

**A Case Study of the Process to Develop and Adopt
A Strategic Plan in Idaho**

**Pilot Training Program – Tobacco Use Among Population
Groups:
Putting the Pieces Together to Identify and Eliminate
Disparities**

A Project of
The Idaho Tobacco Prevention and Control Program

With Funding Through
The Centers for Disease Control and Prevention

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Executive Summary

In January of 2001 the Centers for Disease Control and Prevention (CDC) recruited 14 states to participate in a pilot project addressing the fourth goal area of the National Tobacco Prevention and Control Program. The fourth goal area addresses the identification and elimination of tobacco related disparities.

CDC provided funding to Idaho so that the State could participate as a cooperative partner in identifying ways to build capacity for the identification and elimination of tobacco-related disparities by engaging a diverse and inclusive workgroup in a strategic planning process. This report evaluates both the milestones and barriers encountered throughout the development of Idaho's strategic plan.

The workgroup identified five key issues that have been modified into five goal areas within the strategic plan. These are:

- Improving data systems
- Assuring cultural competency
- Enhancing funding and other resources
- Building community capacity and infrastructure
- Establishing policy expectations

Through the process of evaluating each individual workgroup meeting, as well as the overall process, three critical elements necessary for success were identified. These three elements are:

- Leadership
- Communication
- Adherence to the principles of participatory planning

Throughout the process, the largest challenge has been a lack of funding. Idaho received only \$45,000 in grant money from CDC. The limited funding dictated a need for efficiency of money as well as time. Adherence to the critical elements of leadership, communication, and participatory planning made it possible for Idaho's workgroup to develop a solid, workable strategic plan to identify and eliminate tobacco related disparities among the State's population.

This was a very effective workgroup with a very tight timeline. Much of the success of the process can be attributed to strong leadership with pre-existing relationships to many of the disparate populations at the table. With forethought given to leadership, attention to participatory planning and effective communication of available data as well as process steps and progress, it is possible for States to successfully bring disparate populations together, acknowledge the unique challenges faced by each and then work towards goals that will be of benefit to all.

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1. OVERVIEW OF DISPARITIES PROJECT

1.1 PURPOSE AND GOALS OF THE PROJECT

The purpose of this project was to develop a strategic plan that will systematically identify and describe populations that represent small percentages of the total but may be disproportionately impacted by the health effects of tobacco use. Through identification of these populations it is hoped that scarce public health resources can be allocated not only more efficiently, but also more effectively. Nationally, this has been the most difficult area of the tobacco prevention and control program to address.

Idaho is one of 14 states working in cooperation with the Centers for Disease Control and Prevention (CDC) to develop strategic plans to address the disparity shortcomings of the national tobacco program. Through the strategic planning process, Idaho identified five goals. Each goal has its own specific set of strategies and tactics. The five goals of Idaho's project are:

- Improving Data Systems
- Fostering Cultural Competency
- Enhancing Funding and Other Resources
- Building Community Capacity and Infrastructure
- Developing Policy Advocacy for the Elimination of Disparities.

1.2 OVERVIEW OF TOBACCO CONTROL EFFORTS AND TARGET POPULATIONS IN IDAHO

The strategic plan for the elimination of disparities among population groups in the Tobacco Prevention and Control Program must serve the entire state of Idaho. Idaho has some very clear geographic, political and cultural demarcations. The workgroup was charged with developing a plan that is fluid enough to address changing needs while at the same time having adequate substance to make an impact on the health of various population groups.

The racial ethnic distribution of Idaho's population in the 2000 Census does not reflect a state with much diversity (Table 1).

Table 1
Idaho Population (2000 Census)

White	1,177,304
Hispanic	101,690 (Included in race totals)
Native American	17,645
Asian	11,869
Hawaiian/P. Islander	1,308
Black	5,456
Other Race	54,742
Two or More Races	25,609
Idaho Total	1,293,953

Though the Hispanic population at 101,690 (7.2%) may not seem significant, this segment grew 12% from the prior census. The Hispanic population continues to grow and impact Idaho's population as a whole. In addition to the census identified Hispanic population, Idaho is home to a sizeable population of migrant and seasonal farm workers, the majority of whom are Hispanic. In 1989, the Migrant Health Branch of the United States Department of Health and Human Services estimated that more than 119,000 migrant and seasonal farm workers and their families reside in Idaho at least temporarily.

Idaho is home to six federally recognized American Indian Tribes. The lands of two of these sovereign nations straddle the boarder of Idaho and Nevada or Utah. Traditional and ceremonial tobacco use continues to be a strong cultural component of Idaho's Native American populations.

Other populations that were discussed and participated in the strategic planning process were gay, lesbian and transgender individuals, refugee and immigrant populations, African Americans, and individuals of low socioeconomic standing.

Almost 70% of the projects grant funding was set aside for travel purposes. Idaho is a geographically rugged state encompassing 82,751 square miles with only one north / south highway. It would be impossible to secure participation if travel funds were not available to bring participants to the daylong meetings. The Idaho working group for strategic planning towards the elimination of disparities in tobacco use was funded through a grant from the Centers for Disease Control and Prevention (CDC). The supplemental grant funding the project was only for \$45,000. This was the result of limited state matching funds and a state imposed limit on the addition of any FTE to support this project. The majority of this grant (\$31,000) was set aside to pay for travel to the three scheduled meetings in Atlanta, Georgia as well as travel for workgroup member to attend strategic planning meetings in Boise. The objective was to have a completed strategic plan addressing Idaho's use in disparate populations by December of 2002.

1.3 PROJECT TEAM: LEADERS AND OTHER MEMBERS

Idaho's Tobacco Prevention and Control Program (TPCP) within the Division of Health coordinated this strategic planning effort for the state. There were not adequate funds to hire staff to specifically head up this project. Rather, the project director, Galen Louis, Ph.D., is a TPCP employee who currently maintains two contracts with the Hispanic community and five of the six Idaho Tribes. Additionally, the project director oversees all surveillance and evaluation projects for Idaho's TPCP. The existing relationships with the Tribes and Hispanic community coupled with the director's familiarity with the existing data proved to be invaluable to the success of this planning process.

Randy Thompson, Ph.D., an employee of Boise State University (BSU), was hired as the facilitator for each of the working group meetings. Randy, has a strong background in qualitative evaluation including some contract work for Idaho's TPCP. This proved to be very complementary to the director's familiarity with existing hard data regarding tobacco use in Idaho. BSU played a key role in support and logistics. Jim Girvan, Ph.D., of BSU's Office of Policy Development, was available as a backup facilitator should the need arise.

The evaluator, Dieuwke A. Spencer, is a Master of Health Science student as well as the supervisor for the office of epidemiology and surveillance for the largest district health department in the state of Idaho.

Members were recruited predominantly from professional contacts of the director and facilitator. To fill in the gaps and gain additional contacts, the director elicited the assistance of the Human Rights Commission. Letters of invitation were sent to individuals known to be leaders of certain populations such as the gay, lesbian community, migrant and Hispanic communities and the African American community. All correspondence and invitations were sent to all individuals on the list and new comers were added to the list. This was to encourage participation even in the absence of attendance. Those present at meetings were encouraged to extend an invitation to anyone they felt appropriate.

1.4 ROLES AND RESPONSIBILITIES OF PROJECT TEAM MEMBERS

The overriding responsibility of the members was to share their knowledge of their community strengths, weaknesses and resources. The fact that everyone involved was taking time from their very busy schedules to "voluntarily" participate in this process shows a high level of commitment by the individuals and their employers / communities to seriously take a look at the issue of disparities in the TPCP and in the state of Idaho.

The project director and the TPCP wisely did not want to alienate members by loading them down with a lot of tasks between meetings. The director did all of the compiling of data and writing of the plan. However, he effectively used e-mail, phone calls and personal interactions to solicit input from the working group between meetings. This strategy was successful in giving the working group a sense of ownership over the final plan without burdening them to the point of non-participation.

2. EVALUATING STRATEGIC PLANNING PROCESSES

2.1 PURPOSE AND GOALS OF EVALUATION

The purpose of this evaluation is to describe how Idaho's workgroup was formed and the strategic plan was developed. As one of 14 states in this pilot project it is necessary for both our successes and challenges to be documented and shared. This evaluation will look only at the process of the development of the strategic plan, not implementation of the plan. The evaluation should provide a basis for future projects.

The goals of the evaluation are to:

- Document activities, challenges, milestones reached, and lessons learned
- Monitor and report on progress toward achieving planning goals
- Discuss implications of evaluation results and recommend enhancements for future projects to eliminate disparities in any program.

2.2 EVALUATION DESIGN

The evaluation design for this project was that of a case study. As defined by CDC a case study for this project is a "history describing and interpreting key activities, players, challenges, and lessons learned during the strategic planning process."

