LOUISIANA TOBACCO CONTROL

STRATEGIC PLAN

July 2016 - June 2021
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For an electronic version of this document, please visit Well-Ahead Louisiana website, wellaheadla.com.

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Dear Colleagues,

With great enthusiasm, I present to you the Louisiana State Tobacco Control Strategic Plan for 2016-2021, which provides the roadmap for strengthening the health of all communities in our state. This planning process comes at a critical time for our beloved Louisiana. Tobacco use remains the leading cause of preventable death and disease in the United States, and Louisiana boasts some of the highest tobacco use rates in the country, especially for certain portions of our population. In addition, the disparities in tobacco-related health outcomes require urgent attention.

Happily, the road to health is paved with evidence and best practices. The strategic plan presented here is based on the Centers for Disease Control and Prevention’s Best Practices for Comprehensive Tobacco Control Programs and tailored to meet the needs of Louisiana residents in every region and community. It builds on the years of work that established the foundation on which we stand. Today, we have a robust state tobacco quitline, provider referral resources and successful tobacco-free policy work and cessation promotion through Well-Ahead Louisiana’s WellSpots and media campaign.

While drafting this document, the Louisiana Office of Public Health (OPH) also completed a comprehensive State Health Assessment (SHA)/State Health Improvement Plan (SHIP) planning process. The SHA/SHIP planning process was a success because of multi-sector collaboration and partnerships across the nine OPH regions. The resulting SHA/SHIP document provides a broad strategic framework for our communities’ health and will be a “living document” that will be modified and adjusted as conditions, resources and external environmental factors change. The work of the Louisiana State Tobacco Control Strategic Planning Committee complemented the development of the SHA/SHIP and can be utilized in two of our state’s priority areas, supporting behavioral health and promoting healthy lifestyles. The Louisiana State Tobacco Control Strategic Plan for 2016-2021 is aligned with the mission of OPH, “to protect and promote the health and wellness of all individuals and communities in Louisiana.”
Despite all our achievements to date, there is still much to be done. Progress cannot be achieved by a single individual or organization working alone. To truly move the needle on tobacco-use prevalence and tobacco-related death and disease rates we must work together to achieve optimal health in a world with seemingly more complex challenges. For that reason, our state health department undertook this task in partnership with ten organizations all sharing a common goal: to eliminate the harm caused by tobacco in the state of Louisiana. This plan represents the continuation and elevation of that goal from ideas to practice, from intention to operation. I am encouraged by the momentum around this process and will do everything I can to ensure this continues now and into the future. The commitment of our organization and our partners to a healthier Louisiana is made possible by the spirit and collaboration of our state’s neighborhoods, towns and cities. Together, we can move Louisiana’s health forward.

M. Beth Scalco
Assistant Secretary of the Office of Public Health
Louisiana Department of Health
Credits & Acknowledgments

The Louisiana Department of Health’s Office of Public Health would like to acknowledge and thank the following individuals for their dedicated participation in large group meetings, small workgroups and implementation discussions to make the Louisiana Tobacco Control Strategic Plan a reality. This plan would not have been possible without their input and efforts.

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The following acronyms are used frequently throughout this document and listed below for easy reference:

American Cancer Society (ACS)
American Cancer Society – Cancer Action Network (ACS-CAN)
American College of Physicians (ACP)
American Heart Association (AHA)
American Medical Association (AMA)
American Nurses Association (ANA)
Area Health Education Centers (AHEC)
American Lung Association (ALA)
Adult Tobacco Survey (ATS)
Association for Non-Smokers Rights (ANSR)
Behavioral Risk Factor Surveillance System (BRFSS)
Cancer Association of Greater New Orleans (CAGNO)
Campaign for Tobacco-Free Kids (CTFK)
Coalition for a Tobacco-Free Louisiana (CTFLA)

Current Population Survey Tobacco Use Supplement (CPS-TUS)
Louisiana Department of Health (DHH)
Office of Public Health, Well-Ahead Louisiana (OPH)
Louisiana Healthy Communities Coalition (LHCC)
Louisiana Cancer Research Center (LCRC)
Louisiana Cancer Prevention (LCP)
Louisiana Public Health Institute (LPHI), Campaign for Tobacco-Free Living (TFL)
Market Dynamics Research Group (MDRG)
The Rapides Foundation (TRF)
Smoke Free Coalition (SFC)
Smoking Cessation Trust (SCT)
Youth Tobacco Survey (YTS)
Summary and Description
The Louisiana Office of Public Health was tasked with creating a five-year strategic plan for tobacco control. The strategic planning process was designed to be collaborative and inclusive. Louisiana has strong statewide partner organizations that play critical roles in contributing experience, expertise and local knowledge to tobacco control. Through a series of five meetings, the partner organizations developed goals, objectives and strategies that are designed to be evidence based and effective at improving the health of Louisiana residents, all while reflecting the intentions, plans and goals of partner organizations.

Achieving Outcomes
Evidence suggests that public health problems are most effectively addressed through complex, multifaceted approaches. As a long-standing complex public health concern, tobacco use, both nationally and in Louisiana, requires a multidimensional strategy in order to achieve the outcomes of interest: improving the health of Louisiana residents and eliminating the harms caused by tobacco use. The Centers for Disease Control and Prevention’s five key components of programs that are shown to successfully combat the issue of tobacco use:

1. Youth Prevention
2. Eliminating Secondhand Smoke Exposure
3. Promoting Cessation
4. Eliminating Disparities
5. Statewide Coordination And Evaluation/Surveillance

The strategies identified within this plan align with these key areas and are designed to lower the prevalence of tobacco use in Louisiana through direct cessation efforts, prevention initiatives and enactment of policies that support and encourage a tobacco-free environment.

Planning For Success
This document presents a summary of short (by 2017), intermediate (by 2019) and long-term objectives (by 2021) for each goal area. Additionally, the July 2016 to June 2018 action plan is designed to meet all short-term objectives per goal area and is outlined in greater detail below the summary table. Each strategy has been assigned to a lead organization or agency. These “leads” are responsible for conducting or directing the work necessary to complete each strategy and are to report back to the larger group of partners on progress each quarter. As such, responsibility for implementing the plan is shared by all statewide partners.

