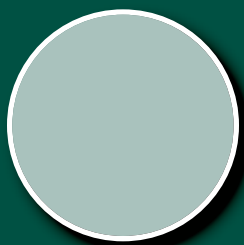


NO One

Left Behind:

Identifying & Eliminating
Tobacco Related Disparities in Florida





Florida Tobacco Prevention and Control Program Program Goal Areas

1. Build and Maintain an Effective Tobacco Prevention Infrastructure
2. Prevent the Initiation of Tobacco Use Among Youth and Young Adults
3. Eliminate Exposure to Secondhand Smoke
4. Promote Cessation from Tobacco Use
5. Reduce Tobacco Related Disparities
6. Contribute to the Science of Tobacco Control

Mission

The mission of the Florida Tobacco Prevention and Control Program, and its collaborative partners, is to promote community and individual responsibility to prevent tobacco use by encouraging governmental agencies, private and public organizations, and individuals to work together toward a common vision of a tobacco-free Florida.

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Executive Summary

Tobacco addiction is among the leading preventable causes of morbidity and mortality in Florida and in the United States. Cigarette use, alone, results in an estimated 430,000 deaths each year in the US, including 28,700 deaths in Florida. The list of illnesses caused by tobacco use is long and contains many of the most common causes of death, including heart disease and stroke and many forms of cancer and lung and vascular diseases. The tobacco industry spends close to \$1 billion in Florida annually to market its products, more than any other state.

The state of Florida is rich with diverse populations and cultures. These diverse populations and cultures are disproportionately affected by tobacco use and exposure to secondhand smoke. In addition, the tobacco industry continues to market heavily towards specific populations which increase disparities among tobacco use in the state.

Currently, the rate of smoking among all Floridians is at 21.0%. However, alarming differences can be seen by delving further into the data. For example, among those who did not graduate from high school, smoking rates are 27.20%. Young adults ages 18-24 smoke at a rate of 26.92%. Floridians whose annual income is less than \$25,000 have smoking rates of 22.82%. Males residing in Florida have smoking rates of 21.33%. Increased rates of smoking have a direct association with increased tobacco related health disparities. In addition, specific populations have a higher rate of secondhand smoke exposure. Among African Americans reporting exposure to secondhand smoke, 24.2% are exposed in a car, 21.6% are exposed at home and 17.0% are exposed in the workplace. The secondhand smoke exposure for Hispanics is 20.6% in a car, 21.6% at work and 9.4% at home. Secondhand smoke exposure for Whites is 21.4% in a car, 8.7% at work and 12.9% at home

To address tobacco disparities in Florida, the Tobacco Prevention and Control Program applied for a grant from the Centers for Disease Control and Prevention (CDC) and in 2006, Florida was awarded funds to become a cooperative partner with CDC to develop a strategic plan to address tobacco related disparities. Florida participated in the CDC's strategic planning process and convened a workgroup to develop a strategic plan which resulted in the development of this document. This document describes six goals with associated strategies and action steps.

The goals are listed below:

- 1. Awareness-** increase the awareness of tobacco-related issues of specific populations
- 2. Capacity Building-** facilitate the development of infrastructures so that communities can create their own tobacco prevention and control programs
- 3. Data and Information-** increase and enhance data and information related to specific populations
- 4. Funding and Sustainability-** identify and secure funding to sustain programs for the reduction and elimination of tobacco related disparities
- 5. Prevention-** develop and implement tobacco prevention strategies for specific populations
- 6. Intervention-** identify, develop and implement culturally competent interventions targeting tobacco use, exposure to secondhand smoke and tobacco policies for specific populations

Introduction & Background

The Centers for Disease Control and Prevention (CDC) has four goal areas for ensuring a successful comprehensive tobacco control program:

- Eliminate exposure to secondhand tobacco smoke.
- Promote quitting tobacco use among adults and youth.
- Prevent initiation among youth.
- Identify and eliminate tobacco related disparities among specific populations.

In 2001, CDC initiated a pilot project to focus on reducing tobacco use among racial and ethnic minority groups in the United States. The pilot project focused on CDC's fourth goal area of identifying and eliminating tobacco related disparities. Funds were awarded to thirteen states and one territory to develop a strategic plan to reduce tobacco use among disparate populations. As a result of this pilot project, CDC continues to fund states to address tobacco related disparities.

When addressing tobacco related disparities the following should be considered:

- The process must be a community and data driven process.
- There must be diversity, inclusivity and representation.
- The process should include a wide range of community members.
- All populations disproportionately affected by tobacco use should be represented.
- Community members should reflect their community's values, norms and behaviors.