For the development of the strategic plan, an independent evaluator was used. Neither the project director nor the meeting facilitator served in a dual capacity as the evaluator. For each meeting, the evaluator very closely followed the design provided by CDC by collecting and analyzing descriptive information to answer the following general questions:

- What is being done, how is it being done and by whom?
- What milestones have been reached through these efforts?
- What critical lessons have been learned during these processes and how will these insights help enhance future efforts to eliminate disparities?

2.3 EVALUATION METHODS

A variety of methods were used to collect the information for this case study. The majority of information collected was qualitative. Data sources included observation of meetings and planning sessions, interviews with key participants, review of written materials and participant evaluations. Methods used included note taking and observation of meetings and planning sessions, interviews with key participants, analysis of participant evaluations, and informal discussions with participants.

The overarching goal of utilizing all of these sources and methods was to identify common themes in the activities of the participants individually and as a group. The challenge is to adequately interpret these behaviors and describe how others may structure a group so that they meet with our successes and avoid our pitfalls.

(Attachment 1: Evaluator’s Observation Form, Attachment 2: Participant Evaluation Form)

3. STRATEGIC PLANNING PROCESSES AND MILESTONES

3.1 STEP 1: FORMING THE STRATEGIC PLANNING WORKGROUP

Workgroup members were recruited primarily through known contacts to the project director, the facilitator or the participants from Boise State University. Invitational letters were sent to every person on the list. The letters described the project and asked for an RSVP. The project director also telephoned individuals whom were known to be key participants or leaders within their communities. This, it turns out, was a key factor in the success of this strategic planning process. The project director had some well-established relationships within some of the known communities with disparities such as the Tribes, the migrant workers and the Hispanic community. For the initial meeting, the director and facilitator also made phone calls to letter recipients to encourage participation. However, personal phone calls are what made the difference in participation, even among these groups.

Members of groups with no existing relationship to the project leaders received the same letter as established contacts. These names were garnered through word of mouth, recommendation from others, through community research or elicited from the Human Rights Commission. Some of these efforts proved to be extremely fruitful and have resulted in newly established alliances. Others failed to produce participation or even interest in the project.

The key to maintaining and increasing participation over the course of the project was communication. All documents and drafts were shared with all recruited members, whether they attended or not. It was also clearly stated at each meeting that anyone was welcome to attend any meeting and participants were encouraged to bring or invite individuals they felt would contribute.

The participants were not heavily burdened with tasks. Following the first meeting members were tasked with completing the Population Assessment of the Environmental Scan and getting the information back to the director. The director and facilitator anticipated a poor response and worked around this by asking several key participants to present their findings to the group at the next meeting. Those asked to do this were primarily individuals with whom the director had well-established relationships. One of the participants asked to present their Environmental Scan findings was a representative from the gay, lesbian, bisexual, trans-gendered (GLBT) community which proved to be a pivotal point in bringing that group to the table in a respected and meaningful way. The presentations were made by three very diverse groups – the Shoshone / Bannock Tribe, the Idaho Council on Hispanic Affairs and the GLBT community. These presentations proved to be just the catalyst that was needed to stimulate discussion. Though the scans may not have been formally done, the presentations and discussion resulted in the gathering of the necessary information. Had the director and facilitator chosen to focus on the task not being completed, the project would have been set back literally by months.

The up-front acknowledgement by the State and the director that the participants are busy people already shaped the style of the meetings. The realization by the participants that they were not going to be burdened by tasks, but rather asked for meaningful input made the meetings very productive. The project director did the work of writing the plan and then brought it to the group for input and approval. The involvement by the group at meetings and via e-mail and phone calls had been such that the members felt ownership but had not been overwhelmed by the process.

Idaho was extremely fortunate in that no turf battles or disagreements arose during the strategic planning process. There were some lively discussions and decisions were made by consensus. There was a core group of members that attended every meeting. Many of the individuals have worked together on other projects and have worked with the project director in various capacities. The predominant exception to this was the representative from the GLBT community. This individual became comfortable enough to ask the group to “just use the word queer – it is so much easier to get out.” And surprisingly enough, group members did just that! More importantly, the gay / lesbian community noted that this is the first time the State has asked them to the table on this type of project and they were thrilled to be there. This is a relationship that has the potential to become as strong and effective as those with the Tribes and that credit must go to the project director and his supervisor.

3.2 STEP 2: IDENTIFYING / PRIORITIZING TOBACCO RELATED DISPARITIES AND ASSESSING CAPACITY

Idaho was very fortunate in that the project director has also served as the data analyst for the state’s tobacco programs. The director had the statistical information on tobacco use as well as population data compiled and organized and was very familiar with it. The limited funding required that every efficiency be employed to assure that this project come to fruition. Having the data compiled and in a format ready for presentation was the foundation of being able to complete the strategic planning process within six months.

It helped that the strategic planning project director was not only very familiar with the data but that he had well established relationships with many of the disparate groups at the table. Because of the existing relationships the workgroup members trusted the data.

Because this was data collected by the state from numerous sources, the group did not have to spend time developing a comprehensive statewide profile of tobacco related disparities. Rather, the group was able to spend time familiarizing themselves with this profile and asking questions of the experts. To facilitate this, the first meeting was well attended by representatives from WIC, vital statistics, indoor air quality programs, and rural health to name a few.

Following an in-depth and lively discussion of the data on the morning of the first meeting, the concepts of the Environmental Scans, including both the Population Assessment and SWOT (strengths, weaknesses, opportunities, threats) were introduced. The presentations by key participants of the Population Assessments at the second meeting set the tone for the small group work done to complete the SWOT matrices. During a planning session the project director and the facilitator spent considerable time going over the matrices for the SWOT analyses and discussing how to engage the group in completion of matrices. Having this process well established and understood by the director, facilitator and evaluator were critical in keeping the meeting running smoothly. Once agreed upon by the leadership, the matrices were sent out to all of the participants prior to the June meeting. Because the forms were not new and the concept had been introduced through e-mail, the process was not stalled by lengthy explanation.

(Attachment 3: Environmental Analysis Forms)

The SWOT analyses were worked out by small groups and then presented to the entire group. Initially, the intent was to complete a matrix on the dry write boards as the information was presented. Fortunately, the project director had committed to having a secretary for each meeting so as the matrix became more complicated, the discussion more involved and the notes harder to follow all was not lost. The secretary took complete notes that were forwarded to all. This allowed everyone, including the facilitator and director, to participate fully in the discussion. Because the group worked through the process together, there was no need to formally present the findings to the group.

3.3 STEP 3: DEVELOPING THE STRATEGIC PLAN

The SWOT analysis resulted in the identification of five key issues. These were:

1. Improving data systems
2. Fostering cultural competency
3. Enhancing funding and other resources
4. Building community capacity and infrastructure
5. Developing policy advocacy for eliminating disparities.

By the end of the second workgroup meeting the participants agreed that these issues should be modified into the goal areas to be addressed in Idaho's strategic plan to identify and eliminate tobacco related disparities among populations.

It was the consensus of the group to turn the task of developing a draft strategic plan over to the project director. It was the director's charge to consider timelines, feasibility, logical lead organizations or persons, and budgets. A draft plan was e-mailed to all participants for comment well in advance of the final meeting.

The final workgroup meeting focused on the draft strategic plan. Particular attention was paid to each goal (issue area) and its associated strategies, tactics, lead and due date. The director had roughed this information in on the draft document in order to give small working groups a starting point for discussion. Five working groups were split out spent time delving into their assigned goal area with the intent of then reporting back to the group as a whole. This tactic worked well except for the goal area focused on funding and resources. For three of the four people in the group, it was their first meeting. The fourth person had attended the first meeting only and had a very poor grasp of strategic planning and the task of critiquing the funding / resource goal of the plan. This individual was very vocal and was really stymieing the work of the group. Fortunately, the project director was alerted to the difficulty within the group and joined them.

Group assignments were made through a count off. More attention should have been paid to the make up of each group. Though some groups were far more effective and productive reconvening and having presentations and discussion "evened out" the input that was provided. The project director was provided with good information and suggestions to strengthen the plan.

Because the State is the lead organization final assessment of clarity and feasibility and approval of the strategic plan lies with the State Department of Health and Welfare. The biggest challenge facing the workgroup at this juncture was funding. The CDC and state match funding was earmarked only for the strategic planning phase. No funds were allocated towards implementation, monitoring, oversight and evaluation. However, because of the success of this project on a "shoe string" budget, the State Tobacco Prevention and Control Program was able to secure \$57,000 to put towards implementation. This commitment by the State in a tangible means was influential in cementing the continued commitment of the group.

3.4 STEP 4: ADOPTING AND REFINING THE PLAN

The primary audience for Idaho's Plan to Identify and Eliminate Tobacco Related Disparities Among Populations are the members of the workgroup who developed the plan and the various departments and bureaus within the state structure whom will be affected by its adoption.