Within each of the five content areas of the strategic plan (youth prevention, eliminating secondhand smoke exposure, promoting cessation, eliminating disparities and statewide coordination/evaluation/surveillance), strategies designed to reduce health disparities...
have been identified. In addition, a new statewide taskforce has been proposed as the primary activity under area four (eliminating disparities) to meet quarterly and review available data and assess both progress toward goals as well as any potentially unintended consequences of activities undertaken by state partners in the area of health equity.

**Realigning Efforts To Maximize Impact**

The elements of the strategic plan were developed based on the contributions of all statewide partner organizations to date and attempts to fill the gaps between these organizations by creating a mechanism for coordination of all of Louisiana’s tobacco control efforts. The strategic planning process itself is a way to realign the efforts of individual partners and ensure that efforts and activities moving forward would be streamlined, integrated and targeted to achieve the maximum possible impact. Two examples are in the areas of youth prevention and statewide coordination. Youth tobacco control efforts, while robust in the past, are lacking current coordination and integration with other elements of statewide tobacco control activities. The coming year is an ideal opportunity to reassess which organizations are engaged in youth tobacco control efforts and what the landscape of those efforts looks like. The mechanism for conducting this work will be a youth prevention workgroup. After completing an environmental scan, the workgroup will conduct a gap analysis and SWOT analysis and, in collaboration with other statewide partner organizations, develop a coordinated statewide strategic plan for youth prevention efforts. Strategic planning elements will be based on an assessment of efforts in other states that have been particularly effective at reducing youth initiation and prevalence.

**All Data, All Together**

In addition to coordinated youth prevention efforts, another gap identified by statewide tobacco control partners in Louisiana was the lack of standardization for data points used and cited, talking points and key messages. As is summarized in section five of this document and in the communications plan, creating a central data warehouse for all tobacco-related data and key communications materials in Louisiana will begin to fill that gap, as will developing a process for coordinating talking points, presentations, fact sheets and publications that use statewide surveillance and evaluation data.

**Sustainability Plan**

According to the CDC, sustainability includes “efforts that enhance the long-term impact of the tobacco control program’s activities.” Throughout this document, strategies and activities that will enhance the long-term impact of the tobacco control program are highlighted and summarized at the end of each of the five sections corresponding to critical areas of interest for tobacco control. A special emphasis was placed on the passage of policies, the enactment of systems changes and the creation of statewide coordination infrastructure.
Building Strong Relationships
In addition, statewide partners selected strengthening relationships with partners as a primary focus for 2016-2017 in order to drive tobacco control at the community level with respect to sustainability of the tobacco control program. As a first step, a matrix of community partners will be developed to identify the engagement happening between statewide tobacco control organizational partners and their community partners, track how information is being disseminated through these community partners, determine if there is an increase in utilization of services in reference to the information disseminated and help us identify gaps in the populations to whom we are disseminating information. This analysis will then guide the development of a community outreach and engagement plan. The template for the sustainability partnership matrix is included.

Communications Plan
The third and final element of the planning documents is the statewide tobacco control communications plan. The communications plan is presented as a separate document and maps out the five sections of the strategic plan. It focuses on the coordination of external communications efforts for tobacco control in Louisiana. Communication and coordination within and between the statewide organizational partners is addressed in area five of the strategic plan: statewide coordination. Specific workplans will be developed based on the guidance provided by the communications plan in response to the needs identified by each area of the strategic plan. Of note, each organization will have one point person to facilitate interactions between their organization and the communications team with respect to communications activities and strategies. The point person should be identified by June 2016. The communications plan will be reviewed annually in January along with the strategic plan and sustainability plan.

Coordination and Annual Review
To ensure the momentum generated by the strategic planning process is maintained and impose a level of accountability on the process, statewide partners have committed to reconvene quarterly throughout the first year of the funding period. At each meeting, partners will report on progress to date for each of the five strategic plan areas, the sustainability plan and the communications plan. In January of each year of the funding period, the entire strategic plan, sustainability plan and communications plan will be reviewed and revised if needed depending on changes in the environment, levels of available resources or emerging opportunities. The timing of this meeting will provide guidance and input for each organization’s annual budget planning process. In this way, the plans maintain their flexibility and allow statewide partners to adapt while maintaining a consistent course heading over time.
### GOALS

#### 1.1 Develop a strategic framework for implementing, monitoring, assessing, and improving youth-related programmatic activities across organizations statewide by 2018.

- **SHORT TERM OBJECTIVES (BY 2017)**
  - 1.1.1 Identify and engage Louisiana organizations conducting youth tobacco control efforts by 2017.
  - 1.1.2 Crosswalk the information provided by each organization identified in the fulfillment of objective 1.1.1 to determine the current landscape of youth tobacco control efforts in Louisiana and plan for coordination of future efforts by 2017.

- **INTERMEDIATE OBJECTIVES (BY 2019)**
  - 1.1.3 Develop a coordinated and strategic plan for future youth tobacco control efforts across the state of Louisiana by 2018.

- **LONG TERM OBJECTIVES (BY 2021)**
  - TBD by June 2018

#### 1.2 Reduce the proportion of youth initiating tobacco use

- **SHORT TERM OBJECTIVES (BY 2017)**
  - TBD by June 2018

- **INTERMEDIATE OBJECTIVES (BY 2019)**
  - 1.2.1 Establish baseline measures and interim targets for the proportion of youth who report having ever tried a cigarette, and (1.2.2) having ever tried other forms of tobacco.

- **LONG TERM OBJECTIVES (BY 2021)**
  - TBD by June 2018

#### 1.3 Reduce youth prevalence of tobacco use

- **SHORT TERM OBJECTIVES (BY 2017)**
  - TBD by June 2018

- **INTERMEDIATE OBJECTIVES (BY 2019)**
  - 1.3.1 Establish baseline measures and interim targets for the proportion of youth who report having smoked 100 cigarettes in their lifetime and (1.3.2) having used tobacco on at least one day in the past 30 days.

- **LONG TERM OBJECTIVES (BY 2021)**
  - TBD by June 2018

#### 1.4 Reduce youth prevalence of e-cigarette (e-cig) use

- **SHORT TERM OBJECTIVES (BY 2017)**
  - TBD by June 2018

- **INTERMEDIATE OBJECTIVES (BY 2019)**
  - 1.4.1 Establish baseline measures and interim targets for the proportion of youth who report having ever tried e-cigs and (1.4.2) having used e-cigs on at least one day in the past 30 days.

