

North Carolina Health and Wellness Trust Fund

Teen Tobacco Use Prevention and Cessation Initiative

Quarterly Report Quarters 1 to 3

July 1, 2009 – March 31, 2010

Prepared for:

North Carolina Health and Wellness Trust Fund

Prepared by: UNC School of Medicine Tobacco Prevention and Evaluation Program





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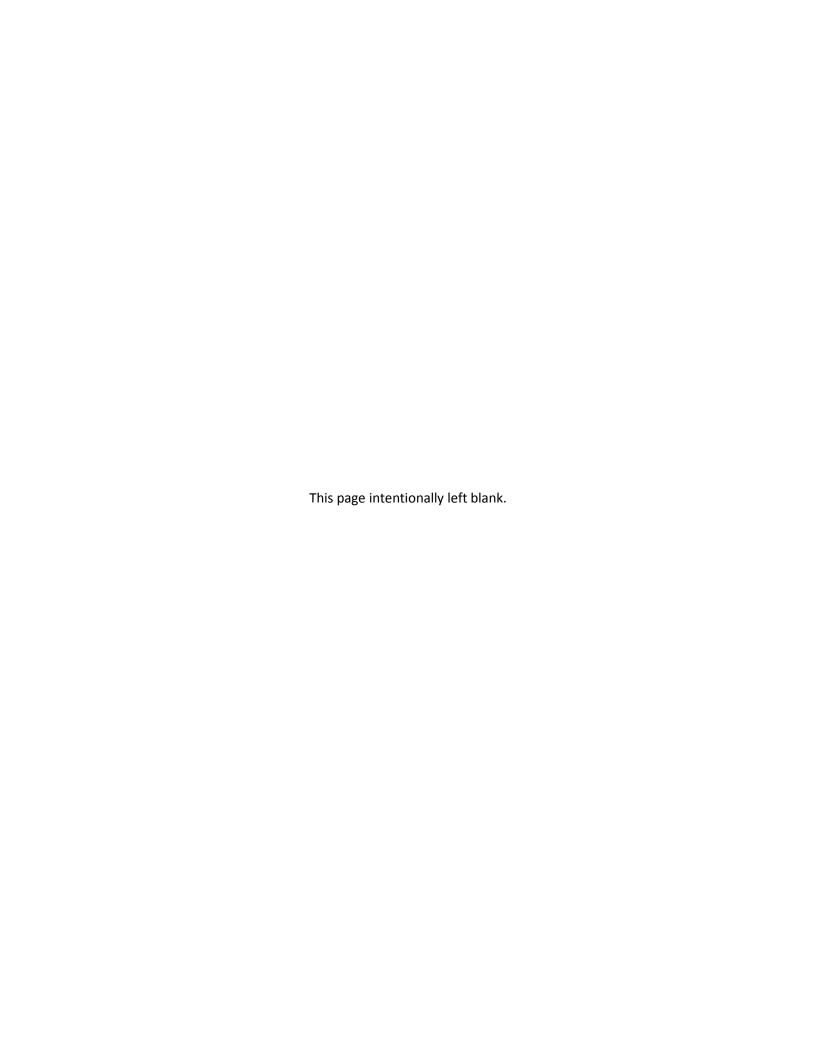
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Teen Tobacco Use Prevention and Cessation Initiative: Q1 to Q3 Report

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A. EXECUTIVE SUMMARY

I. Program Highlights

The 2009-10 fiscal year (FY) of the Teen Tobacco Use Prevention and Cessation Initiative (Teen Initiative) involves 46 grantees addressing the problem of youth tobacco use in North Carolina. Forty-two grantees serve local community and school organizations while 4 grantees focus primarily on reaching youth from priority populations. Twenty-seven of the grantees have received funding since the inception of the Teen Initiative in 2003. This report illustrates the progress of the Teen Initiative during July 2009-March 2010 (referred to as Q1 to Q3 throughout this report). Grantee action plans, activities, and media events are aligned with the Centers for Disease Control's best practices as defined by the Best Practices for Comprehensive Tobacco Control Programs¹. General findings from this timeframe appear below.

Teen Initiative Progress and Policy Outcomes

In Q1 to Q3, Teen Initiative grantees reported 9 smoke-free policy adoptions and increased cessation QuitlineNC promotions. Few outcomes occurred for policy adoption of tobacco use prevention curriculum in schools, removal of tobacco ads in stores, or adoption of ATS programs. Other than the youth empowerment focus area, fewer than one-half of grantees consistently report working across multiple other focus areas. Analysis of grantees' FY 2009-10 Annual Action Plans (AAPs) show inconsistency between planned events and outcomes. This stems primarily from the over-achievement of events conducted relative to planned events in the youth empowerment focus area and subsequent under-achievement in other goal areas. While close to two-thirds of grantees (65%) report they achieved *overall* program goals in the last six months (Fall 2009), extensive variation exists among grantees' perceptions of progress by focus area with 89% reporting goal achievement within youth empowerment and only 20-63% reporting they achieved their goals in the remaining focus areas. Such discrepancies may limit program impact.

Grantee Events

Grantees reported 5,505 activity and media events across all 8 focus areas. Events mainly occurred in the youth empowerment focus area while the remaining focus areas received less attention. While all grantees worked in youth empowerment, only one-third of grantees reported working in the tobacco free school (TFS), cessation, and parent/caregiver focus areas in Q1 to Q3. Fewer than one-fifth of all grantees reported work in the product pricing focus area.

Youth Empowerment

Youth empowerment remains the principal focus for grantee events of the Teen Initiative. During Q1 to Q3, 61% of all grantee activities/events occurred in this focus area. Youth led or implemented 59% of all events from Q1 to Q3 (3,258 out of 5,505). Approximately 40% of these events involved youth meetings. Grantees reported 211 active TRU youth groups, 2,785 TRU youth receiving Health and Wellness Trust Fund (HWTF) training, and 2,278 youth actively involved in tobacco use prevention activities. Grantees reported achieving record levels of youth involvement during Q1 to Q3, including a 17% reported increase in active youth groups from 2008 to 2009.

Cultural Tailoring

During Phase IV of the Teen Initiative, HWTF placed a greater emphasis on reducing health disparities among youth. The program shifted its focus from activities/media events reaching priority populations to culturally

¹ Centers for Disease Control and Prevention. *Best Practices for Comprehensive Tobacco Control Programs-2007*. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; October 2007.

tailoring activities and events targeting a specific priority population. Only one-third of grantees reported culturally tailoring at least one activity/media event in Q1 to Q3, accounting for only 3% of all reported activity and media events. Health disparity and cultural tailoring technical assistance (TA) has primarily reached priority population grantees during Q1 to Q3. TA is expected to reach beyond the priority population grantees in fiscal year 2010-11.

Media

Promoting the Teen Initiative through paid and earned media is paramount to the success of the Initiative. Over three-quarters of all media messages represented earned media during Q1 to Q3, a 64% increase over the same timeframe during FY 2008-09. QuitlineNC media events accounted for 27% of all cessation activities/events. The majority of paid and earned media occurred in the youth empowerment focus area, with minimal media reported in evidence-based tobacco curriculum, product pricing, and youth access focus areas.

Technical Assistance

Grantees report technical assistance utilization and effectiveness twice a year in the semi-annual survey. During Q1 to Q3 nearly all grantees (45 of 46) reported utilizing all technical assistance (TA) providers (N = 12). Each grantee used an average of 3.4 TA providers, a slight decrease from historical averages reported in FYS 2007-09. Grantees assessed the effectiveness of TA provisions received on a Likert-type scale ranging from needs were not at all met to needs were completely met. During Fall 2009, the majority of grantees (94%) reported their needs were completely or mostly met by the TA providers. The majority of TA usage occurred in the youth empowerment focus area which remains consistent with the overall increased emphasis grantees placed on youth empowerment events. An increase in TA usage occurred during Q3 within the secondhand smoke focus area due to the passage of House Bill 2.

II. Key Barriers to Program Activities

The Teen Evaluation and Management System (TEAMS) allows grantees the option to report major barriers to their monthly outcomes. All grantees reported at least one barrier during Q1 to Q3. During Q3, grantees reported 28% fewer barriers when compared to Q3 of fiscal year 2008-09. The most frequent barriers reported in Q1 to Q3 were:

- Students and staff members missing work/school due to holidays and school breaks,
- Planning and scheduling events with community partners and youth,
- Cooperation/communication with community stakeholders (i.e. school personnel and medical/health partners), and
- Staff issues concerning new coordinators, vacant positions, and staff members away from the office.

III. Recommendations for Program Development

Based upon grantee monthly and semi-annual data collected in TEAMS during Q1 to Q3, the following recommendations are proposed for future program development and improvement:

- Grantees' efforts to conduct more evidence-based activities in focus areas 2-8 should occur.
- With few grantees reporting alternative to suspension (ATS) policy adoptions by schools in Q1 to Q3 and with the removal of the ALA as a TA provider, HWTF should clarify if ATS policy adoptions and Not On Tobacco (N-O-T) implementation should remain as a priority for program outcomes in the future.

B. METHODS

The data presented in this report are a compilation and analysis of monthly data across all 46 Teen Initiative grantees for a nine month period, July to March, 2010. As required by the conditions of the grant, Community/School and Priority Population grantees report programmatic outcomes on a monthly basis, with data being due the 5th of each month. All data processing and reporting was conducted by UNC TPEP.

The 2009-10 fiscal year involved a time of transition in data collection and evaluation methodology due to the construction of a new online program evaluation and management database, the Tobacco Evaluation and Management System (TEAMS). Developed by the UNC Tobacco Prevention and Evaluation Program (UNC TPEP) in collaboration with HWTF, TEAMS is a customized, web-based tracking system that collects data related to the nine focus areas and 37 performance outcomes (see Appendix B) in accordance with the Teen Initiative grantees fiscal year 2009-10 Annual Action Plans and comprehensive Teen Initiative logic model.

During the first six months of fiscal year 2009-10, grantees recorded monthly data in a Microsoft Excel-based interim tracking system. In January 2010, all data recorded in the interim tracking system were uploaded into the newly constructed TEAMS database. The TEAMS system involved designing and implementing a more systematic and accurate reflection of the work being done by grantees. As such, once the interim data was uploaded into the TEAMS system, grantees verified the imported data, and in doing so, provided additional details about each reported activity or event. After verification occurred, evaluators employed additional measures to assess the accuracy of the data entry process. Established criteria and reporting procedures verified programmatic outcomes.

Grantees also complete a semi-annual survey within TEAMS which provides data on programmatic indicators and outcomes during July 1 - December 31, 2009. This TEAMS module includes data in three areas: 1) additional semi-annual indicator data 2) perceptions of program progress, and 3) resources, support, and technical assistance (TA). Indicator data is incorporated into this report, with figures and tables from the semi-annual data noted appropriately. A summary of grantee perceptions of program progress is included in this report, and the TA report is provided under separate cover to HWTF.

During the fiscal year 2009-10, the NC Health and Wellness Trust Fund reemphasized the need for grantees to tailor interventions to target nine identified populations that experience tobacco-specific health disparities. During Phase IV of the Teen Initiative, the requirement for a culturally tailored activity/event was amended to be consistent with the American Legacy Foundation's definition: "The application of cultural competence to programmatic efforts by anticipating and planning for the needs, preferences or circumstances of particular cultural groups."-American Legacy Foundation, 2001. The nine identified priority populations for the Teen Initiative include African Americans, Native Americans, Asian Americans, Latino/Hispanic, LGBT (Lesbian, Gay, Bisexual, and Transgendered), Pregnant Teens, Low SES, Low Literacy, and Disabled.

Another change that occurred this fiscal year was the absence of two priority population grantees that addressed culturally tailoring events to African American youth. Priority population grantees have used their knowledge of cultural tailoring to promote tobacco education and youth empowerment in targeting disparities within their communities. Research Triangle Institute (RTI) is responsible for providing health disparity and cultural tailoring TA to grantees. During Q1 to Q3, RTI has primarily reached the four priority population grantees. Additional technical assistance for other non-priority population grantees will occur during fiscal year 2010-11.

C. SUMMARY OF QUARTERLY OUTCOMES

C. (1) Introduction and Summary

The following report is a summary of the progress and events conducted by HWTF Teen Initiative grantees from July 1, 2009 - March 31, 2010 (Q1 to Q3). This report includes data from 42 Community/School grantees and 4 grantees working with populations experiencing tobacco-related health disparities. Grantees conduct work based upon an Annual Action Plan comprised of nine core areas of program focus (e.g., focus areas) within which grantees conduct specific events and projected program outcomes: youth empowerment/tobacco prevention education, evidence-based tobacco curriculum, parent/caregiver education, product pricing, youth access, tobacco-free schools, cessation, secondhand smoke, and capacity building (see Appendix B).

Figure 1 represents the proportion of events or outcomes (or time spent) allocated to each focus area for all grantees during fiscal year 2009-10 based on an aggregated analysis of the Annual Action Plans. For example, as a whole, all grantees reported that they would devote 24% of their time to conducting events in the youth empowerment/tobacco prevention education focus area.

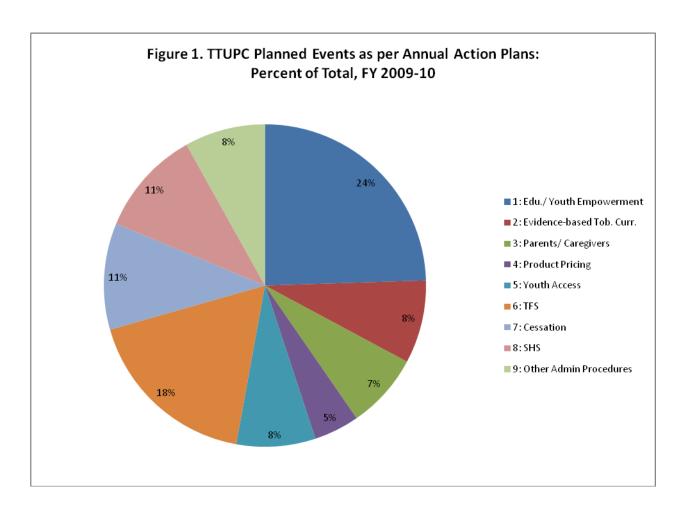
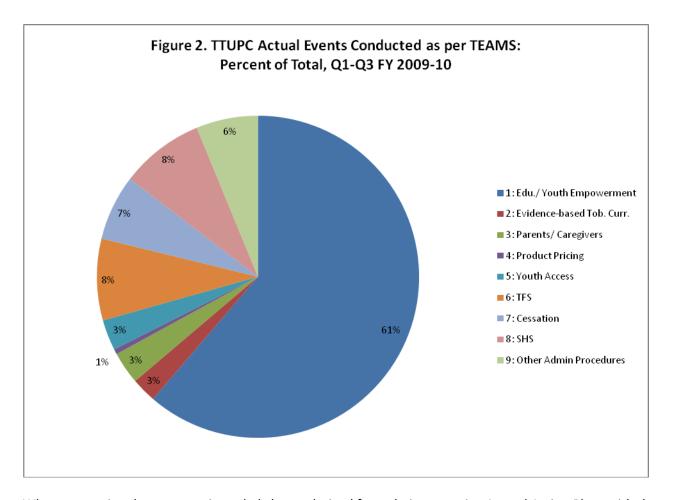
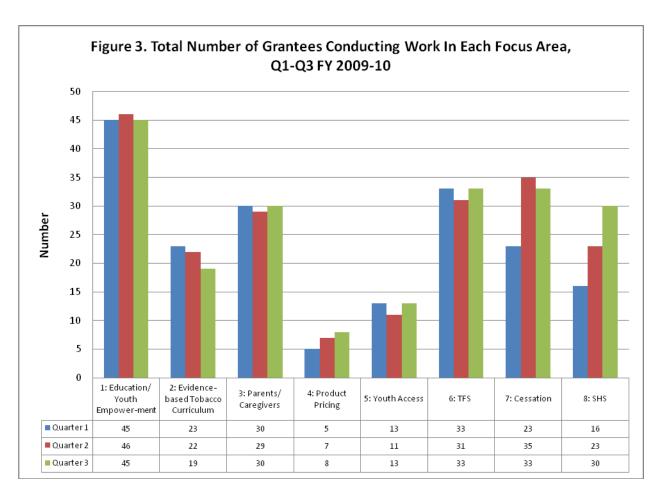


Figure 2 represents the actual events conducted by focus area for all grantees as a proportion of all events conducted for Q1 to Q3. While Figure 1 represents *planned* events by focus area for the entire fiscal year, Figure 2 represents actual data for Q1 to Q3.



When comparing the grantees *intended* plan as derived from their respective Annual Action Plans with those events which they *actually* conducted in Q1 to Q3, considerably more time was devoted to conducting events in the youth empowerment focus area than intended (24% intended vs. 61% actual). Furthermore, less time was allocated to conducting events targeted to tobacco free schools (18% intended vs. 8% actual), evidence-based tobacco curriculum (8% intended vs. 3% actual) and all the remaining focus areas (49% intended vs. 28% actual). In summary, on a whole, grantees have far exceeded their stated plans in the youth empowerment focus area and have yet to meet their stated plans in all other focus areas.

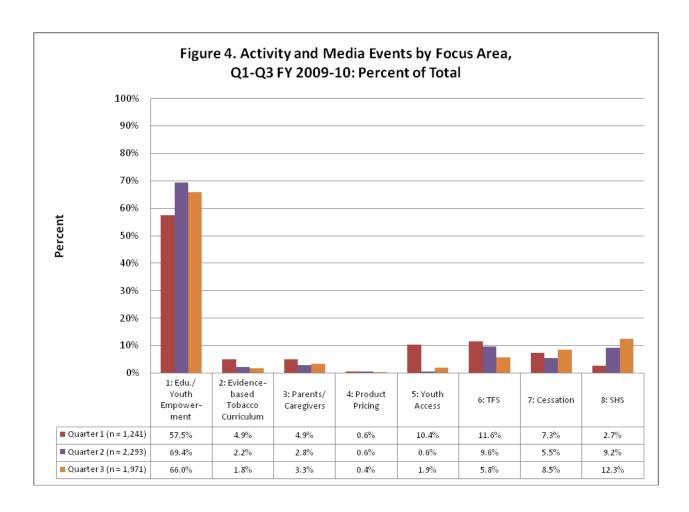
Grantee involvement in eight focus areas for fiscal year 2009-10 (Q1 to Q3) is highlighted in Figure 3. Capacity building events consist of administrative activities and are not included below.



Across quarters, almost all grantees work in youth empowerment, and over half work in tobacco cessation, tobacco-free schools, and parent/caregiver outreach. Fewer than half of grantees consistently report working in evidence-based tobacco curricula, product pricing, or youth access.

Grantees reported a total of 5,505 programmatic events (excluding capacity building measures) from Q1 to Q3, a 13% decrease in total events relative to Q1 to Q3 of 2008-09. The relative decrease is likely due to changes to and clarification of definitions from 2008-09 to 2009-10. In Q1 to Q3 of this year, approximately 66% of all events (3,606 of 5,505) were in the tobacco prevention education and youth empowerment focus area, representing a significant majority of work conducted in one focus area (see Figure 4). Work in Tobaccofree School compliance accounted for 9% of all reported events (479 of 5,505). Secondhand smoke consistently increased from Q1 to Q3 and the number of grantees conducting actual events related to secondhand smoke activities nearly doubled during Q1 to Q3 from 35% to 65% respectively.

Figure 4 provides a breakdown of all activity and media events (excluding capacity building events) as a percent of total events by quarter and differs from Figure 2 in that Figure 2 combines all quarters and is a direct comparison with the Annual Action Plans.



Tables 1 to 9 provide the number of grantees and indicator results contributing to the Teen Initiative evaluation by focus area.

Table 1. Summary of Grantee Reported Indicators for Focus Area 1: Youth Empowerment

Grantee working to increase youth		Grantees Indica			ators		
empowerment through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of tobacco use prevention education media/ promotional messages published or aired	44	45	45	1,103	2,251	1,397	4,751
Number of skill building trainings offered to youth promoting youth led events: TRU and Other Tobacco	17	32	35	53	71	71	195
Number of skill building trainings offered to youth promoting youth led events: Other Youth	10	7	7	19	28	12	59
Number of TRU recruitment events conducted	21	11	11	64	30	21	115
Number of youth led prevention events	43	44	44	399	1,145	868	2,412
Priority Population events	6	7	7	32	35	40	107
Number of new TRU groups formed		27		7.	5		75

Table 2. Summary of Grantee Reported Indicators for Focus Area 2: Evidence-Based Tobacco Curriculum

Grantee working to increase evidence-based		Grantees			Indicators			
tobacco curriculum awareness and adoption								
through:	Q1	Q2	Q3	Q1	Q2	Q3	Total	
Number of events to identify resources								
relating to evidence-based tobacco use	0	0	1	0	0	1	1	
prevention curricula								
Number of schools adopting evidence-based	1	0	0	1	0	0	1	
tobacco use prevention curricula	1	U	U	1	U	U	1	
Number of meetings/contacts to provide	8	9	5	23	14	5	42	
support for existing tobacco curricula	0	9	5	23	14	5	42	
Number of skill building trainings offered by	6	5	5	6	5	5	16	
grantee to adult leaders	6) 5	5	O	5) 5	16	
Priority Population events	0	0	0	0	0	0	0	

Table 3. Summary of Grantee Reported Indicators for Focus Area 3: Parent/Caregivers

Grantee working to increase tobacco risk		Grantees			Indicators			
awareness and use reduction action among								
parents and caregivers through:	Q1	Q2	Q3	Q1	Q2	Q3	Total	
Number of events to identify resources to	4	5	2	5	7	2	14	
reach parents of school-aged youth	·		_)	,	_	Δ.	
Number of meetings/contacts/presentations to parents and parent groups on the importance of talking to their children about tobacco use and related HWTF initiatives	24	23	24	42	36	42	120	
Number of parents who attended meetings/presentations about youth tobacco initiatives	24	23	24	37,222	4,926	2,781	44,929	
Priority Population events	3	3	6	4	5	11	20	

Table 4. Summary of Grantee Reported Indicators for Focus Area 4: Tobacco Pricing and Youth Initiation

Grantee working to promote association of	Grantees			Indicators			
tobacco pricing and youth initiation through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of educational presentations on pricing to school/community linking increased price of tobacco with decreased youth initiation	1	0	5	1	0	5	6
Number of media/promotional messages published or aired that link increased price of tobacco with decreased youth initiation	1	1	1	3	1	1	5
Priority Population events	0	0	1	0	0	1	1

Table 5. Summary of Grantee Reported Indicators for Focus Area 5: Tobacco Sales and Advertising

Grantee working to decrease youth tobacco	Grantees			Indicators			
sales and advertising through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of enforcement media/promotional messages published or aired	5	3	0	5	3	0	8
Number to increase compliance (e.g. merchant education)	8	4	3	45	4	8	57
Priority Population events	0	1	0	0	3	0	3
Number of stores that removed tobacco ads	1			1			1

Table 6. Summary of Grantee Reported Indicators for Focus Area 6: Promoting Tobacco-Free Schools (TFS)

Grantee working to further tobacco-free	Grantees			Indica	itors	ors	
school policies through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of compliance meetings with school/community agencies to encourage implementation and compliance with 100% TFS policy	21	23	22	50	95	33	178
Number of TFS surveillance/assessment events conducted	14	23	16	28	63	23	114
Number to disseminate/discuss surveillance/assessment findings.	8	9	3	13	23	4	40
Schools adopting an Alternative to Suspension (ATS) program (see also Table 5, Figure 7, and Appendix B)	1	1	0	1	2	0	3
Number of media/promotional messages encouraging compliance with 100% TFS policy that are published or aired	30	26	14	200	615	92	907
Number of presentations promoting effective cessation resources for school staff	4	11	10	6	71	20	97
Priority Population events	2	1	1	2	9	1	12
Number of school/community coalitions formed to address TTUPC initiative goals: TOTAL	18			24			24
Number of school/community coalitions formed to address TTUPC initiative goals: PAST SIX MONTHS	10)		12	2		12

Table 7. Summary of Grantee Reported Indicators for Focus Area 7: Providing Cessation Resources

Grantee working to increase youth tobacco		Grantees			Indica	itors	
cessation through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of cessation media/promotional messages published or aired	37	42	41	319	1,402	465	2,186
Number of trainings held for health care professionals on 5A counseling for youth or Spit Tobacco	2	1	6	3	2	7	12
Number conducted to raise awareness to the harmful effects of social smoking	4	7	7	4	8	22	34
Number of presentations or meetings promoting Quitline, NOT, 5A counseling for youth or Spit Tobacco cessation	19	30	20	54	64	65	183
Priority Population events	1	4	2	2	4	4	10

Table 8. Summary of Grantee Reported Indicators for Focus Area 8: Secondhand Smoke

Grantee working to decrease youth exposure	Grantees			Indicators			
to secondhand smoke through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of media/promotional messages promoting adoption of smoke-free policies published or aired	8	20	19	14	36	45	95
Number of improved smoke-free policies (e.g. smoke-free night)	0	0	0	0	0	0	0
Number of smoke-free policies adopted (see also figures 8 and 9 and Appendix C)	3	2	2	3	2	4	9
Number of times appreciation letter/certificates are disseminated to smoke free youth-frequented venues	0	0	0	0	0	0	0
Number of patron survey campaigns/petition drives whose findings are disseminated to manage/owners/leaders	4	2	1	5	3	1	9
Number of presentations/ meetings in schools/ communities or with manager/ owners/ leaders promoting adoption of smoke-free policies	9	10	12	10	15	20	45
Priority Population events	1	1	4	1	1	11	13

Table 9. Summary of Grantee Reported Indicators for Focus Area 9: Infrastructure and Administrative Development

Grantee working to increase administrative	Grantees Indica			Indica	ators		
capacity through:	Q1	Q2	Q3	Q1	Q2	Q3	Total
Number of training sessions/ events attended by staff or partners	35	40	43	63	68	143	274
Number of contacts/ meetings with state or local government leaders	10	10	28	15	13	50	78
Priority Population events	0	0	0	0	0	0	0
Number of new partnerships formed to advance a tobacco prevention initiative	27	7		44	4		44

Reduce health disparities among youth attributable to tobacco use

Data from the monthly reports showed 15 of 46 (33%) grantees reporting events addressing tobacco-related health disparities among youth in their communities. Out of all events conducted during Q1 to Q3 (N = 5,505), grantees reported 3% as culturally tailored to HWTF identified priority populations. Each culturally tailored event may include one or more of the nine priority populations. Although only 33% of the grantees reported conducting events that met the American Legacy Foundation criteria for a culturally tailored event, technical assistance, provided by Research Triangle Institute, focused strictly on the four priority population grantees (i.e., Lumbee Tribe of North Carolina, North Carolina Commission of Indian Affairs, Haliwa-Saponi Indian Tribe, and El Pueblo) in fiscal year 2009-10. These four priority population grantees accounted for 54% (n = 90) of all culturally tailored events conducted during Q1 to Q3. All other 42 grantees accounted for the remaining 46% (n = 76) of culturally tailored events.

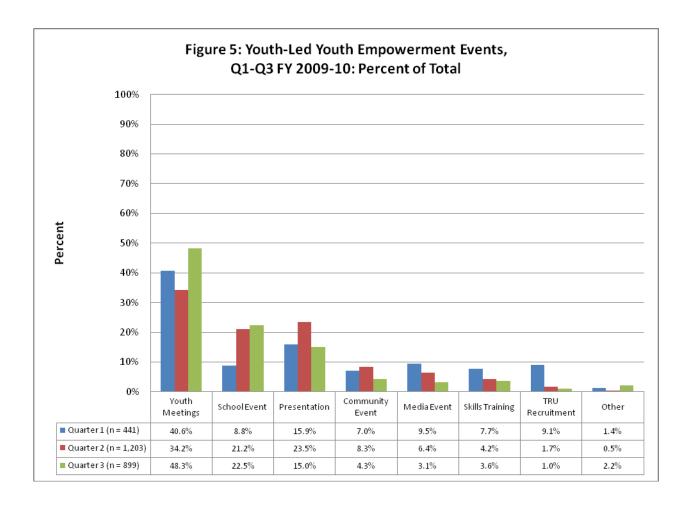
C. (2) Focus Area 1: Youth Empowerment

Youth empowerment remains the primary event component of the Teen Initiative. During Q1 to Q3, 66% of all grantee events were conducted under focus area one, tobacco use prevention education and youth empowerment. Table 10 provides a percent breakdown of all events conducted in the youth empowerment focus area by strategy.

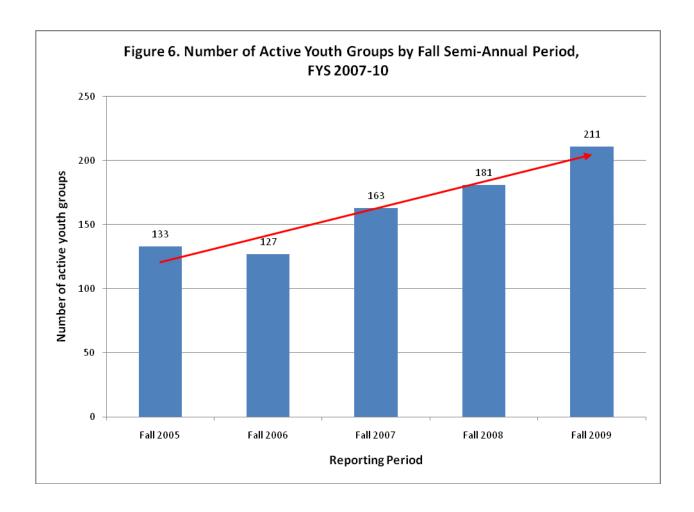
Table 10. Percent Youth Empowerment Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1	Quarter 2	Quarter 3	Total
	(n = 714)	(n = 1,592)	(n = 1,300)	(N = 3,606)
Involve youth in planning and implementation of youth led non-policy related tobacco use prevention activities	28.3%	36.4%	42.9%	37.1%
Disseminate TRU messages in the school and community settings	27.7%	17.8%	20.3%	20.7%
Utilize peer-to-peer education to promote and enhance social norms of no-tobacco use	9.0%	20.9%	15.6%	16.6%
Provide opportunities for youth to become tobacco use prevention policy advocates	14.9%	10.1%	8.7%	10.5%
Assess training needs and provide skill building trainings for TRU group members and adult leaders	11.5%	7.5%	6.7%	8.0%
Promote the TRU brand through local media and awareness campaigns	8.3%	7.2%	5.6%	6.9%
Activities/Events that are not included in your action plan	0.4%	0.1%	0.2	0.2%

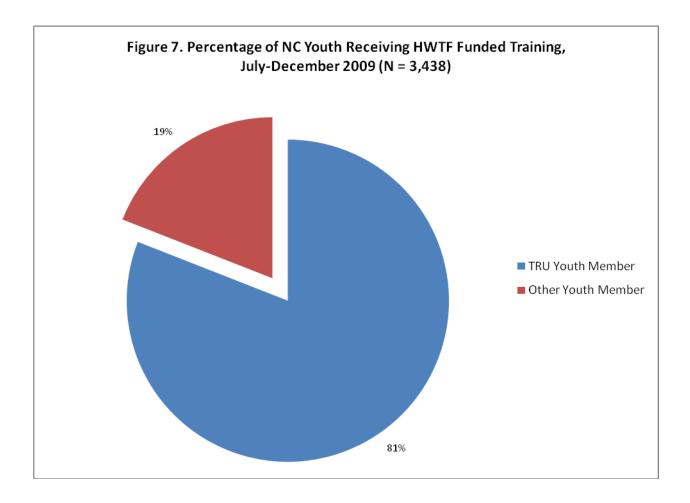
All 46 grantees conducted youth empowerment events during the first three quarters. Youth led or implemented 59% of all events conducted during Q1 to Q3 (N = 5,505). Of all events that were youth-led during Q1 to Q3 (N = 3,258), 78% were conducted under the youth empowerment focus area one. The limited number of youth-led events indicated in the other focus areas indicated that the events in those focus areas are primarily conducted by grantees rather than youth. Figure 5 presents the youth-led events conducted under the youth empowerment focus area. The top three youth-led activities included TRU meetings, school events, and presentations.



