

Massachusetts Tobacco Cessation and Prevention Program Statewide Meeting

September 18, 2025

***Draft for MTCP use only, not for external use**



Make smoking history.

Agenda

- 10:00 AM – Welcome
- 10:10 AM – Mission Moment
- 10:20 AM – Tobacco-Free Community Partnership Program Acknowledgement
- 11:00 AM – FY26 Planned Activities
- 11:55 AM – Lunch
- 12:40 PM – Networking Activity
- 1:20 PM – Updates
- 1:45 PM – Young Adult Cessation Campaign
- 2:00 PM – The 84 Reflection
- 2:20 PM – Evaluation and Adjourn



WELCOME

MISSION MOMENT

Mission Moment

MTCP will invest in and work with communities, especially with historically-oppressed communities, to reverse unjust policies, share decision-making power, and build community capacity to live a life free of commercial tobacco and nicotine.

This will be accomplished through an approach that acknowledges the role of the government, health care systems, and the tobacco industry in creating and perpetuating racial inequities in health and the factors that influence health.

SINCE WE LAST MET...

TOBACCO-FREE COMMUNITY PARTNERSHIP (CP) PROGRAMS

MTCP Vision for CPs

Working with MTCP-funded programs, **CPs will:**

- **Elevate community voices and strengths**, especially in historically oppressed communities (priority communities)
- **Build community capacity** to lead and sustain change
- **Support community-led changes** in policy, systems, and environments within the Social Drivers of Health (SDoH)
- **Reverse harmful and unjust policies**
- **Share power in decision-making**
- **Reduce health inequities related to tobacco use**
- **Create conditions where everyone can live free from commercial tobacco and nicotine**

Tobacco-Related Health Inequities

- People of color are more likely to experience discrimination in the **healthcare system** and less likely to be screened for smoking and referred to treatment
- Higher retail **density, exposure and availability** of tobacco products in neighborhoods of where people color live.
- Greater **exposure of secondhand smoke** among Blacks who are also more likely to live in multi-unit housing
- Despite similar **quit attempts** to Whites, Black and Hispanic smokers are far less likely to successfully quit
- People of color are more likely to experience **smoking/tobacco attributable death and disease** (diabetes, obesity, heart disease, lung cancer, other cancers) and have less successful outcomes

Agenda

Grounding

- MTCP Vision, Mission, Values, MTCP Why Statement
- MTCP Strategic Plan Priorities
- CP alignment with MDPH SPARE
- RFI Process ahead of RFR

Community Partnerships FY26 and Beyond

- Changes
- Priority Communities/Collaborative Communities
- Funded Agencies
- Scope of Services
- Workplan Objectives
- Collaboration with MTCP programs

Plan for unfunded priority communities and remainder of MA

MTCP FOCUS ON RACIAL EQUITY & HEALTH EQUITY

MTCP Vision

People in Massachusetts, especially those disproportionately impacted by tobacco use and exposure, are free from the health and economic burden of commercial tobacco and nicotine.

MTCP Mission

MTCP will invest in and work with communities, especially with historically-oppressed communities, to reverse unjust policies, share decision-making power, and build community capacity to live a life free of commercial tobacco and nicotine. This will be accomplished through an approach that acknowledges the role of the government, health care systems, and the tobacco industry in creating and perpetuating racial inequities in health and the factors that influence health.

MTCP Values

Community: We believe by listening to and partnering with communities of color, we can support the creation of equitable places that lead people to achieve optimal health.

Equity: We believe that it is our job to help eliminate avoidable, unfair, or remediable differences among groups of people, including socially, economically and demographically, so that all people can live a life free of commercial tobacco and nicotine.

Justice: We acknowledge the historical and contemporary racial injustices created by government entities, the health care sector, and the tobacco industry that have kept people from reaching their full potential. We lead with race and racism because we understand that when we start with those who are most oppressed, we improve the health of us all.

Accountability: We are accountable to all the people of Massachusetts, especially to historically-oppressed communities. We own our role as a government entity in the creation of inequities and commit to transforming systems and policies that have allowed racism to proliferate unchecked in all aspects of our community life including where they live, learn, work, heal and pray.

Commitment: We bring our hearts and minds to our work.

Inclusion: We value all diverse and intersectional identities and recognize the power of people in improving their health.

MTCP Why Statement

The history of structural racism – the public policies, institutional practices, and social norms that together maintain racial hierarchies – and its impact across the country and within the Commonwealth is often overlooked or unacknowledged, yet it is pervasive and unmistakably harmful to everyone. The social marginalization and inequities that racism cultivates in housing, education, employment, the built and social environments, and health care are felt across generations, most acutely in communities of color. The MTCP team recognizes that systems of cultural oppression need to be acknowledged and repaired by entities that helped create them. The team is committed to improving the quality of life for all Commonwealth residents while eliminating the marginalization and inequities that threaten the lives of communities of color who are disproportionately affected by tobacco-related disease and death and the associated risk factors.

MTCP Strategic Plan Priorities & Goal Statements

1. Community Engagement and Mobilization

MTCP authentically engages, equips, partners with and learns from communities especially historically-oppressed communities.

2. Cross-Sector Collaboration

MTCP builds cross-sector capacity to reduce tobacco-related inequities

3. Communications

MTCP increases reach and effectiveness of messages and resources

4. Data and Evaluation

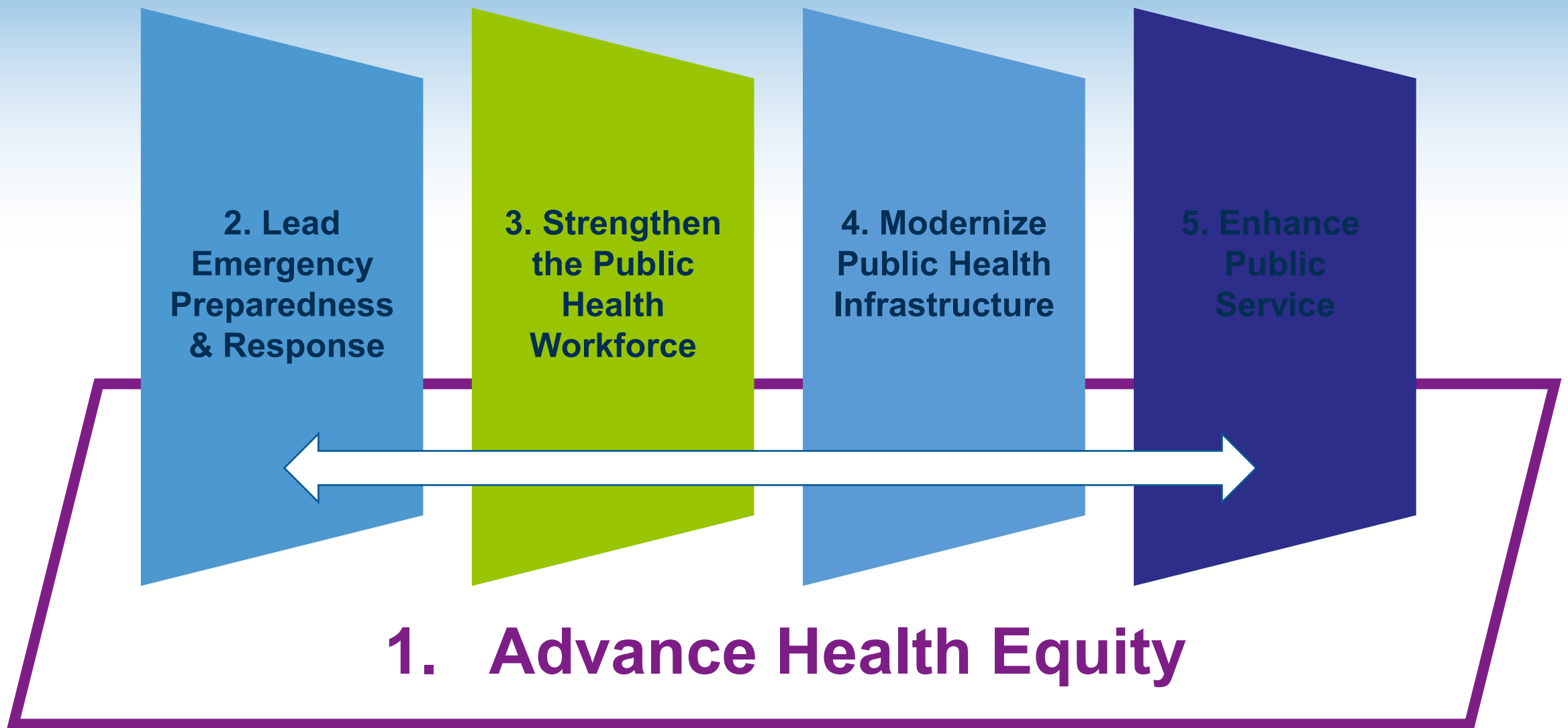
MTCP analyzes and shares data that elevates stories about the impact of tobacco and guides activities that reduce tobacco-related inequities

5. Internal Systems and Infrastructure

MTCP's infrastructure supports its staff and program so they can work effectively to reduce tobacco-related inequities.

MTCP CP PROGRAM ALIGNS WITH MDPH STRATEGIC PLAN TO ADVANCE RACIAL EQUITY (SP-ARE)

Five Foundational Public Health Strategies



REQUEST FOR INFORMATION (RFI) PROCESS

RFI Process Ahead of RFR

Currently funded MTCP Programs

- Community Partnerships & their Subcontractors
- Boards of Health
- Technical Assistance Providers, including policy
- Youth Program Managers, and
- Cessation Service Providers
- Community Inequities Project
- Unfunded organizations within MTCP priority communities
- MTCP staff
- Commbuys posting of Universal RFI Questions

Highlights of RFI Findings

- **Prioritize BIPOC led organizations and those serving BIPOC communities and individuals** that have community presence & impact, solid connections and collaborative networks in the community
- **Decrease Geographic Coverage Area and Fund Communities with Greatest Tobacco/Nicotine Burden**
 - 30 priority communities (measured by: smoking prevalence, BIPOC pop, low SES) with
 - highest need based on data
 - Statewide disbursement but not statewide coverage; geographic spread

Highlights of RFI Findings (cont.)

- **Build Partnership Model**

- Up to 2 people (2.0 FTE) for the scope of the CP work (non-admin, non-managerial) & for sustainability of programs.
- Continuing to subcontract with CBOs and compensate community members who engage.