- **LONG TERM OBJECTIVES (BY 2021)**
  - TBD by June 2018

#### 1.5 Increase the tobacco tax

- **SHORT TERM OBJECTIVES (BY 2017)**
  - 1.5.1 Increase the state’s tobacco tax from $1.08 to $2.58

- **INTERMEDIATE OBJECTIVES (BY 2019)**
  - 1.5.1 Increase the state’s tobacco tax from $1.08 to $2.58 (depending on outcome from previous legislative session)

- **LONG TERM OBJECTIVES (BY 2021)**
  - 1.5.1 Increase the state’s tobacco tax from $1.08 to $2.58 (depending on outcome from previous legislative session)
Develop a strategic framework for implementing, monitoring, assessing, and improving youth-related programmatic activities across organizations statewide by 2018

**Partners**
TFL, The Rapides Foundation, OPH and others to be determined

**Data Sources**
Survey of statewide partners, quarterly Youth Prevention workgroup meetings

**Measures**
Creation of a coordinated statewide Strategic Plan for youth tobacco control efforts; YTS items for ever use of cigarettes, e-cigs, and other forms of tobacco; past 30-day use of cigarettes, e-cigs, and other forms of tobacco; and lifetime use of 100 cigarettes.

**Strategy Summary**
- By September 2016, identify Youth Prevention workgroup members (lead: The Rapides Foundation /TFL)
- By September 2016, establish quarterly meetings of Youth Prevention workgroup (lead: The Rapides Foundation/TFL)
- By October 2016, establish purpose and scope of Youth Prevention workgroup (lead: The Rapides Foundation /TFL)
- By January 2017, create a database of statewide organizations engaging in youth tobacco control efforts by surveying those organizations. (lead: The Rapides Foundation /TFL)
- By March 2017, determine current landscape of ongoing youth tobacco control efforts (lead: The Rapides Foundation /TFL)
- By June 2017, determine plan for coordination of future efforts (lead: The Rapides Foundation /TFL)
- By December 2017, conduct gap analysis & SWOT analysis (lead: The Rapides Foundation /TFL)
- By June 2018, develop coordinated statewide strategic plan for Youth Prevention efforts, including baseline measures and interim targets for goals 1.2, 1.3, 1.4 (lead: The Rapides Foundation /TFL)

**Timeline for Review**
Annually in January

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Increase the Tobacco Tax

**Partners**
Invest Campaign Team: TFL, ACS-CAN, AHA, ALA, CTFK, March of Dimes; OPH, LCCP

**Data Sources**
Department of Revenue, CTFK

**Measures**
Amount tax increased from current amount of $1.08

**Strategy Summary**
- Weekly until June 30, 2017 – lobbying LA legislators for tobacco tax increase (dependent on 2016 outcome) (lead: Invest Campaign Team)
- Weekly until June 30, 2019 – lobbying LA legislators for tobacco tax increase (dependent on 2017 outcome) (lead: Invest Campaign Team)
- Weekly until June 30, 2021 – educate community members, state lawmakers, organizations on tobacco control best practices (lead: OPH, LCCP)
- Weekly until June 30, 2021 – advocate for tobacco tax increase to community members, state lawmakers and organizations (lead: Invest Campaign Team)

**Timeline for Review**
Annually in January
Youth tobacco control efforts, while robust in the past, are lacking current coordination and integration with other elements of statewide tobacco control activities. The coming year is an ideal opportunity to re-assess which organizations are engaged in youth tobacco control efforts, and what the landscape of those efforts looks like. The mechanism for conducting this work will be a Youth Prevention workgroup. Based on the environmental scan, the workgroup will conduct a gap analysis and SWOT analysis, and in collaboration with other statewide partner organizations, develop a coordinated statewide strategic plan for Youth Prevention efforts. Strategic planning elements will be based on an assessment of efforts in other states that have been particularly effective at reducing youth initiation and prevalence. Specific baseline measures and interim targets for goals 1.2, 1.3, and 1.4 will be identified as part of the planning process by June 2018.

The newly created Tobacco Control Disparities Taskforce (see Goal Area four) will be responsible for monitoring efforts in youth prevention on an annual basis to determine what impact they are having on health disparities. Regional variation in youth prevalence rates may trigger targeted efforts designed to reduce inequalities based on geography. Increase in tax should result in decrease in smoking prevalence among youth and adults, particularly low-SES adults, thus reducing current inequities in prevalence rates.

Developing a framework for addressing youth prevention efforts will result in a coordinated plan among all statewide tobacco control organizations for incorporating youth prevention into their work. This framework and resulting infrastructure will extend the impact of the work undertaken by Louisiana partners.

Increasing the state tobacco tax will have a long-term impact on both reducing youth initiation and increasing youth cessation.
<table>
<thead>
<tr>
<th>GOALS</th>
<th>SHORT TERM OBJECTIVES (BY 2017)</th>
<th>INTERMEDIATE OBJECTIVES (BY 2019)</th>
<th>LONG TERM OBJECTIVES (BY 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Enact policies that increase the number of smoke-free and tobacco-free spaces in Louisiana</td>
<td>2.1.2 By June 2017, increase the number of municipalities (N=337) with public policies for smoke-free workplaces and other indoor and outdoor public places that include bars and gaming facilities from 9 to 12.</td>
<td>2.1.3 By June 2019, increase the number of municipalities (N=337) with public policies for smoke-free workplaces and other indoor and outdoor public places that include bars and gaming facilities from 12 to 15.</td>
<td>2.1.1 By June 2021, strengthen the statewide Clean Indoor Air Act to include all workplaces (extend to bars and gaming facilities, and close loopholes) without preemption.</td>
</tr>
<tr>
<td></td>
<td>2.1.5 By June 2017, increase the number of designated Well-Ahead Louisiana WellSpots (worksites, hospitals, colleges, schools, child care centers, and restaurants) from 1200 to 1700.</td>
<td>2.1.6 By June 2019, increase the number of designated Well-Ahead Louisiana WellSpots (worksites, hospitals, colleges, schools, child care centers, and restaurants) from 1700 to 2300.</td>
<td>2.1.4 By June 2021, increase the number of municipalities (N=337) with public policies for smoke-free workplaces and other indoor and outdoor public places that include bars and gaming facilities from 15 to 18.</td>
</tr>
<tr>
<td>2.2 Develop partnerships for expanding smoke-free air policies in municipalities that do not have a policy</td>
<td>2.2.1 By December 2016, develop a joint policy document to track smoke-free and tobacco-free efforts for all statewide organizations including all the coalitions that are involved.</td>
<td></td>
<td>2.1.7 By June 2021, increase the number of designated Well-Ahead Louisiana WellSpots (worksites, hospitals, colleges, schools, child care centers, and restaurants) from 2300 to 2800.</td>
</tr>
</tbody>
</table>
Goal Area 2

