diagnosed with invasive breast cancer
- 92% of women in Maryland age 40+ have ever had a mammogram (as of 2006)
- 14% reduction in breast cancer mortality (between 1999 and 2007)

## Cervical Cancer

- 4,787 women received CRF-funded cervical cancer screening from 2000 to 2008  
1 of these women was diagnosed with invasive cervical cancer
- 97% of women in Maryland age 40+ have ever had a Pap test (as of 2006)
- 14% reduction in cervical cancer mortality (between 1999 and 2007)

## Prostate Cancer

- 4,580 men received CRF-funded prostate cancer screening from 2000 to 2008  
65 men were diagnosed with prostate cancer
- 65% of men in Maryland age 40+ have ever had a prostate specific antigen test as of 2006
- 22% reduction in prostate cancer mortality (between 1999 and 2007)



# MOTA PROGRAM ACHIEVEMENTS (2008)

## Program Model

**16 jurisdictions** were served by local minority groups who received MOTA funding.

**37 minority organizations** provided services as either a primary vendor or a sub-vendor.

## Outreach

**317,030 minority persons were reached** throughout the state to promote healthy behaviors, encourage smoking cessation, and increase participation in cancer screening and prevention.

## Local Minority Participation

**88,761 pieces** of cancer/tobacco health related educational materials were distributed throughout the 16 funded jurisdictions.

**594 persons** were referred to tobacco cessation services.

**361 persons** were referred to cancer screening services.



# TOBACCO PROGRAM ACTIVITY HIGHLIGHTS (2008)

## PREVENTION

- 411,914 students were provided curricula education
- 217,574 Maryland residents were educated about tobacco-use prevention
- 1,832 teachers were trained on tobacco-use prevention curricula
- 7,031 underage compliance checks were conducted
- 1,071 citations were issued for under-age sales
- 584 youth were cited for possession of tobacco or attempts to purchase.

## TOBACCO-USE CESSATION

- 15,527 adults received counseling from the Maryland Tobacco Quitline, 1-800-QUIT-NOW
- 6,280 self-help and information kits were mailed to adults who utilized the Quitline
- 6,259 shipments of Nicotine Replacement Therapy (NRT) were distributed to Quitline users
- 18,240 individuals utilized [www.SmokingStopsHere.com](http://www.SmokingStopsHere.com), the website for the Maryland Tobacco Quitline.
- 7,194 adults participated in local smoking cessation programs
- 3,394 adults received nicotine patches, Chantix, or Zyban®
- 797 nurses, health care providers, and others trained in smoking cessation
- 1,809 students provided smoking cessation services
- 792 pregnant women participated in smoking cessation
- 24 jurisdictions in Maryland were reached through statewide media campaigns conducted to promote the Quitline and local cessation programs – TV commercials were the most popular modality of reaching tobacco users, with 32% reporting this as how they heard about the Quitline.



## **OUTREACH**

- **10 Maryland colleges and universities had active Students Together Organizing Prevention Strategies (STOPS) tobacco-free campus coalitions.**
- **10,572 individuals utilized [www.MDQuit.org](http://www.MDQuit.org), supporting prevention and cessation best practices for Maryland health professionals**
- **Over 400 health professionals were trained by MDQuit with evidence-based approaches in Youth Prevention and Cessation, Smokeless Tobacco Use, Cultural Diversity, Smoking During Pregnancy, and Secondhand Smoke**
- **Over 30 Marylanders suffering from secondhand smoke exposure in apartments or condominiums received assistance.**

## **MINORITY DISPARITIES**

- **115 minority organizations were funded**
- **85 faith-based organizations were funded**
- **61% of Quitline callers were women**
- **56.5% of Quitline callers were non-white (51% of total were African-American)**
- **46% of local community health coalition members are minorities**
- **2 Ethnic Network tobacco control trainings were conducted to build capacity and enhance minority participation in statewide and local activities.**