Data related tobacco disparities encompass the following:

- Increased smoking prevalence,
- Increased exposure to secondhand smoke,
- Increased burden of disease and death,
- Pervasive tobacco industry targeting of certain populations,
- Lack of comprehensive public health policies that protect populations from secondhand smoke (SHS) and curb underage access to tobacco products,
- Lack of appropriate capacity and infrastructure within specific populations to address tobacco use and cessation adequately and
- Lack of appropriate linguistically and culturally competent materials.

The Planning Process

To reduce tobacco related health disparities in Florida, the Florida Tobacco Prevention and Control Program applied for funds in 2003 and was awarded a grant from CDC in 2006 to develop a tobacco disparities strategic plan. In order to complete this process a Priority Population Workgroup and Project Team was developed. The workgroup represented the following populations: African American, Native American, Hispanic, Asian American and the LGBT (Lesbian, Gay, Bi-sexual, Transgender) populations. The workgroup consisted of 20 individuals from various community organizations, state agencies, universities and community leaders. The Project Team consisted of the Disparities Coordinator, Epidemiologist/Evaluator, Community Leader and Facilitator.

The Priority Population Workgroup was assembled and met for five strategic planning sessions from January to May 2007. Led by a facilitator, a data-driven process developed in which the workgroup addressed all aspects of a strategic plan relevant to Florida. The workgroup was given the following task:

- Reviewing current data
- Identifying data gaps
- Developing goals, strategies and action steps
- Developing a marketing plan

As the workgroup moved forward to develop the strategic plan, they were committed to developing goals, strategies and actions steps that would allow the state to address all critical issues regarding tobacco disparities. The workgroup reviewed current data which allowed them to identify gaps and determined which populations were not represented. Members emphasized the importance of developing and implementing a plan that was realistic and stressed the need to secure appropriate funding and staff to implement the plan.

The Florida Tobacco Prevention and Control Program applied for funds in 2003 and was awarded a grant from CDC in 2006 to develop a tobacco disparities strategic plan.

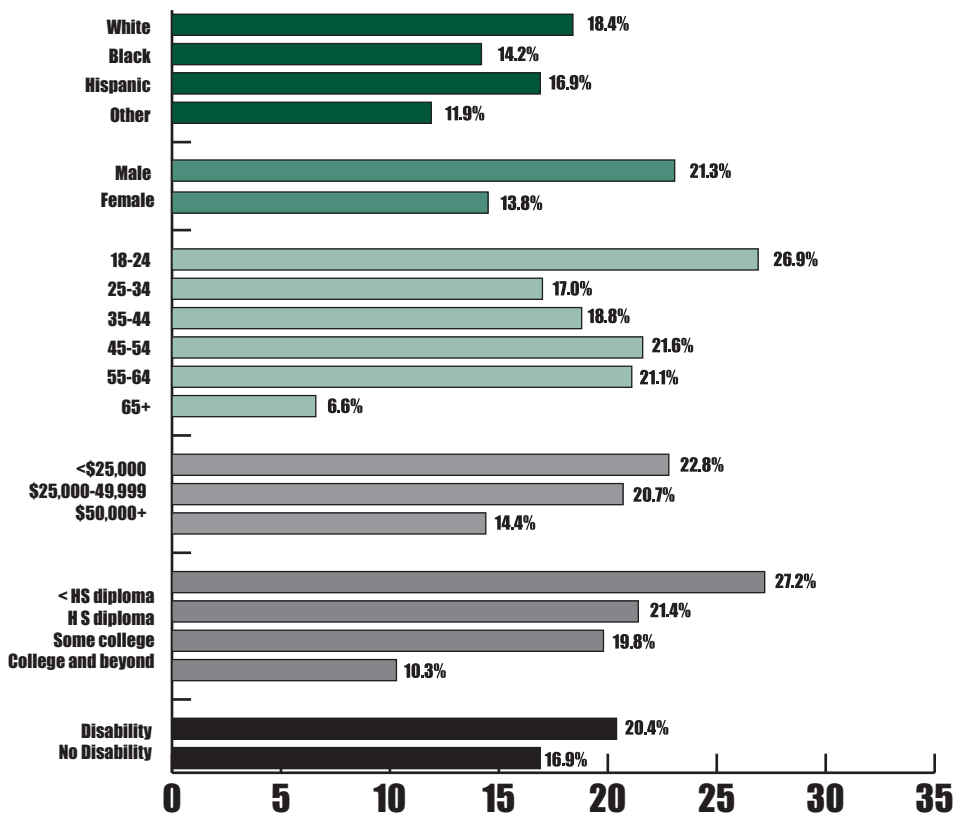


Data

Utilizing quantitative and qualitative data is essential to addressing tobacco disparities. The quantitative data provide a measure of smoking prevalence, exposure to secondhand smoke and quit attempt rates. The qualitative data are instrumental in identifying the lack of community infrastructure, lack of funding and the use of culturally appropriate and competent materials. The Florida Tobacco Prevention and Control Program use the following surveys to obtain data, Behavioral Risk Factor Surveillance Survey (BRFSS), Florida Adult Tobacco Survey (FLATS) and the Florida Youth Tobacco Survey (FYTS).