July 2016 to June 2018 Action Plan

2.1.1 Strengthen the statewide Clean Indoor Air Act to include all workplaces

<table>
<thead>
<tr>
<th>Partners</th>
<th>Smoke-Free Coalition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>Legislative document, Smoke-Free Coalition meeting summaries and documentation</td>
</tr>
<tr>
<td>Measures</td>
<td>Enactment of an expanded statewide, comprehensive law (TFL)</td>
</tr>
</tbody>
</table>
| Strategy Summary  | • By December 2016, identify Champions to support the bill in the legislature (lead: ACS-CAN)  
• By March 2017, host education, advocacy/lobby day at the capitol to educate on behalf of tobacco (lead will be identified by June 2016)  
• Ongoing until law is passed: educate legislators and the community on the dangers of secondhand smoke, vaping and inhaling (lead: TFL)  
• Ongoing until law is passed: lobbying LA legislators in support of the statewide comprehensive clean indoor air act; and to avoid pre-emption in the bill, using communications (outreach, media campaigns), medical experts, coalition support (lead will be identified by June 2016)  
• Ongoing until law is passed: weekly meetings of Smoke-Free Coalition (lead: TFL) |
| Timeline for Review | Weekly during Smoke-Free Coalition meetings, and formal review of objective and strategies annually in January |

2.1.2-7 Increase the number of municipalities with public policies for smoke-free workplaces and other indoor and outdoor public places, and number of WellSpots

<table>
<thead>
<tr>
<th>Partners</th>
<th>TFL, OPH, LHCC, local elected officials, local healthcare providers, school leads, business leaders, child care center leads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>TFL policy tracker (TFL); WellSpot database (OPH, PBRC)</td>
</tr>
<tr>
<td>Measures</td>
<td>Number of municipalities (N=337) with public policies for smoke-free workplaces and other indoor and outdoor public places that include bars and gaming facilities. The proportion of Louisianans who are protected from secondhand smoke (numerator: population of all combined municipalities that are smoke-free; denominator: Louisiana population). Number and reach of WellSpots with 100% tobacco-free or 100% smoke-free policies.</td>
</tr>
</tbody>
</table>
| Strategy Summary  | • By December 2016, and quarterly thereafter, identify local municipalities interested/ready to move forward with an ordinance (lead: TFL)  
• By December 2016, and monthly thereafter, recruit grassroots supporters (lead: TFL)  
• By December 2016, develop educational material for local elected officials and community members on the dangers of secondhand smoke, vaping, and inhaling (lead: OPH, TFL)  
• By June 2017, design and implement information/materials distribution and education strategy for local elected officials and community members (lead: TFL, OPH)  
• By June 2017 and ongoing, partner with the Louisiana Municipal Association (lead: TFL)  
• By December 2016 and ongoing, disseminate information regarding WellSpots to coalitions & organizations statewide, and drive sites back to Well-Ahead for WellSpot designation. (lead: OPH) |
| Timeline for Review | Annually in January |
Goal Area 2

2.2.1 Develop a joint policy document to track smoke-free and tobacco-free efforts for all statewide organizations including all the coalitions that are involved

<table>
<thead>
<tr>
<th>Partners</th>
<th>OPH, TFL, LHCC, Smoke-Free Coalition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>TFL Policy Tracker, Sustainability Partnership Matrix.</td>
</tr>
<tr>
<td>Measures</td>
<td>A tracking document for all smoke-free efforts in Louisiana, the number of partnerships or organizations that support smoke-free efforts in Louisiana</td>
</tr>
<tr>
<td>Strategy Summary</td>
<td>By December 2016, create joint policy tracking document to track all smoke-free and tobacco-free efforts for statewide partner organizations (lead: TFL)</td>
</tr>
<tr>
<td>Timeline for Review</td>
<td>Review progress quarterly at meetings, and formal review annually in January.</td>
</tr>
</tbody>
</table>

Additional Critical Information

Rationale and Background

Goal 2.1 focuses on the creation of policies that expand the number of smoke-free spaces, and the number of people protected from exposure to secondhand smoke because of those policies. Expanding the Clean Indoor Air Act is a major priority for nearly all statewide tobacco control partners, and a significant amount of time and resources are being devoted to achieving this goal in the coming years. Simultaneously, partner organizations are pursuing voluntary policies at workplaces and public places both to generate support for a comprehensive statewide clean air law, and to fill in the gaps left by the current statewide law. One of the criteria for becoming a WellSpot is to enact a 100% tobacco-free or smoke-free policy, which is complementary to voluntary policies, and focuses primarily on worksites, hospitals, colleges, schools, childcare centers, and restaurants.

Goal 2.2 focuses on understanding and tracking partnerships for expanding smoke-free policies in the state. This is supportive and part of sustainability efforts in Louisiana for the coming year, which are focusing on identifying and expanding local community support for tobacco control efforts in Louisiana (see Sustainability Partnership Matrix in Appendix A).

Health Equity Components

The passage of comprehensive smoke-free policies has been associated with an overall decline in smoking prevalence. Further, such a law would serve to mitigate current occupational disparities in protections from secondhand smoke. Right now, certain types of workplaces experience higher secondhand smoke exposure rates (e.g., bars, gambling facilities, manufacturing plants) while in comparison state workers are covered by a tobacco-free policy and are not exposed at work. A comprehensive clean air policy would create a level playing field, and assure that all workers can work in a smoke-free environment. In addition, the newly created Tobacco Control Disparities Taskforce (see Goal Area four) will be responsible for monitoring efforts in secondhand smoke prevention on an annual basis to determine what impact they are having on health disparities.