The greatest stumbling block for the process at this point is funding. To this point, the project has succeeded with limited financing and without the commitment of any portion

of an FTE. Though the TPCP program manager has secured some funds, the challenges of travel, a state hiring freeze and a dismal economic climate pose obstacles well beyond the means of the workgroup. In spite of these hurdles, the core members of the workgroup did not by any means see the September meeting as the end of their involvement with the tobacco disparities project.

It was interesting that the workgroup was very comfortable with having the project director (a state employee) write the plan. The critical piece was not that the group writes the plan but rather that they have input to the plan. Most important, was that their voices be heard and taken into consideration by the state. Interviews with key participants did not reveal a single workgroup member who felt that they did not have significant and meaningful input into the plan. Along the same vein, no one who was interviewed wanted the responsibility of writing the plan only to be met with the frustrations of having the state alter it to fit within government guidelines with which they were not familiar.

This approach would not have worked if the project director did not already have some very strong, well-established relationships with workgroup members. The group did not have to go through as many growing pains as may have been expected. For those members who were new and unfamiliar with the director, the established trust had very positive effect that “rubbed off”. The other critical piece was that those members who already knew each other and had established relationships were open and welcoming to newcomers. Rather than being territorial members seemed bound by their status as minorities and disparate populations.

At the September meeting, workgroup members unanimously gave their approval to the plan crafted by the project director. The process of final approval of the plan by the State Department of Health and Welfare was left to the director. The draft document had been shared with management and the director was able to assure the group that he did not expect any surprises in the approval process.

3.5 STEP 5: PREPARING FOR ACTION

At this point, the marketing of the plan is in the hands of the State. The workgroup, project director and TPCP manager have all been informed that the state has adopted the plan. The TPCP manager has taken the original position of the project director and split it into two so that outreach may be enhanced. Prior to this, the project director devoted half of his time to tobacco surveillance duties.

The key participants left the final meeting with every intention of returning in January to continue their work. Though their commitment was through December 2002 and the completion of the Tobacco Disparities Strategic Plan, the workgroup will be meeting in January 2003. The biggest challenge now is funding. Marketing and strategies for action in these tight economic times will be addressed in future reports.

3.6 ADHERENCE TO CDC / OSH PRINCIPLES / CHARACTERISTICS OF PARTICIPATORY PLANNING

Participatory planning, in this case, is a process in which the State shares the responsibility for developing a strategic plan to address tobacco-related disparities with other governmental and nongovernmental organizations as well as representatives from diverse populations. The project director was extremely conscious of the importance of getting a good cross section of representation to the table as well as the need to keep them engaged. The director spent considerable time on the phone following up invitational letters, answering questions and assuring attendance at the first meeting. Though this was extremely labor and time intensive up front, it paid off in the level of sustained participation seen in the group.

There are three key characteristics of participatory planning:

1. **Inclusiveness** – Assurance that diverse population groups are represented and involved in the planning process.
2. **Representation** – Assurance that those representing specific population groups truly reflect the community’s values, norms, and behaviors.
3. **Parity** – All members of the workgroup have equal opportunity for input and participation. This includes an equal voice in priority setting and identification of critical issues.

The level of success with the participatory planning process is reflected in participant comments from evaluations as well as key participant comments from follow-up interviews. (**Attachment 4: Key Participant Interview Form with Comments**)
Comments included:

- “[The director] made sure everyone was at the table. He tried to fill in the gaps as well as he could.”
- “We have most of the major players at the table, very influential people.”
- “Input was valued.”
- “Facilitators made an effort to call on people who were not speaking up.”

The director was concerned by the vague, loose agenda that the facilitator put together for the first meeting. These concerns proved to be well grounded. The previously mentioned phone calls were needed to convince some individuals and organizations that this was a project worth participating in. Evaluations of the first meeting also reflected this frustration. This issue was remedied by having detailed and well structured agendas for each of the following meetings.

Participant evaluations from the first meeting voiced some frustration at not having their voice heard or the facilitator not noticing that they had a comment to make. These

concerns were discussed and addressed during the follow-up meeting between the evaluator, facilitator and director. Adjustments were made and these concerns were not raised again.

The money used to hire a professional facilitator was well spent. This allowed the director (the State) to be present at the table as a participant. This structure opened up the process and leveled the field. Though the director was frustrated at times, allowing the group to work through issues made the project their own and increased cohesiveness and commitment.

The State did an excellent job of fulfilling their roles of leadership, technical assistance and logistical support. As noted in participant comments, the leadership provided by the project director was pivotal to the success of this strategic planning process. The director also possessed a very high level of technical knowledge of the issues and challenges faced by the workgroup. His familiarity with the data and synthesis of the data kept the workgroup from floundering with technical issues. The State minimized participant barriers by providing logistical support, including financing for meeting places, travel and lodging.

In follow up interviews, key participants were asked if they felt that their voice had been heard. All respondents felt that yes, they had been able to participate in a meaningful way and that they were heard and their input was valued. All felt that the environment was very open and “safe”. Though many of the participants had worked together before, this was not the case for everyone. The workgroup ground rules, set at the first meeting, encompass the participatory planning principles of collaboration, commitment, cooperation and respect. These ground rules were:

- Respect for each of your fellow participants.
- Represent your own population / community but advocate for the group.

4. MAJOR ASSESTS FOR STRATEGIC PLANNING

4.1 FACTORS FACILITATING PLANNING PROCESS: STEPS 1 – 5

The single most important factor facilitating the planning process was the project director’s ability to capitalize on existing relationships. Idaho had very low funding, travel and lodging concerns and a very tight timeline. The existing relationships with key disparate populations brought players to the table with an established level of trust. Most participants knew what to expect from the director. These relationships have taken years to establish. Careful and considered selection of the project director by the State made it possible to come into the process with years of ground work already successfully accomplished.

The project director knows that often what a State will offer is “technical assistance” with no money attached. In 1999 in his work with the Tribes in the tobacco program, the director convinced the State to set aside \$93,500 as implementation funding to address

disparity issues within the Tribes and Hispanic community. In fiscal year 2003 this funding is at \$165,000. This is the kind of act and commitment that has built the relationships with the disparate populations that have led to the success of this strategic planning process. The project director also relied on relationships that other state agencies or programs had established with disparate populations and built on those. This was accomplished by inviting key representatives from those programs to sit at the table with the disparate populations.

Second to the relationships, was the director's familiarity with the available data on tobacco use in Idaho. The director oversees all surveillance and evaluation projects for Idaho's Tobacco Prevention and Control Program. These duties have provided the director with intimate knowledge of state databases such as BRFSS, YRBS, PRATS, YTS, WIC, as well as data from instruments that he has designed and administered.

At the first meeting the director gave a synthesized version of all data currently "known" by the State. Because of the compressed timeline, this synthesis of the data was critical for moving the project forward. The director had compiled data from many State sources, as well as appropriate national data. Due to his familiarity with all of the data and ability to act as a single presenter, the State was able to speak as "one voice" and thereby avoid disjointed and confusing multiple presentations.

The third most important factor was communication. The director and facilitator sent letters and e-mails, and made phone calls. Every commitment made by the director to get information out to participants was adhered to. A variety of techniques were used to elicit participation from as many members as possible. These included group discussion, small and large group work, participant presentations, worksheets and matrices.

It was clear that the meetings were always open and that anyone was welcome to attend or bring / send others they felt appropriate. All e-mails were sent to all participants to keep them apprised whether or not they were able to attend the meetings. The director, facilitator and evaluator met after each meeting and reviewed participant evaluations and observations made. The evaluator then reported at the beginning of each subsequent workgroup meeting. The participants were assured that their concerns were heard and that adjustments were made to make the meetings as productive as possible.

In many ways, the limited funding that Idaho had for this project was an asset. Limited funding forced adherence to an already compressed timeline. This in turn forced organized, well-delineated meetings and group focus.

4.2 MAXIMIZING PLANNING ASSETS

The assets of this project were maximized by communication and attention to detail. The director did everything possible to make each individual and organization feel valued and that they had an equal voice in the development of the strategic plan. The use of various techniques to elicit participation and responding to participant concerns accomplished this.

5 CHALLENGES TO STRATEGIC PLANNING

5.1 CHALLENGES TO SUCESSFUL PLANNING: STEPS 1 – 5

The largest challenge, which impacted every facet of the project, was funding. Funding forced adherence to a compressed the timeline, limited the FTE the State put towards the project and funding focused the leadership team – particularly the project director.

Of the 14 states in this pilot program for strategic planning for addressing disparities in the state Tobacco Prevention and Control Program Idaho had the smallest level of funding at \$45,000 and no FTE commitment from the State.

Additionally, Idaho is a large, geographically diverse state with limited interstate highways and air travel options. Just getting people to Boise for a meeting is a challenge. Organizations and individuals do not possess the means or time to commit representatives to a day of travel and a day of meetings unless the purpose is very clear and the leadership trusted.

