Eliminating Tobacco Related Disparities Evaluation Case Study

Prepared by Cheryl J. Wiese, M.A.
Associate Director, Bureau of Sociological Research
University of Nebraska - Lincoln
May 2, 2003

OVERVIEW OF THE ELIMINATING TOBACCO RELATED DISPARITIES WORKGROUP

1.1 Workgroup Mission, Goals, and Leadership

Tobacco Free Nebraska (TFN) is responsible for comprehensive tobacco control and prevention in the state of Nebraska using funds from both the National Master Settlement Agreement and funds from the National Centers for Disease Control and Prevention (CDC). The primary goals of TFN include:

- Preventing the initiation of tobacco use among young people;
- Eliminating exposure to environmental tobacco smoke;
- Identifying and eliminating disparities related to tobacco use and its effects among different population groups; and
- Promoting tobacco cessation among adults and youth

Nebraska has been noted in the past for having outstanding collaboration and cooperation among all tobacco control entities. TFN has worked hard to build grass roots support for tobacco control efforts by concentrating on comprehensive tobacco control programs in the states most populace counties. The mission of the workgroup was to invite other service providers, researchers, and other stakeholders to identify characteristics of other disparate groups in regard to tobacco control, offer them an opportunity to share their knowledge and experiences in regard to tobacco use among the populations their organizations serve, and to allow them an opportunity to examine data collected for the purpose of surveillance of tobacco use in Nebraska to help identify the disparate groups.

1.2 Geographic Area and Population Served

Tobacco control efforts directed by TFN are both statewide and locally focused. Nebraska is a rural state with a significant proportion of its population based in the southeast region of the state in the Omaha and Lincoln areas. Recent legislation in the state established public health departments to serve all 93 counties of the state.

The Quitline (tobacco cessation hotline), media campaign, and youth empowerment movements are statewide programs, and a significant proportion of the tobacco settlement and CDC funds are concentrated on the 15 most populated counties, the four Native American Indian tribes, and other target populations in the state. Counties, tribes, and outreach groups were invited to submit a proposal including a comprehensive workplan and budget for tobacco control in their communities. TFN technical assistants provided guidance in writing SMART objectives, but the counties were given a lot of latitude in what elements of tobacco control would be addressed in their communities. Because TFN efforts have been targeted both locally and statewide, it was determined that the members of the workgroup should also include those who serve populations both statewide and locally.

ORGANIZATIONAL DEVELOPMENT

2.1 Organizational Structure

As a result of tobacco settlement dollars, a comprehensive approach to tobacco control was underway in the state by the time the CSAT Eliminating Tobacco Related Disparities grant opportunity arose. The TFN program director saw this as an opportunity to involve other service agencies in determining if disparate populations not already addressed with current efforts could be identified. In addition, by inviting those not involved intimately involved in tobacco control to examine the surveillance data and draw their own conclusions, TFN may be offered new ideas and suggestions for areas to target as well as receiving affirmation that the populations they identified when the tobacco settlement dollars became available were the same as those identified by this workgroup.

The TFN program director and the TFN staff person responsible for outreach determined that an objective approach to this strategic planning would include the hiring of a consultant with skills in communication and strategic planning to help guide the process. In meeting with this consultant, it was determined that efficiency was one of the most important goals. It was important to create a design for strategic planning that would entice those invited to participate, and in doing so, allow them to offer their insight and skill with minimal burden in terms of time and effort.

A group of eleven service providers were invited to participate. Upon their acceptance of the invitation, a letter and informational materials were sent out in preparation for the first meeting. The first meeting was a full day dedicated to identifying six critical issues to be addressed in terms of tobacco-related disparities. This was achieved by introducing the participants to the tobacco control efforts already in place as well as exposing them to the surveillance data available regarding prevalence and other tobacco control issues as they relate to demographic characteristics. Following this meeting, the consultant prepared a draft of the six critical issues and sent them out to participants for their review and feedback. Approximately three months later, a second full day meeting was held to expand on the six strategic goals and incorporate key objectives, strategies and tactics, including the identification of other resources and individuals who could be invited to become involved in achieving the goals. Following this meeting, another letter and summary was sent out. Finally, a half-day meeting was held in October to review the strategic plan and provide an opportunity for participants to provide final feedback.

2.2 Recruitment of Service Providers and Stakeholders

Workgroup members were identified by Rama Tidball, TFN Outreach Specialist and Judy Martin, Program Administrator in consultation with the Office of Minority Health staff and the Deputy Director of Health and Human Services (who had served as the Minority Health Office Director). Workgroup members identified were all individuals who are conduits in reaching disparate populations in the state. Some workgroup members had been working with TFN for the last few years, while a few others were new faces. One of the new faces was from the Nebraska Health and Human Services System Economic Assistance Program – this is a program within the same umbrella agency of Tobacco Free Nebraska yet the two programs had not worked together prior to this workgroup. Hence, even partners inside Tobacco Free Nebraska's own system were engaged in the process who hadn't been engaged previously. Although the group was small, the TFN Program identified key players. At the first meeting of the workgroup, workgroup members were also asked to suggest additional names for participants. Two additional members joined the workgroup as a result.