- **Increase Number of CPs**

- To cover priority communities

COMMUNITY PARTNERSHIPS – FY26 AND BEYOND

Changes to Current CP Model

- Increased Focus within Communities with Greatest Tobacco/Nicotine Burden (Priority Communities)
- Community-led model centering Black, Indigenous, People of Color (BIPOC) community members and community members with lived experience of tobacco-related health inequities
- Increased funding to Increase staffing and partnerships with subcontracts
- Decreased geographic coverage area
- Unintentional decreased number of CPs

MTCP Priority Communities

Funded MTCP Priority Communities

Athol, Boston, Brockton, Chelsea, Everett, Fitchburg, Gardner, Greenfield, Leominster, Orange, Palmer, Quincy, Randolph, Revere, Springfield, Sunderland, Ware, and Worcester

80-90% of work

Priority Communities not funded: Attleboro, Chicopee, Fall River, Holyoke, Lawrence, Lowell, Lynn, New Bedford, North Adams, Salem, Southbridge, Taunton, Tisbury, Wareham, Webster, West Springfield

CP Collaborative Communities

Collaborative Communities

Avon, Braintree, Easthampton, Milton,
Northampton, Stoughton, Weymouth, Winthrop

10-20% of work

MTCP Community Partnerships – October 1, 2026

1. Bay State Community Services
2. Collaborative for Educational Services
3. Health Research in Action
4. UMASS Chan Medical School
5. YMCA of Springfield/Men of Color Health Awareness (MOCHA)

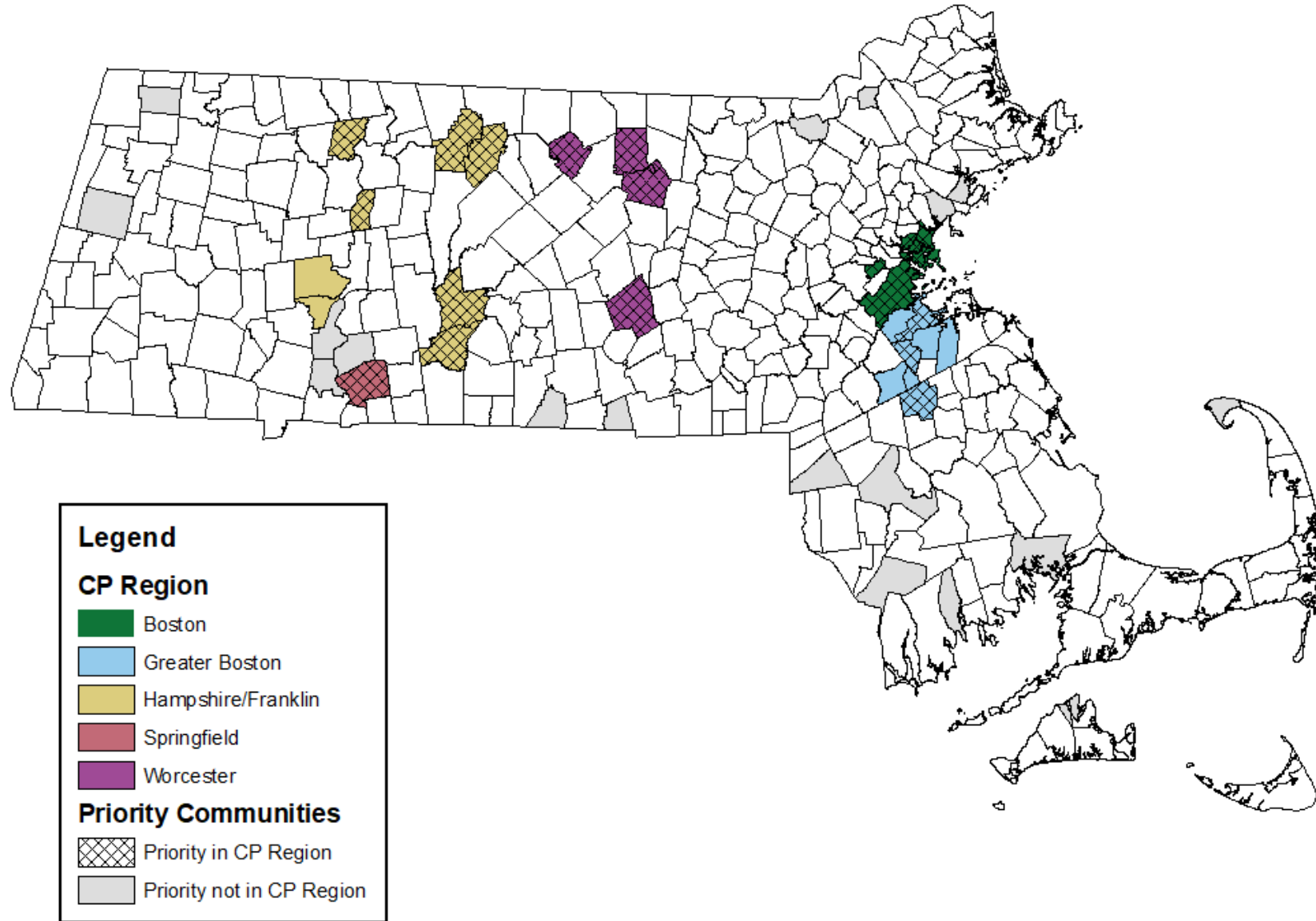
MTCP Community Partnerships: Priority Communities

1. Bay State Community Services
 - Brockton, Quincy, Randolph
2. Collaborative for Educational Services
 - Athol, Greenfield, Orange, Palmer, Sunderland, Ware
3. Health Research in Action
 - Boston, Chelsea, Everett, Revere
4. UMASS Chan Medical School
 - Fitchburg, Gardner, Leominster, Worcester
5. YMCA of Springfield/Men of Color Health Awareness (MOCHA)
 - Springfield

MTCP Community Partnerships: Collaborative Communities

1. Bay State Community Services
 - Brockton, Quincy, Randolph (**Avon, Braintree, Milton, Stoughton, Weymouth**)
2. Collaborative for Educational Services
 - Athol, Greenfield, Orange, Palmer, Sunderland, Ware (**Easthampton, Northampton**)
3. Health Research in Action
 - Boston, Chelsea, Everett, Revere (**Winthrop**)
4. UMASS Chan Medical School
 - Fitchburg, Gardner, Leominster, Worcester
5. YMCA of Springfield/Men of Color Health Awareness (MOCHA)
 - Springfield

Community Partnership Program Coverage



CP Scope of Services: Goal

Advance racial equity and health equity by reducing tobacco-related health inequities through community-led policy, systems, and environmental (PSE) change.

CPs will work with community members within MTCP priority communities, centering Black, Indigenous, People of Color (BIPOC) community members and community members with lived experience of tobacco-related health inequities to:

- Foster racially just and inclusive engagement;
- Build community capacity to address inequities within social drivers of health (SDoH) – including where people live, work, play, and heal – that influence tobacco and nicotine related health inequities;
- Build community capacity for implementing community-led policy, systems, and environmental (PSE) changes to reduce tobacco-related health inequities; and
- Deliver culturally and linguistically appropriate education on related topics.

CP Scope of Service: Workplan Objectives

Objective 1: Increase CP knowledge of structural racism, white supremacy culture (WSC), and racial equity and their relationship to the social drivers of health and the history of tobacco and health.

Objective 1a. Develop skill set to effectively communicate with community members (particularly within priority communities) the aforementioned knowledge gained.

Objective 2: Priority Community Data Collection and Assessment

Objective 3: Co-Interpretation of Data and Community Engagement

Objective 3a: Plan of Action

Objective 4: Develop Strategy Plan including Outreach & Communications Plan

Objective 5: Implement Community-Led Advocacy and Policy Change to Decrease Tobacco-related Health Inequities (Led by the self-identified members of marginalized population(s) within priority community(ies))

Evaluation and Sustainability

CP Collaboration with MTCP Programs

- BOHs – CPs may support **BOH** policy change in priority/collaborative communities by educating, mobilizing and engaging members in the process, etc.
- 84 chapters - CPs may support expansion of youth **84** chapters through referrals of youth groups to the 84 program
- Cessation - CPs support community members by educating CBOs on the availability of **cessation** services offered through MTCP and subsequently make referrals
- Community Inequities Project – CPs may engage with PHIWM/WOCHEC in the Community of Practice and/or on **racial equity assessments, training and coaching**

Unfunded Priority Communities & Remainder of MA

- Root Cause Solutions Exchange
 - And existing technical assistance programs
- Community-Based Participatory Evaluation
- Community Advisory Board
- UMass Medical – school support added to scope
- Tobacco Free Mass
- The 84 Movement
- MTCP@mass.gov

RESOURCES FOR LOCAL PSE CHANGE

Resources for Local PSE Change

The following list is not exhaustive of all the coalitions, organizations, and resources that are committed to conducting PSE change work.

Statewide Resources

Alliance for Community Health Integration	https://mapublichealth.org/achi/
Coalitions List on Mass Power Forward	https://www.mapowerforward.com/ourcoalition
Dignity Alliance Massachusetts	https://dignityalliancema.org/
Disability Policy Consortium	https://www.dpcma.org/about
Massachusetts Coalition for Health Equity	https://masscoalitionforhealthequity.org/
Member Directory on Massachusetts Association of Community Development Corporations	https://www.macdc.org/members

Western MA Resources

Arise for Social Justice	https://arisespringfield.org/
Community Action Pioneer Valley	https://www.communityaction.us/about/
Community Foundation of Western Massachusetts	https://communityfoundation.org/
Public Health Institute of Western Massachusetts	https://www.publichealthwm.org/

Resources for Local PSE Change (cont.)

Central MA Resources

Free Worcester	https://freeworcester.org/
Grassroots Central Mass	https://www.mapowerforward.com/ourcoalition
Health Foundation of Central Mass	https://hfcmm.org/
United Way of Central Massachusetts	https://www.unitedwaycm.org/

Northeastern MA Resources

Health Equity Partnership of North Central Massachusetts (CHNA9)	https://www.chna9.org/27/About-Us
Mystic Valley Public Health Coalition	https://www.mysticvalleyphc.org/resources-1
Northeastern Public Health Alliance	https://www.nephacoalition.com/
The Highlands Coalition	https://hclynn.co/

Resources for Local PSE Change (cont.)

Southeastern MA Resources

Coalition for Social Justice Education Fund	https://csjeducate.org/
Health Imperatives	https://healthimperatives.org/
Self Help Inc	https://selfhelpinc.org/
Women's Alliance of Southeastern Massachusetts	https://www.wasema.org/ https://www.facebook.com/womensalliancesema/

Greater Boston/Eastern MA Resources

Boston Community Health Collaborative	https://www.boston.gov/government/cabinets/boston-public-health-commission/racial-justice-and-health-equity/bostonchna
Community Organized for Solidarity	https://www.cosnewengland.org/
Dudley Street Neighborhood Initiative	https://www.dsni.org/
GenUnity	https://www.genunity.org/
Health Leads	https://healthleadsusa.org/
Metropolitan Area Planning Council	https://www.mapc.org/aboutus/

Resources for Local PSE Change (cont.)

Other MTCP Resources

Cessation Technical Assistance (for school trainings)	https://www.umassmed.edu/tobacco
Coalition Finder on HRiA's Website	https://hriainstitute.org/coalitions/
MTCP Community Advisory Board (CAB)	Vendor TBD
Community-Based Participatory Evaluation (CBPE)	Vendor TBD
The 84 Movement; or start a local chapter	https://www.the84.org/

Other DPH Resources

Bureau of Environmental Health	https://www.mass.gov/orgs/bureau-of-climate-and-environmental-health
Mass in Motion Programs	https://www.mass.gov/info-details/directory-of-mass-in-motion-programs

Digital Resources

Coalition Finder on HRiA's Website	https://hriainstitute.org/coalitions/
Root Cause Solutions Exchange	https://exchangema.org/

QUESTIONS?