Though Idaho was fortunate to have much of the data compiled and organized, the State does not have access to all available data. Each Tribe is a sovereign nation and as such, their data, on any issue is proprietary. There is also a very important cultural element to handling of any data relating to the Tribes. Native American communities see themselves as “a small number of large families” (discussion with Joe Finkbonner, Director, Northwest Tribal Epidemiology Center, January 17, 2003). This premise keeps data proprietary so as not to reflect negatively on a family whether the issue is tobacco use or any other health issue. Idaho was able to elicit the participation of the Northwest Indian Health Board and though the data will remain proprietary, this process has fostered a better understanding of the needs of both the State and the Tribes with regards to disparity issues.

For other populations, Idaho has had to rely on national data and extrapolate. Included in these populations are GLBT and migrant workers.

5.2 STRATEGIES TO OVERCOME CHALLENGES

The TPCP and project director did a very good job of allocating the limited funds. Of the \$45,000, over half (\$31,000) was set aside to support travel to the three Atlanta meetings and the Boise-based workgroup meetings. This commitment of funds to get participants to Boise decreased or removed the challenge of geography, time and funds faced by invited organizations.

The travel funds were also extended to regional tribal representatives, such as the Director of the Northwest Tribal Epidemiology Center and the Director to the Northwest Portland Area Indian Health Board Tobacco Project. The participation of these individuals was unifying for Idaho’s Tribes as well as the Tribes throughout Northwest. These alliances also made inroads into gaining access to tobacco and health related data

that is held solely by the Tribes. As the project moves into the implementation phase, and these relationships are strengthened, it is hoped that data sharing will become more commonplace.

6 CONCLUSIONS

6.1 MAJOR PLANNING ACCOMPLISHMENTS

The leadership of the project director brought to fruition, a very comprehensive and workable strategic plan to address disparate populations and tobacco use in a short six months. This was accomplished by making each member feel as though they had the opportunity to significantly contribute to and shape the plan. A conscious and constant effort to communicate with workgroup members made this possible.

The project director did not expect the group to write the plan but rather took all of the input from the group, drafted the plan and incorporated their feedback. This approach was very effective with the limited funding and tight timeline faced by the workgroup. Not a single participant indicated that they felt the plan was solely the work of the State. Though the workgroup was tasked with developing the strategic plan, they scheduled a January meeting and have every intention of working through implementation. And this was before knowing of the commitment by the State of \$57,000 and a half-time position to support the tobacco disparities project.

In addition to the plan, it was a major accomplishment to have such a diverse and disparate group sitting at the table with the State and getting work done. The State was so pleased with the process that they are hoping to incorporate some of the tactics used to convene this group into other programs.

The Tobacco Disparities Project has found a home with the Tobacco Free Idaho Alliance (TFIA). TFIA already had implementation responsibility for the first three goals of the National Tobacco Control Program – this adds the fourth goal area to TFIA’s scope of work. These national goal areas, which are also the goals of Idaho’s TPCP are:

1. Preventing initiation of tobacco use
2. Eliminating environmental tobacco smoke
3. Promoting cessation
4. Eliminating disparities among population groups.

The challenge will be fostering and maintaining relationships over time between the State, TFIA and key participants from the disparate communities.

6.2 LESSONS LEARNED THROUGHOUT THE PLANNING PROCESS

The single most important lesson of this process is the importance of communication and truly listening to those people you invite to the table. States need to develop relationships that debunk the “us and them” mentality and bring participants to the table as members of the same team working towards the accomplishments of the same goals. This, however, is labor intensive. States need to commit FTEs to accomplish this.

As noted by the program director, States also need to offer more than technical advice. It does not work to require that things be done but not provide any monetary support. Along with support, the State needs to build trust by following through and doing and providing what they say they will.

The leadership and the workgroup were very proud of what they accomplished on a limited budget, and rightfully so. The limited funding forced the group to be focused and task oriented. There were no major conflicts encountered during this process. This may have been due in part to the realization that there literally was not time for that so common ground was sought.

6.3 RECOMMENDATIONS TO ENHANCE FUTURE STRATEGIC PLANNING

For effective strategic planning, several recommendations can be made based on the experiences of this group.

1. Leadership should come to the first meeting with all available and pertinent data organized and ready to present. If possible, one person should present the data to avoid the perception of excessive control by any one group (in this case the State).
2. Communicate! Take the time to make phone calls, particularly to key participants, to ensure their participation either through attendance, a representative, or e-mailed minutes and handouts.
3. Do not overload participants with work.
4. Do listen and respond to all input from participants.
5. As much as possible, use funds to enhance the principles of participatory planning.
6. Share data and continue to work on relationships that will gain access to additional data sources.
7. Nurture relationships. People enjoy working with people, not bureaucracies.
8. The State must demonstrate their commitment by “doing”.

7 ATTACHMENTS & APPENDICES

7.1 ATTACHMENTS

1. Evaluator's Observation Form
2. Participant's Evaluation Form
3. Environmental Scan Worksheets I, II, and III
4. Key Participant Interviews with Comments

7.2 APPENDICES: INDIVIDUAL MEETING EVALUATIONS

Appendix 1: Meeting of April 25, 2002

Appendix 2: Meeting of June 28, 2002

Appendix 3: Meeting of September 26, 2002

Attachment 1

Form for Observing Workgroup Meetings April 25, 2002 Boise, Idaho

General Items	Description/Comments
Purpose of meeting	
Agenda topics	
Changes to agenda	
Meeting location	
Who leads meetings and their affiliation	
Attendees/affiliation	
# invited/# attending	
Changes in attendees over time	
Development of working groups	
Frequency of workgroup meetings	
Work assignments made	

Attachment 2

Evaluation Checklist Form to Assess Workgroup Meetings Boise, Idaho

Openness	Great Extent	Some Extent	A Little	Not At All	Comments
There is adequate representation of population groups with disparities.	4	3	2	1	
Participants are encouraged to attend all workgroup meetings.	4	3	2	1	
Participants feel comfortable expressing their views.	4	3	2	1	
Chairs/co-chairs/facilitators are responsive to participant concerns.	4	3	2	1	
Formal procedures are used to facilitate discussion/decision making.	4	3	2	1	
Informal procedures are used to facilitate discussion/decision making.	4	3	2	1	
Adequate time is given for questions, answers and discussion.	4	3	2	1	
Participation					
All participants can bring issues to the table.	4	3	2	1	
Workgroup members from population groups with disparities participate actively in the meetings.	4	3	2	1	
Lay language is used so everyone can understand.	4	3	2	1	
Participants demonstrate a high level of interest in the proceedings.	4	3	2	1	
Decisions are made through consensus and/or working consensus.	4	3	2	1	
Productivity					
Participants receive agendas/other materials to review before the meetings.	4	3	2	1	
All agenda items are addressed	4	3	2	1	
Meetings run smoothly with minimum interruptions/disruptions	4	3	2	1	
Conflicts are resolved to the satisfaction of each party	4	3	2	1	
Meetings end with action steps / task assignments with deadlines	4	3	2	1	

ATTACHMENT 3:

Worksheets I, II, and III

WORKSHEET I

Descriptive and Prevalence (Quantitative)				Resources/Attributes		
Population	Total Population	Smoking %	# of Smokers	Monitoring Tool	Interested Groups	Potential Groups
Native American Adults	11,994	42.2	6,933	<i>BRFSS</i>		
Hispanic	101,690	23.0	23,389	BRFSS		
WIC	14,349	22.7	3,269	WIC		
GLBT Adults	?	30.5*	?	None		
Bosnian	?	?	?	None		
Asian	11,889	17.0	2,021	<i>BRFSS</i>		
18-24	143,975	27.0	38,873	BRFSS		
African Amer.	5456	?	?	<i>BRFSS</i>		
Less than \$20K	163,300	29.6	48,337	BRFSS		
Less than 12 th grade education	87,900	40.0	35,160	BRFSS		
MS and HS Students	125,300	16.1	20,210	YTS YRBS		
GLBT Youth	?	48.5*	?			
Medicaid Eligible	25,057	36.7	9,196	MEDICAID BRFSS		
Idaho Teens	125,300	16.1	20,210			
Idaho Adults	890,089	22.3	194,490			

*Nat'l Estimates
(Midpoint averages)

STRONG
WEAK
None

WORKSHEET II

Population	Involvement of Decision-Makers	Support of Key Opinion Leaders	Community Involvement	Infrastructure and Capacity	Linkages to other Organizations	Training	Cultural Competency
Native American							
Hispanic							
WIC							
GLBT Adults							
Bosnian							
Asian							
18-24							
African Amer.							
Less than \$20K							
Less than 12 th grade education							
MS and HS Students							
GLBT Youth							
Medicaid Eligible							