Although Florida has a wealth of data, there are still data gaps regarding tobacco use prevalence among specific populations such as lesbian, gay bi-sexual, transgender (LGBT); individuals with disabilities; low income individuals; blue collar workers; military personnel; those who are institutionalized; and ethnicities within African Americans, Hispanics and Asian Americans. The group stressed the need to conduct focus groups in the future to obtain additional data.

Figure Two: Current Cigarette Use by Race/Ethnicity, Gender, Age, Income, Education and Disability. Data are from the 2006 Florida Adult Tobacco Survey.



Goals and Strategies

The workgroup developed six goals and their associated strategies and action steps

Awareness

Goal: Increase the awareness of tobacco related issues of specific populations

Strategies

1.1 Identify and develop culturally competent education materials and marketing programs for specific populations

Action Steps

- Identify, research and assess current programs that reach specific populations
- Conduct focus groups among members of specific populations to gather information for the development of culturally competent education and marketing materials and programs

Strategies

1.2 Identify and develop media strategies for specific populations

Action Steps

- Research existing media outlets for specific populations and identify effective strategies
- Conduct focus groups of members of specific populations to gather information for the development of culturally competent media messages and strategies

Strategies

1.3 Disseminate education materials and marketing programs to healthcare professionals, community-based organizations and the general public

Action Steps

- Implement in Year Two

Strategies

1.4 Implement education and marketing programs for healthcare professionals and community-based organizations that serve specific populations

Action Steps

- Implement in Year Two

Capacity Building

Goal: Facilitate the development of infrastructures so that communities can create their own tobacco prevention and control programs

Strategies

2.1 Identify and engage community stakeholders to develop tobacco related health agendas

Action Steps

- Develop a media outreach campaign to enlist community partners
- Implement a media outreach campaign to enlist community partners
- Educate enlisted partners about tobacco prevention and control

Strategies

2.2 Generate community buy-in for tobacco prevention and cessation initiatives

Action Steps

- Work with partners to increase awareness in their communities of tobacco prevention and control issues
- Work with partners to develop and enhance culturally competent educational materials and programs

Strategies

2.3 Facilitate the creation and/or enhancement of community based organizations in specific populations

Action Steps

- Provide resources required to build capacity in community based organizations
- Provide trainings required to build capacity in community based organizations
- Provide technical assistance required to build capacity in community based organizations

Strategies

2.4 Ensure the sustainability of tobacco prevention and control initiatives in local communities

Action Steps

- Provide technical assistance to community based organizations re: strategies to create sustainability
- Provide resources required to sustain community based organizations
- Implement annual evaluation of tobacco initiatives implemented in community based organizations

Data and Information

Goal: Increase and enhance data and information related to specific populations

Strategies

3.1 Use traditional and non traditional methods to collect community-level data

Action Steps

- Create a data center incorporating existing resources
- Identify stakeholders and recruit data interest groups
- Review and identify population-specific data sources
- Create and pilot innovative data collection methods

Strategies

3.2 Prioritize data gathering with specific groups: The LGBT population and communities within the Black, Hispanic/Latino and Asian populations

Action Steps

- Facilitate the development of community initiated Advisory and Work Groups
- Implement community involved data collection
- Monitor and evaluate new and existing data collection methods

Strategies

3.3 Begin process of engaging American Indian tribes and organizations to develop data gathering strategies

Action Steps

- Work with tribal governments to develop community initiated work groups
- Collaborate with tribal governments to develop implementation of data collection efforts
- Monitor and evaluate collaboration efforts with tribal governments and data collection methods

Strategies

3.4 Develop partnerships with other states and with state and county agencies, organizations and institutions to facilitate data gathering

Action Steps

- Develop a list of key organizations
- Establish or enhance channels of communication among key organizations
- Develop website to facilitate information sharing
- Share data collection methods and population specific information



Funding and Sustainability

Goal: Identify and secure funding to sustain programs for the reduction and elimination of tobacco related disparities

