

Community Engagement in Policy Change



**Presented by
Bob Gordon, MPH**

When did smoking become part of us?

Seven *Million*
Tobacco-related deaths a year





In the United States...

Tobacco causes more deaths than:

**Suicides, homicides, alcohol,
auto accidents, drug use, HIV**

COMBINED (CDC)

A history of working across communities



Using a health equity approach

is important in engaging priority populations in policy change.
We must ensure that no community is ignored or left behind.



80,000 Taiwanese participate in Pride march in Taipei 2015

WORKING WITHIN THE LGBT COMMUNITY



When did smoking become part of us?

Commercial Tobacco use: does not take place in a vacuum



- Poverty:** Low education, Low opportunity
- Alcohol and Other Drugs :** meth; opiates
- Chronic disease:**
 - Diabetes, Obesity, Hypertension, Asthma, HIV
- Mental health**
- Violence and safety:** Rape and bullying
- Racism**
- Concern over legal status**
- Environmental issues:** air, water, noise, food deserts

**freedom.to speak.
to choose. to marry.
to participate. to be.
to disagree. to inhale.
to believe. to love.
to live. it's all good.**



**the people of santa fe natural
tobacco company**

No additives in our tobacco
does **NOT** mean a safer cigarette.

**SURGEON GENERAL'S WARNING: Smoking
By Pregnant Women May Result in Fetal
Injury, Premature Birth, And Low Birth Weight.**

www.nascigs.com

©2010 N.T.C. Natural American Spirit is a registered trademark of Santa Fe Natural Tobacco Company.

PARLIAMENT *Menthol Lights*



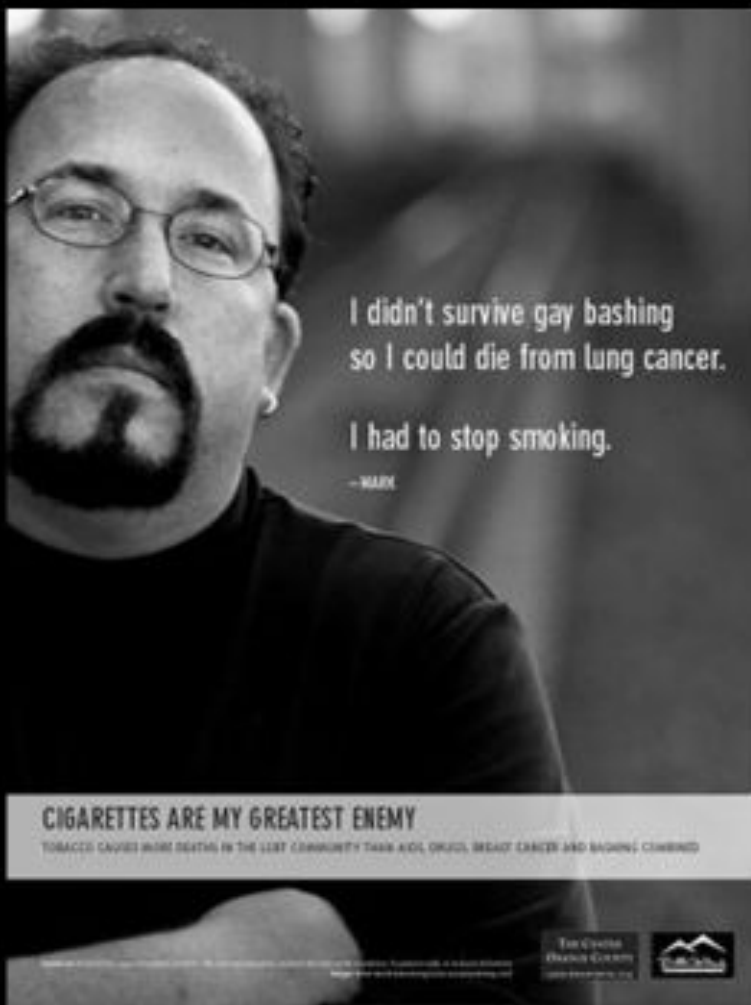
**SURGEON GENERAL'S WARNING: Quitting Smoking
Now Greatly Reduces Serious Risks to Your Health.**



**TAKE PRIDE IN YOUR
FLAVOR**

Light, extra-light, soft, free, flame-free tobacco. That's what
it's good for: great looking, long lasting, smooth enjoyment.
Camel SHUS—the pleasure is all yours.

**WARNING: Smokeless
tobacco is addictive.**



I didn't survive gay bashing
so I could die from lung cancer.