WORKSHEET III

<i>Strengths</i>	<i>Weaknesses</i>
<i>Opportunities</i>	<i>Threats</i>

Attachment 4

Key Participant Interviews

<u>Name</u>	<u>Date</u>
1. Do you feel you were part of the process? In what way? What was done to create that sense?	
<ul style="list-style-type: none">• <i>“I felt a very big part of the process.”</i>• <i>“ Galen included me in almost every step. I appreciate his special interest in the Native communities.”</i>• <i>“The facilitator was very good at including everyone and summarizing points”</i>• <i>“Not enough good can be said about Galen. He made sure everyone was at the table. He tried to fill the gaps as well as he could.”</i>• <i>“Yes. Input was valued.”</i>• <i>“The discussion was open. Input was considered seriously and reflected back both verbally and written.”</i>• <i>“Yes. The facilitator was awesome. Organizationally, Galen has done an awesome job.”</i>	
2. Was your voice heard? How was this accomplished / not accomplished? Examples.	
<ul style="list-style-type: none">• <i>“Yes. Facilitators made an effort to call on people who were not speaking up.”</i>• <i>“Yes, by sending out drafts and inviting input.”</i>• <i>“I believe my voice was heard. As stated before, Galen has taken a special interest in the Native communities. It has helped to have a person at the State level to ask questions, gather information, etc.”</i>• <i>“I believe my voice was heard. Galen kept us updated and provided ample time to speak during general sessions and breakouts.”</i>• <i>“From Galen’s office, everyone was very accommodating for travel and other details.”</i>	

3. How would you describe your experience with this process? Was it meaningful? How?

- *“My voice was heard.”*
- *“The unique aspects of Native American culture were considered and welcomed. It was a process of inclusion.”*
- *“I feel I have had a positive experience with the whole process. I am glad we have had input from a few of the Tribes of Idaho. It gives me a sense of inclusion and team.”*
- *“Very meaningful. We are now starting on a survey of tobacco use in the GLBT community – something substantial.”*
- *“I would have never expected to be involved.”*
- *“It was very meaningful to me. I realized that though we do provide services, we still have disparities.”*
- *“I was able to reflect on the strength and weaknesses of what we do.”*

4. I know you are asked to be on a lot of committees – Do you have faith that this plan will move forward? Why?

- *“Disparities work alone, I am concerned about funding. Tobacco work will continue.”*
- *“Possibilities for projects as risk for lack of funding.”*
- *“Focus on populations that are normally ignored – it’s exciting!”*
- *“I do believe this plan will move forward. We have most major players at the table, very influential people. I think it will be slow but should progress nicely.”*
- *“Marginal. It has nothing to do with the players, process or presentation. My concern is the availability of resources.”*
- *“I believe it will given the leadership of the Department – however, the Department relies on Galen’s leadership. I would be hesitant to say this if Galen left.”*
- *“I see Galen’s passion in working with Idaho groups. If it weren’t for him, it may not happen. I hope for the same passion when Galen moves on.”*

5. How did the State do in organizing and moving the process along? Did they lead too much? Not enough? Just right?
- *“Just right.”*
 - *“I think the state involvement was just right. They organized and got the ball rolling. A little encouragement now and then was good.”*
 - *“I was really impressed. This is the sort of thing we could have flailed around with. There was a lot of thought put in ahead of time.”*
 - *“The State got our opinions without reinventing the wheel.”*
6. Was the role you ended up experiencing in line with your expectations?
- *“No, it was more!”*
 - *“I am so impressed with the sensitivity with which Galen put all of this forward. **He gets it!**”*
 - *“I came to this process with little expectation because I still was unsure what was asked of me. But, watching and participating in the process has made me set expectations that I believe were met by the end of the last meeting.”*
 - *“Consistent with expectations.”*
 - *“Consistent with what I had already heard about Galen. My participation was because of Galen’s reputation.”*

APPENDIX 1:

Evaluation of the Meeting of
April 25, 2002

Evaluation of Tobacco Disparities Meeting

April 25, 2002

Boise, Idaho

The first meeting of Idaho's working group for tobacco disparities strategic planning was held in Boise, Idaho on April 25. Though Boise is the capital city, geography and transportation pose challenges in this very rural state. This is especially true for a six-hour meeting. To reduce the impact of these barriers, the project paid for transportation and lodging if needed.

The medium sized conference room was arranged in a horseshoe configuration to encourage interaction between group members. This arrangement allowed the facilitator to "walk in to" the group and be an integral member of the group. I believe that this closeness helped to put the group at ease with each other fairly quickly. Several of the participants already knew each other while several others had were absolutely new to this particular mix of people. Time spent in small groups provided those with no prior ties or those who do not naturally emerge as leaders an opportunity to voice their ideas and concerns.

Conspicuously absent from the table was representation of the African American community of Idaho. The project coordinator admitted to having little knowledge of this group and it's leadership. Invitations were sent several leaders within Idaho's African American population but this first meeting failed to attract their participation. According to the 2000 Census, the breakdown for Idaho by race is: White, 91%; American Indian, 1.4%; Asian, 0.9%; African American, 0.4%; and Pacific Islander, 0.1%. In the 2000 Census, 7.9% of Idahoans identified themselves as being of Hispanic or Latino origin.

Purpose of the Meeting

The purpose of this meeting was clearly stated in the invitational letter and within the first hour of the meeting – to write a state strategic plan by December of 2002 that addresses the issue of disparity in the tobacco program in Idaho.

Meeting started promptly at 10:00 am with opening words by Tobacco Program Manager for the State of Idaho, Department of Health and Welfare, Bureau of Health Promotion. Identified this as one of 14 CDC pilot projects and outlined 4 goals of the tobacco program.

Agenda Topics (agenda attached)

Prior to the meeting, the project coordinator received several telephone calls asking for clarification on the meeting. Those calling had found the agenda too vague and were unwilling to make the commitment of time and travel without further information.

The facilitator conducted a good icebreaker and exercise to introduce everyone.

Purpose and definitions clearly stated several times by three different speakers; Selina Carver, Dr. Randy Thompson and Dr. Galen Louis.

Prior to the meeting, the project coordinator had compiled the existing data and was able to give a comprehensive overview of what we know about tobacco use in Idaho. This pre-work made the meeting much more efficient. The limited funding of the State match (\$5,000) has required that every efficiency be employed in order to complete this project. I do not think that the prior compilation of the data detracted in anyway from the usefulness or meaning of the data to the participants but that it in fact got the group moving more quickly.

Changes to Agenda

The agenda was well adhered to. All topics adequately covered. Not additions or deletions were made.

No morning break scheduled. The ground rules stated freedom to move about. It was obvious that by the 11:15 data presentation people were ready for a break and opportunity to stretch their legs. Refreshments were late, arrived after 10:00, which was somewhat disruptive.

Meeting Location

The meeting was held in the 7th floor conference room of the Pete Cenarussa Office Building in down town Boise. This building houses the State of Idaho Division of Health & Welfare. The location is convenient for the in town participants and is convenient to down town hotels where out of town participants were put up.

Being in the Cenarussa building allowed for good technical and administrative support.

There was a group scheduled to use the conference room at 3:00, the adjournment time for the Tobacco Disparity group. This was very disruptive as people were coming into the room and rearranging it before we had even left. I believe it rushed time participants felt they had to complete evaluation forms. Additionally, it did not allow for any of the natural and spontaneous interaction that may have taken place between participants as they prepared to leave.

Meeting Leader

Dr. Randy Thompson, of Boise State University, Boise, Idaho.

Randy was very open and inviting. He kept the meeting moving.

Randy moves about the room but he is soft-spoken and very difficult to hear when his back is too you. After lunch, he put on a wireless microphone, which was somewhat helpful.

The quieter participants seemed to be sitting in the front and Randy often had his back to them missing non-verbal cues for participation. This is reflected in the following comment from an evaluation form: "Need to be more than willing to interrupt to get heard."

Attendees / Affiliation

See attached.

Several people were only there for part of the meeting but voiced their desire to participate.

Though not everyone spoke up, the group appeared to be engaged – for example, nodding in agreement to questions and comments, note taking, eye contact with the person speaking, etc. When small discussion groups were formed after lunch those who had been quiet in the large group spoke up freely.

While in the large group, 10 different people participated with questions or comments to the group. Most spoke up only one or two times. One individual dominated and emerged as a very strong informal leader of the group.

Number Invited / Number Attending

Invitation list of 51 (I did not include the facilitator or evaluator in the count for any of the attendance numbers.)

RSVP Yes = 29

RSVP No = 4

Attendance = 25, 49% of total number invited. However, the attendance includes two individuals who were not on the invitation list.

Evaluation Forms Returned = 15 (60%)

This return rate was hampered by the rushed transition out of the conference room at the end of the day.

Development of Working Groups

No working groups were formed or discussed during the course of this meeting.

Frequency of Workgroup Meetings

Though the group was told that the goal is a strategic plan by December, a schedule of meetings was not discussed. This was purposeful so as to limit the rescheduling that often occurs when meetings are scheduled out too far. There was discussion about what would be a good date in June to meet. Several dates were thrown out with the understanding that every attempt would be made to accommodate these time frames. A letter will be sent out.