Sustainability Elements

All policy-related goals and objectives are designed to establish long-term change and sustain/enhance the impact of the work being done over the next five years. Partnerships with all statewide and local supporting organizations are critical to the success of this work, both now and in the future.
### GOALS

3.1 Reduce tobacco use prevalence among adults and youth

- **3.1.1** Increase by 10% the proportion of current adult smokers who report awareness of cessation services to help them quit, including:
  - Telephone quit-line services by 2018 (baseline and target to be determined with 2016 ATS)
  - Individual or group counseling services, other than quit-lines, from 42% to 46% by 2018

- **3.1.2** Increase by 30% the proportion of current adult smokers who report using an evidence-based service the last time they tried to quit, including:
  - a telephone quit-line, from 3.82% to 4.97% by 2018
  - a class or program, from 3.63% to 4.72% by 2018
  - one-on-one counseling from a health professional, from 4.78% to 6.21% by 2018
  - medication, from 25.24% to 32.81% by 2018

- **3.1.3** Increase the proportion of current adult smokers who report a health professional put them in contact with, or told them how to contact, a telephone quit-line, a class or program, or one on one counseling, by 2018 (baseline and target to be determined with 2016 ATS).

- **3.1.4** Increase by 10% the proportion of smokers who report that they stopped smoking for one day or longer in the prior 12 months in an attempt to quit, including:
  - adult smokers from 63% to 69% by 2021
  - middle schoolers, from 75.8% to 83.3% by 2021
  - high schoolers from 57.5% to 63.3% by 2021

3.2 Expand cessation treatment coverage by insurers and health plans

- **3.2.1** Increase the number of insurers/health plans providing comprehensive cessation services (i.e. counseling, and medications with no co-payment or counseling requirement, limit duration, or prior authorization provision) to their members from 0 to 3 by 2019

### INTERMEDIATE OBJECTIVES

3.1.1 Increase by 10% the proportion of current adult smokers who report awareness of cessation services to help them quit, including:

- Telephone quit-line services by 2018 (baseline and target to be determined with 2016 ATS)
- Individual or group counseling services, other than quit-lines, from 42% to 46% by 2018

3.1.2 Increase by 30% the proportion of current adult smokers who report using an evidence-based service the last time they tried to quit, including:

- a telephone quit-line, from 3.82% to 4.97% by 2018
- a class or program, from 3.63% to 4.72% by 2018
- one-on-one counseling from a health professional, from 4.78% to 6.21% by 2018
- medication, from 25.24% to 32.81% by 2018

3.1.3 Increase the proportion of current adult smokers who report a health professional put them in contact with, or told them how to contact, a telephone quit-line, a class or program, or one on one counseling, by 2018 (baseline and target to be determined with 2016 ATS).

3.1.4 Increase by 10% the proportion of smokers who report that they stopped smoking for one day or longer in the prior 12 months in an attempt to quit, including:

- adult smokers from 63% to 69% by 2021
- middle schoolers, from 75.8% to 83.3% by 2021
- high schoolers from 57.5% to 63.3% by 2021

### LONG TERM OBJECTIVES (BY 2021)

3.1.5 Decrease prevalence among adults and youth, including:

- tobacco use among adults by 10% from 23.4% to 21.1% by 2021
- tobacco use among youth by 10% by 2021 (baseline to be determined with 2017 YTS)
- smokeless tobacco use among adults by 2% from 5% to 4% by 2021
- smokeless tobacco use among youth by 2% by 2021 (baseline to be determined with 2017 YTS)
### Goal Area 3

#### July 2016 to June 2018 Action Plan

**Reduce tobacco use prevalence by increasing awareness and use of cessation services, and increasing the number of quit attempts and successful quits**

<table>
<thead>
<tr>
<th>Partners</th>
<th>OPH, SCT, TCI, TFL, ACS, Louisiana private insurers, Bayou Health insurers; other health systems and providers; trade organizations (e.g., AMA, ANA, ACP), CAGNO, The Rapides Foundation, AHECs, healthcare professionals, EQ Health Solutions, Optum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>ATS, BRFSS, To-be-created central data source for number of referrals sent to cessation services, number of people served by cessation services</td>
</tr>
</tbody>
</table>
| Measures | • Proportion of adult smokers who report awareness of cessation services  
• Number of adult smokers who have been referred to cessation services  
• Number of adult smokers served by cessation services  
• Proportion of adult/youth smokers participating in and/or who self-report participating in a cessation service to help them quit  
• Proportion of adult smokers who report stopping smoking for 1 day or longer in the prior 12 months in an attempt to quit  
• Proportion of high school and middle school youth smokers who report trying to quit smoking cigarettes during past year  
• Proportion of the Louisiana adult population who are current smokers and who use smokeless tobacco |
| Strategy Summary | • By June 2017, work with the communication team to identify, disseminate and promote coordinated cessation services messaging and materials (lead: TFL)  
• By June 2017, work with Goal Area one to develop an integrated approach to youth prevention and cessation efforts in Louisiana (lead: TCI)  
• By June 2017, determine whether it is possible to create a central data source for number of referrals to cessation services, and number of people served by cessation services (lead: TFL)  
• By June 2017, lobby to ensure necessary questions for measuring success are included in the 2018 surveys (lead to be determined by June 2016)  
• By June 2017, promote increased referrals from healthcare providers as part of health systems change efforts (establish referral systems to cessation service providers/quitline) (lead: SCT,TFL)  
• By June 2017, promote increased referrals between cessation service providers (lead: TFL, OPH)  
• By June 2018, promote increased referrals from non-traditional organizations (lead: OPH) |
| Timeline for Review | Annually in January |

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**Increase the number of insurers/health plans providing comprehensive cessation services to their members**

<table>
<thead>
<tr>
<th>Partners</th>
<th>TFL, SCT, ACS, ALA, OPH, Insurance commissioner, Bayou Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>ALA Report Card</td>
</tr>
<tr>
<td>Measures</td>
<td>Development of a plan to work with insurers/health plans; Number of insurers/health plans providing comprehensive cessation services to their members</td>
</tr>
</tbody>
</table>
| Strategy Summary | • By June 2017, develop a plan for working with insurers/health plans to improve coverage for cessation services, including who will take the lead, baseline and target measures (lead: OPH)  
• By June 2018, implement the plan (lead to be determined by June 2016) |
| Timeline for Review | Annually in January |
Goal Area 3

Additional Critical Information

| Rationale and Background | While the title of this Goal Area is promoting quitting, we see the ultimate outcome of our efforts as reducing population prevalence of tobacco use. Based on tobacco control logic models, reducing prevalence is preceded by increasing awareness of cessation services, increasing use of those services, increasing the number of quit attempts, and increasing the number of successful quits. A separate, but related issue focuses on accessibility of cessation services through increasing coverage of those services by insurers/health plans. Through efforts to promote awareness and use of cessation services, more people will make quit attempts, and more people will be successful in those attempts. Most strategies target the adult population, although we will continue to monitor key measures among youth as well. More specific planning for youth cessation will take place in tandem with the planning efforts for Goal Area one in order to leverage resources and maximize efforts.