Thank You!

Colleen

Devin

Joyce

Thank You!



Thank You!



Thank You!

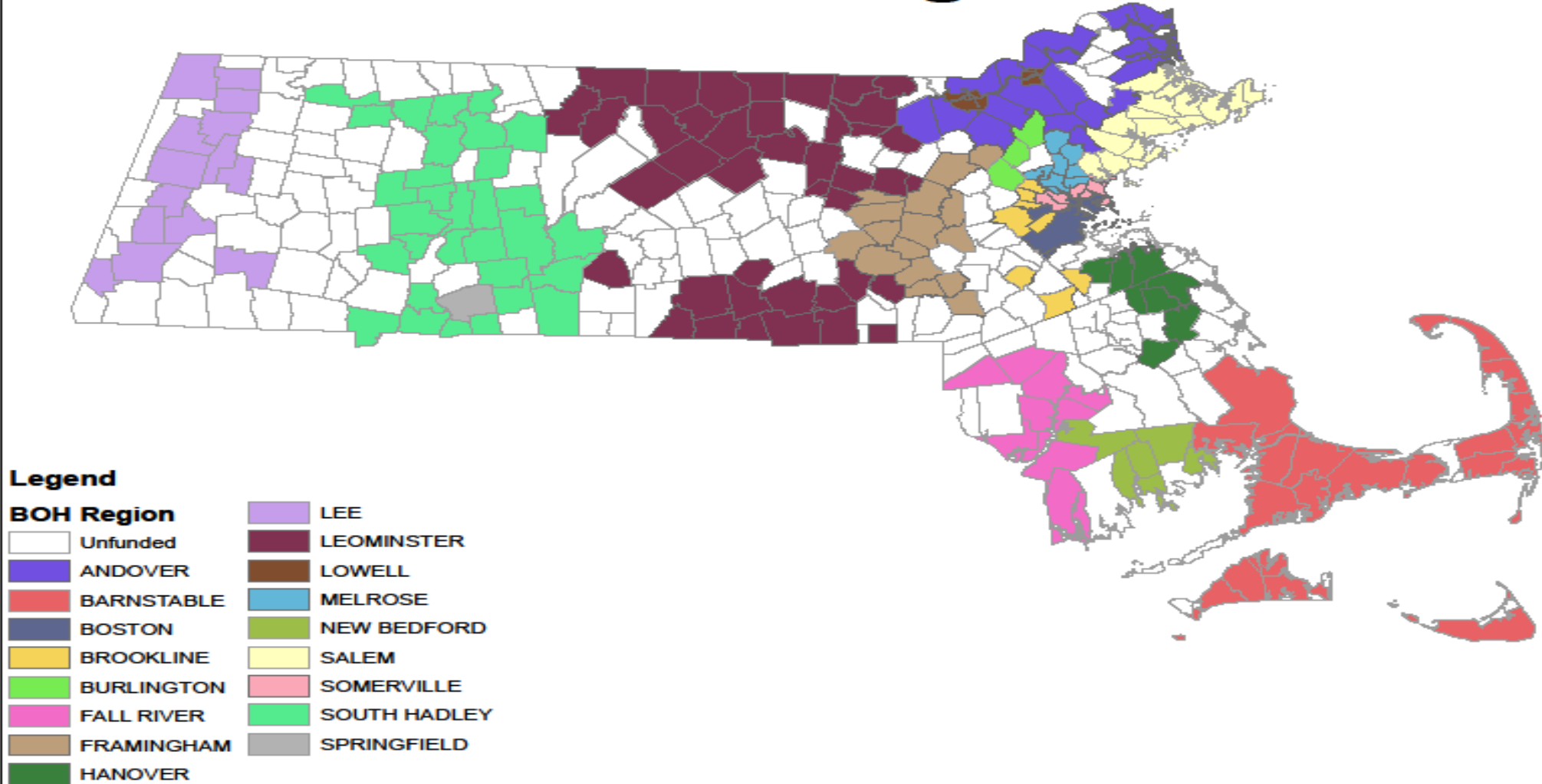


FY26 PLANNED ACTIVITIES

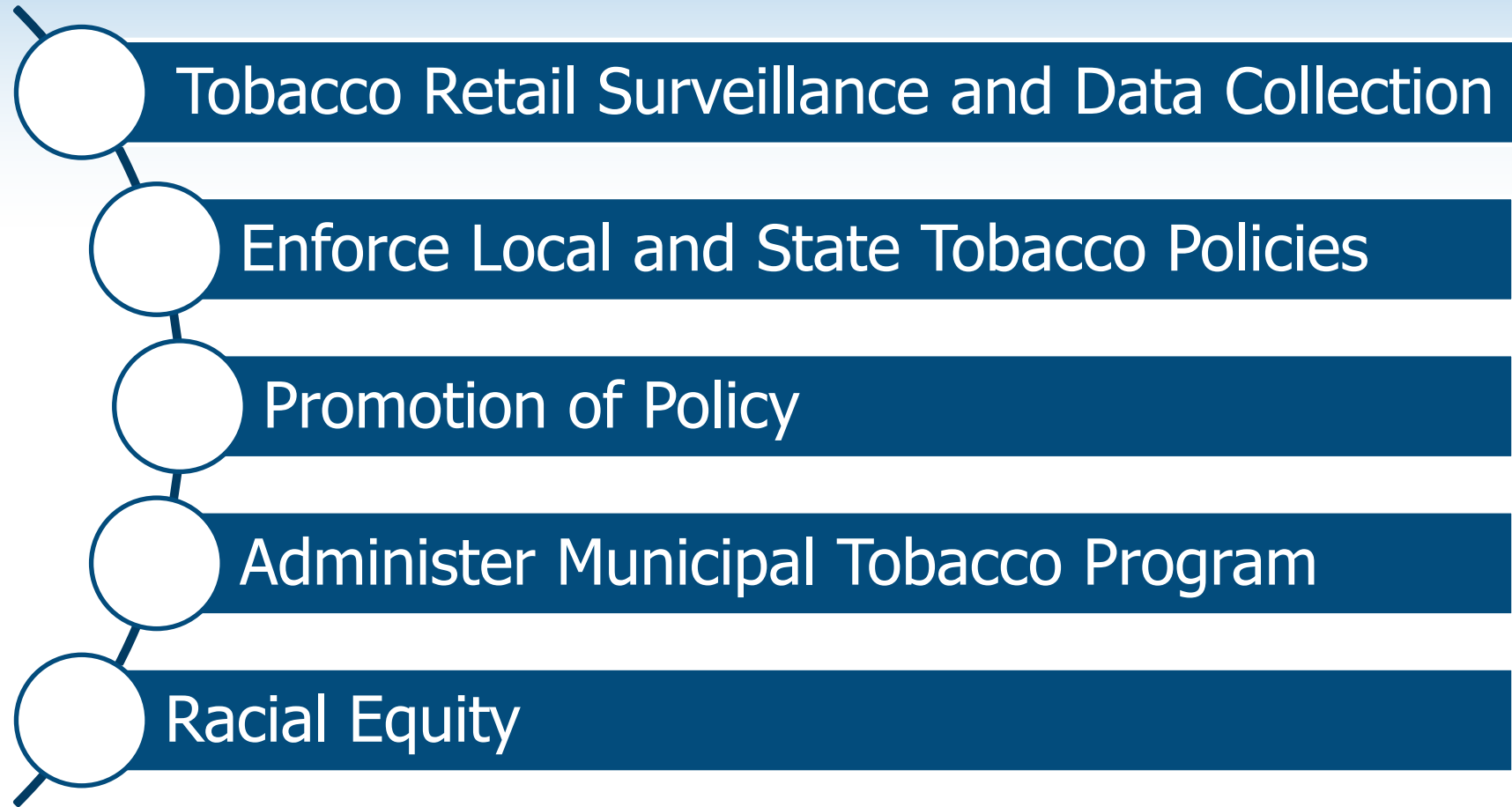
BOARDS OF HEALTH

MTCP BOH Programs

BOH Funded Regions 2025



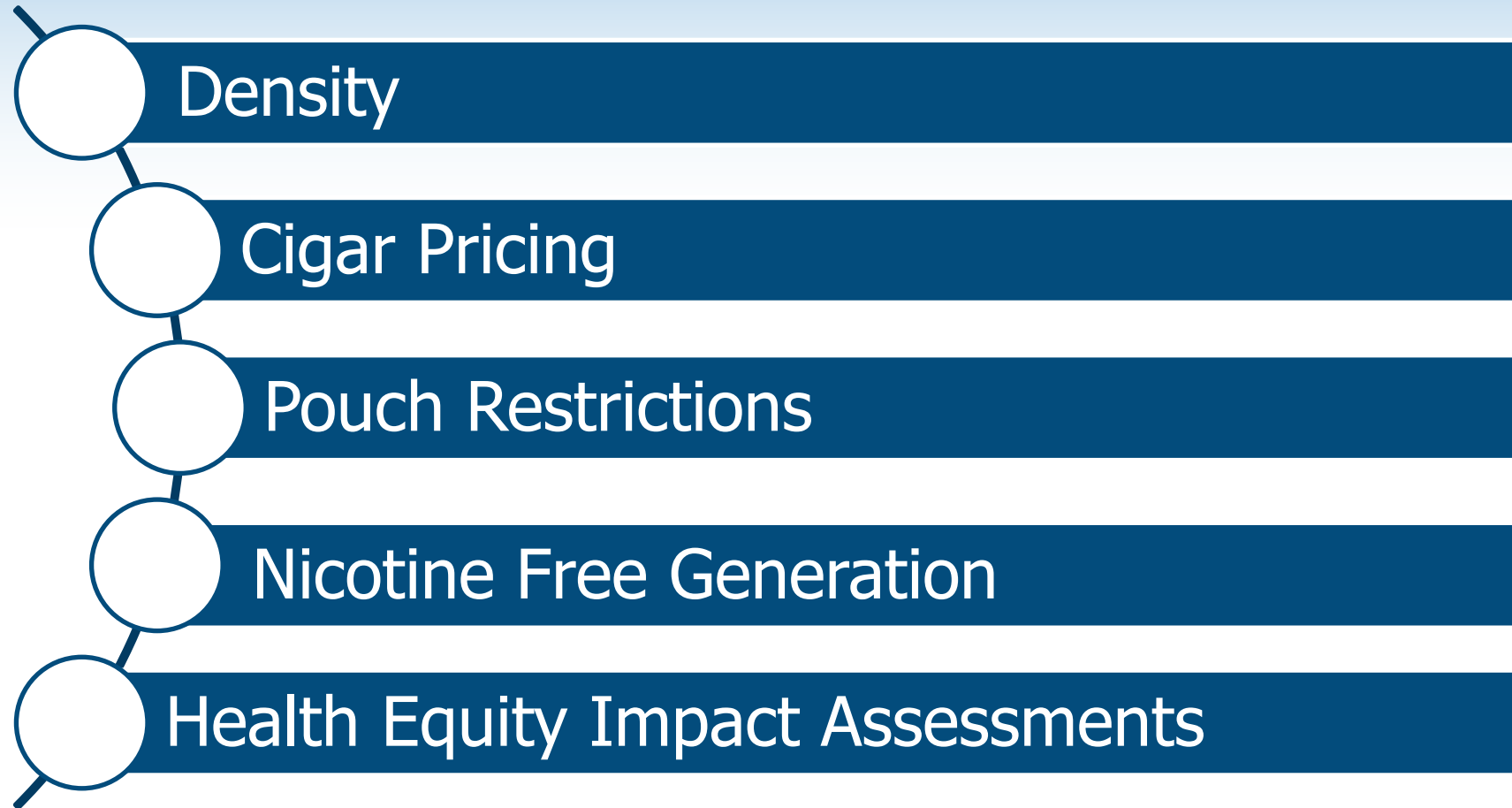
Board of Health Scope of Work



Surveillance and Enforcement



Policy Promotion



AND.....