## **SURVEILLANCE AND EVALUATION**

- **Maryland youth and adult tobacco surveys were conducted in the fall of 2006**
- **Comprehensive evaluation of CRF Programs, including tobacco program.**



# CANCER PROGRAM ACTIVITY HIGHLIGHTS (2008)

## LOCAL PUBLIC HEALTH (Excludes Baltimore City)

- 23 local public health jurisdictions received funds for cancer awareness, prevention, screening and treatment
- 110,318 residents educated on cancer awareness, prevention and screening
- 5,326 health providers educated on targeted cancers and cancer screening guidelines
- 15 grants awarded to community-based organizations to provide outreach to minority, underserved and uninsured residents
- 4,765 cancer screenings with 36 cancers diagnosed
- 475 adenomatous colon polyps removed (probably preventing colon cancers)
- All jurisdictions link and/or refer clients to treatment because CRFP funds are not sufficient to pay for treatment.

## STATEWIDE ACADEMIC HEALTH CENTER-Johns Hopkins Institutions (JHI)

### Research Grant

- 10 CRF-funded competitive grants awarded for cancer research
- 360 CRF-related cancer articles were published in peer-reviewed scientific journals
- 21 new grants to CRF investigators were received from outside funding sources, leveraging CRF funds
- Partnered with the University of Maryland Medical Group in jointly sponsoring the annual "Research Matters" conference

### Baltimore City Public Health Grant

- 10,715 persons were educated about prostate cancer
- 1,970 persons were also educated about colorectal and breast cancer
- 709 men were screened for prostate cancers with 7 men diagnosed.



# **CANCER PROGRAM ACTIVITY HIGHLIGHTS (2008)**

## **STATEWIDE ACADEMIC HEALTH CENTER-University of Maryland Medical Group (UMMG)**

### **Research Grant**

- The University of Maryland Greenebaum Cancer Center received a P30 Cancer Center Support Grant (CCSG) and became a NCI-designated Cancer Center on August 8, 2008.
- The University of Maryland Greenebaum Cancer Center has been recognized as one of the top 50 cancer centers in the United States by *U.S. News and World Report*.
- 103 CRF-related cancer articles were published in peer-reviewed scientific journals.
- Partnered with the Johns Hopkins Institution in jointly sponsoring the 2008 annual "Research Matters" conference.
- Leveraged CRF funds and received 22 new grants to investigators, from outside sources.

### **Baltimore City Public Health Grant**

- 11,910 persons educated about breast and cervical cancers
- 972 women screened for breast cancer
- 6 women diagnosed with breast cancer
- 259 women screened for cervical cancer
- 0 women diagnosed with cervical cancer.

### **Maryland Statewide Health Network**

- 26 tele-health linkages operated throughout the State
- 250 educational activities were conducted with attendance of 10,738 individuals
- 40 continuing education programs attended by 2,940 health care professionals.

### **Tobacco-Related Disease Grant**

- 4 Pilot Faculty Research Projects were funded
- 4 research articles accepted for publication.



# MOTA PROGRAM ACTIVITY HIGHLIGHTS (2008)

- **Targeted cancer and tobacco education to minorities**  
377,030 minority persons were reached in FY 2008 through local events to raise awareness, promote healthy behaviors, and encourage screening to reduce smoking and control cancer.
- **Minority Participation in local cancer/tobacco health coalitions**  
338 minorities have attended local cancer/tobacco health coalition meetings.  
185 minorities were recruited to join the local health coalitions.
- **Capacity-building for minority-serving organizations**  
151 technical assistance sessions were successfully conducted in FY 2008 by grantees to provide grant writing, 501 (c) (3) start-up and organization networking/collaboration skills to other minority organizations.
- **Outcomes**  
MOTA activities contributed to decreases in smoking among minority youth, adults, minority cancer mortality and in mortality disparities statewide.

All cause cancer minority mortality disparity decreased by 50% from 2001 to 2005; Underage smoking decreased by 38% from 2000 to 2006; Adult smoking decreased by 20% from 2000 to 2006.