DEVELOPMENT PROCESSES AND MILESTONES

The first half of the first full day meeting of the workgroup was spent educating the group on what efforts were already in place, what groups were known to be disparate in terms of smoking prevalence based on the surveillance data, and if and how these known groups were being addressed with current efforts. The participants had existing knowledge of TFN coming into the meeting ranging from very little to extensive. The exercise of providing all of this information served as a review for those already familiar with the TFN efforts as well as offering an opportunity for those less familiar to ask questions.

After a break, the consultant presented eleven critical issues that had been identified based on the data. She broke the entire group into two smaller working groups and instructed them to identify the six critical issues that should be included in the final strategic plan. The consultant provided a five-step process to consider when determining which of the eleven critical issues should remain in the final total of six. When each of the two groups had gone through the process of elimination to six remaining critical issues or goals, they came together to determine if the lists were parallel and if not, how they might reduce the entire list once again to six.

The second full day meeting was attended by nearly all of the original participants, and they were very engaged in discussion about the goals. They were once again split into groups to identify two strategies for each of the six goals. Upon coming together again as a full group, for each strategy, stakeholders were identified as resources to be brought to the table when the strategy was implemented.

The final half day meeting was attended by about half of the original group, but some of those unable to attend had provided some feedback to the consultant prior to the meeting.

The utilization of a consultant to bring objectivity to the process was beneficial. The consultant provided insight and creativity to the process of strategic planning, and she was able to ask questions to make the information being presented to those less familiar with tobacco control in the workgroup as clear and direct as possible.

Overall, the goal of efficiency and participant retention was achieved. The consultant and TFN program director were very clear in communicating with the participants that this activity is a planning activity with the goal of developing an effective network of stakeholders and providers and eventually securing resources and funding to fully implement the plan.

MAJOR CHALLENGES

The first major challenge in even applying for the grant was thinking creatively to identify disparate groups outside of age and race characteristics. This was overcome to some extent by inviting participants who work with various populations of people and in different environments.

The absence of an epidemiologist at the state level created the second major challenge in being able to present a comprehensive picture of the state of tobacco control based on the surveillance data. While attempts were made to present descriptive statistics, the data begged for more extensive analysis, possibly in the form of logistic regression, to identify which demographic characteristics interact with each other and which ones are really identifying disparate groups. The goals of the strategic plan were supposed to be largely data based, but a lot of data could not be utilized for lack of someone to analyze it properly and present it to the group. Because the population of the state of Nebraska is homogeneous in terms of race and even range of income, often it was difficult to draw conclusions with any degree of confidence based on the small number of people in non-white or other non-majority populations.

A third challenge faced was developing a plan to get stakeholders to agree to participate in a planning activity when so many are working very hard at implementation of their own programs

without making them feel they may be taking time away from that implementation. The consultant and Principle Investigators tried to reduce the burden while maximizing opportunity to benefit from the unique insights these stakeholders could offer to the planning with a minimal time commitment in the form of three very intense meetings over a four month period.

Another challenge faced was how to quickly familiarize the participants while allowing them enough time to think and then immediately participate in the workgroup. In order to deal with this challenge, the consultant mailed out materials to be reviewed ahead of time, but the majority of knowledge transfer occurred with presentations during the first half of the first full meeting day.

The final challenge is sustainability of this workgroup beyond this planning process.

LESSONS LEARNED

Because TFN had a comprehensive approach to tobacco control already underway, it was not clear at the start whether the goal was to identify disparate groups that were not already included in the TFN tobacco control efforts, or if the goal was to simply identify what stakeholders felt were the six most important issues of disparity to be addressed regardless of whether they are already addressed with the current tobacco control efforts. Clarifying this issue from the start would have helped the process of identifying the six goals to be addressed in the strategic plan.

By presenting eleven critical issues at the first full day meeting and instructing the participants that the final six critical issues or goals should be data-driven, the participants may not have shared their more creative ideas or experiences that may have differed from the data being presented to them. The presentation of the eleven critical issues may have restricted free thought. However, it is also acknowledged that to simply start the process with a blank slate may have required an even greater time commitment and may have resulted in attrition of participants over time. It had to start somewhere.

The participants proved valuable resources as they suggested additional stakeholders who should be present at the second and third meetings. TFN was also made aware of a number of existing networks and resources through the participants which have already proven useful in tobacco control efforts.

The participants were much more active during the second and third meetings, largely because they felt informed enough and had time to think about what they could offer the planning process based on their own knowledge and experiences. The toughest challenge of the workgroup was identifying six critical issues to be addressed in the strategic plan, and once identified, the development of strategies and stakeholders flowed more smoothly.

Although survey data exists in Nebraska regarding tobacco prevalence and attitudes, gaps exist for special populations. A survey was conducted among Native American Indian youth on three Nebraska reservations to measure tobacco prevalence, and this provided some unique data compared to the information collected on the Youth Risk Behavior Survey (YRBS) collected among the general population of Nebraska youth. With access to an epidemiologist on a regular basis, existing data (BRFSS, SCS, YRBS, NYTS etc.) could provide valuable information for planning and programs.