Site Visits

CESSATION

With Caroline Cranos (UMass Chan Medical School) and Jordan Mackin
(Institute for Health & Recovery)

Vendor: UMass Chan Medical School

- Current work (priorities):
 - Health Systems work:
 - Engaging with Federally Qualified Health Centers (FQHC) to include:
 - Programming and incentives to support FQHCs in establishing eReferral to the Quitline and developing workflows to support its use
 - Trainings focused on implementing patient-centered brief interventions
 - Expanding services to engage OB/GYNs, pediatricians
 - Youth work/expanded scope:
 - Developing training master slide set focused on increasing skills of providers and staff assisting youth who use tobacco/nicotine in quitting
 - Reviewing materials for assisting youth in quitting, including youth-based materials and guides/support documents for school nurses/staff
 - Engaging school nurses/staff and pediatricians to promote materials and treatment options

Institute for Health and Recovery (IHR) – BHENA Workplan Updates

1. MTCP/BSAS increased collaboration – Two Programs, One Vision
 - Continued support for BSAS, DMH, and other behavioral health entities to provide system assessments, consultation, technical assistance, and trainings

Sign up for Our Newsletter to Get on Our Email List

Sign Up for our Newsletter

Name*

Email*

I'm Interested In:

- ✓ Select One
- Family and Children
- FASD Task Force
- Outpatient Services
- Tobacco Education and Treatment**
- Trauma
- Youth and Young Adults

 Sign Up >

- Quarterly newsletter:
“IHR’s Tobacco & Nicotine Project News”
- Announcements:
 - ✓ TEC meetings (BSAS & DMH)
 - ✓ Other trainings/events
 - ✓ Special news items

Click here to sign up: <https://www.healthrecovery.org>

(Scroll to bottom of the page, select “Tobacco Education and Treatment”)

Institute for Health and Recovery (IHR) – BHENA Workplan Updates

2. Expansion of intentional outreach
 - Youth Community Crisis Stabilization (YCCS) programs
 - Recovery high schools
3. Smokefree housing work with Group Living Environments (GLEs)
 - Collaborating with MTCP's Smokefree Housing workgroup on creating materials that promote a healthy home in behavioral health settings

Institute for Health and Recovery (IHR) – BHENA Workplan Updates

4. Finalize and work with providers to implement our latest toolkit:

Addressing Tobacco and Nicotine Dependence Among Pregnant and Postpartum People With Behavioral Health Conditions

COMMUNICATIONS

FY 26 Communications

- Young Adult Cessation – launch campaign (Juul funds)
- Adult Cessation
 - Continue to run Google search campaign, re-run small Take the First Step campaign
 - Provider outreach – Behavioral Health and Oral Health
- Procurement of communications support under new Communications MSA
- Youth prevention/cessation - Pediatrician outreach
- ENUFF day planning and execution
- MTCP web pages – ADA accessibility compliance, revise and reorganize pages
- Other – Clearinghouse, social media, support new cohort of CPs, start thinking of next steps for youth prevention/adult awareness based on research in FY25, and more!

COMMUNITY INEQUITIES PROJECT

Lisa Ranghelli, Public Health Institute of Western Massachusetts

Capacity Building for Racial Equity: Overall Goals

- Build racial equity capacity among organizations, individuals and coalitions in western MA and beyond.
- Support them move along a continuum toward becoming anti-racist.
- Pursue changes in policies and practices internally and externally that will improve health and reduce harms of tobacco/nicotine.

Capacity Building for Racial Equity: FY26 Priorities

- Continue and expand work with “pilot” organizations, which receive extensive one-on-one **racial equity assessment, TA and coaching**.
- Deepen trust, relationships, and learning among **community of practice (COP)**, which has expanded beyond western MA.
- **Recruit 1-3 more organizations** into the project from outside western MA, and include as “pilots” and in a COP.
- **Disseminate and market resources** developed in the last year:

Advancing Racial Equity in the Workplace: A Practical Guide, <https://wohec.org/facilitator-guidebook/>

Quitting posters designed by community artists, <https://drive.google.com/drive/folders/1aWT27GiHPepfOMLJB2jzMNq4TLN-aa8B>



Capacity Building for Racial Equity: FY26 Priorities

- **Support action**
 - Continue leadership role with equity in the 413 summit
 - Continue participation in statewide density working group
 - Offer webinars on tobacco/nicotine data and policy

Up next: 9/26 webinar on
vaping/nicotine pouches and youth
<https://www.publichealthwm.org/vaping%20pouches%20webinar>



PUBLIC HEALTH INSTITUTE OF WESTERN MASSACHUSETTS
PARTNERS FOR HEALTH EQUITY

FREE WEBINAR

**Vaping & Nicotine Pouches:
Understanding the New Landscape**

Friday, September 26, 2025
12:00 - 1:00 pm

FEATURED SPEAKERS:



Dr. Nicole Porter
Chair of the Department of Health Professions, Massachusetts College of Liberal Arts



Heather Warner, MPH
Hampshire Franklin Tobacco-Free Community Partnership Coordinator, Collaborative for Educational Services

PublicHealthWM.org

ENFORCEMENT

Enforcement

- Metrik
 - Reimagine – adopt a more focused, slower-spend approach to sustain the project over a longer timeframe.
- Retailer Education Training
- Synar
 - FY26 – Finishing up wrapping up the data collection
 - FY27 – Report due at the end of December. BOH will be sent out selected Synar zip codes in early October

SMOKE-FREE HOUSING (SFH)

With Kathleen McCabe, Chris Banthin, and Destiny Gonzalez

SFH FY26 Workplan

- Build partnership with and advance healthy housing priorities with tribal communities in Massachusetts
 - Identify needs and gaps; create, update and/or adapt materials
 - Partner with Nichol Brewer-Lowry at Native Life Lines & Cheryl Cromwell
- Better align cannabis and tobacco work
 - Review and assess regulations related to social consumption sites to mitigate harms of secondhand smoke.
 - Coordinate with MTCP, TA and CP programs to understand and strategize at the local level.
- Support compliance with smoke-free housing policies in the behavioral health setting
 - Create tools for residents and staff to facilitate productive conversations within (DMH) group home settings.
 - Continue partnering with IHR to advance trauma-informed approaches to enforcement.
- Provide technical assistance, as needed, to individuals and organizations to advance smoke-free housing policies
 - Present at Housing Court conference
 - Provide support via the hotline

THE 84 MOVEMENT

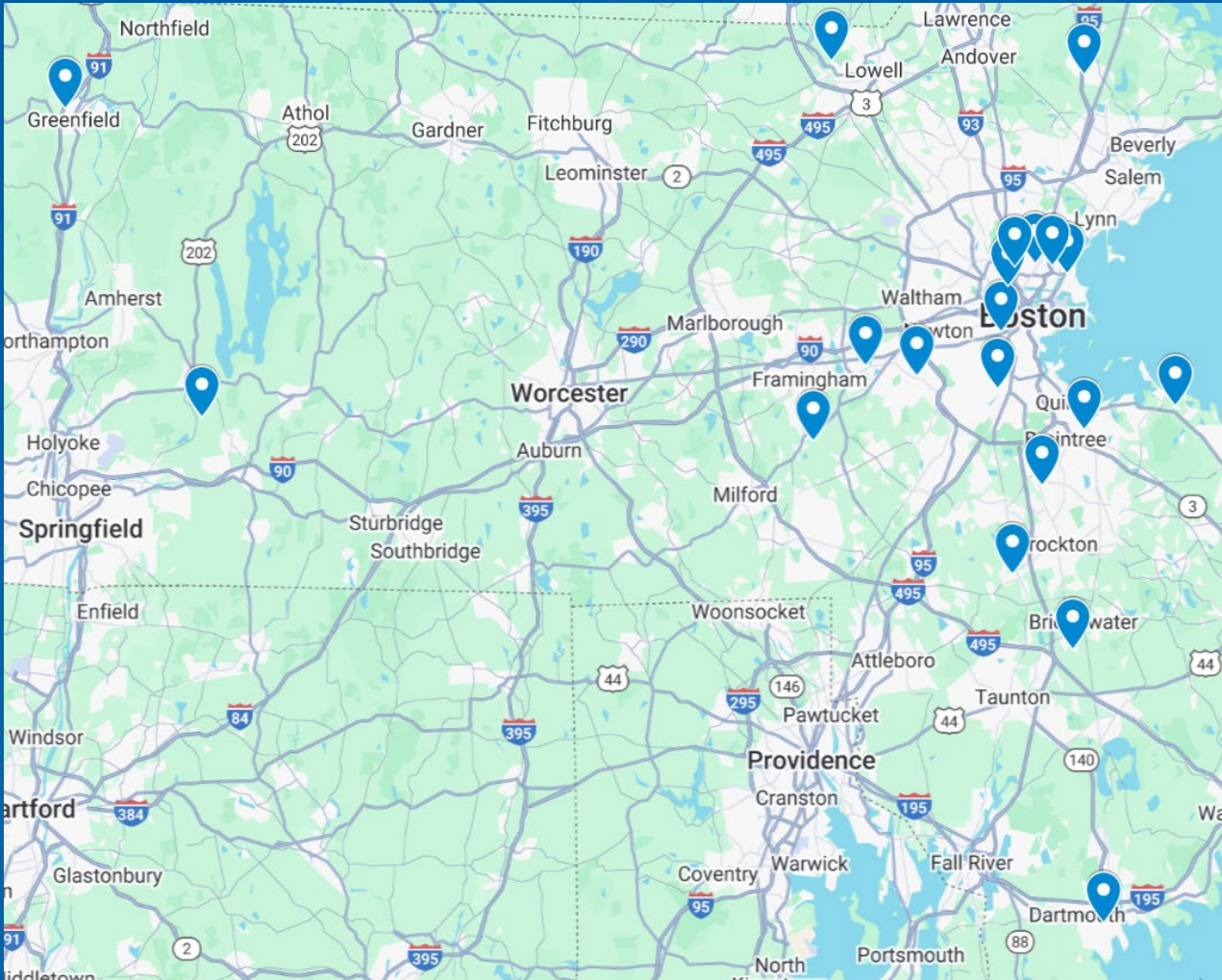
With Mark Kowalski, Ed Rand, Kelly McKora, Christina Badillo, and Wes Carty

