Elevating Community Voices to End the Sale of Flavored Tobacco Products Through Use of a Community Action Model

Amanda Ng, nga@washtenaw.org
Washtenaw County Health Department

Minou Jones, mjones@umakeitcount.org
Making It Count Community Development Corporation

Mary McGhee, mmcghee@grurbanleague.org
Urban League Of West Michigan
Overview of Presentation

• How the Community Action Model (CAM) can be used within other models or frameworks
• What is the CAM and why use it?
• Review of the 5 Steps of the CAM with examples
• Where are we now and what comes next?
• Questions
Can it work with other models?

The Community Action Model can be used within and part of other methods that are implemented.

**Example:** Strategic Prevention Framework, Substance Abuse and Mental Health Services Administration

→ Capacity Phase: Builds community capacity and expands the network of community members.
Community Action Model (CAM)

• A 5-step, community-driven model designed to build communities’ capacity to address health disparities through mobilization.

• The goal = provide communities with the framework necessary to acquire the skills and resources to plan, implement, and evaluate health-related actions and policies.

(Lavery, et. al, 2005)
Why do this work?

★ Reinvigorates the work of the public health professional
  • Builds trust
  • Builds Relationships
  • Successful use of the community voice
  • Empowers the community – community leads the work

★ Sustainability and transfer of knowledge
  • Ensures community level work continues when there is agency staff turnover.
  • Model can be used to address other community health priorities
Items to Consider:

1. Does your community have a coalition?  
   ◦ Are you currently connected to their work?

2. What model/framework does the coalition use?

3. What are the needs as it applies to the Community Action Model?  
   ◦ Are you looking to mobilize the community?  
   ◦ Build infrastructure?
Step 1: Train Participants, Name the Issue, Choose the Area of Focus

Training source: Center for Black Health and Equity 5-part training series
- Historical timeline of tobacco and the impact on African Americans
- Tobacco advertising and marketing
- Coalition readiness
- Community readiness
- Strategic planning

Name the issue:
- Tobacco advertisement and marketing has led to increased use of menthol use among African Americans, LGBTQ, Latino, and other underserved populations.
- Tobacco companies are targeting youth with flavored tobacco products.
Step 2: Define, Design, and Do Community Diagnosis

Adult current smoking rates in Detroit and Other Counties in Michigan By Race, BRFSS-2018-20

- Detroit City:
  - White: 18%
  - Black: 21.2%
  - Other: 25.4%

- Wayne Exc. Detroit:
  - White: 19.5%
  - Black: 14.6%
  - Other: 19.2%

- Kent Co:
  - White: 14%
  - Black: 19.4%
  - Other: 28.8%

- Oakland Co:
  - White: 13.3%
  - Black: 9.2%
  - Other: 10.2%

- Statewide:
  - White: 18.3%
  - Black: 20.2%
  - Other: 21.4%
Death Rate from Some Tobacco Related Diseases (by 100,000 population) in Detroit Compared to Other Counties. Vital Statistics 2020

<table>
<thead>
<tr>
<th>County</th>
<th>Lung Cancer</th>
<th>Heart Attack</th>
<th>Stroke</th>
<th>COPD</th>
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<td>City of Detroit</td>
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<td>30.9</td>
<td>52.5</td>
<td>34.6</td>
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<tr>
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<td>33.6</td>
<td>55.3</td>
<td>44.4</td>
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<tr>
<td>Kent County</td>
<td>37.1</td>
<td>10.2</td>
<td>35.6</td>
<td>33.9</td>
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<tr>
<td>Oakland County</td>
<td>37.9</td>
<td>30.0</td>
<td>68.1</td>
<td>44.0</td>
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</tbody>
</table>
Step 2: Define, Design, and Do
Community Diagnosis

**Problem:** Tobacco Marketing and Advertisement has led to increased use of menthol and flavored tobacco products in Michigan causing a disparate impact on BIPOC communities and youth.

- Preemptive language does **not** allow local communities to restrict the sale of menthol and flavored tobacco sales.
- Michigan does **not** currently require retailers to have a license to sell tobacco products.
- Michigan does **not** currently have a ban on flavored tobacco products.

**Solution:** Restrict the sale of all flavored tobacco products in Michigan including Menthol.

**Action:** Join the Keep MI Kids Tobacco Free Alliance to partner with other key stakeholders in working to pass comprehensive legislation to improve tobacco control efforts in Michigan.
Step 3: Analyze Results of Community Diagnosis

Two-thirds of respondents support ending the sale of menthol flavored tobacco

Current tobacco users and non voters form the largest groups of opposition. At the same time voters tend to skew more in favor of a ban than the general population. This is helpful in the context of both a ballot initiative and in talking to local elected officials.

