

**Developing the Minnesota Cancer Plan
Step 2: Recommend Objectives and Strategies**

Workgroup: Prevention B

Date: 6-13-2016

Objective: Establish consistent and reliable funding for tobacco control in MN at the level recommended by CDC

Rationale: Funding for tobacco control in Minnesota faces significant decreases in the near future. It is imperative that consistent and reliable funding to continue tobacco control efforts be established. Impending funding decreases include the following:

- ClearWay Minnesota, funding through an endowment established from tobacco settlement dollars, currently contributes \$20 million per year to tobacco control funding. Clearway's funding will sunset in 2023.
- Since ClearWay currently funds the statewide quitline and the Minnesota Adult Tobacco Survey (MATS); funds will be required to continue these resources.
- An estimated \$1,000,000 is currently devoted to tobacco control from the Statewide Health Improvement Program (SHIP). SHIP funding needs to be reauthorized by the legislator and governor every two years. The current round of funding ends in 2019
- Funding for tobacco control in Minnesota has never risen to the level recommended by CDC, which is \$52.9 million for 2015.

A number of groups are working on this issue. Notably, it is one of four goals of MN for a Smoke-Free Generation, a coalition of organizations interested in tobacco control. The Cancer Alliance could play an important support role in this effort.

Desired Outcome:

At the end of five years, what would you like to accomplish? If you do not expect to achieve the objective by the end of five years, what would success look like?

- **Increase in understanding among lawmakers of the importance of establishing consistent and reliable funding for tobacco control**
- **The continuance of the Minnesota Adult Tobacco Survey (MATS) and other data collection resources assured. Data collection includes efforts to identify communities at greater risk of harm from tobacco use.**
- **Communities mobilized to advocate for tobacco control funding.**
- **Sources of consistent and reliable funding identified and attained. Possible actions: Enact an increase in tobacco tax dedicated to tobacco control; pass a constitutional amendment to maintain a consistent and reliable source of funding passed.**

Strategies:

<p>Strategy #1: Build community support for funding dedicated to tobacco. Methods:</p> <ul style="list-style-type: none">• Support public health infrastructure.• Conduct media campaigns and use social media to (1) advocate for funding; (2) increase awareness of tobacco control issues.• Mobilize communities affected by disparities to advocate for funds.
<p>Indicator to measure progress (such as increased number of engaged stakeholders, increased media events, increased number of local jurisdictions that pass policy): Increased number of organizations engaged in this issue, particularly the number that represent communities affected by tobacco-related disparities; number of media campaigns.</p>
<p>Rationale: Passage of legislation to provide consistent and reliable funding for tobacco control is more likely when more voices are heard calling for this funding. Involvement of groups affected by disparities will increase the likelihood that funding will be used to address disparities.</p>
<p>This is an ___ evidence-based practice ___x___ promising practice ___ other. Please explain.</p>
<p>Does this strategy promote health equity by addressing a racial, economic, geographic or other barrier? If yes, explain. Yes, it seeks to actively involve communities affected by disparities in advocating for funding for tobacco control.</p>
<p>Rank this strategy for the greatest potential for traditional and non-traditional partners working together. Rank <u>1</u> of <u>4</u> strategies</p>
<p>Strategy #2: Maintain the Minnesota Adult Tobacco Survey (MATS) and other data collection activities to identify groups most in need of tobacco control funding.</p>
<p>Indicator to measure progress (such as increased number of engaged stakeholders, increased media events, increased number of local jurisdictions that pass policy): A periodic survey that collects nicotine surveillance data that is sufficient to guide tobacco control efforts in the state is in place.</p>
<p>Rationale: MATS and other data collection activities provide evidence that consistent funding is needed and indicate where funds should be directed.</p>
<p>This is an ___ evidence-based practice ___x___ promising practice ___ other. Please explain. The importance of surveys and other surveillance methods in motivating action and indicating how funds should be directed is well-established.</p>
<p>Does this strategy promote health equity by addressing a racial, economic, geographic or other barrier? If yes, explain. Yes, surveillance efforts will indicate which groups are most negatively affected by tobacco use and, therefore, how funds should be dispersed.</p>
<p>Rank this strategy for the greatest potential for traditional and non-traditional partners working together. Rank <u>3</u> of <u>4</u> strategies</p>

Strategy #3: Educate lawmakers about the importance of continued tobacco control efforts and identify new champions for tobacco control in this group.

