



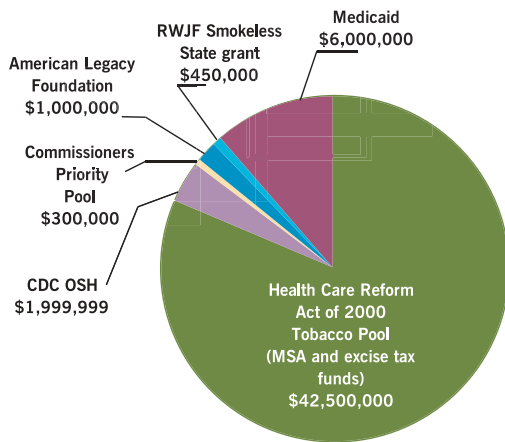
# The New York Profile

A review of New York's tobacco prevention and control program

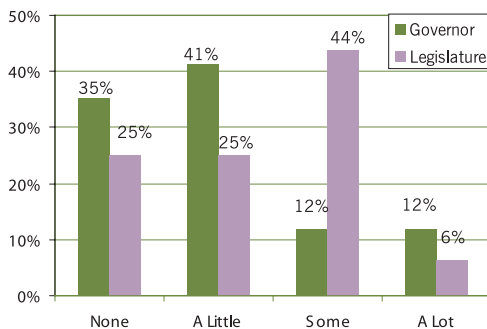
### Partners interviewed

- NY State Department of Health Tobacco Control Program
- American Cancer Society
- American Heart Association
- American Lung Association
- Coalition for a Tobacco Free New York
- Coalition for a Smoke-Free City
- Tobacco Action Coalition of Long Island
- CDC Office on Smoking and Health
- Roswell Park Cancer Institute
- Desmond Media
- Onondaga Cortland Madison BOCES
- New York Public Interest Research Group
- Bureau of Sanitation and Food Protection, Division of Environmental Health
- Statewide Center for Healthy Schools
- Tobacco Control Program Advisory Board

### Tobacco control funding sources, FY 2003



### How much support for tobacco control do you receive from the Governor and Legislature?



The Center for Tobacco Policy Research at The Saint Louis University Prevention Research Center is conducting a project examining the current status of 10-12 state tobacco control programs. The primary aim of the project is to develop a comprehensive picture of a state's tobacco control program to be used as a resource for tobacco control agencies and policymakers.

In December 2002, 15 New York tobacco control partners participated in semi-structured interviews. In addition to the interviews, a quantitative survey providing background information about New York's program was completed by the New York State Department of Health Tobacco Control Program (DOH TCP).

The following is a brief summary of the major results from the full version of the final report, entitled *The New York Profile: A review of New York's tobacco prevention and control program*. Information on how to obtain a copy of the full report can be found on the second page.

### FINANCIAL CLIMATE

- In fiscal year 03, New York dedicated \$52.25 million to tobacco control, meeting 55% of the CDC's minimum recommendation for an effective tobacco control program in the state. New York was 25<sup>th</sup> in tobacco control funding among all states for that fiscal year.
- Two tobacco control areas met or exceeded the CDC minimum funding recommendations: community programs and counter-marketing programs. Chronic disease programs was the only area that did not receive any tobacco control funding in FY 03.
- The fact that New York had dedicated a respectable sum of money to tobacco control was viewed as a financial success. New York's significant budget deficit and Governor Pataki's securitization proposal posed significant challenges to the program.

### POLITICAL CLIMATE

- The political climate regarding tobacco control was described as "ambiguous", "a mixed bag", and "two ends of the spectrum" since some positive achievements occurred in the midst of poor political support.
- Governor Pataki was viewed as unsupportive of tobacco control and having strong ties to the tobacco industry, but some partners gave him credit for passing a number of tobacco control policies.
- Partners felt there were pockets of support for tobacco control in the Legislature, but the Assembly tended to be more supportive than the Senate.
- Although politics in New York were challenging, New York City Mayor Michael Bloomberg, New York City Commissioner of Health Dr. Thomas Frieden, and Assemblyman Pete Granis (D) were recognized as strong tobacco control advocates.