Support Ending the Sale of Menthol Flavored Tobacco

*Gen Pop*

<table>
<thead>
<tr>
<th>Support</th>
<th>63</th>
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</thead>
<tbody>
<tr>
<td>Strongly Support</td>
<td>34</td>
</tr>
<tr>
<td>Somewhat Support</td>
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</table>

<table>
<thead>
<tr>
<th>Oppose</th>
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</tr>
</thead>
<tbody>
<tr>
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<td>20</td>
</tr>
<tr>
<td>Somewhat Oppose</td>
<td>18</td>
</tr>
</tbody>
</table>

Support:
- 45+ (68%)
- Voters (66%)
- Former Tobacco Users (69%)
- Never Used Tobacco (70%)

Oppose:
- Current Tobacco Users (55%)
- Non Voters (57%)
There is a deep concern about tobacco usage amongst youth

There is a correlation between voting and concern about youth using tobacco, suggesting that voters are especially concerned about the issue.

**Concern About Youth Using Tobacco**  
*(Gen Pop)*

- **Concerned:**  
  - Female (88%)  
  - Voters (88%)

- **Very Concerned:** 46
- **Somewhat Concerned:** 38

- **Not Concerned:**
  - Male (22%)
  - Hispanic (24%)
  - Current Tobacco User (23%)
  - Non Voter (38%)

- **Concerned:**
  - Not very concerned: 10
  - Not at all concerned: 7

- **Not Concerned:**
  - Not at all concerned: 7

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**Source:** Image description

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**Note:**

- The data on concern about youth using tobacco is divided into two categories: Concerned and Not Concerned.
- Within the Concerned category, it is further divided into Very Concerned and Somewhat Concerned.
- The Not Concerned category includes specific subcategories based on gender, race, and tobacco use status.
Four out of five respondents support a ban on tobacco products appealing to youth

In looking more closely at the level of support, over half of respondents strongly support the ban.

Prohibition of Tobacco Products Appealing to Youth

(Generational Population)

Support:
- Female (83%)
- 65+ (85%)
- Former Tobacco User (86%)
- Never Used Tobacco (84%)
- Voter (82%)

Oppose:
- Current Tobacco Users (37%)
- Non Voter (45%)
- LGBTQ (39%)

“Many states and localities have passed policies that prohibit the sale of all flavored tobacco products, including fruit and candy-flavored e-cigarettes and nicotine vaping products, menthol-flavored cigarettes, flavored cigars, and other flavored tobacco products. Do you support or oppose this policy to prohibit the sale of all flavored tobacco products that can appeal to youth?”
Step 4: Select Action or Activity and Implement

- Activate coalitions
- M[END]THOL media campaign
- Community education
  - No Menthol Sunday
  - Take Down Tobacco
- Education of elected officials
  - Biweekly outreach
  - Lunch and Learns
- Draft of model policy language

- Collect Resolutions of Support
  - Individual and organization resolutions (Tobacco Free Michigan)
  - Elected official resolutions

- Introduction of Legislative Bill Package
  - Identify community champions
  - Identify bill sponsors
The West Michigan Health Equity Coalition (WMHEC) is comprised of state and local representatives, nonprofits, and other community organizations who work together to help end the health disparities that disproportionately harm Black/African American and other minority communities.

**Mission:** To promote health equity and eliminate health equity disparities in West Michigan. Through collaboration, education and advocacy, we strive to reduce tobacco use, prevent tobacco related diseases, and ensure equitable access to resources and support for all individuals and communities.

**Vision:** Seeking to end the sale of all flavored tobacco and menthol products.

**Consist of 5 Subcommittees:**
- Policy, Legislation, and Research
- Data Governance, Collection, and Evaluation
- Cessation and Health Resources and Promotion
- (Youth) Education and Program Development
- Community Mobilization, Communications, and Event Planning
Step 5: Maintain and Enforce Action or Activity

Maintain:
- Continue coalition building
  - Sub-committee work
  - Expand networks
- Update partners
- Continue education of leaders and officials
- Leverage media

Enforcement:
- Plan for who will enforce
- Varies depending on state vs local level
Evidence-Based Tobacco Policies that are needed:

1. Tobacco Retail Licensing - for compliance, graduated fines, and purchase, use possession (PUP) removal

2. Taxation on vaping products and tax parity to ensure public health benefit in cessation and avoid product switching

3. Removing the sale of all flavored tobacco products, including menthol

4. Removal of preemption so local authorities may regulate tobacco for their specific communities
Education & Action

Local Governments and Boards:
- Resolution of Support

Organizations/Coalitions:
- Join the Keep MI Kids Tobacco Free Alliance
- Educate about evidence-based tobacco policies
- Non-lobbying Letter of Support

Individuals:
- Call your elected official on YOUR OWN time
- Share items on social media

Keep MI Kids Tobacco Free:
Scan to Sign the Petition

Resources:
- www.keepmikidstobaccofree.com/
- www.stopflavors.org
- MDHHS Online Tobacco Resource Library (michigan.gov)
Questions?

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Resolutions or Letters of Support

*Not a comprehensive list*

Ann Arbor City Council
Church Without Walls
Detroit City Council
Flint City Council
Flint Development Center
Flint’s Chapter of National Alliance on Mental Illness
Genesee Health Center
Hurley Medical Center

MI Association of Local Public Health
MI School Health Coordinators Association
Mott Children’s Health Center
U.S. Conference of Mayors
Washtenaw County Board of Commissioners
Washtenaw County Board of Health
Wayne County Commission
Wayne State University
Community Action Model:

Strategic Prevention Framework: