

Howard County Health Department
Cigarette Restitution Fund Program

FY 2022 Application: Engaging Communities to Address Tobacco/Vaping Prevention and Cessation

November 15, 2021 – May 31, 2022

1. General Purpose

The Howard County Health Department seeks to fund community-based organization(s) to reach populations/groups identified as at risk for tobacco/vape use, or having a known health disparity related to tobacco, and advance health equity efforts to provide anti-tobacco/vaping use prevention, education, and cessation resources. Tobacco use, including cigarette smoking, cigar smoking, and smokeless tobacco use, remains the leading preventable cause of death in the United States.

Data from the Youth Risk Behavior/Youth Tobacco Survey (YRBS/YTS):

- From 2016 – 2018, the prevalence of any tobacco/electronic smoking devices (ESDs), cigarettes, cigars, smokeless tobacco use among middle school (MS) students has increased 100% and 47% for high school (HS) students. In 2018, tobacco use was highest for Black (6.7%) and Hispanics (6.1%) MS students.
- In both 2016 and 2018 there were noted racial/ethnic disparities observed among MS students reported use of traditional tobacco products with African-American/Black (4.7%), Hispanic/Latino (4.5%) and “Multiple Races” (3.3%) reporting a higher usage rate compared to White students (0.9%).

Adult Data from the Behavioral Risk Factor Surveillance System (BRFSS):

- 2016 data showed a higher proportion of tobacco use among adults with incomes lower than \$50K (13.2%) compared to those with incomes greater than \$50K (8.0%).
- From 2014-2018, cigarette smoking among adults receiving MH services dropped from 38.6% to 25.2%. Among those receiving Substance-Related Disorder (SRD) services, cigarette smoking has remained consistent at approximately 60%, twice that of adults receiving MH services (59.5% vs. 25.5%). The most common type of tobacco product used by both groups was electronic cigarettes.

Project must address one of the following grant objectives:

1. Reduce initiation of use for all tobacco products among youth
2. Increase awareness among adults about youth vaping
3. Promote and provide referral to smoking cessation resources and services
4. Influence social norms and public health policies regarding tobacco products

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2. Funding and Reporting Requirements

The funding period for this grant initiative is November 15, 2021 – May 31, 2022.

Proposals may request up to \$3,000.00

Half of the funds will be issued upon award and contract execution. The second payment will be issued upon receipt of mid-term report.

Reports of all activities, outcomes, and expenditures must be submitted on **February 15, 2022 and May 31, 2022** on the provided reporting template.

The organization must maintain and submit financial records and activity reports. A representative of the grantee must attend two grantee meetings and one Howard County Local Health Improvement Coalition (HCLHIC) meetings during the active grant period and be prepared to provide updates on the progress of the project

3. Application Requirements

The project goals and objectives must address one of the grant objectives listed above.

Applicants must meet the following eligibility criteria

- A current non-profit or for-profit group in Howard County; and
- Registered and in “Good Standing” with the State.
<https://egov.maryland.gov/BusinessExpress/EntitySearch>

Applications are due **October 31, 2021** and should be completed using the template provided.

An electronic copy of the application and any attachments should be sent to

LHIC@howardcountymd.gov. *Please do not send hard copies.*

Upon funding award, awardees will be required to join the Howard County Local Health Improvement Coalition. Membership application information can be found at <https://www.hclhic.org/membership/become-a-member>. Additionally, awardees will be requested to complete and submit the **new vendor form** and **W9**.

An informational session about the application and review process will be held on **Friday, October 22, 2021 at 10:00am – 11:00am via Zoom**. Register [here](#). Attendance is optional.

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Grant Application Deadline: October 31, 2021

All applications must be submitted electronically via e-mail attachment to LHIC@howardcountymd.gov. In your email's subject line, please reference your organization name and "FY 2022 Tobacco Grantee Application."

Cover Page

Name of Organization:

Mailing Address of Organization:

Title of Proposed Program:

Amount of Funds Requested:

Contact Information:

Contact Position	Name	Phone	Email
Application Preparer:			
Project Contact:			
Fiscal Contact:			

Grant Objectives:

- Reduce initiation of use for all tobacco products among youth
- Increase awareness among adults about youth vaping
- Promote or provide referral to smoking cessation resources and services
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Please address the following, by section, in narrative response.

A. Proposal Narrative

1. **Organization Background:** Tell us about your organization’s mission and who your organization primarily serves. Describe your organization's experience in providing services and engaging with identified communities in public health areas and any prior experience with tobacco control projects. (250-word limit)

2. **Statement of Need:** Why do you feel this project is needed in Howard County. Share any data to support this need and how you plan to recruit participants for your program. (250-word limit)

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3. **Description of Project:** Tell us about your proposed program and how it addresses the needs that you described and what outcomes you expect to achieve. Describe what adaptations you will make to ensure that you reach your target audience during COVID-19 restrictions. (250-word limit)

4. **Evaluation:** Describe how your program will be tracked, measured or evaluated. What records will you use to demonstrate that you accomplished your objectives? This can include attendance sheets, written evaluation by those completing the activity, pre-test/post-tests. (250-word limit)

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B. Action Plan

Complete the action plan table.

Grant Objective: (selected from above)		
Activity	Expected Outcomes	Timeframe
<p>List proposed activities in its own row. Consider the following:</p> <ul style="list-style-type: none"> • What will you do? • How will you advertise or promote your activity or event? • What are the expected benefits of the activity? • What community partners do you have? • How will they help accomplish your goal? 	<p>Describe expected outcome.</p> <p>Examples:</p> <ul style="list-style-type: none"> • # individuals educated about tobacco/vaping through community engagement/outreach activities • # youth educated about vaping/tobacco prevention and awareness • # individuals educated about smoking cessation • # referrals provided to the Maryland Tobacco Quitline 	<p>Define the timeframe for the specified activity</p> <ul style="list-style-type: none"> • What is the timeframe for completing each activity?

Grant Objective:		
Activity	Expected Outcomes	Timeframe

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C. Budget Narrative

Provide a brief budget narrative complementing the line item budget. Please note that indirect costs cannot be funded through this grant.

Line Item	Budget Item	Funding Requested	Budget Narrative & Justification (Explanation of Spending Request)
1	Printing		
2	Advertising/ Marketing Materials		
3	Educational & outreach materials and supplies		
4	Staff Training		
5	Other (Please specify)		
	TOTAL COST	\$	

- I hereby declare that the information submitted on this proposal is accurate and correct to the best of my knowledge. If the application is approved, I will be responsible for keeping necessary records and completing narrative and budget reports by due dates. I understand that I or a representative of my organization must attend all scheduled grantee meetings and Howard County Local Health Improvement Coalition (HCLHIC) meetings during this active grant period and be prepared to update on the progress of the project while in attendance at these meetings.

Grant Application Deadline: October 31, 2021

All applications must be submitted electronically via e-mail attachment to LHIC@howardcountymd.gov. In your email's subject line, please reference your organization name and "FY 2022 Tobacco Grantee Application." *Please do not send hard copies.*