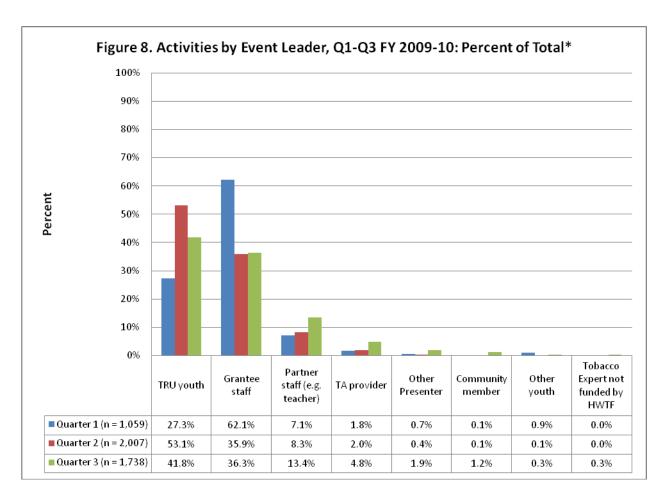
The number of active youth groups funded by the Teen Initiative appears to be steadily increasing, as shown by Figure 6. Semi-annual data reveal a 17% increase in the number of reportedactive youth groups during Fall 2009 when compared to Fall 2008, and a 59% increase when compared to Fall 2005.



Grantees reported 311 skill trainings during Q1 to Q3, 83% of which occurred in the education and youth empowerment focus area. Additionally, grantees reported in the Fall 2009 Semi-Annual Survey that 81% of the youth receiving HWTF funded training were TRU youth members. Figure 7 depicts the percentage of TRU and other youth members receiving HWTF funded training during Fall 2009. Two new focus areas were added during the fiscal year 2010-11 making the youth led prevention activity/event comparison between fiscal years 2009-10 and 2010-11 no longer informative.

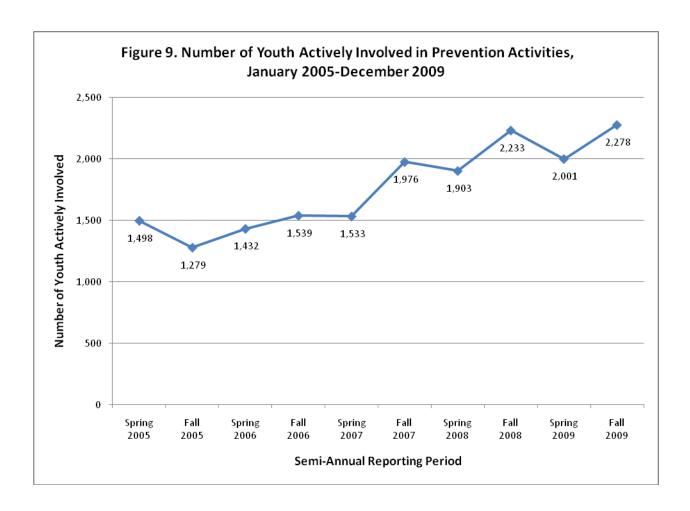


TRU youth members also played an integral role in conducting many of the activities during Q1 to Q3. As depicted in Figure 8, 43% (2,080 out of 4,804) of all activities were conducted by TRU youth members. Grantee staff conducted 42% (2,010), and the remaining 15% of all activities were conducted by partner staff, TA providers, community members, and other youth and presenters.



^{*}Counts include activities only. Media, capacity building, and policy events are excluded.

During Fall 2009, the number of youth reported as actively involved in Teen Initiative events remained relatively consistent, but there was a 14% increase in the number of youth actively involved from Spring 2009 to Fall 2009. Figure 9 demonstrates a steady increase in the number of youth reported as actively involved in prevention activities from fiscal year 2005-06 to fiscal year 2009-10.



C. (3) Focus Area 2: Evidence-based Tobacco Curriculums

A new area of focus highlighted by HWTF for Phase IV of the Teen Initiative is increasing awareness and adoption of evidence-based tobacco curriculums. The adoption of evidence-based tobacco curricula in middle and high schools is thought to reduce receptivity to industry marketing, decrease susceptibility to tobacco use, increase the proportion of youth in middle and high school students that have never smoked, and ultimately decrease use of tobacco products among teens². This focus area included measurement of the number of resources identified relating to evidence-based tobacco prevention curriculums, number of meetings to support adoption, number of trainings, and number of tobacco curriculums adopted. Table 11 shows the percentage of events conducted in focus area two by strategy.

Table 11. Percent Tobacco Use Prevention Curriculum Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1 (n = 61)	Quarter 2 (n = 50)	Quarter 3 (n = 35)	Total (N = 146)
Work with school and school district administrators, community youth programs, and other school and community official to provide guidance in identification and integration of evidence-based tobacco use prevention curricula	41.0%	30.0%	20.0%	32.2%
Provide support to schools and districts in integrating tobacco use prevention into existing curricula	36.1%	24.0%	37.1%	32.2%
Train teachers, curriculum coordinators, school administrators, health educators, and community youth workers on tobacco prevention and education issues	23.0%	46.0%	22.9%	30.8%
Activities/Events that are not included in your action plan	0%	0%	20.0%	4.8%

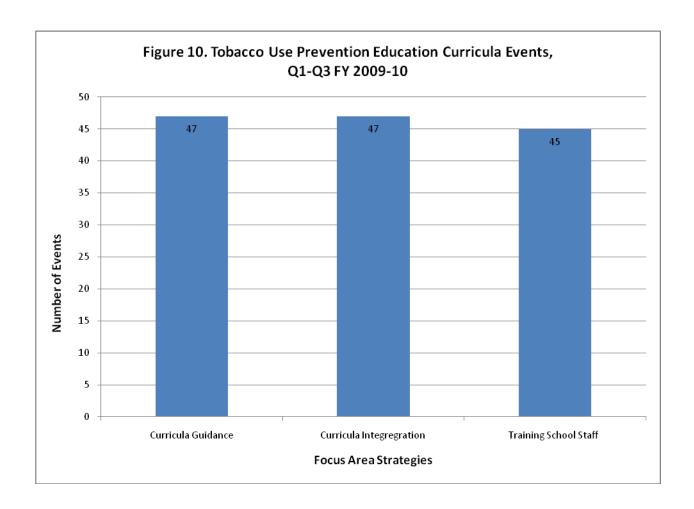
Table 12 shows the number and types of events conducted by the grantees for evidence-based tobacco curriculums.

Table 12. Evidence-based Tobacco Curriculums Events Conducted Q1 to Q3, FY 2009-10 (N = 146)

Event Type	Number
Presentations	78
Small group discussions	31
Skills training	16
School event	7
Other	14

² Lee DJ, Trapido E, Weatherby N, Rodriguez R. (2001). Correlated of participation and willingness to participate in antitobacco activities among 4th-7th graders. *J Community Health*. Dec 26(6), 447-57.

Figure 10 represents the type of work conducted by grantees in focus area two. These strategies were consistently executed during the first three quarters of fiscal year 2009-10. Adoption of the NC Spit Tobacco Education curriculum occurred in Warren County Public Schools in 2009. We expect more curricula adoptions by the end of the fiscal year.



C. (4) Focus Area 3: Parents and Caregivers

A second new area of emphasis for Phase IV of the Teen Initiative was HWTF's endorsement of grantee work targeted at educating parents and caregivers about youth tobacco risk and reduction. Research has shown that youth with whom their parents/caregivers discuss the harmful effects of tobacco are less likely to use tobacco products^{3,4}. An expected long-term outcome for this focus area is a statewide increase in the percent of parents/caregivers discussing the harmful effects of tobacco with youth. The NC Child Health Assessment and Monitoring Program (CHAMP) survey is the surveillance tool use to track progress in this focus area. Interim data from 2010 CHAMPS survey indicate that nearly half of parents of children ages 9-17 report talking to their child(ren) about the dangers of tobacco use a few times a month or more frequently. Nearly a quarter reports talking with their child(ren) about the dangers of tobacco use only a few times a year and 16.5% report never talking with their child(ren) about this topic. The final CHAMP 2010 data are expected to be available in spring or summer of 2011.

Table 13 provides a percentage breakdown of all parent/caregiver events by strategy.

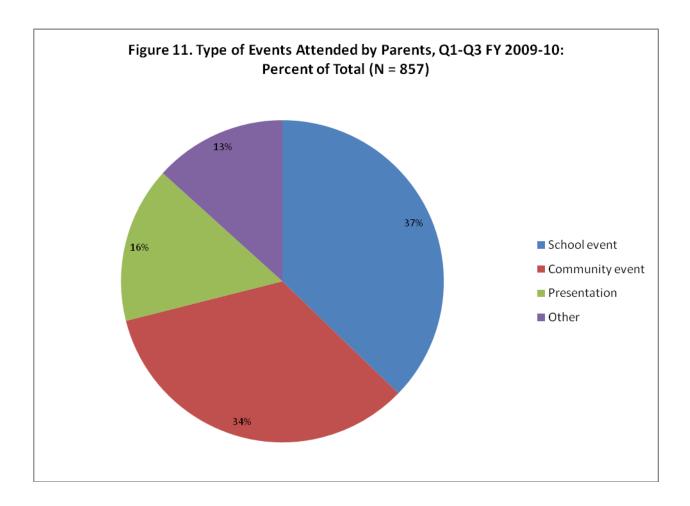
Table 13. Percent Parent/Caregiver Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1	Quarter 2	Quarter 3	Total
	(n = 61)	(n = 65)	(n = 65)	(N = 191)
Inform parents and parent groups about local TRU				
groups and resources, additional local tobacco use	59.0%	52.3%	41.5%	50.8%
prevention efforts, and other HWTF initiatives				
Provide education to parents of fifth through ninth				
graders about the importance of talking with their	32.8%	36.9%	53.9%	41.4%
children about tobacco use				
Identify resources in the community that reach parents				
of school-aged youth, particularly those in grades 5	8.2%	10.8%	3.1%	7.3%
through 9				
Activities/Events that are not included in your action	0%	0%	1.5%	0.5%
plan	0/0	0%	1.576	0.576

³ Beatty SE, Cross DS, Shaw TM. (2008). The Impact of a parent-directed intervention on parent-child communication about tobacco and alcohol. *Drug Alcohol Review. 31*, 1-11.