The 84 Work Plan

- 46 to 70 grants will be awarded this year
 - Up to 35 in the Fall and up to 35 in the Spring
 - PSE for Prevention (\$5K for up to 10 Chapters/Fall and up to 10 Chapters/Spring) & Creative Spark (\$2-\$4K for up to 25 Chapters/Fall and up to 25 Chapters/Spring)
- NFG will be our stipend project for the Fall of 2025
- Training Overhaul- Update trainings
 - Audit of trainings
 - Gathering information from past participants to inform any changes made
 - Make trainings more interactive
 - Recording some trainings to make more easily accessible
- SLT
 - Grow the Involvement of SLT in YPS and ENUFF
 - Term limits introduced this year
- YPS
 - Will be “conference style” this year with simultaneous tracks, options for sessions
 - Held at end of January (venue TBD)



Statewide Leadership Team (SLT)

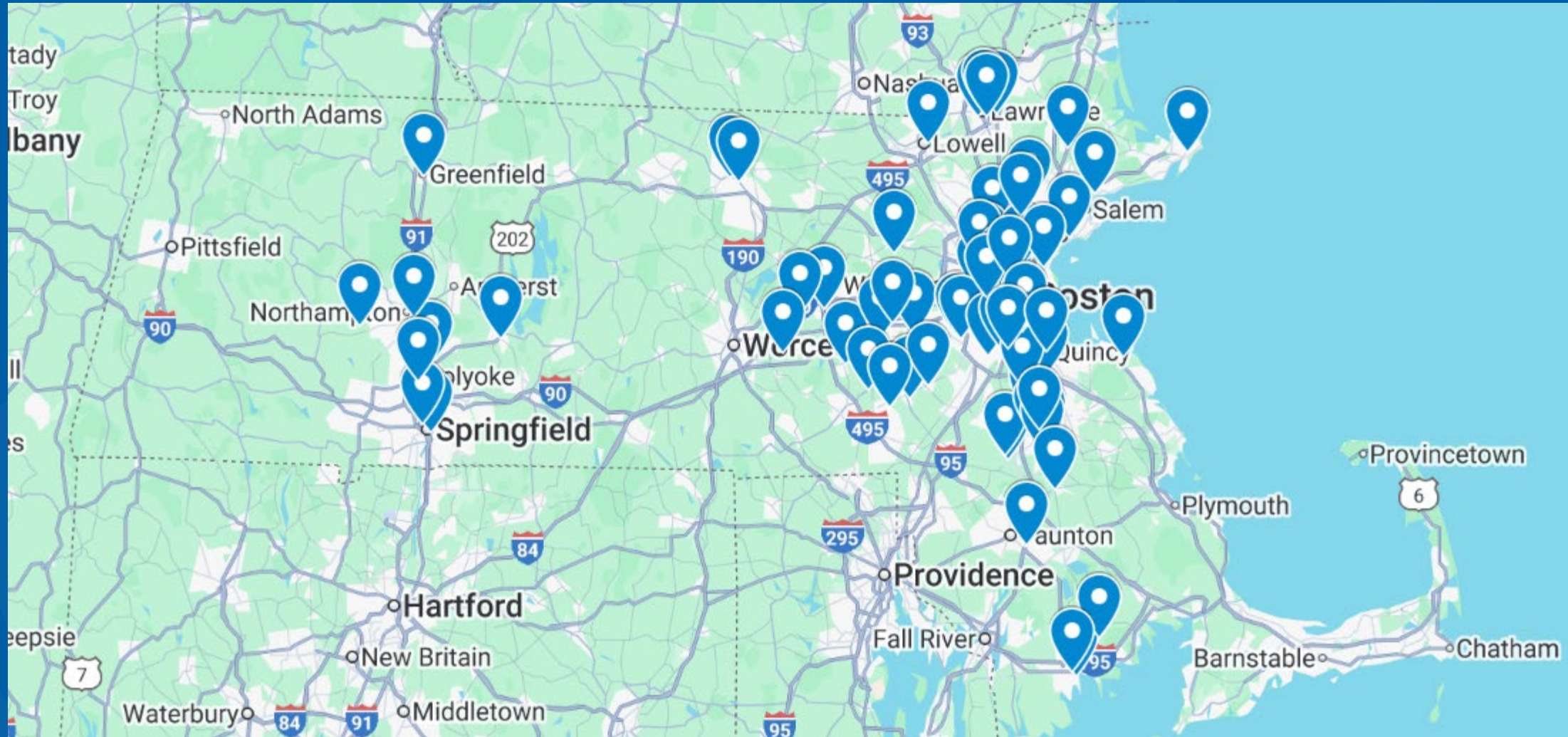


A current map of where our 20 SLT leaders are located.



In August, some of our SLT leaders had the opportunity to connect, participate in team-building activities, and engage in training during a 3-day retreat in Cape Cod

The 84 Chapters



A current map of where our 75 Chapters are located.

JUUL SETTLEMENT PROJECTS

Juul Settlement Projects

Recap of projects funded by JUUL in FY26:

- Youth Prevention
 - Support training to school nurses and youth providers to increase awareness of vape products, signs, and intervention resources; train the trainers for curricula implementation
 - Support Community Partnership Programming for local PSE change work
 - Increase capacity of The 84 Movement
- Cessation
 - Continue work with provider technical assistance and capacity building to increase awareness, screening, and referrals to cessation services; EMR integration to increase referrals
 - Promotion of cessation services via mass media
 - Continue work educating providers about e-cigarettes use among youth and young adults

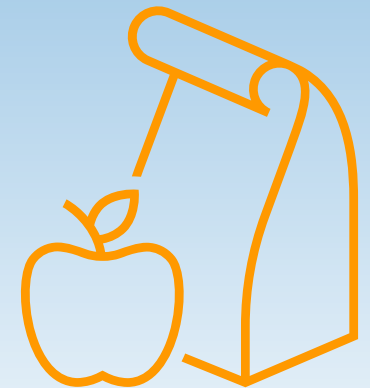
- Compliance and Enforcement
 - Retailer inspections and enforcement in unfunded municipalities and in funded municipalities where more support is needed
 - Tailored retailer education in areas that are unfunded and/or have high non-compliance rates
 - Data analysis and supporting QI strategies for areas with high violation rates
- Infrastructure and Administration
 - Staffing and infrastructure for ISA oversight and community engagement

Other projects funded by Juul in FY26:

- Community-Based Participatory Evaluation (CBPE)
- Community Advisory Board (CAB)
- 2025 Physician and Researcher Convening
- Youth and Young Adult Surveillance Survey in collaboration with DPH CHEI

ENJOY LUNCH!

Return at 12:40 PM



NETWORKING ACTIVITY



NCTOH 2025 World Café

Instructions:

- **Conference Attendees**

- Split up and sit at different tables across the room. Ideally, 2-3 conference attendees sit at a table.

- **Those Who Did Not Attend**

- Form small groups of 5-6 and sit at different tables across the room. There shouldn't be too many people at one table.
 - Example: Table 1 has 2-3 conference attendees and 5-6 non-conference attendees.
- Each table gets one conversation card.
- Talk for **15 minutes**.
- When the alarm goes off, switch. Non-attendees rotate clock-wise to another table. Attendees stay at the same table.
- Talk for **15 minutes**.
- After the alarm, come to back to the large group and debrief.

- **For Virtual Attendees**

- Virtual attendees will stay in the main room and answer the prompt questions with each other.
- If there are no virtual attendees who attended this year's NCTOH, then focus on answering *Questions for Non-Attendees*.

NCTOH 2025 World Café (cont.)

Conversation Prompts:

- **Questions For Conference Attendees:**

- What was the best session or keynote, and why?
- Did anything surprise you about NCTOH?
- What's one idea you plan to apply to your work?
- Who did you meet that left a strong impression?

- **Questions For Non-Attendees:**

- What do you wish you could have learned at the event?
- What's a professional challenge you're currently facing?
- Is there a topic you hope to hear more about in future events/trainings?
- What would make you attend this conference next year?



NCTOH 2025 World Café (cont.)

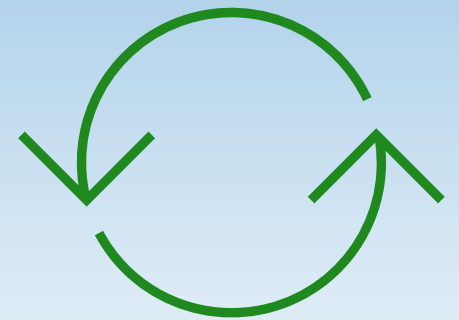
Large Group Debrief:

- ☐ Share back:
 - Something interesting you learned from a conversation.
 - A session or idea you now want to learn more about.

- ☐ What's the most valuable thing you've learned recently? Is there anything you learned that you want to take back to your work?



UPDATES



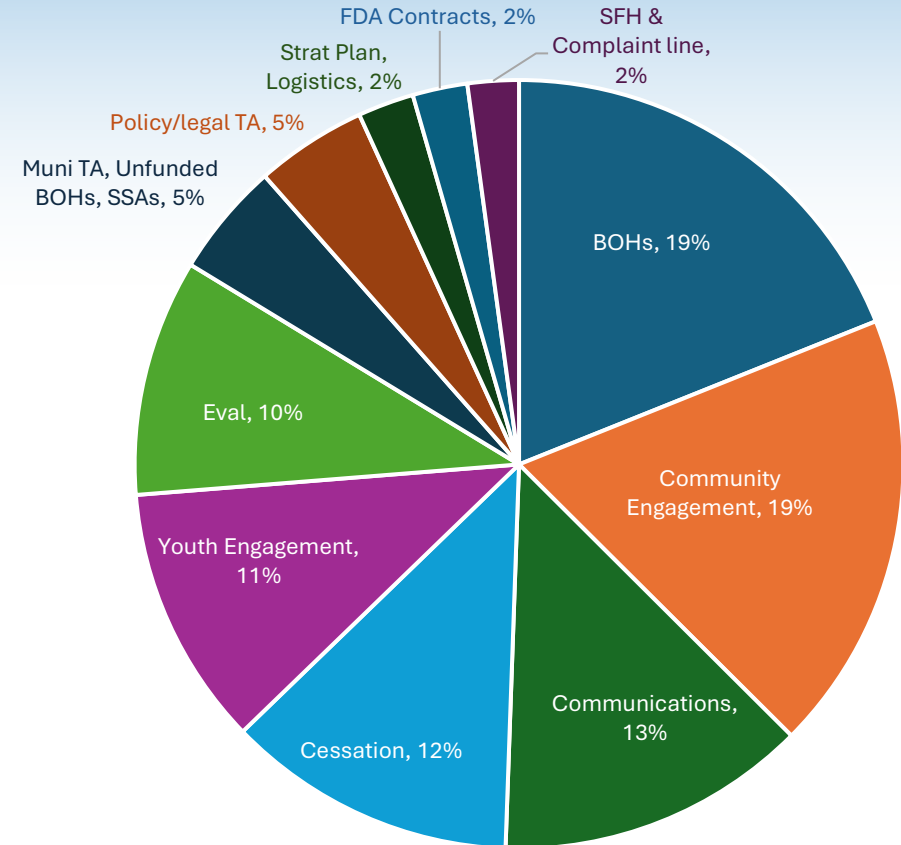
TECHNICAL ASSISTANCE (TA) UPDATES

MTCP FY26 BUDGET

MTCP FY26 Budget

Account	Amount
State – Chronic Disease Line	\$6,252,977.00
BSAS – SAHMSA, Synar	\$1,001,437.16
FDA	\$864,696.30
DOR – Illegal Tobacco Task Force	\$114,768.00
OLRH – Shared Services for LBOH	\$150,000.00
JUUL ISA	\$4,750,000.00
CDC - NTCP	TBD??
Total	\$13,133,878.46

FY26 Funding Allocations



Draft allocations of current encumbrances and projections. Not included in analysis: infrastructure, staffing, fringe, payroll taxes, mailing services, disposal contracts, facilities, equipment, etc.