The frequency of meetings has been limited by funding. This is forcing the process to be streamlined, efficient and focused. The informal response to this seemed favorable. Participants do not see that this effort will take too much of their time but they seem to have a sense of the purpose of the project.

Work Assignments

Participants were given the Environmental Scan and asked to do that and come to the June meeting prepared to discuss the results. The instructions for this were rushed due to the next group coming into the room. However, a follow-up e-mail gave further direction and invited questions.

Evaluation Forms

An evaluation form provided by CDC was used and the same form will be used throughout the strategic planning process. The responses for this first session are summarized in the following table.

Descriptive Statistics of Evaluation Forms
April 25, 2002

	N	MIN	MAX	MEAN	S.D.
Openness					
1. There is adequate representation of population groups with disparities.	13	3	4	3.31	.48
2. Participants are encouraged to attend all workgroup meetings	14	4	4	4.00	.00
3. Participants feel comfortable expressing their views	15	3	4	3.90	.28
4. Chairs/co-chairs/facilitators are responsive to participant concerns	15	3	4	3.90	.28
5. Formal procedures are used to facilitate discussion/decision making	15	2	4	3.07	.59
6. Informal procedures are used to facilitate discussion/decision making	14	2	4	3.50	.65
7. Adequate time is given for questions, answers and discussion	15	3	4	3.70	.46
Participation					
8. All participants can bring issues to the table	15	3	4	3.70	.46
9. Workgroup members from population groups with disparities participate actively in the meetings	15	3	4	3.73	.46
10. Lay language is used so everyone can understand	15	2	4	3.40	.63
11. Participants demonstrate a high level of interest in the proceedings	15	3	4	3.70	.46
12. Decisions are made through consensus and/or working consensus	14	3	4	3.57	.51
Productivity					
13. Participants receive agendas/other materials to review before the meetings	15	1	4	3.20	1.08
14. All agenda items are addressed	13	3	4	3.85	.38
15. Meetings run smoothly with minimum interruptions/disruptions	15	3	4	3.67	.49
16. Conflicts are resolved to the satisfaction of each party	11	3		3.73	.47
17. Meetings end with action steps/task assignments with deadlines	15	3	4	3.93	.26

Scale:
4 = Great Extent
3 = Some Extent
2 = A Little
1 = Not At All

Comments from Evaluation Forms

- I didn't [receive written materials], at least.
- Need to be more than willing to interrupt to get heard.
- Too many acronyms are used without deciphering.

Items 2, 3 and 17 all reflect a group member's feelings about participation and focus of the meetings. These three items have a mean of 3.9 indicating that they felt they were encouraged to participate in a meaningful way and that action steps were outlined for the next meeting. Attendance at all work group meetings (Item 2) was encouraged not only through written invitation but also follow-up telephone calls. Expression of views (Item 3) was encouraged by activities and discussion in both large and small groups. Finally, participants were given an assignment, the enviroscan, to be completed by the next meeting (Item 17).

For Item 12, how decisions are made, it is unclear if participants were evaluating large or small group decisions. Strong personalities may have had even more effect on the decisions of the small groups in which they participated than they had on the group as a whole. Similarly, it is difficult to discern if similarity in the scores for Item 5 (formal procedures) and Item 6 (informal procedures) reflects a good mix of techniques and group size or if people were rushed while completing the evaluations. There is always a percentage of participants who will indicate the same response straight down the evaluation form. It is generally felt that these represent an overall feeling of the meeting whether that be good, bad or indifferent.

Overall, the first meeting was very successful and the process seems to be proceeding as planned and hoped.

APPENDIX 2:

Evaluation of the Meeting of
June 28, 2002

Evaluation of Tobacco Disparities Meeting

June 28, 2002

Boise, Idaho

This was the second meeting of Idaho's working group for tobacco disparities strategic planning. The first meeting was held approximately two months earlier on April 25, 2002 also in Boise.

The meeting logistics were very similar to the first meeting. The meeting ran from 9:00 a.m. to 3:00 p.m. in a medium sized conference room in Pete Cennarussa government office building in downtown Boise.

Purpose of the Meeting

The invitational letter sent out on June 10, 2002 clearly states the purpose of this second meeting to be the establishment of goals and objectives for the strategic plan (see attached). With the limited funding of the state match (\$5,000), the working group has been restricted to only three meetings. In order to assure progress, the purpose of each meeting has been clearly stated in each invitational letter and at the meetings. The overall purpose of this meeting was clearly stated as the establishment of goals and objectives for the strategic plan both in writing and then reinforced verbally by state officials during introductory comments.

Prior to the first meeting, the project coordinator had received several telephone calls from individuals who had found the agenda too vague. This was remedied for the second meeting. A detailed agenda (see attached) was sent out with the invitational letters.

The meeting started with opening comments by Ms. Selina Carver, Tobacco Program Manager, Idaho Department of Health and Welfare. Ms. Carver emphasized the importance of this strategic plan to future funding for the state of Idaho. She also discussed the importance of how the work being done by this group will impact the overall five-year tobacco plan for the state of Idaho. Ms. Carver clearly stated the purpose of this project to be the creation of a strategic plan to identify and eliminate tobacco-related disparities through a process which engages a diverse and inclusive workgroup.

Dr. Galen Louis, Tobacco Disparities Project Coordinator, reviewed the four components of the Tobacco Program; prevention, cessation, environmental tobacco smoke and the elimination of disparities. He also reiterated the importance of being one of only 14 states included in this pilot project particularly since Idaho is working with such limited funding.

Dr. Louis provided everybody with a laminated card that graphically depicts the components of program development (see attached) and went over the components and reminders at the start of the day. This was helpful in focusing the group on the task of plan development. This small tool was referred to several times during the day and having something to visually refer to was very effective whenever the facilitator needed to refocus the group.

The facilitator, Dr. Randy Thompson of Boise State University, reviewed the definitions of diversity and disparity prior to moving ahead with the agenda.

Agenda Topics (agenda attached)

Following introductory comments, the facilitator and evaluator provided a review and overview of the last meeting. Though the evaluator stated that African Americans were conspicuously absent from first meeting as well as from this one, Dr. Thompson said he felt encouraged. The reason for his optimism was that discussions centered on an inclusive broad plan that would be amenable to change if need be.

Though the agenda was very full, it was well adhered to. The program coordinator, the facilitator and the evaluator had met and worked together in setting the agenda for this meeting. This “behind the scenes” work is crucial to developing this strategic plan with limited funding for meetings. This pre-planning assures that the coordinator, facilitator and evaluator clearly understand what needs to transpire to achieve the goals of each meeting. Because time has been spent in planning the meetings and anticipating conflicts or turf-battles it is easier for the facilitator to direct and maintain the focus of the group.

It was during the meeting to set the agenda that the low number of environmental scans returned was discussed. In order to address this concern, it was decided that prior to the meeting, the project coordinator would ask three key participants to share their experience with the scan. The coordinator, facilitator and evaluator discussed and agreed upon who the three most effective and appropriate key participants would be to do this. It was in this manner that discussion of the scans became an agenda item that was participant driven.

During the planning meeting, there was considerable discussion on the matrices used to compile information from the scans and SWOTs (strengths, weaknesses, opportunities, threats) assessments into a useable format. Having this well established and understood by the facilitator, coordinator and evaluator was very helpful in keeping the meeting running smoothly. The matrices were sent out to participants prior to the meeting so introducing a completely new form did not stall the process.

Changes to Agenda

There were no changes made to the agenda after it was mailed to participants. There were adequate breaks and refreshments were on time. Sufficient time had been allotted for each agenda item.

Meeting Location

The meeting was held in the 7th floor conference room of the Pete Cenarussa Office Building in downtown Boise. This building houses the State of Idaho Division of Health & Welfare. The location is convenient for the in town participants and is convenient to downtown hotels where out of town participants were put up.

Being in the Cenarussa building allowed for good technical and administrative support.

The project coordinator took steps to assure that the conference room was not booked immediately following our meeting. This allowed for very valuable informal interaction between the participants at the end of the day. It also provided adequate time for the completion of the evaluations. The increased number of written comments indicate that the participants were not as rushed in the evaluation process after this meeting as they were after the first meeting.

Meeting Leader

Dr. Randy Thompson of Boise State University again served as facilitator. Dr. Thompson received very favorable comments following the first meeting and I believe the continuity helped to put the participants at ease. Dr. Thompson was very open and inviting and he kept the meeting moving.

We had a smaller group this time and there were not difficulties with hearing either the facilitator or participants. All of the participants were involved in the discussion and no one individual dominated or directed the group.

Attendees / Affiliation

See attached list.

Number Invited / Number Attending

A total of 14 individuals attended the meeting as compared to 25 at the April meeting. Fortunately, those present provided good representation of Idaho's disparate populations.

