



AAFP Tobacco and Nicotine Chapter/Family Medicine Residency Program Mini Grants
Final Report
2015-2016

Each question in this Final Report should be answered thoroughly and completely.

Describe your project. Please answer the following questions.

1. Why did you choose this project? In other words, how was it relevant to your chapter/residency?

Kansas Academy of Family Physicians (KAFP) is recognized statewide as a tobacco champion due to its long-standing, active involvement with local and state tobacco-free advocacy groups, Tobacco Free Wichita Coalition (TFW) and Tobacco Free Kansas Coalition (TFKC). Beginning in July of 2015, KAFP became the Sedgwick County grantee for the Kansas Department of Health Environment Chronic Disease Risk Reduction program (CDRR), which funds two staff members (with a combined 20 years of experience in prevention programming) to coordinate the implementation of evidence-based tobacco strategies.

The tobacco retail environment is an important area of focus for tobacco control, as the tobacco industry focuses most of its marketing dollars in this setting. Annually, tobacco companies spend an estimated \$79.7-million a year on marketing at the point-of-sale in Kansas. Increased exposure to tobacco advertisements is concerning to KAFP for a number of reasons. The U.S. Surgeon General concluded in 2012 that advertising and promotional efforts by the tobacco industry cause the initiation and progression of tobacco use among youth. As visits to stores where tobacco products are sold increases the odds of teens initiating smoking. The odds of initiation more than doubles for teens who visit these stores at least twice a week. Furthermore, youth who live in areas with high retailer density, also known as "tobacco swamps" are more likely to smoke. The Surgeon General also concluded that tobacco advertising in the retail environment discourages cessation attempts by adults.

This project is an extension of TFW's 2014 tobacco retailer assessment, which was completed with the assistance of KAFP and other community partners. This revealed 40% of all tobacco licenses in Wichita are located in six zip codes with the lowest reported average household income, and 71% of all tobacco retailers are within ½-mile of a school and/or park with a large proportion located near eight schools in economically disadvantaged areas. According to other local data sources, the affected zip codes also correlate to areas with predominantly African-American and Hispanic populations and incidence of fetal/infant mortality, of which approximately 23.5% of mothers with babies who died before their first birthday reported smoking during pregnancy.

2. What did you do and how did you accomplish it?

With the assistance of the AAFP mini-grant and a grant from the Kansas Health Foundation, KAFP staff coordinated efforts for the Tobacco Free Wichita Coalition to conduct seven Neighborhood Conversations in six Wichita zip codes deemed tobacco swamps (67203, 67214, 67211, 67218, 67216, 67210) and specifically with members of the community who are targeted by tobacco ads (youth, African-Americans, LGBT, and low SES, as well as pregnant women). TFW developed a communications plan with Nye & Associates (a local PR firm), which included "branding" the campaign, promotional messages and materials for specific communities, advertising for both print and social media, and a direct mailer campaign to be used as a follow-up step with the

community. Staff also reached out to community partners to help secure locations within the affected areas to host the events. Strategic placement of ads and signage, as well as engaging community partners, was integral to promote the events. Partners who assisted with promotion included, but was not limited to, the NAACP-Wichita Chapter, American Cancer Society, YMCA of Greater Wichita After School Programs, Health Alliance, USD 259, The Center of Wichita (houses all local LGBT programs), GLSEN-Greater Wichita Chapter, City of Wichita Parks and Recreation, local FQHC's (one of which hosted an event), Inner-Faith Ministries, churches, Mental Health Association, Wichita City Council, Shocker Neighborhood Coalition, Fairmount Neighborhood Association, and local homeless shelters. KAFP also contracted with eight local health educators, including two Spanish interpreters, to assist with event facilitation, individual and small group discussions, and translation services, as some of the communities we visited had a high proportion of Spanish-only speaking adults.

The events were held in the evenings to accommodate the busy schedules of families. Food, activities for small children, thank you gifts, and door prizes were provided to help encourage participation. All event participants over the age of 18 completed a brief 5-question survey to help ensure that the target populations were being reached. The survey included the participant's zip code, use of tobacco products (including electronic cigarettes or vaping devices) in the last 12 months, planning to get pregnant in the next 12 months, having been pregnant in the last 12 months, and what type of store they typically buy groceries and supplies for their homes (superstore, grocery store, convenience store, neighborhood store, other). All of the information collected was anonymous and voluntary.