Program Area (represents contracts/grants, not reflective of all resources allocated to strategies)	Proportion of Budget
Muni Board of Health Programs	19%
Community Engagement (CAB, CPs, CBPE, Inequities project; Root Cause Solutions, etc.)	19%
Communications (MORE Advertising, Clearinghouse, etc.)	13%
Cessation (Quitline, Umass, IHR)	12%
Youth Engagement (The 84, PYD/Y4Y)	11%
Evaluation (BRFSS, YRBS, ERG, POST, JSI, CHEI, CPBE, MGH, CDCF)	10%
Muni TA, Unfunded BOHs, Retailer ed, SSA Support (MHOA, BOHs via MHOA, OLRH)	5%
Policy/Legal TA (MMA, MAHB, PHAI)	5%
Logistics, Meetings, Strategic Planning (AdCare, TBD)	2%
FDA Youth Buyer Program (HRIA)	2%
Smoke-free Housing TA & Complaint Line (HRIA, PHAI)	2%
Total Programming/Services	\$10,852,836.46
Total MTCP FY26 Budget (see previous slide)	\$13,133,878.46
Proportion of Funding Spent in Programming/Services	83%

Economic Report – Coming Soon!

- Report outlines 1-, 5-, and 10-year savings in health care costs
- 5-year savings of \$71.2M in health care costs associated with pregnancy/birth complications, heart attack and stroke, and lung cancer alone (report coming soon to mass.gov)
- Underestimate of overall law impact on health costs. Analysis doesn't include:
 - full extent of all health consequences of tobacco use and associated costs
 - omits secondhand smoke reductions/impact
 - analysis is isolated to menthol flavored (other flavored tobacco not included)
- Using report to celebrate 5 years of the law, press release and full report coming soon

YOUNG ADULT CESSATION CAMPAIGN

With MORE Advertising



Young Adult Vaping Cessation Campaign:

Statewide MTCP Meeting Update

September 18, 2025

Challenge and Campaign Goal

What challenge are we trying to address?

The MTCP and Massachusetts AGO want to launch a campaign to...

Help young adults—those most affected by JUUL's predatory marketing—quit nicotine products.

- JUUL's predatory marketing practices resulted in a new generation addicted to nicotine, with resulting harms to both physical and mental health.
- Significant barriers stand between young adults and a nicotine-free life, even among those who express a desire to quit.



GOAL: For young adults who use nicotine products to make supported quit attempts and sustain quit progress throughout their quitting journey.

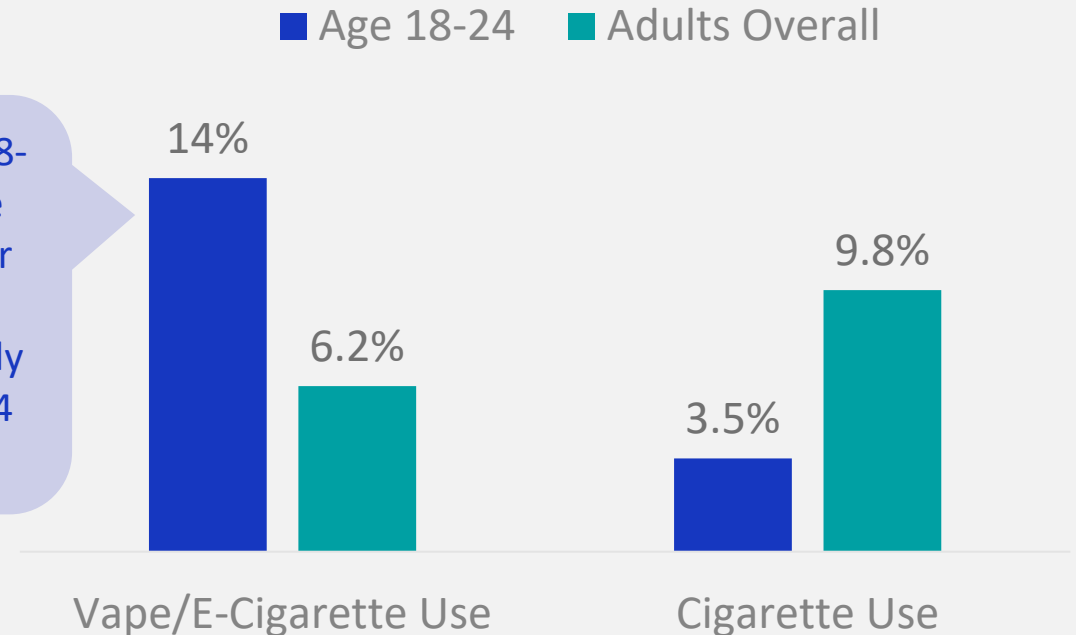
Our Audience: Demographics

Who is our primary audience?

- Young adults ages 18 to 24 in Massachusetts who currently use nicotine products.
- Predominantly or historically used vaping products.
- English, and Spanish language preference
- Equity focus:
 - Black, Indigenous, and People of Color (BIPOC) – most at risk for poor health outcomes
 - LGBTQIA+, and young adults with behavioral health conditions – most likely to use nicotine products + high barriers to cessation

Young adults 18-24 vape more than any other age group, followed closely by those 25-34 (13.1%)

MA BRFSS 2023 ¹
Tobacco/Nicotine Product Use by Age



¹ A Profile of Health Among Massachusetts Adults, 2023 Results from the Behavioral Risk Factor Surveillance System

Discovery Phase

Formative Research

Multi-phase, mixed methods study by Market Street Research (MSR)

MSR conducted formative research to **identify and analyze barriers to quitting nicotine** among young adults.

All participants had current or previous experience with nicotine products, primarily vapes and were segmented into three groups: those who have not attempted to quit, those who have attempted to quit, and those who have successfully quit.

Phase 1: Barrier Identification

- **Primary Objective:** Identify motivations and barriers to quitting, particularly among those who have prior attempts to quit.
- **Method:** 30 young adults age 18-28 participated in 45-minute interviews

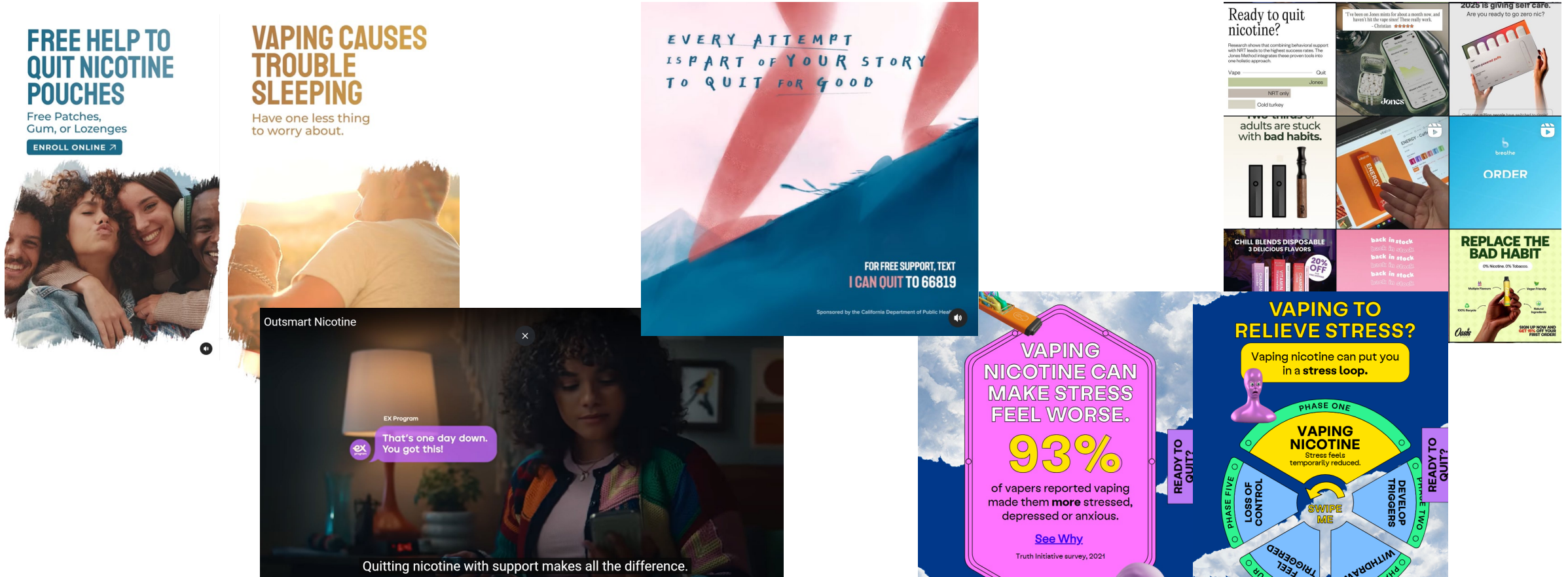
Phase 2: Barrier Analysis

- **Primary Objective:** Analyze and identify behavioral determinants to quitting – grounded in the Theory of Reasoned Action and Health Belief Model – by comparing determinants between those who have successfully quit vaping and those who have not.
- **Method:** 255 young adults age 18-25 participated in an online survey

Media Scan and Environmental Landscape

Identify learnings and themes from existing campaigns and environmental barriers to quitting

MORE scanned existing media campaigns and environmental landscape to inform campaign direction.



Key Takeaways

What insights inform our strategy recommendation?