⁴ Simons-Morton BG. (2004). The protective effect of parental expectations against early adolescent smoking initiation. *Health Education Research*. *19* (5), 561-569.

Grantees use a number of strategies directed at reaching parents on the harmful effects of tobacco use. Grantees reported that parents/caregivers attended a total of 857 events (across focus areas 1 through 8) during Q1 to Q3. Over half of all events attended by parents/caregivers were school events (37%) and community events (34%). Figure 11 illustrates the spectrum of events attended by parents/caregivers.



C. (5) Focus Area 4: Product Pricing

Focus area 4 includes events that discuss the relationship between tobacco product pricing and youth tobacco use. Grantees primarily provide this type of information to teachers, school staff, youth, and other adult leaders. Table 14 provides a percentage breakdown of all product pricing events by strategy.

Table 14. Percent Product Pricing Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1	Quarter 2	Quarter 3	Total
	(n = 8)	(n = 14)	(n = 8)	(N = 30)
Integrate information about the tobacco product price relationship into educational presentations to youth, their caregivers, school personnel and community youth workers	62.5%	85.7%	75.0%	76.7%
Promote price-initiation relationship information dissemination by TRU youth groups through local newspaper editorials, newsletters and similar channels	37.5%	14.3%	25.0%	23.3%

Table 15 shows the number and types of events conducted by the grantees for product pricing. Data show that grantees emphasize educational presentations to youth more than community presentations or dissemination.

Table 15. Product Pricing Events Conducted Q1 to Q3, FY 2009-10 (N = 28)

Event Type	Number
*Media	10
Presentations	6
Community/School Events	5
Skills Trainings	2
Other	5

^{*}NOTE: Media events include newspapers, newsletters, billboards, annuals, magazines, printed programs for extracurricular school events, radio, TV, theatre slides, and websites.

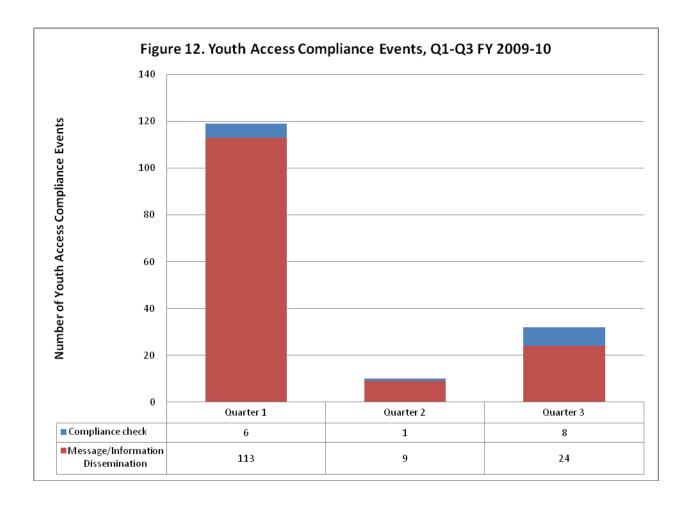
C. (6) Focus Area 5: Youth Access

Activities in this area focus on promoting enforcement of underage tobacco sale laws and reducing tobacco advertising appealing to youth. Fatback's Citgo located in Murphy, NC removed all tobacco advertisements from its premises during Fall 2009. In prior fiscal years, grantees reported youth access events under only one evaluation indicator. This fiscal year (2009-10), grantees reported youth access activities under multiple strategies according to their individual action plans developed in collaboration with their HWTF Grant Manger. This is the first year the outcome evaluation is measuring youth access compliance by both dissemination and compliance check activities. Breaking down this focus areas provides clarity regarding grantees' activities in this focus area. Table 16 shows the percentage of all youth access events by strategy.

Table 16. Percent Youth Access Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1 (n = 129)	Quarter 2 (n = 14)	Quarter 3 (n = 38)	Total (N = 181)
Utilize media advocacy strategies to promote awareness of underage tobacco sale laws to the community	52.7%	21.4%	0%	39.2%
Utilize approved youth empowerment strategies such as environmental scans of stores to increase awareness of the importance of not selling tobacco products to teens	31.8%	7.1%	55.3%	34.8%
Conduct approved merchant education activities to inform local store owners of the importance of not selling tobacco products to teens	15.5%	71.4%	39.5%	24.9%
Activities/Events that are not included in your action plan	0%	0%	5.3%	1.1%

As shown in Figure 12, a greater amount of youth access compliance activities, such as message dissemination and compliance checks, occurred in Q1. During Q2, youth received specific training from Alcohol Law Enforcement (ALE) for compliance checks planned for Q3. There was a 92% decrease in message dissemination compliance activities between Q1 and Q2, and an 80% decrease between Q1 and Q3. The overall number of compliance checks conducted from Q1 to Q3 represents fewer than 10% of all events.



C. (7) Focus Area 6: Tobacco Free Schools

With the passage of Tobacco Free School legislation in 2008, HWTF has expanded the delivery of events in this focus area to include compliance checks on school grounds (including TFS sign posting) and message dissemination to parents, teachers, visitors, and students. The sole program outcome for this focus area is the adoption of alternative to suspension programs (ATS). Grantees reported a 92% decrease in ATS program adoptions in Q1 to Q3 of fiscal year 2009-10 when compared to the same timeframe in fiscal year 2008-09. Chatham and Orange County Schools piloted tested ASPIRE, a computer-based program that assist teen tobacco users to stop using tobacco products.

During Q1 to Q3, the ATS program no longer received promotion to the Teen grantees by the American Lung Association. Table 17 provides the percentage breakdown of all tobacco free schools events by strategy. Across Q1 to Q3, events occurred across five strategies involving cessation, compliance, surveillance, media, and training.

Table 17. Tobacco-Free Schools Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1 (n = 144)	Quarter 2 (n = 221)	Quarter 3 (n = 114)	Total (N = 479)
Improve surveillance and assessment of compliance on school property, particularly at sporting and other events that include community participation and disseminate surveillance and assessment findings to school administrators	20.1%	29.0%	20.2%	24.2%
Provide effective smoking cessation resources for school staff by promoting the QuitlineNC	4.9%	32.1%	20.2%	21.1%
Utilize media advocacy to increase community awareness about 100% TFS policies	33.3%	8.1%	3.5%	14.6%
Provide continued training and education for school administrators, staff and community members about 100% TFS compliance	14.6%	15.8%	7.9%	13.6%
Develop school/community coalitions to address compliance issues, media advocacy strategies to promote awareness of underage tobacco sale laws to the community	7.6%	9.5%	26. 3%	12.9%
Increase the number of schools integrating alternative to suspension programs into their discipline plan for tobacco-related issues	12.5%	5.4%	11.4%	9.0%
Ensure that school districts include 100% TFS policy compliance in contracts for outside vendors/organizations using school property	3.5%	0%	0%	1.0%
Activities/Events that are not included in your action plan	3.5%	0%	10.5%	3.6%

Table 18 shows the number and types of events conducted by the grantees for tobacco free schools.

Table 18. Tobacco Free Schools Events Conducted Q1 to Q3, FY 2009-10 (N = 479)

Event Type	Number
Compliance	171
School event	103
*Media Event	74
Presentation (providing education)	63
Other	68

^{*}NOTE: Media events include newspapers, newsletters, billboards, annuals, magazines, printed programs for extracurricular school events, radio, TV, theatre slides, and websites.

Table 19 lists the newly adopted ATS programs reported by grantees for Q1 to Q3 for fiscal year 2009-10.

Table 19. Grantees reporting Adoption of an Alternative to Suspension (ATS) Program, Q1 to Q3, FY 2009-10

Grantee	School Name
Orange County HD	Chapel Hill High School
Orange County HD	Orange High School
Cancer Services of Gaston	East Gaston High School

In the Fall 2009 Semi-Annual Survey, 22 grantees reported that 256 schools (grades 5-12) offer an ATS program to students caught violating the TFS policy. Table 20 lists the grantees reporting schools in their counties offering an ATS program. Extensive variation exists in the number of schools in a school district that have reportedly adopted an ATS program.

Table 20. Grantee Reported Number of Schools Offering an Alternative to Suspension (ATS) Program

Grantee	Number of Schools
1. Buncombe County Schools	5
2. Cabarrus Health Alliance	1
3. Caldwell Council on Adolescent Health	11
4.Cancer Services of Gaston	1
5. Catawba County HD	1
6. Chowan Regional	6
7. Duplin County HD	13
8. Durham County HD	2
9. FirstHealth of the Carolinas	1
10. Forsyth County HD	70
11. Guilford County HD	50
12. Haliwa-Saponi Tribe	2
13. Haywood County HD	6
14. Hertford County PH Authority	2
15. Macon County PH Center	6
16. McDowell County Schools	2
17. Northern Nash HD	3
18. Orange County HD	14
19. Rowan County HD	16
20. Union County Schools	18
21. Vance County Schools	3
22. Wilkes County Schools	23

C. (8) Focus Area 7: Cessation

Grantees primarily conduct cessation events with youth, parent/caregivers, and the general public. Thirty-five grantees performed presentations, skills trainings, small group discussions, and community/school events in the goal area of tobacco cessation during Q1 to Q3. There was a 21% decrease in the number of events promoting youth cessation resources for Q1 to Q3 of fiscal year 2009-10 (N = 386) as compared to the same period last year (N = 467). Skills trainings in particular decreased by 63% from Q1 to Q3 of fiscal year 2009-10 compared with the same time frame in the prior fiscal year. Table 21 shows the percentage of cessation events by strategy.