Four of the seven events included a presentation overview of tobacco advertising tactics and what can be done to reduce the impact in our community. The attendees were shown pictures of advertisements taken by TFW members to demonstrate how they are used to target certain populations and entice people to keep using tobacco. This was followed by small group discussions that asked questions about how tobacco has affected their family, what types of ads they have noticed, how children most often get to school in their community, and how certain policies to address the problem might affect their family. TFW was most concerned with how a policy that could limit tobacco retailers to 1,000 feet from schools might affect people if a store were to close or stop selling tobacco, as well as whether people would support an update to the local Youth Access Ordinance to give authority to the City of Wichita to perform compliance checks on local electronic cigarette and hookah retailers (the City already performs these checks on tobacco retailers). Comments were collected on flip charts by the small group leaders and maintained for review once all events were completed. Community members were encouraged to take pictures of advertisements when they visited tobacco retailers and share them with TFW via social media and email. Community members were also presented with four policy options and "voted" their support by placing a sticker by each policy description they agreed with. The policies included: tobacco retailers no less than 1,000-feet from schools; electronic cigarette retailers checked for compliance with no sales to minors; limiting all advertising for retail establishments; and prohibiting discounts for tobacco products.

Three of the seven events were facilitated similar to a health fair booth, as TFW collaborated with community partners on previously scheduled events for some of the target communities. The participants were shown pictures of advertisements taken by TFW members to demonstrate how they are used to target certain populations and entice people to keep using tobacco. These events allowed the small group leaders to have a brief discussion with participants about the issue and record comments for the previously mentioned questions on a one-on-one basis. The individual conversations lasted approximately 5-10 minutes. Community members were encouraged to take pictures of advertisements when they visited tobacco retailers and share them with TFW via social media and email. Community members were also presented with four policy options and "voted" their support by placing a sticker by each policy description they agreed with. The policies included: tobacco retailers no less than 1,000-feet from schools; electronic cigarette retailers checked for compliance with no sales to minors; limiting all advertising for retail establishments; and prohibiting discounts for tobacco products.

Due to concerns about obtaining parental consent for youth participation, staff elected not to include them in the question and answer portion of the conversations. Instead, youth were given a detailed overview of the

issue, which included showing them pictures of the advertisements. Youth were encouraged to ask the health educators questions at the end of the discussion, as well as participate in the community activity of photographing ads and sharing them with TFW. Youth were allowed to “vote” for any policy options they supported only if they requested to participate in that part of the activity. They were also given a thank-you gift for their participation.

3. What were your goals and to what extent did you achieve them?

The main goal was to hold six events with targeted areas of the community to educate people on the advertising tactics of tobacco companies to help raise awareness of the issue. The minimum anticipated attendance at each of six events was 20 people for an overall goal of 120. Although some of the events had less than 20 participants, the overall goal was surpassed, as we were able to speak to 136 members of the community (106 adults and 30 youth) at a total of seven events. It is also important to note that just the promotion of these events had a total reach of approximately 24,000, using social media, advertisements, community partner networks, and community-wide distribution of marketing materials.

KAFP was able to reach community members within our intended target audience. Almost 70% of participants (n=66) reported living within the target zip codes (67203, 67208, 67211, 67214, 67218). The zip code 67208 was added during data analysis, as it is a zip code recognized for high incidence of fetal/infant mortality deaths in Wichita. Over 20% (n=22) of adult females reported they were either planning to be pregnant within 12 months or had previously been pregnant within the last 12 months. A significant number of attendees (44%, n=44) reported that they had used a tobacco product within the last 12 months (Please note: This question included electronic cigarettes and other vaping devices in the definition of tobacco products).

Please note: Only 99 responses were allowed for the above estimates. Six were removed from analysis for being outside of the Wichita area and one participant did not complete all of the questions.

Another goal was to garner support for future policy initiatives that KAFP and TFW plan to move forward on to reduce the impact of tobacco ads, based on input from the community. This was accomplished by discussing the policy options in a meaningful way and allowing for feedback from participants, which was recorded for future use. The discussion resulted in mostly positive, thoughtful comments (1,000 total comments estimated) from attendees and even produced suggestions of other evidence-based policy options that were not even brought up by staff or health educators. The policy option “voting” activity at the end of the events resulted in 90 votes in support of updating the Youth Access Ordinance to include electronic cigarette and hookah retailers; 65 votes for limiting the distance tobacco retailers could be from schools to more than 1,000 feet; 63 votes for restricting advertisements at retail locations, and 60 votes supporting prohibition of tobacco discounts in Wichita. Some attendees thanked TFW and KAFP for bringing attention to this issue and asked for more information on how they could get involved with the initiative in the future.

4. How did you measure your goals?

KAFP tracked the number of participants in two ways: The survey was provided to all adult participants, which allowed staff to count individual responses and analyze the data using Survey Monkey - Professional Edition. However, since the survey was not administered to youth (as it would have required parental consent) staff tracked the number of incentives given out to youth to get an accurate count of those who participated in the conversations. KAFP also tracked the number of flyers distributed and social media reach, as well as counts from community partners who shared events information through their listservs and social media pages. Nye and Associates tracked paid media reach on Facebook and other advertisements and reported it to KAFP. Comments and policy support “votes” were recorded and are currently being combined and uploaded electronically for data coding in the near future.