Mental health is a powerful entry point for young adults—especially those from marginalized communities—so we will position quitting as a way to improve their mental health and emotional wellbeing.



Many young adults use nicotine to cope with stress, trauma, or social pressures. We will meet them with empathetic, nonjudgmental messaging that increases self-efficacy.



Attempters need multiple, flexible support options—so we will meet them where they are by spotlighting accessible tools like free texting programs, no-cost NRT, and insurance-covered resources they may not know are available.



Young adults live on their phones—and trust content that feels personal, real, and shareable. Therefore, we will use a digital-first media approach that prioritizes mobile.

Communications Objectives

How do we get there?

Using a social marketing framework, we have three **communications objectives** for the campaign: Knowledge, attitudinal, and behavioral

- **Know:** Your mental health and emotional wellbeing can improve after quitting nicotine.
- **Feel:** Although it's challenging to quit, it's easier with support and so much better on the other side.
- **Do:** Get support to quit vapes and nicotine products—your way.

Concept Testing

Concept Testing Findings

- Market Street Research conducted **four focus groups** to test three concepts in English and Spanish to:
 - Gather reactions to creative concepts
 - Collect feedback on effectiveness, clarity, and overall appeal of the concepts
 - Explore participants' responses to messaging in the creative concepts
- In the focus groups, young adults were also asked to pick two video ideas from a list of five that they would be interested in.
- Results showed two concepts rising to the top, yet “This Ad Will Make You Quit” showed more promise to motivate the audience to take action.
- Findings also informed revisions to the concept.

English Concepts Tested

This ad won't make you quit vaping.

But reduced anxiety, a better mood, and feeling less stressed might.



When you're ready to quit vaping, text 'Start' to:

36072

mass.gov/QuitVaping

Connect to live quit coaches, custom quit plans, and FREE quit meds today.



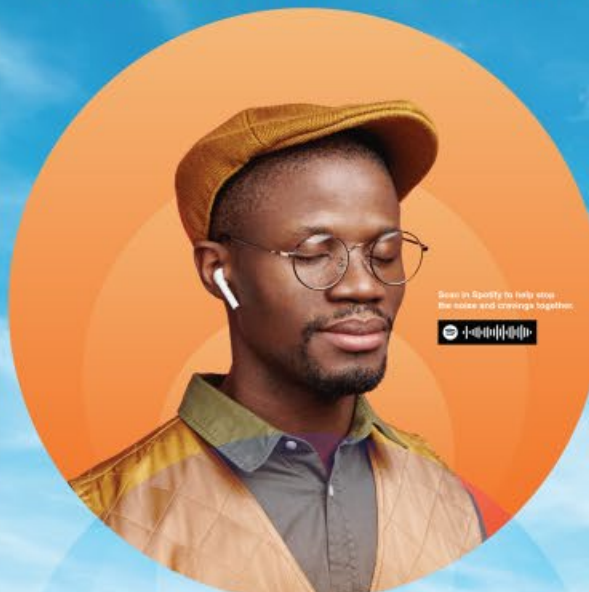
Support is ready when you are.



Concept 1
Won't Make You Quit

Find your calm when nicotine cravings hit.

Vaping doesn't clear your mind. It clutters it.



Sees in Quality to help stop the noise and cravings together.



Text "Start" to 36072

Free quit coaches, quit plans, and quit meds can help you turn down the noise of nicotine. Whether this is your first quit or your next one, get proven support.



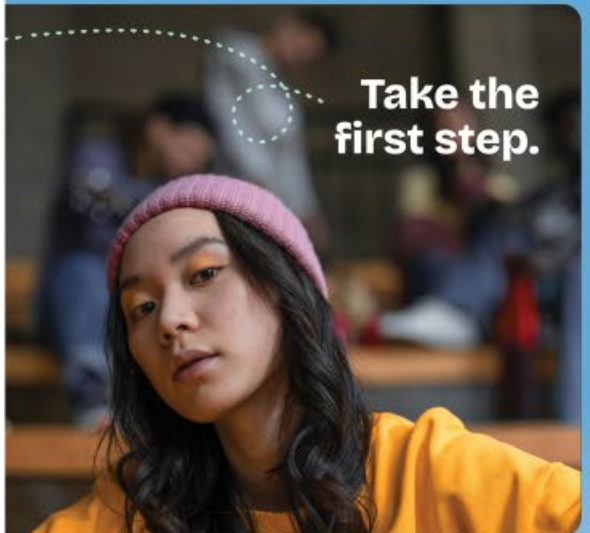
mass.gov/QuitVaping



Concept 2
Quit The Noise

 The best way to quit nicotine?

Take the first step.



If you're ready for reduced anxiety, a better mood, and a calmer mind... Start here.



mass.gov/QuitVaping

Text a coach. Create a plan. Get free quit meds.

Text **Start** to:

36072



Concept 3
Take the First Step

Spanish Concepts Tested

**Este anuncio
no le hará
dejar de vapear.**

**Pero reducir
su ansiedad,
irritabilidad y
estrés, podría.**



**Para recibir
información en
español para dejar
de vapear, llame al:**
1-855-DÉJELO-YA
mass.gov/QuitVaping

**Conecte directamente con
asesores y obtenga planes
y medicamentos GRATIS
para dejar de vapear.**

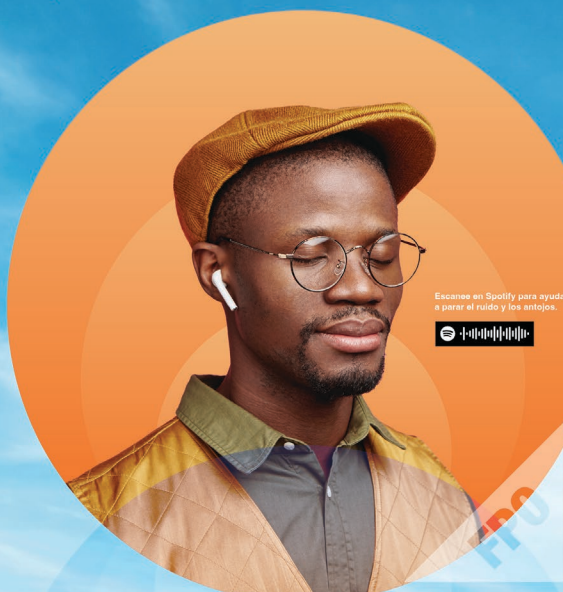


**Cuando esté listo, tenemos
la ayuda que necesita.**



Concept 1
Won't Make You Quit

**Recupere la calma cuando
tenga antojos de nicotina.**
Vapear no le aclara la mente. Solo le crea ruido.



Escanee en Spotify para ayudar
a parar el ruido y los antojos.



Llame al 1-855-DÉJELO-YA

Tener acceso a asesores, planes y medicamentos GRATIS
para dejar de vapear le puede ayudar a silenciar el ruido que
crea la nicotina. No importa si es la primera vez que la deja o
si ya lo ha intentado antes, obtenga la ayuda que necesita.



 mass.gov/QuitVaping

Concept 2
Quit The Noise

 **¿La mejor manera de
dejar la nicotina?**

**Dé el
primer
paso.**



**Si está listo para tener
menos ansiedad, un
mejor humor y una
mente más tranquila...
Comience aquí.**



mass.gov/QuitVaping

**Llame a un asesor.
Cree un plan. Reciba
medicamentos gratis
para dejar la nicotina.**

Llame al:
1-855-DÉJELO-YA



Concept 3
Take the First Step

MORE recommends *This Ad Won't Make You Quit* based on focus group findings showing it is most likely to motivate action

Though *Take the First Step* was rated similarly on general appeal, young adults who selected *This Ad Won't Make You Quit* as their top choice were more likely to say the ad would inspire them to take action, including engaging with the ad content or visiting the website to learn more.

		Overall* (n=24)	English (n=19)
Rating 1**	3.4	4.1	
Top Choice 2**	12	11	

		Overall* (n=24)	English (n=19)
Rating 1**	3.4	3.5	
Top Choice 2**	10	7	

* Overall scores were calculated based on feedback from English and Spanish speaking young adults. Spanish scores are not shown separately due to small sample size (n=5).
** As with all qualitative research, quantitative data should be interpreted with caution.

Elements unique to *This Ad Won't Make You Quit* make young adults more likely to engage, including:

- An intriguing, attention grabbing headline
- Honesty that's different from other ads, increasing trust and curiosity to learn more
- Pressure-free, welcoming language that empowers quitting on their own terms

"I like the awareness of the ad, that's what caught my attention. You understand, but you're still trying."

Plus, small language changes can broaden the concept's appeal while maintaining what makes it effective.

- **More concise:** While some felt *Take the First Step* would not get their attention, many liked that it was straightforward and "used the least words to say the most."
- **Less formal:** A small sample (n=5) of young adults who prefer Spanish felt the language in *This Ad Won't Make You Quit* was too formal, preventing the concept from scoring well. However, the concept was a favorite among Hispanic and Latino young adults who prefer English, demonstrating potential for cross-cultural appeal.

¹ Young adults were asked to rate each concept on a scale from 1 to 5, where 1 meant "didn't like it at all" and 5 meant "liked it a lot."
² Young adults were asked which campaign idea would make them "most likely to seek support to quit vaping" out of the three concepts they reviewed.

FINAL CONCEPT

***This Ad Won't
Make You Quit***

This Ad Won't Make You Quit Poster

**This ad
won't make
you quit vaping.**

**But knowing
you'll feel less
anxious or
stressed might.**

**Support is ready
when you are.**

**Text 'Start' to:
36072**
mass.gov/QuitVaping

**Find a way to quit that
works for you, all for FREE:**

- Text a live coach.
- Create a personalized plan.
- Get quit meds.

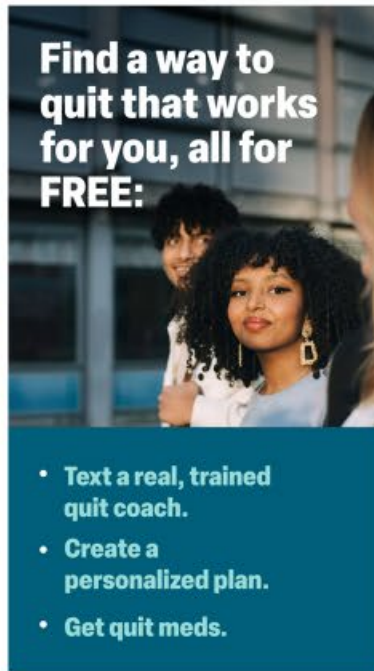


This Ad Won't Make You Quit

Digital



**But knowing
you'll feel less
anxious or
stressed might.**



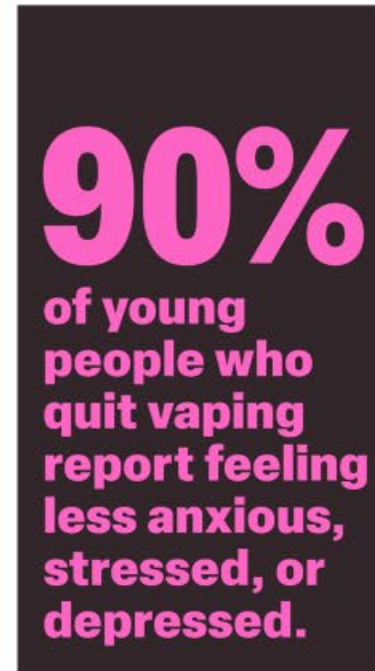
**Find a way to
quit that works
for you, all for
FREE:**

- Text a real, trained quit coach.
- Create a personalized plan.
- Get quit meds.