Currently, there is no measure for awareness of cessation services among youth. As part of the planning process around both youth prevention and cessation, we will work with OPH to include a question on the YTS that measures awareness of cessation services. Once added, the measure of youth awareness of cessation services can be included as part of the Strategic Plan.

Regarding use of cessation services, there are three primary providers of services: SCT, Quitline, and TCI. Tobacco users are asked about whether they used different types of cessation assistance the last time they tried to quit as part of the ATS. While actual utilization numbers from the three cessation providers would be preferable, it is not possible to obtain them at this time. Similarly, referrals to cessation services is an excellent measure of the impact of health systems change work. Health systems change work is prioritized in this Strategic Plan as one of the best ways to enhance the sustainability of tobacco control efforts in the state. However, there is no centralized measure for the number of referrals made to cessation services right now. Over the course of the next year, SCT, TCI, and the quitline will explore whether the creation of such data sources is possible. |

| Health Equity Components | The newly created Tobacco Control Disparities Taskforce (see Goal Area four) will be responsible for monitoring efforts in youth and adult prevention on an annual basis to determine what impact they are having on health disparities. Organizations working on cessation efforts will identify disparate populations based on disparities work group and survey results, and adjust strategies/activities as needed during the January annual review. |

| Sustainability Elements | Embedding tobacco cessation within health systems as part of systems change efforts is a proven way to enhance the sustainability of tobacco control programming in LA. |
## Eliminate Disparities Related to Tobacco-Use

### July 2016 to June 2021 Strategic Plan Summary

#### GOALS

4.1 By April 1, 2021, reduce tobacco use among youth, low socioeconomic status, racial and ethnic minorities by meeting strategic goal area workgroup objectives through the Coordinated Tobacco Disparities Statewide Taskforce.

<table>
<thead>
<tr>
<th>SHORT TERM OBJECTIVES (BY 2017)</th>
<th>INTERMEDIATE OBJECTIVES (BY 2019)</th>
<th>LONG TERM OBJECTIVES (BY 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.1 By the end of 2016, establish Coordinated Tobacco Disparities Statewide Taskforce.</td>
<td>4.1.2 By June 2018, analyze available data to produce specific fact sheets and joint talking points for the five identified priority populations with tobacco-related disparities.</td>
<td>4.1.3 By June 2021, monitor and update statewide strategic goal area strategies and objectives, available data, and population-specific fact sheets.</td>
</tr>
</tbody>
</table>

### July 2016 to June 2018 Action Plan

#### Establish Coordinated Tobacco Disparities Statewide Taskforce

<table>
<thead>
<tr>
<th>Partners</th>
<th>OPH, TCI, TFL, The Rapides Foundation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>Taskforce meeting minutes, agendas, plans, documents</td>
</tr>
<tr>
<td>Measures</td>
<td>Taskforce members identified, meetings held quarterly, Strategic Plan updated, data analyzed, fact sheets and talking points developed</td>
</tr>
</tbody>
</table>
| Strategy Summary | • By December 2016, establish the role, functions, membership, meeting frequency of Coordinated Tobacco Disparities Statewide Taskforce, including identifying a Taskforce Lead (lead: TFL)  
• By December 2016, identify 5 priority populations (lead: TFL)  
• By January 2017, Obtain reports of corresponding Strategic Priority Areas measures through collaborating with the evaluation and measurement team (lead: TFL)  
• By March 2017, identify the population framework and corresponding measures per population/subpopulation group (lead: Disparities Taskforce)  
• By April 1, 2017, establish data analysis schedule for the updating of tobacco use statistics for the five identified populations with tobacco-related disparities (lead: TFL)  
• By June, 2018, disseminate tobacco-related disparities population fact sheets and talking points among five identified organizations/agencies serving the populations (lead: Disparities Taskforce)  
• Annually review the most recent data and utilize the CDC’s Best Practices User Guide on Health Equity in Tobacco Prevention and Control to help create the goals, objectives and strategies to update goals, objectives, strategies, fact sheets and joint talking points (lead: Disparities Taskforce) |
| Timeline for Review | Annually in January |
Currently, no coordinated mechanism exists to study, measure, or influence efforts to reduce disparities in tobacco control systematically in Louisiana. The Tobacco Disparities Statewide Taskforce is the proposed mechanism by which all tobacco control efforts will be examined to determine how strategies can be coordinated across the state and among different organizations, to understand the impact current programming has on disparities (intended or otherwise), and to hold all statewide partners accountable. The ultimate goal of the Taskforce is to review programs and their impact on disparities regularly and systematically.

The Tobacco Control Disparities Taskforce will be responsible for monitoring efforts in all goal areas on an annual basis to determine what impact they are having on health disparities. The entire goal area is focused on improving health equity, and provides a framework for coordinating efforts and providing accountability for how other tobacco control goals, objectives, and strategies impact health equity.