Table 21. Percent Cessation Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1	Quarter 2	Quarter 3	Total
	(n = 91)	(n = 127)	(n = 168)	(N = 386)
Promote QuitlineNC to middle and high school students	70.3%	75.6%	41.7%	59.6%
and their caregivers as a resource for tobacco users	70.570	75.070	41.770	33.070
Train health care professionals and school staff who				
work with youth including, but not limited to,				
pediatricians, dental health care providers, and school	12.1%	7.9%	14.9%	11.9%
health nurses on effective strategies for identification				
and referral of youth tobacco users to the QuitlineNC				
Create awareness of the harmful effects of "social	4.4%	8.7%	16.1%	10.9%
smoking"	4.470	0.770	10.176	10.576
Promote the American Lung Association's Not-On-				
Tobacco (N-O-T) program as a group resource for	13.2%	5.5%	7.7%	8.3%
students who want to quit smoking				
Activities/Events that are not included in your action	0%	2.4%	19.6%	9.3%
plan	0%	2.470	15.0%	3.3%

Table 22 shows the number and types of events conducted by the grantees for cessation.

Table 22. Cessation Events Conducted Q1 to Q3, FY 2009-10 (N = 386)

Event Type	Number
*Media event	104
School event	86
Presentations	82
Community event	45
Small group discussions	21
Skills trainings	19
Other	29

^{*}NOTE: Media events include newspapers, newsletters, billboards, annuals, magazines, printed programs for extracurricular school events, radio, TV, theatre slides, and websites.

C. (9) Focus Area 8: Secondhand Smoke

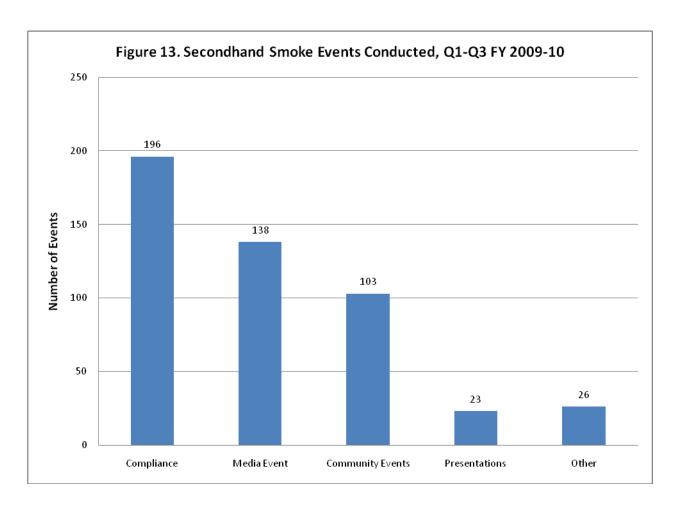
The program outcome for the secondhand smoke (SHS) focus area is *smoke-free policy adoptions* which is realized when venues (e.g. restaurants, places of worship, tribal facilities, convenience stores) frequented by youth implement a policy prohibiting smoking or tobacco use on the premises. Table 23 shows the percentage of events targeted to secondhand smoke by strategy.

Table 23. Percent Secondhand Smoke Events by Quarter and Strategy, FY 2009-10

Strategy	Quarter 1 (n = 33)	Quarter 2 (n = 210)	Quarter 3 (n = 243)	Total (N = 486)
Use media advocacy to promote the adoption of smoke-free policies in local venues frequented by youth	27.3%	37.6%	5.4%	20.8%
Use media advocacy to promote all venues that have adopted smoke-free policies	15.2%	13.8%	24.3%	19.1%
Provide letters or certificates of appreciation for venues frequented by youth that adopt smoke-free policies	12.1%	3.8%	4.5%	4.7%
Direct use of any secondhand smoke strategies to aid in the adoption of an improved or smoke-free policy	9.1%	1.4%	4.1%	3.3%
Conduct targeted surveys or petition drives in the community to determine compliance and opinions regarding smoke-free venues and policies. Disseminate findings to owners and managers	27.3%	1.4%	0.8%	2.9%
Activities/Events that are not included in your action plan	9.1%	41.9%	60.9%	49.2%

The adoption of House Bill 2 in the spring, 2009, and its initial implementation in January, 2010, clearly is contributing to events of grantees surrounding secondhand smoke. As House Bill 2 compliance increases, the number of establishments in which smoking is allowed deceases, thus resulting in changes needed for reaching venues that continue to have secondhand smoke exposure. These changes have resulted in increases in events in Q1 to Q3 not originally in grantees' action plans for 2009-10.

Figure 13 summarizes reported grantee events targeting reduced exposure to SHS among youth. During Q1 to Q3, the majority of SHS events (196 compliance activities) occurred, which includes SHS compliance policy messages and policy checks/violations to local restaurant owners, managers, and patrons.



During Q1 to Q3, 5 grantees reported a total of 9 smoke-free policy adoptions; one health care facility, one restaurant, two municipal policies, two places of worship, and three others (daycare, real estate office, and a gift shop). Fewer grantees reported smoke free policy adoptions this year compared to last year because of the House Bill 2 passage in which all venues serving food are now required to be smoke free. Table 24 lists the grantees and venues that adopted 100% smoke-free policies during Q1 to Q3.

Table 24. 100% Smoke-Free Policy Adoptions, Q1 to Q3, FY 2009-10

Grantee	Venue	Location		
Buncombe County Schools	Buncombe County Government	Buncombe County, NC		
Catawba County HD	Yousseff 242	Hickory, NC		
Chowan Regional	Open Door Baptist Church	Edenton, NC		
Chowan Regional	Church of Christ	Edenton, NC		
Dare County HD	Dare County Dept. of Public Health	Dare County, NC		
Macon County PH Center	Town of Franklin	Franklin, NC		
North Carolina Commission on Indian Affairs	Sweet Expressions	Pembroke, NC		

C. (10) Focus Area 9: Capacity Building

Data for Q1 to Q3 showed major decreases in contacts/meetings with state and local leaders and in reports on community partnerships, compared to Q1 to Q3 of 2008-09. It is important to note that TEAMS requires grantees to list the names of each state and local leader contacted, whereas previous reporting systems did not require this information. Staff trainings and events decreased some in Q1 to Q3 of 2009-10 compared to 2008-09, a time in which grantees had minimal opportunities to access two technical assistance providers for trainings and events during Q1 to Q3 (SAVE - Q1 to Q2; American Lung Association - Q1 to Q3). Table 25 shows the capacity building programmatic outcomes for fiscal years 2008-10.

Table 25. Summary Outcomes for Administrative Capacity Building Events, Q1 to Q3, FY 2008-10

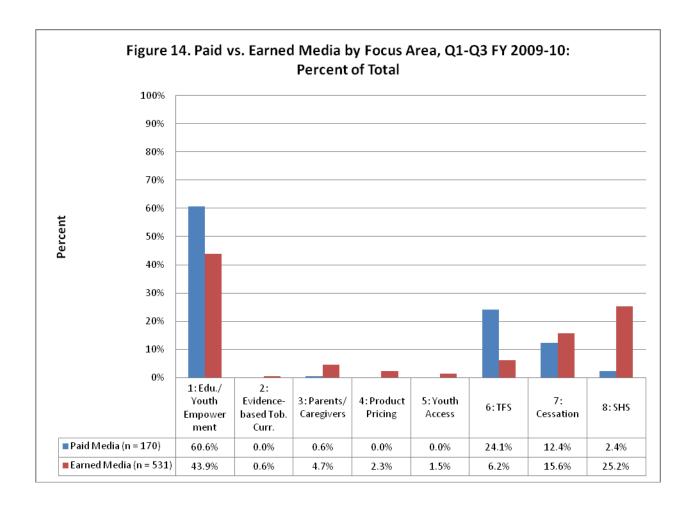
	FY 2008-09				FY 2009-10			
	Q1	Q2	Q3	Total	Q1	Q2	Q3	Total
Staff Trainings & Events	86	136	104	326	63	66	141	270
Contacts/Meetings with State & Local Leaders	25	782	91	898	6	9	27	42
Community Partnerships	92	99	94	285	12	8	31	51

C. (11) Overall Media Outcomes

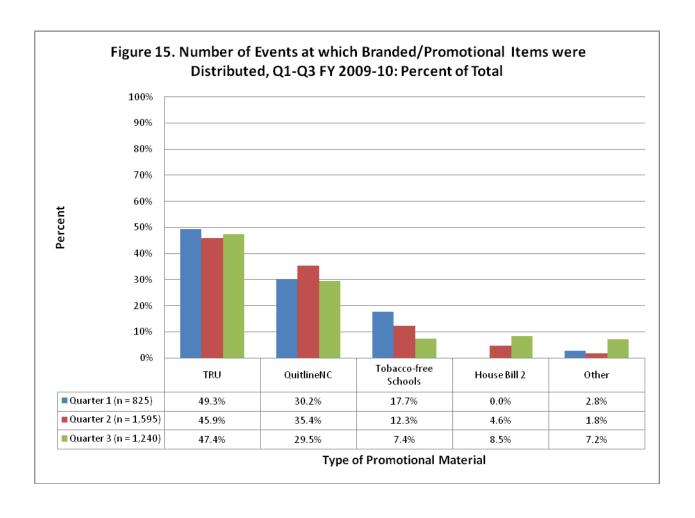
Forty-five grantees reported paid and/or earned media messages during Q1 to Q3. Media includes messages that are either 1) Earned or 2) Paid. Earned messages are generally "mass or large media" reaching large audiences through channels including radio, TV, and newspaper interviews and were merited by the grantee based on their work. Earned media also include letters to the editor. Grantees do not pay for earned media coverage. Paid messages include ads, radio spots, or HWTF materials that were purchased. Contrary to previous fiscal years, media, as defined within this report and in all programmatic measures, no longer includes unpaid media messages. Unpaid media messages are now considered printed and promotional materials.

Grantees reported a total of 701 media messages as disseminated during Q1 to Q3 for fiscal year 2009-10. Since media no longer encompasses unpaid media messages, trend analysis for media related outcomes by grantees is no longer possible. Trend analyses for paid and earned media messages alone will, however, occur for upcoming fiscal years.