Strategies

4.1 Involve the community in the development of funding opportunities

Action Steps

- Identify established coalitions in communities within specific populations
- Prioritize the set of counties with specific populations to start gathering coalition information
- Develop questions for gathering information from coalitions and methodologies to use (focus groups, telephone survey, e-mail survey, in-person interviews, Town Hall Meetings)
- Develop Tool Kit as a resource for gathering data from coalitions
- Determine methodology to be used in each prioritized county
- Administer approved methodology for each county prioritized to gather information

Strategies

4.2 Identify and communicate existing and new funding sources that support tobacco use prevention and cessation initiatives

Action Steps

- Research funding sources and update regularly
- Communicate funding list to regional and county staff
- Communicate funding list to each coalition in database and when gathering data
- Send funding list to all coalitions identified and listed in database via direct mail and electronically

Strategies

4.3 Develop electronic system to increase the visibility of tobacco grant opportunities for specific populations

Action Steps

- Recruit intern to research and update on-line system
- Establish a Sharepoint and website to communicate funding opportunities for specific populations and update regularly
- Establish a link to Sharepoint from tobacco program website
- Publicize Sharepoint site to coalition database and through press releases, etc.



Strategies

4.4 Create diverse partnerships that maximize funding resources

Action Steps

- Implement in Year Two

Strategies

4.5 Institute an accountability and reporting system to measure progress toward goals, objectives and outcomes for funded programs

Action Steps

- Implement in Year Two

Interventions

Goal: Identify, develop and implement culturally competent interventions targeting tobacco use, exposure to secondhand smoke and tobacco policies for specific populations

Strategies

5.1 Identify, enhance and support existing cessation, secondhand smoke exposure and policy resources for specific populations

Action Steps

- Identify existing resources for specific populations

Strategies

5.2 Facilitate the development, implementation and accessibility of population specific cessation, secondhand smoke exposure and policy resources

Action Steps

- Work with partners to develop population specific cessation, secondhand smoke and policy efforts
- Work with partners to implement population specific cessation, secondhand smoke and policy efforts
- Work with partners to increase accessibility to population specific cessation, secondhand smoke and policy efforts

Strategies

5.3 Provide a resource clearinghouse of population specific cessation, secondhand smoke exposure and policy resources

Action Steps

- Implement in Year Two

Prevention

Goal: Develop and implement tobacco prevention strategies for specific populations

Strategies

6.1 Identify and compile a resource directory of prevention programs and outreach strategies for specific population groups

Action Steps

- Research prevention strategies used in other states for specific populations
- Publish prevention strategies identified on Sharepoint site
- Provide training to organizations and agencies serving specific populations on ways to utilize prevention strategies using National Cancer Institute-Cancer Information Services model
- Market Sharepoint site and prevention strategies for specific populations to coalitions and community organizations

Strategies

6.2 Develop traditional and non-traditional partners who will assist in implementing prevention strategies

Action Steps

- Train tobacco staff in cultural competency and diversity issues
- Educate organizations, agencies and coalitions serving specific populations on tobacco issues
- Develop and use a variety of media strategies and outlets to publicize the tobacco issue as a priority for specific populations
- Utilize community events to raise awareness of the tobacco issue as a priority for specific populations

Strategies

6.3 Mobilize communities to develop and enact policies that restrict access to and visibility of tobacco products

Action Steps

- Evaluate and assess current county ordinances and their enforcement
- Educate communities on impact of tobacco policies and visibility on specific populations
- Educate decision makers on impact of tobacco policies and visibility on specific populations
- Recruit community coalitions and partners to become stakeholders in policy change
- Provide training to community coalitions and partners to effectively advocate for policy change
- Encourage community coalitions and partners to advocate for voluntary policies that reduce/restrict access to and visibility of tobacco products

Strategies

6.4 Encourage the de-normalization of tobacco use

Action Steps

- Implement in Year Two



Moving Forward

Florida has laid the foundation by developing this strategic plan that will be utilized to guide the state in efforts of identifying and eliminating tobacco related disparities. This plan will serve as a framework for the state, partners, advocacy groups and community organizations to reduce and eliminate tobacco related disparities over the next three years.