The creation of a disparities taskforce will provide the mechanism to look at disparities and health equity as they relate to tobacco control in a coordinated and integrated way.
### Goal Area 5

**Statewide Coordination and Evaluation/Surveillance**

#### July 2016 to June 2021 Strategic Plan Summary

<table>
<thead>
<tr>
<th>GOALS</th>
<th>SHORT TERM OBJECTIVES (BY 2017)</th>
<th>INTERMEDIATE OBJECTIVES (BY 2019)</th>
<th>LONG TERM OBJECTIVES (BY 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1</td>
<td>5.1.1 Create a centralized warehouse for tobacco-related data.</td>
<td>5.1.4 By June 2018, all statewide tobacco control partner organizations will be using the data warehouse and the information stored there actively and in a consistent manner.</td>
<td>5.2.8: By March 31, 2020, successfully secure funding and partnerships to prepare for the 2021 YTS.</td>
</tr>
<tr>
<td></td>
<td>5.1.2 Establish and maintain a collaborative process to create and review presentations, fact sheets, etc.</td>
<td>5.2.5 By March 31, 2018, complete one joint special analysis of existing data and/or primary data collection for one selected disparate population.</td>
<td>5.2.9 By October 2020, complete data collection for 2020 ATS.</td>
</tr>
<tr>
<td></td>
<td>5.1.3 By June 2017, establish core statistical talking points and consensus on corresponding data source(s) for use by all partners.</td>
<td>5.2.6 By October 2018, complete data collection for 2018 ATS.</td>
<td>5.2.10 By March 2021, successfully implement 2021 YTS.</td>
</tr>
<tr>
<td>5.2</td>
<td>5.2.1 By July 2016, establish a protocol for analyses, citation/documentation, and approval and authorship of joint publications.</td>
<td>5.2.7: By May 31, 2019, successfully implement and increase the sample size for the 2019 YTS to obtain regional estimates.</td>
<td>5.2.11: By March 31, 2021, complete one joint analysis of existing data and/or primary data collection for one selected disparate population.</td>
</tr>
<tr>
<td></td>
<td>5.2.2 By December 2016, develop a process for coordination among statewide strategic partners to support implementation of surveillance surveys.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5.2.3 By October 2016, complete data collection for 2016 ATS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5.2.4 By May 2017, complete data collection for 2017 YTS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5.2.5 By March 31, 2017, and annually thereafter, enhance surveillance and evaluation coordination of public data collection among statewide strategic partners to conduct surveillance surveys, conduct analysis of collected data, and release joint publications.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5.2.6 By October 2016, complete data collection for 2016 ATS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5.2.7: By May 31, 2019, successfully implement and increase the sample size for the 2019 YTS to obtain regional estimates.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Goal Area 5

### July 2016 to June 2018 Action Plan

#### Develop a centralized warehouse and a process for statewide surveillance and evaluation data coordination

<table>
<thead>
<tr>
<th>Partners</th>
<th>TFL, OPH, PBRC, The Rapides Foundation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>Data warehouse, Evaluation team meeting minutes and documents</td>
</tr>
<tr>
<td>Measures</td>
<td>Creation and functioning of a central data warehouse</td>
</tr>
<tr>
<td>Strategy Summary</td>
<td></td>
</tr>
</tbody>
</table>
  - By April 2016, establish and maintain monthly coordination calls/meetings in year one for tobacco surveillance and evaluation, and quarterly in years two through five (lead: TFL)  
  - By December 2016, establish a data share agreement and data warehouse to store and share tobacco-related surveillance data among partners in the state (lead: TFL)  
  - By December 2016, establish a process for cross organization coordination and review of fiscal year activity planning and budgeting in order to prevent duplication of efforts and maximize/leverage financial resources for the next fiscal year (lead: TFL, OPH)  
  - By January 2017, conduct cross organization coordination and review of fiscal year activity planning and budgeting in order to prevent duplication of efforts and maximize/leverage financial resources for the next fiscal year (lead: TFL, OPH)  
  - By March 2017, establish protocols for analyses, citation/documentation, and approval and authorship for all Strategic Plan partners (lead: OPH)  
  - By June 2017, create and distribute a brief introduction kit and contact list for legislators and community partners that describes which organizations are involved in tobacco work throughout the state and how we work together (lead: TFL) |
| Timeline for Review       | Annually in January |

#### Conduct surveillance surveys, conduct analysis of collected data, and release joint publications

<table>
<thead>
<tr>
<th>Partners</th>
<th>TFL, OPH, PBRC, The Rapides Foundation, DisparitiesTaskforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Sources</td>
<td>ATS, YTS</td>
</tr>
<tr>
<td>Measures</td>
<td>Established data share agreement, established protocol for analysis and publications, completion of 2016 ATS, completion of 2017 YTS</td>
</tr>
<tr>
<td>Strategy Summary</td>
<td></td>
</tr>
</tbody>
</table>
  - By July 2016, establish a protocol for analyses, citation/documentation, and approval and authorship of joint publications for TFL and OPH (lead: PBRC)  
  - By September 2016, complete 2013-2015 YTS Analysis and submit first joint publication (lead: OPH)  
  - By October 2016, complete ATS data collection and initial data analysis (lead: TFL)  
  - By January 2017, initiate implementation of the 2017 YTS (lead: OPH)  
  - By February 2017, complete 2012-2016 ATS Analysis and submit first publication(s) (lead: TFL)  
  - By March 2017, complete 2017 YTS Data Collection (lead: OPH)  
  - By April 2017, identify joint project for building the information base for tobacco-related disparities (lead: OPH, Disparities Taskforce)  
  - By February 2018, submit and disseminate results of joint project on tobacco-related disparities (lead: OPH) |
| Timeline for Review       | Annually in January |

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### Additional Critical Information

| Rationale and Background | One of the biggest gaps identified by statewide tobacco control partners in Louisiana is the lack of standardization for data points used and cited, talking points, etc. Creating a central data warehouse for all tobacco-related data in Louisiana will begin to fill that gap, as will developing a process for coordinating talking points, presentations, fact sheets, and publications that use statewide surveillance and evaluation data. |
| Health Equity Components | The work proposed in this area allows for centralization of information and improved, regular communication about data and programming. This makes it easier for us to identify opportunities for collaboration, topics/and disparate populations that may lack sufficient data. The Surveillance and Evaluation partners will also complete two special evaluation projects/analyses that will address health equity before 2021. In addition, the newly created Tobacco Control Disparities Taskforce (see section 4) will be responsible for monitoring efforts in surveillance and evaluation on an annual basis to determine how health disparities are being addressed. |
| Sustainability Elements | The strategies proposed here enhance the long-term impact of work in this area by aligning the data in talking points, presentations, and fact sheets so that all organizations communicate the same message to legislators, community stakeholders, media outlets, and various boards and funders. |
The following matrix has been developed by the sustainability team (TFL, OPH) as part of the sustainability planning work for Louisiana tobacco control. A primary focus for the coming year was selected by statewide partners with respect to sustainability of the tobacco control program: strengthening relationships with partners to drive tobacco control at the community level. As a first step, a matrix of community partners will be developed to identify the engagement happening between statewide tobacco control organizational partners and their community partners, track how information is being disseminated through these community partners, determine if there is an increase in utilization of services in reference to the information disseminated and help us identify gaps in populations to whom we are disseminating information. The matrix legend is provided here and the matrix itself will be filled out by statewide partners by the end of July 2016.