**"I vaped for six years
and struggled to quit,
but I feel so much better
on the other side."**

REAL QUOTE



90%
**of young
people who
quit vaping
report feeling
less anxious,
stressed, or
depressed.**



**Support is
ready when
you are.**

Text 'Start' to:
36072
mass.gov/QuitVaping

Flagship Video: This Ad Won't Make You Quit

Video Style; Script for VO on next page

Frame 1



Scene: Young woman scrolling past anti-vaping messages on her phone, clearly tuning them out. Close-up/high contrast/cinematic

VO + On-screen over lifestyle

Frame 2



CUT TO: showing real moments that might motivate quitting: social situations, active lifestyles, positivity unburdened by nicotine. Colorblock animates in/over

VO + On-screen over lifestyle

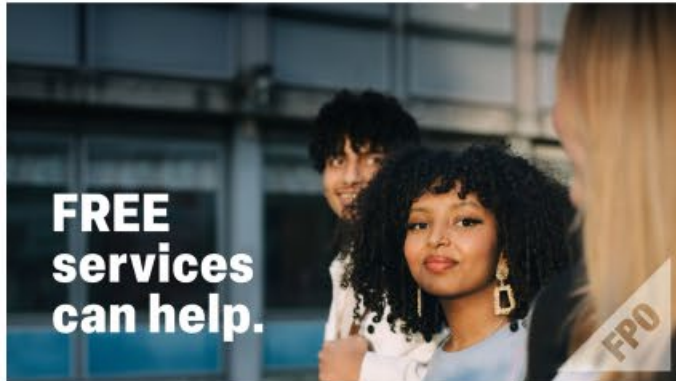
Frame 3



Stats and animation

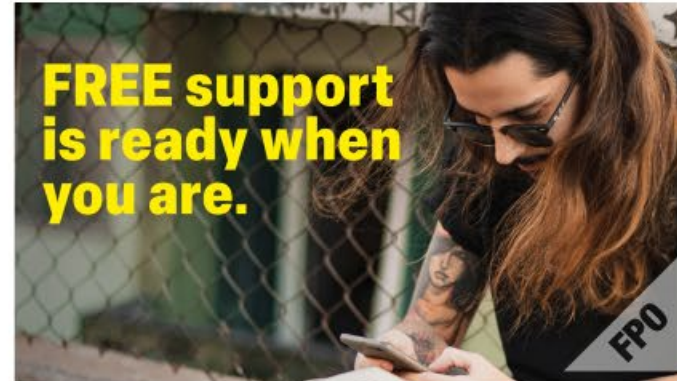
VO + On-screen over lifestyle

Frame 4



VO + On-screen continues over lifestyle. Frame 4 cut to frame 8 (see next slide for full script).

Frame 8



Quiet moment of young man considering, then reaching for phone to text 36072

VO + On-screen over lifestyle

Frame 9



Colorblocks animate over footage from top and bottom:

TAG, CTA, logos with VO

Social Video

Real person element to humanize the Quitline; filmed virtually

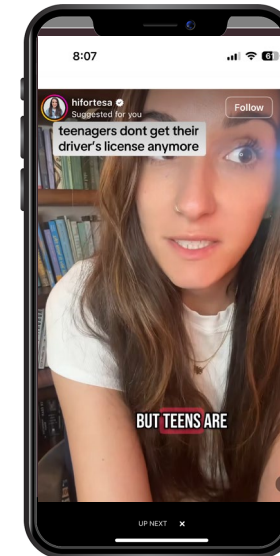
Quitline Coach

- **What:** Feature a real Quitline Coach on camera to share quitting success stories, ways the Quitline helps real people, and the why behind what they do. For example, the top five tricks to help you quit vaping. Five things you can expect on the other side. Five things that can help you confront cravings.
- **Why:** Humanizes the Quitline, puts a face to the number, lets people know they will have personalized support. Sharing quitting success stories helps others visualize their own success.
- **How:** TikTok style direct-to-camera videos or a podcast-style conversation – all done virtually and remotely. Currently working with the Quitline to recruit quit coaches to participate.

Video Option A:
Podcast-style
conversation



Video Option B:
TikTok-style
direct-to-camera



Media

Paid Media Plan

Phase 1 Media Mix – November 2025 to February 2026

Online/Digital

Search

- Google

Social

- Instagram + Facebook
- TikTok
- YouTube

Streaming TV

- Connected TV
- Connected TV Premium on Hulu, Max, Paramount+, Peacock, Disney, etc.
- Twitch.tv

Streaming Audio

- Streaming radio ads and podcasts on iHeart, Pandora, SoundCloud, Spotify, TuneIn

Offline

College Campuses

- Posters/Flyers
- Oversized poster units

Phase 2 Media Mix (Preliminary) – April to June 2026

Online/Digital

Search

- Google

Social

- Instagram + Facebook
- TikTok
- YouTube

Offline

Transit

- Bus systems statewide
- MBTA liveboards
- MBTA station posters

Connected TV

- Connected TV

What challenge are we trying to address?

The MTCP and Massachusetts AGO want to launch a campaign to...

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- JUUL's predatory marketing practices resulted in a new generation addicted to nicotine, with resulting harms to both physical and mental health.
- Significant barriers stand between young adults and a nicotine-free life, even among those who express a desire to quit.



GOAL: For young adults who use nicotine products to make supported quit attempts and sustain quit progress throughout their quitting journey.

more

Thank you!

THE 84 MINI-GRANTS REFLECTION

With HRiA



MA YOUTH FIGHTING
THE TOBACCO AND
VAPING INDUSTRIES

Creative Spark Fund

Completed Spring 2025

Murals and Artwork



Uplifting Lynnfield's Youth Voice – Portable Mural





Belchertown High School Mural





Presentations



PATHFINDER SPRING 2025

The World We Want to Live In

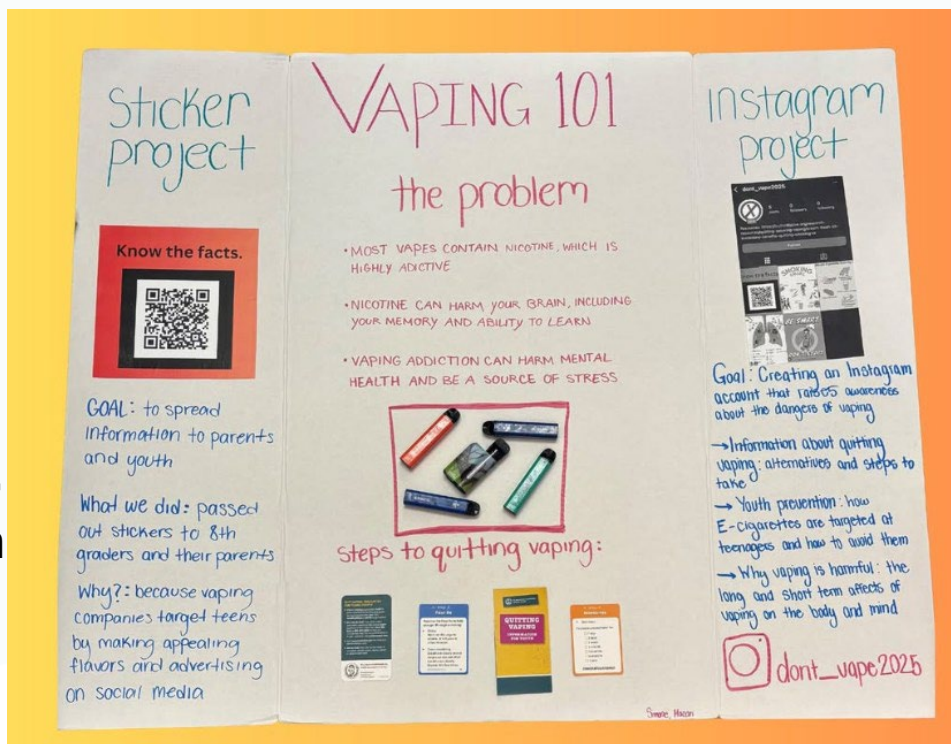


The World We Want to Live In – Educational Divide Reform Chapter's Collaborative Portfolio



Stop Vaping! – Brookline High School Poster & Presentation

WWW.THE84.ORG



Piecing Together Healthy Habits – CASA's Youth Advisory Board Collaboration

Vape Disposal



Drop It Arlington – Arlington Students About Prevention's Vape Drop Boxes (will be painted this fall)



Safe Vape Disposal Project – Needham SALSA



Podcasts





**Talk to Hoops – Hoops and Homework
teens talk about mental health**



**New Bedford Parks,
Recreation, and
Beaches – Youth
Led Podcast
Program**



**New North Citizens
Council Chapter's
Podcast**



**Teens Vs. Tobacco Podcast
– EMS 97 Health Club**

Other Creative Projects





Teens in Print Spring Magazine



**Stay Away (Stay Awake) Song –
Teen Empowerment Studios**

Videos





**Tobacco Talk Short Film – Youth,
Purpose, and Partnership**



**Don't Smoke Your Creativity Away
– The Cabot in Focus**



**DARE vs. Vaping – After
School Arts Program**

WWW.THE84.ORG



**Teens Against
Tobacco – Dream Out
Loud**



Cycles - ZUMIX

STILL TARGETING US







Still Targeting Us – Girls Inc. of Lynn



Thank You!



EVALUATION AND ADJOURN



Evaluation

Please take a few minutes to fill out the evaluation for today's meeting.

We will wrap up and adjourn shortly.

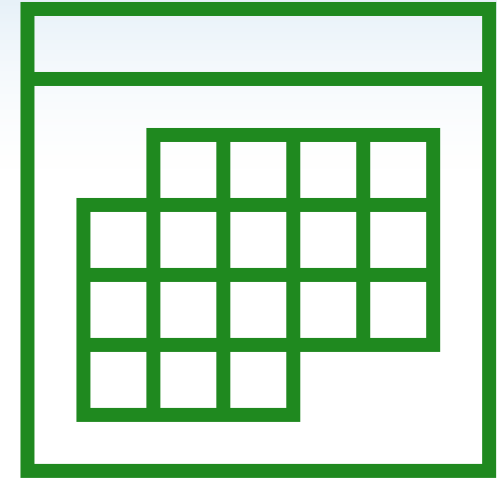
September 2025 MTCP Statewide
Evaluation



Next Statewide Meeting Dates

Mark your calendars:

- March 19, 2026 @ Tower Hill



Thank you and safe travels home!