I had to stop smoking.

— MARK

CIGARETTES ARE MY GREATEST ENEMY
TOBACCO CAUSES MORE DEATHS IN THE LGBT COMMUNITY THAN AIDS, DRUGS, BREAST CANCER AND BASHING COMBINED

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I didn't survive drugs & alcohol
so I could die from lung cancer.

I had to stop smoking.

— SEEMA

CIGARETTES ARE MY GREATEST ENEMY
TOBACCO CAUSES MORE DEATHS THAN AIDS, DRUGS, BREAST CANCER AND GAY BASHING COMBINED

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"Cigarettes are my greatest enemy" campaign



Asking elected officials to stop helping the tobacco industry

- Policy to help us curtail tobacco industry influence
- Research indicates politicians who take tobacco \$ more likely to support tobacco industry with votes or remain silent
- Elected officials serve as LGBT role models
- “Inoculate” politicians before they take \$



THE LAST DRAG

**SMOKE LESS.
PLAY MORE.**

**WWW.LASTDRAG.ORG
415.339.STOP**

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The Last Drag: An Evaluation of an LGBT-Specific Smoking Intervention

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Many studies in the past 20 years have documented that lesbian, gay, bisexual, and transgender (LGBT) individuals smoke at rates that exceed the general population, yet, there have been few reports of smoking cessation interventions targeting this population. This study reports on data from 233 participants in The Last Drag, a seven-session, six-week group education and support intervention tailored for LGBT smokers. Data on smoking rates were collected during the first and last sessions, and at one, three, and six months post-intervention. As with many interventions over time, missing data is a challenge in determining success rates, but even using the most conservative estimates, nearly 60% were smoke-free at the end of the intervention, and 36% remained smoke-free by six months post-intervention. This success rate is comparable to, or better, than many mainstream smoking cessation interventions reported in the literature. The Last Drag is an effective, low-cost, LGBT-specific community intervention that can be replicated in other communities.

Health Equity Policy Recommendations (abbreviated)

Federal tobacco tax with inclusion of health equity language and concepts and allocations specific to communities of color and LGBTQ populations

Mandate “community-friendly” grant mechanism system to ensure that those most marginalized Communities of Color and LGBTs are prioritized

LGBTs: Include Sexual Orientation and Gender Identity questions in all surveys so our communities can be counted and can be served

Partnering to pass policies that improve Health Equity across a jurisdiction

Case Study #1: San Francisco, California

California Department of Public Health supports LGBT Partnership's work to reduce tobacco-related disparities through first U.S. tobacco-free pharmacy policy.

State program funds community grantee's work to reduce tobacco use in priority population

In 2003, the California Department of Public Health/Tobacco Control Section funded the California LGBT Tobacco Education Partnership's (the Partnership) work to reduce tobacco-related disparities among LGBT populations. Research has shown that tobacco use in LGBT communities is high and that the LGBT population is targeted by tobacco industry marketing.^{12,60,157} The Partnership educates LGBT communities and partners about policies limiting tobacco industry donations and reducing the availability of tobacco products. Led by project director Bob Gordon, the group began exploring tobacco product sales in San Francisco pharmacies in 2007.

Different sales policies at two Castro district Walgreens spark idea for policy change

The idea for the pharmacy ban came from observations made by the Partnership about two Walgreens pharmacies in the Castro district of San Francisco, one of the nation's largest LGBT communities. A traditional Walgreens store located at the busy corner

of 18th and Castro sold medications and other products, including tobacco. At one time, this store was known to have the highest revenue of the chain. Gordon worried that this high sales revenue translated to a high volume of cigarette sales to community members. A second Walgreens, located just half a block away, was a "specialty pharmacy" that sold only medications—no greeting cards, food items, office supplies—and no cigarettes. The difference in sales practices of the two stores prompted the Partnership to consider whether community members could have a say about what items are sold in their neighborhoods and particularly in their pharmacies. Because the state of California already encouraged grantees to work on increasing the number of tobacco-free pharmacies, the Partnership decided to begin formally working on this policy.

State program guides academic, health, and community partners' work to increase awareness of tobacco-free pharmacy issue

The Partnership began work by developing a three-year plan required by the state program that described a set of activities leading to a policy change goal. When

To **help** a persistent cough go to aisle 8.



To **get** a persistent cough go to aisle 14.



Cigarettes & pharmacies don't mix.



Ad promoting the "Cigarettes & Pharmacies Don't Mix" awareness campaign