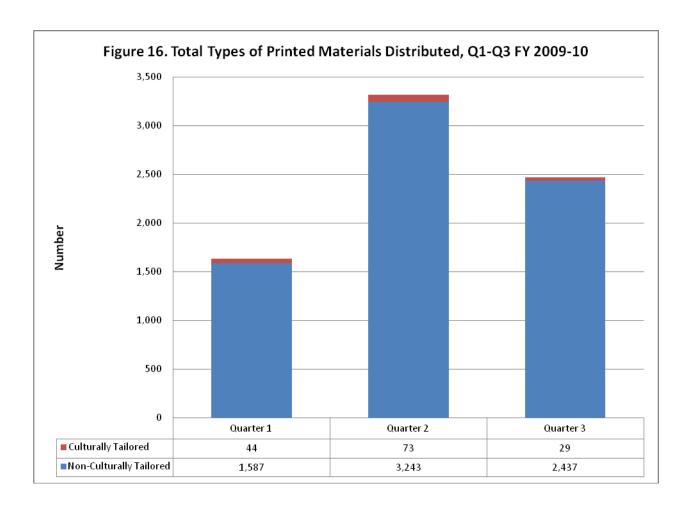
Figure 14 below shows the proportion of paid and earned media outcomes by focus area during Q1 to Q3. Forty eight percent of all media messages reported this quarter occurred in the area of youth education and empowerment. Another 11% of media messages occurred in the area of 100% tobacco-free school policy implementation and compliance. Grantees reported 104 media messages in the area of cessation and a large number of earned media in secondhand smoke.



Although unpaid promotion of Teen Initiative messages are no longer considered media per se, information on the distribution of branded/promotional items is still collected. Figure 15 depicts the number of events at which branded/promotional items distribution occurred as reported by grantees. Over half of the events during Q1 to Q3 at which branded items were distributed involved promoting TRU (47%; 1,727 of 3,660). Thirty-seven percent (1,358 of 3,660) of the events involved promoting QuitlineNC and House Bill 2.

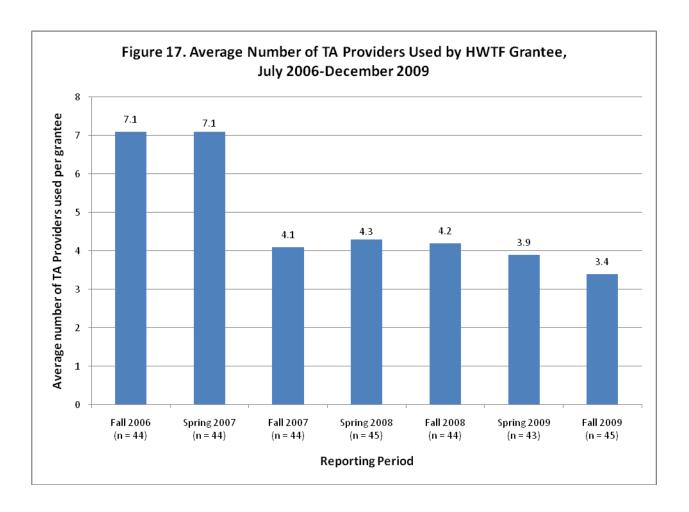


Distribution of printed materials also occurred at a variety of events during Q1 to Q3. Examples of printed materials include fact sheets, brochures, and posters. While grantees can tailor printed materials to HWTF priority populations, most did not, which is in direct proportion to the low number of overall culturally tailored events conducted. Figure 16 shows the very low numbers of culturally tailored vs. non-culturally tailored printed materials distributed during Q1 to Q3.



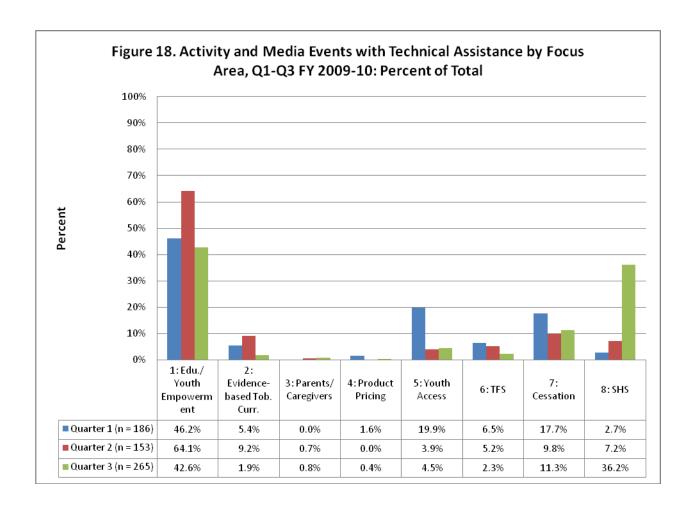
C. (12) Technical Assistance Providers

For the Teen Initiative, grantees provide feedback bi-annually via the Semi-Annual Survey on HWTF funded technical assistance (TA) and training resources. There are 12 TA providers offering a wide variety of resources ranging from media advocacy to youth empowerment. During July 2009 - December 2009, grantees reported using all HWTF-funded TA providers. Nearly all grantees (98%) reported using a technical assistance (TA) provider during July 2009 - December 2009. On average, each grantee reported using 3.4 TA providers during Fall 2009, compared to 4.2 reported during Fall 2008. Figure 17 shows the average number of TA providers utilized by grantees from Fall 2006 to Fall 2009.



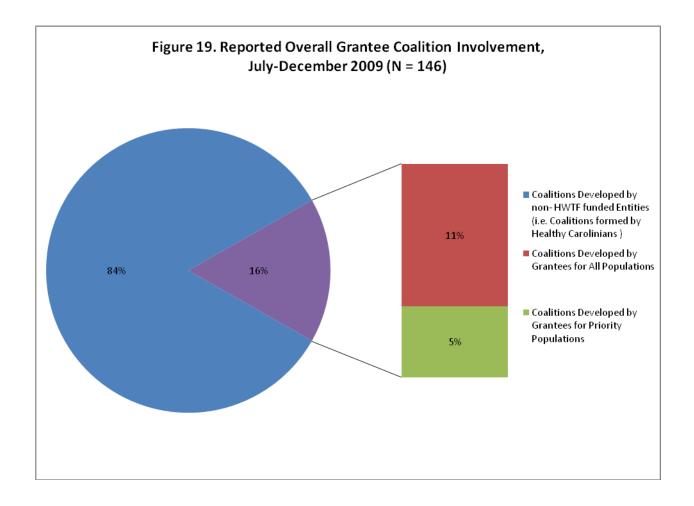
During Q1 and Q2 SAVE was unavailable to grantees for TA, and grantees had limited access to American Lung Association. The TA providers used the most during Fall 2009 by grantees were Question Why (42 of 46; 91%) and NC STEP (34 of 46; 74%). Additionally, grantees report TA usage and effectiveness of services rendered on a Likert-type scale ranging from *needs were not at all met* to *needs were completely met* on the semi-annual survey. During Fall 2009, the majority of grantees (94%) reported their needs were completely or mostly met by the TA providers.

Technical assistance occurred across all focus areas with the majority in youth empowerment. Figure 18 provides a breakdown of technical assistance usage across focus areas for Q1 to Q3.

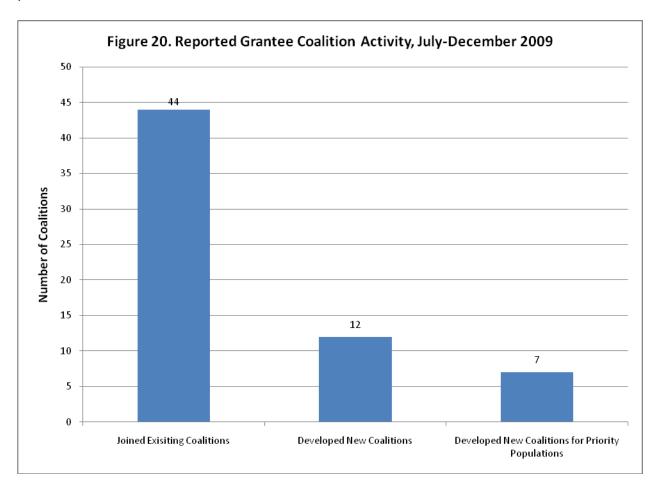


C. (13) Coalitions

Since the inception of the Teen Initiative, grantees reported involvement with 146 coalitions across North Carolina. Of the 24 coalitions developed by HWTF grantees, 16 coalitions occurred to reach youth from all populations and 8 coalitions occurred to reach priority population youth. Figure 19 illustrates the distribution of coalitions that grantees reported they have been involved in from the inception of the Teen Initiative to December 2009. Nearly all of the coalitions developed by grantees to reach priority population youth were created during Fall 2009 (7 of 8, 88%).



During Fall 2009, grantees reported joining 44 existing coalitions and developing 12 new coalitions. Seven of the newly developed coalitions were designed to reach one of the nine identified priority populations for the Teen Initiative. Figure 20 illustrates grantees reported coalition involvement during Fall 2009. Since the Phase IV logic models examine coalition activities in greater detail than in previous years, trend analysis for coalition activity across grantees is no longer possible. Trend analyses for coalition activity will continue for future fiscal years.



C. (14) Grantee Reported Perceptions

Over half of all grantees report that they have achieved their overall program goals in the last six months (65%) and are on target to achieve their program goals during the next six months (80%). When the same perceptions are reported by focus area (see Table 26) variation exists among grantees with over half reporting achieving their goals in the youth empowerment, second hand smoke, and cessation focus areas with 89%, 54%, and 63% achieved respectively. More grantees report room for improvement within product pricing and other focus areas as well as with planning and conducting culturally tailored events.

Table 26. Summary of Grantees' Perception of Progress toward Goals, July 2009–December 2009

AAP Progress	January-June 2008 (N = 45)	July-December 2008 (N = 45)	January-June 2009 (N = 44)	July-December 2009 (N = 46)		
On target to achieve program goals in the next six months	80%	73%	73%	80%		
Achieved overall program goals in the last six months	67%	36%	66%	65%		
Achieved goals related to Focus Ar	Achieved goals related to Focus Areas:					
Youth tobacco prevention and empowerment	71%	60%	75%	89%		
100%Tobacco-free Schools (TFS)	49%	40%	59%	48%		
Product Pricing and Youth Initiation	16%	9%	23%	20%		
Smoke-free policies/Second-hand smoke	20%	9%	36%	54%		
Cessation	31%	16%	52%	63%		
Priority Populations	29%	29%	34%	24%		

Grantees were asked about their perception of partnerships with other grantees. On a scale from 1 to 5 where 1 = Significantly less than you expected, 2 = Less than you expected, 3 = As you expected, 4 = More than you expected, and 5 = Significantly more than you expected, grantees reported partnering with other grantees as slightly less than expected (see Table 27). This finding suggests that grantees expected to partner more with other grantees during July 2009 - December 2009.