Development of Working Groups

This is a very small group on a tight timeline so no further divisions into workgroups were made. This core group of individuals has quickly become supportive of each other and very productive.

An example of the support shown within the group would be when the representative from the gay, lesbian, bisexual and transgender (GLBT) community asked that everyone use the word “queer” during the discussion rather than tripping over the acronym. She stated, “Everyone knows what queer means.” Some group members honored this request and became more comfortable using the word queer as the day went on. Others were not comfortable using the word queer and that was all right also.

Three key things occurred with the group dynamics when this request was made. First, a member felt comfortable and safe enough with the group to be very open and frank. Secondly, the member making the request was treated with respect by the group. And, finally, the same level of respect was extended to those individuals who were not comfortable using the word queer in discussion as to those who were.

The fact that this interaction occurred early in the day really helped to “gel” this group. There was a very high level of participation. So much so that I could not keep track of the number of comments made even by the most “quiet” members of the group.

The sharing done by the three key participants on their experience with the environmental scan, generated a lot of discussion and really pushed the group into a very productive mode. This process brought people out and talking about their communities in the context of an environmental scan even though they may not have formally completed and submitted the scan to the program coordinator.

Frequency of Meetings

Due to funding constraints, there will be only one more meeting of the workgroup prior to submission of the strategic plan. The next meeting was generally discussed as going to occur in late September. This date will allow time for the program coordinator to develop the draft as well as have time to modify the draft following participant input.

Work Assignments

During the meeting the group worked together to complete

The only work assignment made for completion between this meeting and the next, was to the project coordinator. Based on information collected today as the matrices for the environmental scans and SWOTs were completed as well as data sources reviewed at the first meeting, Galen Louis, project coordinator, will draft the strategic plan. The group was in 100% agreement with proceeding in this manner.

Evaluation Forms

An evaluation form provided by CDC was distributed and collected at the end of the session. The responses from this session are summarized in the following table (A). Written comments from the June 28th evaluations are attached with Table A. Table B is a summary of the cumulative responses from the evaluation forms from both April 25th and June 28th.

TABLE A
Descriptive Statistics of Evaluation Forms
June 28, 2002

	N	MIN	MAX	MEAN	S.D.
Openness					
1. There is adequate representation of population groups with disparities.	12	3	4	3.25	.45
2. Participants are encouraged to attend all workgroup meetings	12	3	4	3.83	.39
3. Participants feel comfortable expressing their views	12	3	4	3.83	.39
4. Chairs/co-chairs/facilitators are responsive to participant concerns	12	3	4	3.92	.29
5. Formal procedures are used to facilitate discussion/decision making	12	1	4	3.17	.94
6. Informal procedures are used to facilitate discussion/decision making	12	3	4	3.67	.49
7. Adequate time is given for questions, answers and discussion	12	3	4	3.92	.29
Participation					
8. All participants can bring issues to the table	12	3	4	3.92	.29
9. Workgroup members from population groups with disparities participate actively in the meetings	12	3	4	3.83	.39
10. Lay language is used so everyone can understand	12	2	4	3.33	.78
11. Participants demonstrate a high level of interest in the proceedings	12	3	4	3.75	.45
12. Decisions are made through consensus and/or working consensus	12	4	4	4.00	.00
Productivity					
13. Participants receive agendas/other materials to review before the meetings	12	3	4	3.75	.45
14. All agenda items are addressed	12	3	4	3.92	.29
15. Meetings run smoothly with minimum interruptions/disruptions	12	3	4	3.75	.45
16. Conflicts are resolved to the satisfaction of each party	10	3	4	3.90	.32
17. Meetings end with action steps/task assignments with deadlines	12	3	4	3.92	.29

Scale: 4 = Great Extent
 3 = Some Extent
 2 = A Little
 1 = Not At All

TABLE B
Descriptive Statistics of Evaluation Forms Combined
April 25 and June 28, 2002

	N	MIN	MAX	MEAN	S.D.
Openness					
1. There is adequate representation of population groups with disparities.	25	3	4	3.28	.46
2. Participants are encouraged to attend all workgroup meetings	26	3	4	3.92	.27
3. Participants feel comfortable expressing their views	27	3	4	3.87	.33
4. Chairs/co-chairs/facilitators are responsive to participant concerns	27	3	4	3.91	.28
5. Formal procedures are used to facilitate discussion/decision making	27	1	4	3.48	.80
6. Informal procedures are used to facilitate discussion/decision making	26	2	4	3.58	.58
7. Adequate time is given for questions, answers and discussion	27	3	4	3.69	.46
Participation					
8. All participants can bring issues to the table	27	3	4	3.80	.40
9. Workgroup members from population groups with disparities participate actively in the meetings	27	3	4	3.78	.42
10. Lay language is used so everyone can understand	27	2	4	3.37	.69
11. Participants demonstrate a high level of interest in the proceedings	27	3	4	3.72	.45
12. Decisions are made through consensus and/or working consensus	26	3	4	3.77	.43
Productivity					
13. Participants receive agendas/other materials to review before the meetings	27	1	4	3.44	.89
14. All agenda items are addressed	25	3	4	3.88	.33
15. Meetings run smoothly with minimum interruptions/disruptions	27	3	4	3.70	.47
16. Conflicts are resolved to the satisfaction of each party	21	3	4	3.81	.40
17. Meetings end with action steps/task assignments with deadlines	27	3	4	3.93	.27

Scale: 4 = Great Extent
 3 = Some Extent
 2 = A Little
 1 = Not At All

**Written Comments From
June 28, 2002
Tobacco Disparities Working Group
Evaluations**

1. There is adequate representation of population groups with disparities.
 - “Some [groups] are missing”
 - “Need to increase representation at the table”
 - “Still [some groups] missing and acknowledged in group process”
 - “Some north Idaho tribes, African Americans, Asian/Pacific Islander, another queer person maybe”
 - “Acknowledged”
2. Participants are encouraged to attend all workgroup meetings.
 - “It would be nice to have at least 4 – 6 weeks notice on meeting dates”
3. Participants feel comfortable expressing their views.
 - “Facilitator invites input. He does an excellent job.”
4. Formal procedures are use to facilitate discussion / decision making.
 - “But why important?”
 - “The appropriate amount”
 - “And yet not too formal”
 - “Comfortable”
5. All participants can bring issues to the table.
 - “Facilitator does a good job”
 - “hope so”
6. Lay language is used so everyone can understand.
 - “Terms are defined if there are questions”
 - “Need of clarification of terms on worksheets”
 - “Did take time to define terms. This was helpful.”
 - “Acronyms are tough to follow”
7. Participants receive agendas / other materials to review before the meetings.
 - “Galen has done an outstanding job in reaching out to community ‘unrepresented’ populations! He’s the man...”
8. Meetings run smoothly with minimum interruptions / disruptions.
 - “Need a break earlier than 11:00”

APPENDIX 3:

Evaluation of the Meeting of
September 26, 2002

Evaluation of Tobacco Disparities Meeting September 26, 2002 Boise, Idaho

This was the third and final meeting for the tobacco disparities strategic planning work group for the state of Idaho. The logistics and meeting place once again remained the same. This familiarity and routine seem to assist in the groups ability to get “down to business” quickly and efficiently.

Purpose of the Meeting

On August 27, 2002 an e-mail and letter were sent out to all participants regarding the third and final meeting scheduled for September 26, 2002. The program coordinator had left the June meeting tasked with the development of a draft strategic plan by the final meeting. This draft was sent as an attachment with the August 27th correspondence. This follow through by the state was critical.

In addition to getting the draft to the group members, the purpose of the meeting was clearly stated as refining and adopting the five goal areas that had been identified in the previous meeting. The meeting was described as an opportunity to discuss and negotiate the draft strategic plan and the five goal areas.

The four objectives for the meeting were clearly stated on the top of the agenda (see attached). This very clearly tied the activities of the day together and provided a quick overview.

As has been the case with each meeting, the day began with comments from the Tobacco Program Manager for the State of Idaho, Department of Health and Welfare, Bureau of Health Promotion followed by the disparities project coordinator. Though the program manager has not been able to attend each meeting in it's entirety, her presence at each meeting has conveyed a sense of commitment by the State.

Agenda Topics (agenda attached)

The agenda was sent out in the same format as the June 28th agenda. This format of stating the meeting objectives and then having a grid with time, task, speaker/facilitator and purpose has eliminated the complaints received after the first agenda was sent out. This method is very thorough and concise.

This meeting was attended by a number of people who had either missed meeting number two or were new to the group. For this reason, Dr. Randy Thompson, facilitator, conducted an icebreaker and introductions. The agenda allowed for five minutes of comments by Ms. Selina Carver from the state tobacco program. Following Ms. Carver's comments and introductions, Dr. Thompson noted that we were behind but reiterated the

importance of the introductions and having everyone feel that they are a valued and contributing member of the group no matter what amount of time they are actually able to commit.