## NETWORK RELATIONSHIPS

- Partners believed New York's tobacco control network was improving, with the potential to become very effective. Some felt that the network could be counterproductive at times due to competing agency priorities.
- The DOH TCP program director was viewed as a major strength, while the bureaucratic and highly political environment of the DOH was an impediment to the program.
- Partners identified the statewide coalition, the Coalition for a Tobacco Free New York, as an integral component of the network.

## PROGRAM GOALS

- Eliminating exposure to secondhand smoke and decreasing the social acceptability of tobacco use were seen as appropriate priority goals for New York. Partners felt they were goals that everyone could work towards, however some felt that they were long-term and could not be accomplished in one year.
- New York was implementing several activities to address these goals. The passage of strong clean indoor air legislation and the enforcement of youth access laws were viewed as successes.
- Partners felt that more staffing, recruiting new partners, and focusing more time and funding on policy issues would help ensure achieving the priority goals.

## DISPARATE POPULATIONS

- Partners agreed that Medicaid beneficiaries, persons with mental illness, and rural, low-income, non-Hispanic whites were experiencing pronounced tobacco-related disparities and should be priorities for the state.
- Additional populations suggested by partners to address included immigrants and Native Americans.
- Strategies were in place to address the disparate populations, specifically targeting Medicaid beneficiaries and persons with mental illness.

## PROGRAM STRENGTHS & CHALLENGES

Partners identified the major strengths and challenges of the program:

- The experience and leadership of the DOH TCP Director was a major strength of the program.
- Clean indoor air efforts throughout the state were also a strength.
- Insufficient funding was an impediment. Furthermore, partners worried about continued and additional funding due to the large state and city budget shortfalls.
- Some characteristics of the DOH were challenging due to the Pataki Administration's influence on the Department. The Department's slow approval and grant processes were also barriers.
- Little support from state policymakers and the influence of the tobacco industry and its allies also made implementing a comprehensive program challenging.

## Agency rating of importance to the program & commitment to tobacco control

Importance to the program <sup>a</sup>		Commitment to tobacco control <sup>b</sup>	
Agency	Avg. rating <sup>c</sup>	Agency	Avg. rating <sup>c</sup>
NY DOH, Tobacco Control Program	9,0	Coalition for a Smoke-free City	9,7
Coalition for a Tobacco-Free NY	9,2	Tobacco Action Coalition of Long Island	9,7
American Cancer Society	8,6	Coalition for a Tobacco-Free NY	9,6
Coalition for a Smoke Free City	8,2	American Cancer Society	9,4
American Lung Association	7,8	American Lung Association	9,3
CDC, Office on Smoking & Health	7,8	NY DOH, Tobacco Control Program	9,3
Tobacco Control Advisory Board	7,8	Roswell Park Cancer Institute	9,3
NYPIRG	7,7	CDC, Office on Smoking & Health	9,1
Tobacco Action Coalition of Long Island	7,6	Tobacco Control Advisory Board	9,0
Roswell Park Cancer Institute	7,0	NYPIRG	8,4
Bureau of Sanitation & Food Protection	6,6	American Heart Association	7,9
Onondaga Cortland Madison BOCES	6,0	Statewide Center for Healthy Schools	6,9
Desmond Media	5,8	Bureau of Sanitation & Food Protection	6,6
Statewide Center for Healthy Schools	5,2	Desmond Media	6,4
American Heart Association	3,9	Onondaga Cortland Madison BOCES	6,1

<sup>a</sup> How would you rate the importance of each agency for an effective tobacco control program in your state?  
<sup>b</sup> How would you rate the level of commitment to tobacco control for each of the following agencies in your state?  
<sup>c</sup> 10 = High; 1 = low.

## New York regularly shares information with...



To obtain a complete version of *The New York Profile: A review of New York's tobacco prevention and control program*, please contact:

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