The workgroup agreed that marketing the plan in its first year of implementation will be a major priority in order to provide visibility and secure buy in from the state, communities and policy makers. To ensure marketing, monitoring and implementation of the plan the workgroup agreed to the following:

1. Continue Workgroup Meetings

- The workgroup will remain functional and will meet three times a year to monitor and ensure implementation
- The group will have conference calls as needed

2. Recruitment of additional members of groups that are under represented.

The following populations will be recruited:

- Those who are or have been institutionalized
- 18-24 Year Olds
- Hispanic/Latinos
- Straight to Work Young Adults (young adults not attending educational institutions)
- Members of the Military
- Immigrants of Afro-Caribbean Heritage
- People with Disabilities
- Mental Health and Substance Abuse Service Advocates
- American Indians
- Blue Collar/Pink Collar Workers

3. Marketing the Plan

- Department of Health agencies
- Advisory Council
- American Heart Association
- American Cancer Society
- American Lung Association
- Area Health Education Centers (AHEC)
- Legislators and other elected officials
- Florida Association of City and County Health Officials
- Public Health Association

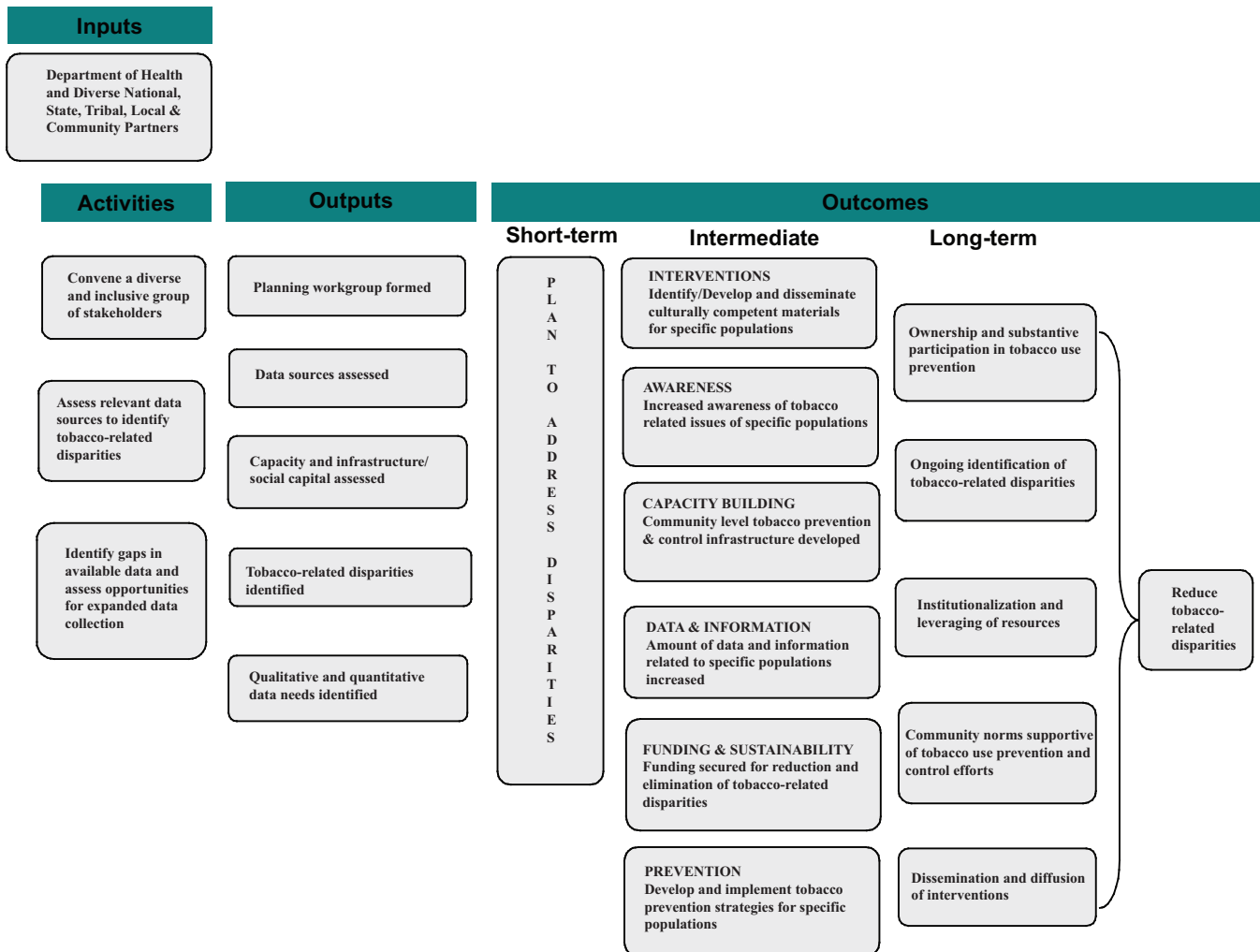
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Tobacco Disparities Logic Model



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