Dr. Galen Louis, project coordinator, began his review of the process to date at 10:07 a.m. This was scheduled to begin at 9:45. The value of the introductions and review was very evident by 10:30. The group members appeared to be very engaged, especially those who had not previously attended meetings. There was lots of nodding, eye contact with the speaker and note taking. Galen did a very good job of rolling the review of the process and “getting acquainted” with the draft agenda items together in an efficient package.

By 10:45 a.m. the working group was divided into small groups to critically review each of the five goal areas of the draft. This put the meeting only 10 minutes off of the agenda. Lunch arrived on time, which allowed the small groups the flexibility of working through lunch. This got the meeting back on schedule with the afternoon session starting promptly at 12:45 p.m.

Changes to the Agenda

The only change made to the agenda was the impromptu introduction / icebreaker exercise. As noted above, this time was recouped by the beginning of the after-lunch session at 12:45.

Meeting Location

Once again, the meeting was conveniently held in the Pete Cenarussa Office Building in downtown Boise, Idaho. The convenience and familiarity of this location makes the morning logistics and orientation very quick.

One slight problem encountered was that the letter indicated the meeting would be in the seventh floor conference room while the agenda listed the tenth floor conference room as the site for the meeting. Fortunately, because the meetings have consistently been in the same building it was easy to make sure that everyone got to the right place.

Meeting Facilitator

Dr. Randy Thompson of Boise State University once again served as facilitator. Randy has consistently received very favorable comments on the evaluations. Randy and Dr. Galen Louis, project coordinator, have proven to complement each other very nicely even though they have very differing styles.

Randy readily sensed the need to do introductions for the new people and quickly got everyone up to speed. More importantly, he made them each feel valued as important and contributing individuals.

Attendees / Affiliation

See attached.

Number Invited / Number Attending

As with the second meeting, the invitation was sent out to the entire list of original invitees. Additionally, the invitational letter encouraged participants to bring along others whom they felt appropriate to attend. This strategy paid off with several new people attending. It was also clear to those who had missed a meeting that it was “safe” to come back for the last meeting; their input would be valued.

Development of Working Groups

Working groups formed were only for small group work during this final session. The project coordinator had made some suggestions as to group assignments for the small group work sessions. These suggested groups were sent out with the letter and agenda. With those who were present and not listed and vice versa, this really did not pan out. It is impossible to say whether or not this would have been a good idea and assisted in focusing attention to the draft in those area perceived by the coordinator to be a good fit.

The five working groups were established by simply counting off around the room. One of the groups ended up with three people who were attending their first meeting and one who had only attended the initial meeting. This group really struggled with the review of the draft language and possible strategic tactics and contacts for their goal area. The individual who had previously attended a meeting was railroading the conversation but had a very poor understanding of what the small group was to try and accomplish. Dr. Galen Louis, project coordinator, salvaged this effort by immediately joining the group when one of the members asked for clarification.

Frequency of Meetings

This was the third and final meeting of the Tobacco Disparities Strategic Planning Group.

Work Assignments

From the way this group interacted during this final meeting a newcomer would have no idea that each individual technically had no further commitment. People were discussing where to go from here and how they personally fit into that vision. The energy in the conference room was palpable. People were excited by what they had accomplished and ready to roll their sleeves up and continue on with the work at hand. I did not hear anyone say that this would be the end of the involvement of themselves or organization with the Tobacco Disparities Project.

The facilitator quickly picked up on the enthusiasm of the group and began lining out the next steps. Initial discussion centered on the need for workgroups versus meeting all together again. The consensus was to meet all together due to overlap of the work done by this group and what the workgroups will be charged with accomplishing. It was also felt that meeting altogether would be of value to new members as well as those who may have missed a meeting or two.

The group then worked out a timeline for themselves. The project coordinator would try to get the suggested changes to the plan made and out for comments so that he could have it back by mid to late October. Members would invite other that should be at the table by early November so that they could “save the date”. And the group would reconvene in January of 2003. It was the members of the group who set this aggressive timeline. It was not an agenda / timeline that was pushed by the State Tobacco Program.

TABLE A

**Descriptive Statistics of Evaluation Forms
September 26, 2002**

	N	Min	Max	Mean	S. D.
Openness					
1. There is adequate representation of population groups with disparities.	19	3	4	3.32	.48
2. Participants are encouraged to attend all workgroup meetings	19	3	4	3.84	.37
3. Participants feel comfortable expressing their views	19	2	4	3.68	.58
4. Chairs/co-chairs/facilitators are responsive to participant concerns	19	2	4	3.79	.54
5. Formal procedures are used to facilitate discussion/decision making	19	2	4	3.16	.69
6. Informal procedures are used to facilitate discussion/decision making	18	2	4	3.39	.61
7. Adequate time is given for questions, answers and discussion	18	3	4	3.67	.49
Participation					
8. All participants can bring issues to the table	19	3	4	3.84	.37
9. Workgroup members from population groups with disparities participate actively in the meetings	19	2	4	3.53	.61
10. Lay language is used so everyone can understand	19	3	4	3.47	.51
11. Participants demonstrate a high level of interest in the proceedings	19	3	4	3.63	.50
12. Decisions are made through consensus and/or working consensus	18	3	4	3.72	.46
Productivity					
13. Participants receive agendas/other materials to review before the meetings	19	3	4	3.89	.32
14. All agenda items are addressed	19	3	4	3.89	.32
15. Meetings run smoothly with minimum interruptions/disruptions	19	3	4	3.84	.37
16. Conflicts are resolved to the satisfaction of each party	15	3	4	3.73	.46
17. Meetings end with action steps/task assignments with deadlines	19	2	4	3.53	.61

Scale: 4 = Great Extent
 3 = Some Extent
 2 = A Little
 1 = Not At All

TABLE B**Descriptive Statistics of Evaluation Forms
Cumulative**

	N	Min	Max	Mean	S. D.
Openness					
1. There is adequate representation of population groups with disparities.	44	3	4	3.30	.46
2. Participants are encouraged to attend all workgroup meetings	45	3	4	3.89	.32
3. Participants feel comfortable expressing their views	46	2	4	3.79	.45
4. Chairs/co-chairs/facilitators are responsive to participant concerns	46	2	4	3.86	.40
5. Formal procedures are used to facilitate discussion/decision making	46	1	4	3.35	.77
6. Informal procedures are used to facilitate discussion/decision making	44	2	4	3.50	.59
7. Adequate time is given for questions, answers and discussion	45	3	4	3.68	.47
Participation					
8. All participants can bring issues to the table	46	3	4	3.82	.39
9. Workgroup members from population groups with disparities participate actively in the meetings	46	2	4	3.67	.52
10. Lay language is used so everyone can understand	46	2	4	3.41	.62
11. Participants demonstrate a high level of interest in the proceedings	46	3	4	3.68	.46
12. Decisions are made through consensus and/or working consensus	44	3	4	3.75	.44
Productivity					
13. Participants receive agendas/other materials to review before the meetings	46	1	4	3.63	.74
14. All agenda items are addressed	44	3	4	3.89	.32
15. Meetings run smoothly with minimum interruptions/disruptions	46	3	4	3.76	.43
16. Conflicts are resolved to the satisfaction of each party	36	3	4	3.78	.42
17. Meetings end with action steps/task assignments with deadlines	46	2	4	3.76	.48

Scale:
4 = Great Extent
3 = Some Extent
2 = A Little
1 = Not At All

**Written Comments From
September 26, 2002
Tobacco Disparities Working Group
Evaluations**

1. There is adequate representation of population groups with disparities.
 - “Effort is definitely made to have adequate representation.”
 - “Need more [representation].”
 - “Other representation needed but great start.”
 - To some extent “but way better than one usually sees.”
2. Chairs / co-chairs / facilitators are responsive to participant concerns.
 - “One individual felt the need to say something after everyone else. Quite annoying. – (Randy).”
 - “Randy, very effective facilitator.”
3. Formal procedures are used to facilitate discussion / decision making.
 - “Structured, but was made and easy comfortable process.”
 - “Were formal procedures warranted?”
 - “It is good not to be too formal.”
4. Informal procedures are used to facilitate discussion / decision making.
 - “Informal atmosphere and humor are a plus.”
5. Workgroup members from population groups with disparities participate actively in the meetings.
 - “People of color should be in a group to discuss issues internally.”
6. Lay language is used so everyone can understand.
 - To a great extent “though I am against the move towards ‘dumbing down’”.
7. Decisions are made through consensus and / or working consensus.
 - “Don’t know if many decisions were made but terrific suggestions.”
8. Meetings run smoothly with minimum interruptions / disruptions.
 - “Great facilitators!”
9. Conflicts are resolved to the satisfaction of each party.
 - “Did not encounter conflicts.”
 - “N/A”
 - “Conflicts?”
 - “N/A. Wasn’t any.”
 - “No conflicts among us I see!”