Indicator to measure progress (such as increased number of engaged stakeholders, increased media events, increased number of local jurisdictions that pass policy): Number of lawmakers engaged in this issue.

Rationale: One must get lawmakers on-board in order to pass legislation that will dedicate funds to tobacco control. This is particularly important as some lawmakers who are tobacco control advocates are retiring.

This is an evidence-based practice promising practice other. Please explain.

Does this strategy promote health equity by addressing a racial, economic, geographic or other barrier? If yes, explain.
Unsure.

Rank this strategy for the greatest potential for traditional and non-traditional partners working together.
Rank 2 of 4 strategies

Strategy #4: increase the tobacco tax and dedicate the proceeds to tobacco control.

Indicator to measure progress (such as increased number of engaged stakeholders, increased media events, increased number of local jurisdictions that pass policy): Tobacco tax whose proceeds are dedicated to tobacco control is enacted.

Rationale: This method of insuring continuing funding might be more palatable for legislators than other possible mechanisms since those directly involved and who may benefit from the use of the funds, such as continued funding of the state nicotine cessation support, will pay the tax. An added benefit is that increases in the cost of tobacco products has been shown to decrease tobacco use.

This is an evidence-based practice promising practice other. Please explain. Other states / countries (e.g., California, Australia (Victoria)) have successfully used this mechanism to fund tobacco control efforts.

Does this strategy promote health equity by addressing a racial, economic, geographic or other barrier? If yes, explain.
Not in itself, but the resulting funds can be used to promote health equity.

Rank this strategy for the greatest potential for traditional and non-traditional partners working together.
Rank 1 of 4 strategies (Note: This is one possible outcome of the work described in Strategies 1-3. Therefore, it is difficult to assign it a rank separate from the ranks of the other strategies.)

Glossary

Alignment:

- Alignment is the opportunity to collaborate with traditional and non-traditional partners around a strategy to improve individual and community health outcomes.

Health Equity:

- According to the [Centers for Disease Control and Prevention](#), health equity is achieved when every person has the opportunity to “attain his or her full health potential” and no one is “disadvantaged from achieving this potential because of social position or other socially determined circumstances”.

Policy Systems and Environmental Change/Strategies:

- Policy: strategies may be a law, ordinance, resolution, mandate, regulation, or rule (both formal and informal). Example: Organizational policies that provide time off during work hours for physical activity.
- System: strategies are changes that impact all elements of an organization, institution, or system. Example of systems include, schools, transportation, etc.
- Environmental: strategies involve physical or material changes to the economic, social, or physical environment. Example: Incorporating sidewalks, paths, and recreation areas into community design.

Learn about [Policy Systems and Environmental Changes](#) here.

Evidence-Based Practice:

- Although the term evidence-based practices varies from different health settings. The following broad definition has been adopted from the SAMHSA’S National Registry for Evidences-based Program for the purposes of updating the Cancer Plan Minnesota is, “A practice that is based on rigorous research that has demonstrated effectiveness and evidence in achieving the outcomes that is it designed to achieve”.

Promising Practice:

- Although very loosely defined across different health settings, promising practices for the purposes of updating the Cancer Plan Minnesota is, “A practices that is not based on rigorous researched, but has demonstrated effectiveness and evidence in achieving the outcomes that it is designed to achieve”.

Traditional Partners:

- Examples of traditional partners include, but are not limited to, health departments, other public agencies and officials, hospitals, medical practices, and social services providers.

Non-Traditional Partners:

- Examples of non-traditional partners include, but are not limited to, employers, schools, community groups, faith-based communities, families, and individuals.