5. How did this project benefit your chapter/residency? Please provide examples.

This project benefited the Kansas Chapter by allowing staff to discuss the impact of tobacco advertising directly with members of the community who most affected by it. It also gave staff a chance to solicit feedback from the community we serve. Marginalized populations, such as the ones addressed with this project, are often not consulted in the process of policy development. From talking with community members about the issue, KAFP staff and TFW will be able to undergo strategic planning from an informed point of view to decide on next steps for interventions based on this input. KAFP and TFW will also be able to share the feedback with policymakers and reach out to the same communities for support when a policy initiative has been decided upon.

6. What challenges did you face implementing your project and how did you overcome them?

The main challenge with this project stemmed from low attendance at some of the events despite well-planned and well-executed promotion and providing food, incentives, and door prizes. However, KAFP staff were able to partner with different community organizations and use different methods for talking with the public (formal meeting versus brief discussions at previously organized events) in order to reach our overall goals.

Another challenge arose from scheduling difficulties at certain locations around the city. KAFP staff tried to arrange the events within the tobacco swamps or in schools with several tobacco retailers within 1,000-feet. However, two of the events were located just outside of the desired region due to scheduling conflicts. The start time for two events had to be altered to a later time for this same reason, which also could have affected attendance.

Describe how other chapters/residencies could learn from your project.

7. Do you think that your project could be easily adapted by other chapters/residency programs? Why or why not?

This project could be easily adapted by other chapters or residencies. KAFP and TFW utilized community partnerships to achieve the goals for this project, which can be done in any location. The process we chose and the number of events could be altered to be less detailed and include fewer people. However, arranging community events to talk with the people we serve is easily replicable. The discussion was planned out so it served all of our needs without treating the attendees like they were under a microscope. Even the tobacco retailer audit that TFW performed in 2014 could be replicated by other programs by using the Health Landscape mapping program to determine location patterns of retailers or using our retailer audit form to collect information about advertising practices.

8. What recommendations would you have for other chapters/residencies who want to replicate your project?

KAFP staff recommends that other programs start by determining what data sources are already available in your community regarding tobacco retailers. States, counties, and cities that require tobacco retailer licensing could help determine how many retailers are located in a specified region, as well as their physical addresses to help with mapping. This would help plan an audit or determine patterns in respect to targeted populations in that area. Also, working with local agencies that track this type of information is useful. KAFP staff was fortunate to partner with the City of Wichita Department of Environmental Health, which has the authority to check compliance with underage tobacco sales. This information, as well as compliance statistics, helped inform our questions on our retailer audit form. Collection of local data, if it is not collected elsewhere, is imperative to this type of initiative, particularly in areas where the political climate is not readily supportive of tobacco policies.

Counter Tobacco is a national organization that helped start the tobacco retailer strategy movement. TFW received funding in 2013 to work with this organization, and they have a lot of resources and information on evidence-based strategies that are very beneficial.

Pictures from Events:



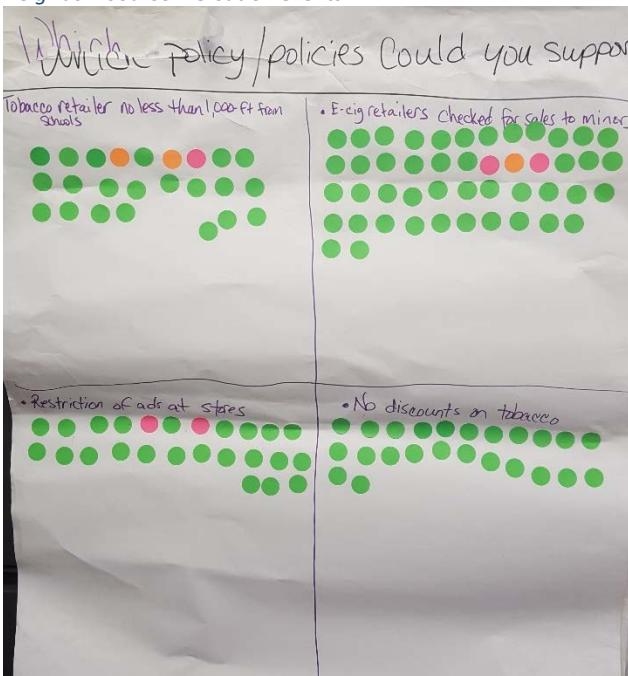
Attendees listen to a presentation about tobacco advertising tactics at Neighborhood Conversation #1 on 03/03/16 (Location: HealthCore Clinic (FQHC))



Health Educators discuss tobacco advertising with individual participants at Neighborhood Conversation #2 on 03/03/16 (Location: Caldwell Elementary)



Volunteers provide participants with thank you gifts, snacks, and educational materials to attendees of Neighborhood Conversation events.



Example of Neighborhood Conversation Policy Support "voting" board

Contact Information

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NOTE: AAFP would like to help disseminate your good work by sharing your project with others via the AAFP Mini-grant web page. Please indicate whether you consent to AAFP sharing on its website your project results, final report and contact information. Yes No