<table>
<thead>
<tr>
<th>Matrix Column Header</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco Control Community Partner</td>
<td>Full name (no acronyms) of the tobacco control community partner</td>
</tr>
<tr>
<td>Statewide Partner Associated</td>
<td>Full name (no acronyms) of the tobacco control statewide partner associated</td>
</tr>
<tr>
<td>Purpose/Objective of Partnership</td>
<td>Brief explanation of the purpose/objective of the partnership between the statewide/community partner</td>
</tr>
</tbody>
</table>
| Related Goal Area | Choose from one or more of the following tobacco control goal areas as you see related to this partnership:  
  • Youth Prevention  
  • Secondhand Smoke Exposure  
  • Cessation  
  • Eliminate Disparities |
| Parish(es)/Municipalities Affected | Insert the parish(es) and municipalities affected by this partner’s work |
| Target Audience | Insert the target audience here (examples: low SES, community leaders, urban population, rural population, school leaders, etc.) |
| Point of Contact (Name, Title, Email, Phone) | Insert the point of contact name, title, email and phone number |
| Type of Engagement | How do the community partners communicate/engage with their statewide partner? Example: Meeting, email, conference call, trainings, etc. |
| Impact/Measure of Success | How is success measured for the community partner? |
| Data Source | If applicable, what data source is used to measure success for the community partner? |
# Appendix

**LOUISIANA TOBACCO CONTROL STRATEGIC PLAN 2016-2021, HIGH LEVEL SUMMARY**

<table>
<thead>
<tr>
<th>Goal</th>
<th>Focus</th>
<th>Main Objectives</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Youth Tobacco Initiation</strong></td>
<td>Prevent initiation of tobacco use among youth</td>
<td><strong>Long Term (3-5 years)</strong>&lt;br&gt;• Develop a coordinated and strategic plan for future youth tobacco control efforts across the state of Louisiana by 2018</td>
<td><strong>Short Term (by 2017)</strong>&lt;br&gt;• Identify and engage Louisiana organizations engaging in youth tobacco control efforts by 2017.&lt;br&gt;• Crosswalk the information provided by each organization identified in the fulfillment of objective 1.1.1 to determine the current landscape of youth tobacco control efforts in Louisiana and plan for coordination of future efforts by 2017.&lt;br&gt;• Increase the state’s tobacco tax from $1.08 to $2.58</td>
</tr>
<tr>
<td><strong>2. Secondhand Smoke</strong></td>
<td>Eliminate nonsmoker’s exposure to secondhand smoke</td>
<td><strong>Long Term (3-5 years)</strong>&lt;br&gt;• Strengthen the statewide Clean Indoor Air Act to include all workplaces (extend to bars and gaming facilities, and close loopholes) without pre-emption.&lt;br&gt;• By June 2021, increase the number of municipalities (N=337) with public policies for smoke-free workplaces and other indoor and outdoor public places that include bars and gaming facilities from 9 to 18.&lt;br&gt;• By June 2021, increase the number of designated Well-Ahead Louisiana WellSpots from Z to A.</td>
<td><strong>Short Term (by 2017)</strong>&lt;br&gt;• Develop partnerships for expanding smoke-free air policies in those municipalities that have not done so.</td>
</tr>
<tr>
<td><strong>3. Smoking Cessation</strong></td>
<td>Promote tobacco cessation among youth and adults</td>
<td><strong>Long Term (3-5 years)</strong>&lt;br&gt;• Decrease tobacco and smokeless tobacco prevalence among adults and youth.</td>
<td><strong>Short Term (by 2017)</strong>&lt;br&gt;• Increase by 10% the proportion of current adult smokers who report awareness of cessation services to help them quit.&lt;br&gt;• Increase by 30% the proportion of current adult smokers who report using an evidence-based service the last time they tried to quit.&lt;br&gt;• Increase the proportion of current adult smokers who report a health professional put them in contact with, or told them how to contact, a telephone quit-line, a class or program, or one on one counseling (target TBD).&lt;br&gt;• Increase by 10% the proportion of smokers who report that they stopped smoking for one day or longer in the prior 12 months in an attempt to quit.&lt;br&gt;• Increase the number of insurers/health plans providing comprehensive cessation services to their members from 0 to 3 by 2019.</td>
</tr>
</tbody>
</table>
## Appendix

### 4. Disparities
**Identify and eliminate tobacco-related disparities**

**Long Term (3-5 years)**
- Analyze available data to produce specific fact sheets and joint talking points for 5 identified priority populations with tobacco-related disparities.
- Monitor and update (annually or bi-annually) Statewide Strategic Goal Area strategies and objectives, available data, and population-specific fact sheets.

**Short Term (by 2017)**
- Establish Coordinated Tobacco Disparities Statewide Taskforce.

### 5. Statewide Coordination, Evaluation, Surveillance

**Long Term (3-5 years)**
- All statewide tobacco control partner organizations will be using the data warehouse and the information stored there actively and in a consistent manner.
- Complete data collection for 2018 YTS, 2019 YTS (with regional estimates), 2021 YTS, 2020 ATS, and 2021 YTS.
- Complete two joint analyses of existing data and/or primary data collection for two selected disparate population.

**Short Term (by 2017)**
- Establish Coordinated Tobacco Disparities Statewide Taskforce.
- Create a centralized warehouse for tobacco-related data.
- Establish core statistical talking points and consensus on corresponding data source(s) for use by all partners.
- Establish and maintain a collaborative process to create and review presentations, fact sheets, etc.
- Establish a protocol for analyses, citation/documentation, and approval and authorship of joint publications.
- Develop a process for coordination among statewide strategic partners to provide support implementation of surveillance surveys.
- Complete data collection for 2016 ATS and 2017 YTS.