Table 27. Summary of Grantees' Perception of Partnerships, July - December 2009*

	Mean (N = 46)	Standard Deviation	Minimum Value Reported	Maximum Value Reported
Partnered with other Grantees:				
Community/ School Grantee	2.76	0.87	1	4
Priority Population Grantee	2.54	0.84	1	4

^{*}Note: Prior data were captured using a different measure. Therefore, we are unable to continue trend analysis on these data from previous years.

C. ACHIEVEMENTS AND PROGRAM BARRIERS

C. (1) Achievements

Forty-five of forty-six grantees (98%) reported at least one major accomplishment during Q1 to Q3. The majority of grantees reported an accomplishment during Q2 (45 of 46), while 33 grantees reported an accomplishment during Q3 (a 25% decrease when compared to Q3 of fiscal year 2008-09). A total of 452 accomplishments were reported during Q1 to Q3, with the majority of accomplishments reported during Q2 (217 of 452; 48%) and the least amount reported during Q3 (102 of 452; 23%). Noteworthy accomplishments reported during Q1 to Q3 include:

Awards

- Chowan Hospital received the NC Quitline Fax Referral Award for being the #1 North Carolina small hospital generating QuitlineNC fax referrals for January 2010. Hospital administrators acknowledged the TRU nicoTEEN Free Way program for the increase in cessation efforts among hospital employees.
- The Orange County Health Department's TRU program was awarded the Kathy Kerr Outstanding Health Education Project Award from the North Carolina Chapter of the Society for Public Health Education.

Programmatic Outcomes and Policy Adoptions

- Fatback's Citgo located in Murphy, NC removed all tobacco advertisements from its premises.
- Buncombe County Commissioners voted unanimously to prohibit smoking in all government buildings, vehicles, and property. The ordinance went into effect January 2, 2010.
- The Dare County Public Health Department implemented a 100% tobacco-free policy.
- The Town of Franklin adopted a 100% tobacco-free policy.

Events

- El Pueblo hosted La Fiesta de Pueblo 2009. This event attracted approximately 25,000 participants primarily from the Latino/Hispanic Community.
- The 2009 Eastern Region Youth Summit was organized and presented by 9 HWTF Eastern Region grantees. TRU youth members spend the weekend learning about the perils of tobacco use and the importance of team work.
- Youth from Ocracoke middle and high schools presented information about the Great American Smoke-Out and House Bill 2 to the Hyde County Board of Commissioners. The youth also asked the Board to adopt a TRU Great American Smoke Out proclamation.
- The TPCB Cessation Section presented 5A's training to 45 physicians, nurses, dentists, and other healthcare professionals. Training materials included5A's, pharmacotherapy, fax referral, QuitlineNC resources, and insurance billing codes.
- Vance County Schools launched a TRU poster campaign featuring local youth promoting TRU. The posters were displayed in businesses across Vance County.
- Community TRU and Healthy Cabarrus hosted a Kick Butts 5K run for youth ages 12-18.
- In collaboration with Cabarrus Health Alliance, Cancer Services of Gaston County created a Tobacco
 Notebook which contained nine lesson plans, one tobacco quiz, and a course evaluation form for
 teachers to complete. Eleven middle schools and one behavior school received the Tobacco Notebook
 materials and training.

C. (2) Barriers

TEAMS allows grantees to report any barriers they encountered that had a negative impact on their progress each month. While reporting barriers is not required of grantees, all forty-six grantees reported at least one barrier during Q1 to Q3. During Q1 and Q2, the number of grantees reporting barriers remained relatively unchanged when compared to the same timeframe in fiscal year 2008-09. There was a 28% decrease in the number of grantees reporting barriers during Q3 (n = 31) compared to Q3 of fiscal year 2008-09 (n = 43). In the semi-annual survey, most grantees reported they encountered barriers to achieving their program objectives as expected (M = 3.35, SD = 0.82) during July-December 2009.

The most common barriers reported by grantees were students and staff members missing work/school due to holidays and breaks (107 of 333; 32%), planning and scheduling events with community partners and youth (72 of 333; 22%), and cooperation and communication with community stakeholders such as school personnel, medical/ health partners, and other community members (62 of 333; 19%). It is important to note that 26 grantees reported staff issues regarding new coordinators and vacant positions as a barrier during Q1 to Q3. Table 28 shows all barriers reported in TEAMS by HWTF grantees during Q1 to Q3.

Table 28. Reported Barriers by Quarter, FY 2009-10

Reported Barriers	Q1	Q2	Q3	Total
Administrative	14	16	3	33
Cooperation and Communication	26	28	8	62
Funding	3	2	0	5
Holidays and Breaks	46	54	7	107
Planning and Scheduling	28	35	9	72
Staff Issues (new coordinator, paid time off, etc.)	29	25	0	54
Student Issues (participation, recruitment, etc.)	39	43	11	93
Weather	4	16	38	58
Other	27	16	5	48
TOTAL	216	235	81	532

Appendix A: Indicators by Focus Area

Projected Grantee Indicators by Focus Area FY 2009-10

Focus Area 1: Youth Empowerment

- 1. Number of tobacco use prevention education media/ promotional messages published or aired -
- 2. Number of skill building trainings offered to youth promoting youth led activities
- 3. Number of TRU recruitment activities conducted
- 4. Number of new TRU groups formed
- 5. Number of youth led prevention activities

Focus Area 2: Evidence-based Tobacco Curriculums

- 6. Number of activities to identify resources relating to evidence-based tobacco use prevention curricula
- 7. Number of schools adopting evidence-based tobacco use prevention curricula
- 8. Number of meetings/contacts to provide support for existing tobacco curricula
- 9. Number of skill building trainings offered by grantee to adult leaders

Focus Area 3: Parents and Caregivers

- 10. Number of activities to identify resources to reach parents of school-aged youth
- 11. Number of meetings/contacts/presentations to parents and parent groups on the importance of talking to their children about tobacco use and related HWTF initiatives
- 12. Number of parents who attended meetings/presentations about youth tobacco initiatives.

Focus Area 4: Product Pricing

- 13. Number of educational presentations on pricing to school/community linking increased price of tobacco with decreased youth initiation
- 14. Number of media/promotional messages published or aired that link increased price of tobacco with decreased youth initiation

Focus Area 5: Youth Access

- 15. Number of enforcement media/promotional messages published or aired
- 16. Number of activities to increase compliance (e.g. merchant education
- 17. Number of stores that remove tobacco ads as a result of the grantee's direct involvement

Focus Area 6: Tobacco Free Schools

- 18. Number of compliance meetings with school/community agencies to encourage implementation and compliance with 100% TFS policy
- 19. Number of TFS surveillance/assessment activities conducted
- 20. Number of activities to disseminate/discuss surveillance/assessment findings.
- 21. Number of schools adopting an ATS program
- 22. Number of media/promotional messages encouraging compliance with 100% TFS policy that are published or aired
- 23. Number of presentations promoting effective cessation resources for school staff
- 24. Number of school/community coalitions formed to address TTUPC initiative goals

Focus Area 7: Secondhand Smoke

- 25. Number of cessation media/promotional messages published or aired
- 26. Number of trainings held for health care professionals on 5A counseling for youth or Spit Tobacco
- 27. Number of activities conducted to raise awareness to the harmful effects of social smoking
- 28. Number of presentations or meetings promoting Quitline, NOT, 5A counseling for youth or Spit Tobacco cessation

Focus Area 8: Cessation

- 29. Number of media/promotional messages promoting adoption of smoke-free policies published or aired
- 30. Number of improved smoke-free policies (e.g. smoke-free night)
- 31. Number of smoke-free policies adopted
- 32. Number of times appreciation letter/certificates are disseminated to smoke free youth-frequented venues
- 33. Number of patron survey campaigns/petition drives whose findings are disseminated to manage/owners/leaders
- 34. Number of presentations/ meetings in schools/communities or with manager/owners/leaders promoting adoption of smoke-free policies

Focus Area 9: Infrastructure and Administrative Development

- 35. Number of training sessions/ events attended by staff or partners
- 36. Number of contacts/ meetings with state or local government leaders
- 37. Number of new partnerships formed to advance a tobacco prevention initiative

Appendix B: Grantee Activity/Event Examples

Focus Areas	Event Examples				
Focus Area 1: Youth Empowerment	Youth trainings	School lunch and learns	Peer to peer education	TRU Week activities	
Focus Area 2: Curriculum	Identify and integrate an evidenced-based tobacco use prevention curricula	Identify key champion in the school system who will advance the tobacco use prevention curricula	Meetings with Curriculum Specialists/Coordinator	School staff development trainings/workshops	
Focus Area 3: Parents	Host tables during parent nights, open houses, PTA meetings, etc. at local schools	Conduct presentations in which youth inform parents about TRU activities	Make presentations to pre-existing parent groups (PTO, Parent Networks, DSS groups)	Mail information out to parents about TRU/ HWTF initiatives	
Focus Area 4: Product Pricing	Conduct price relationship presentations	Publish letters to the editor	Key Point: HWTF encourages grantees to incorporate price information into presentations that highlight all best practice activities related to youth and tobacco use. They cannot mention any call to action. Must focus only on education/raising awareness.		
Focus Area 5: Youth Access	Conduct environmental scans	Disseminate Red Flag/ Merchant Education materials	Send thank -you letters/certificates to stores who are complaint and conduct follow-up activities with non- compliant stores	Photography of tobacco advertisements and advertisement placement in retail stores (Photovoice)	
Focus Area 6: TFS	Conduct cigarette butt clean-ups at schools	Present TFS information during new hire sessions at the beginning of the school year (school staff)	Place TFS ads in sport programs	Actively develop/participate with coalitions such as SHAC, SADD, & Healthy Carolinians	
Focus Area 7: Cessation	QuitlineNC Promotions: bulletin boards, posters, business cards, disseminate QuitlineNC promotional items, etc	Conduct Great American Smoke Out and Kick Butts Day activities	Air PSAs on school and local television/radio stations	Training school nurses and other school staff (on youth cessation) during school staff meetings	

Focus Area 8: Secondhand Smoke	Publish letters to the editor thanking youth- frequented venues for adopting smoke free policies	Disseminate House Bill 2 (Prohibit Smoking in Certain Places) materials	Work with tribal councils & churches to adopt smoke-free policies	Conduct youth surveys to determine which venues they frequent in their county
Focus Area 9: Administrative	Meet with elected officials to share results of grantee's HWTF-funded grant work	Create new partnerships	Attend annual meetings and conferences	Participate in tobacco related trainings, webinars, etc.