

Community Grants Strategy 2010 Evaluation Findings

Introduction

This report is part of a series developed to provide updates on the progress of the Missouri Foundation for Health's Tobacco Prevention and Cessation Initiative (TPCI). The report provides an overview of the activities and short-term outcomes that occurred in 2010 as part of the Community Grants Strategy. Data for this report are taken from the Tobacco Initiative Evaluation System (TIES), a web-based database for grantees to enter data required for the Initiative evaluation. This and previous evaluation reports are available at <http://ctpr.wustl.edu/tpciproducts>.

Community Grants Strategy Overview

In 2010, five different programs were implemented as part of the TPCI Community Grants Strategy. This section provides a summary of who received grants and where they targeted their efforts.

Campus-Community Alliances for Smokefree Environments (CASE)

- College and community leaders worked together to change policies to increase smokefree workplaces and access to cessation resources.
- 7 community grantees
- 52 sites

During 2010, the TPCI Community Grants Strategy included: **46** grantees who worked at **367** workplace, school and community sites in **64** Missouri counties, and were involved in **27** policy changes.

Teens Against Tobacco Use (TATU)

- Teens learned about the effects of tobacco use and developed skills to teach younger children about tobacco use.
- 5 community grantees
- 43 sites

Smokebusters

- Teens learned about the effects of smoking, how to communicate this knowledge to the public, and how to advocate for policy change.
- 8 community grantees
- 81 sites

Community Grants Strategy Overview (continued)

Freedom from Smoking (FFS)

- Community members and employees learned strategies to help quit smoking and remain smokefree.
- 15 community grantees
- 166 sites

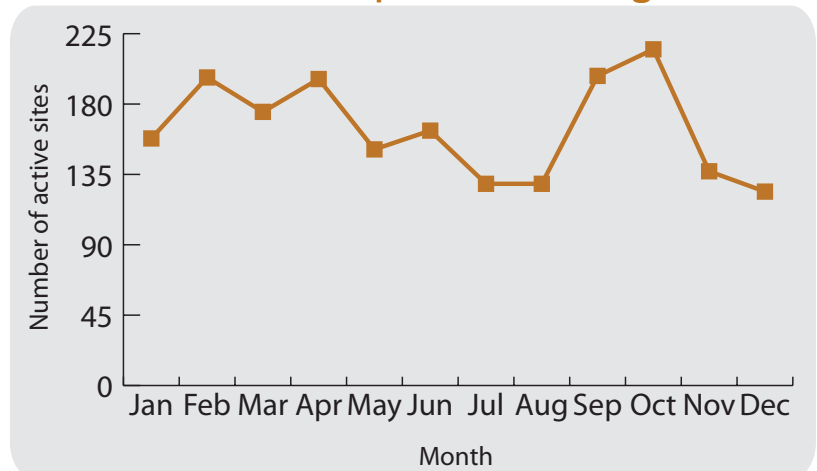
Community-Based Cessation

- Grantees worked towards one of the following goals: change systems and networks to encourage or support individuals to make healthy behavior choices related to tobacco use; promote existing cessation services in communities; or increase access to cessation services in communities.
- 11 community grantees
- 25 sites

How many community grant sites were involved in TPCI in 2010?

A total of 367 community grant sites were active during at least one month in 2010. A site was considered active during any given month if it was involved in at least one programmatic/policy activity. On average, sites were active for six months during the year, one more month than in 2009. A total of 153 new sites joined the Community Grants Strategy efforts during 2010, with an average of 13 new sites every month. The line graph to the right shows the number of active sites per month during 2010. At the beginning of the year, there were 158 active Community Grants Strategy sites. The number of active sites was lower during the summer months, particularly July and August, which is attributable to inactivity in school sites because of summer break. The number of active sites was highest during October, due mostly to sites implementing cessation programs. The year ended with 124 active sites in December.

Number of active sites per month during 2010



Where were the community grant sites in 2010 located?

As shown on the map on the page three, sites implemented activities throughout most of the MFH coverage area, with higher concentrations in the Bootheel, central and southwest regions. The Bootheel and southwest regions in particular had more active sites in 2010 than during the previous year, while the St. Louis area had fewer active sites in 2010 compared to 2009. Active sites were located in 64 different Missouri counties. In 2010, three counties no longer had active sites, in comparison to the previous year. However, nine counties that did not have TPCI activities in 2009 became active.

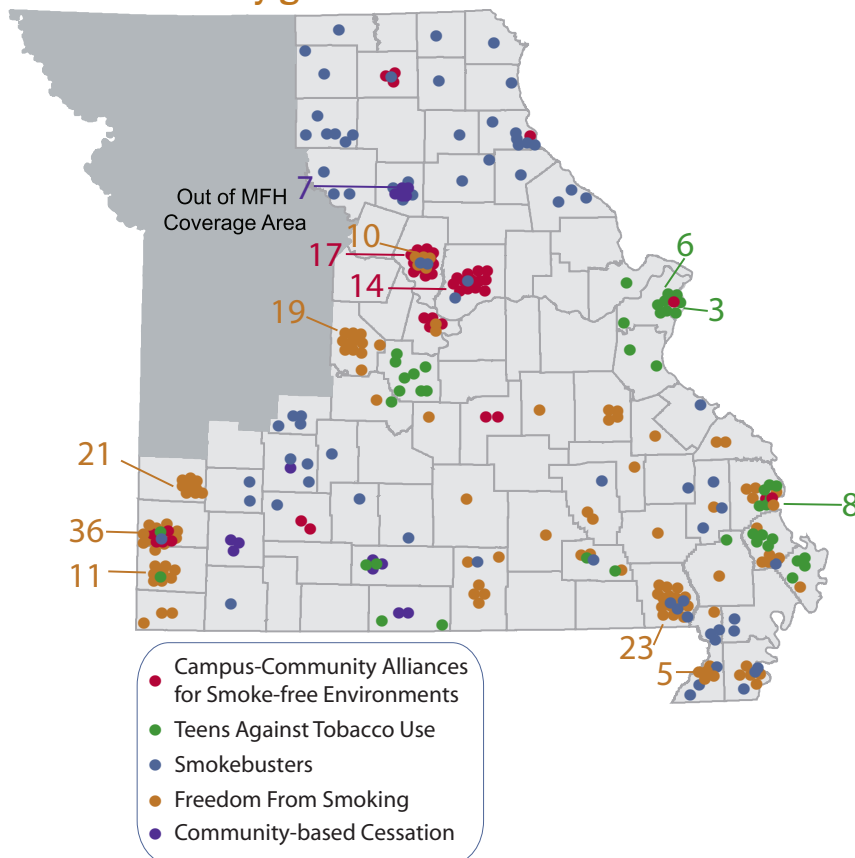
Activities and Outputs

What activities were community grant sites involved with in 2010?

The goal of the Community Grants Strategy is to reduce tobacco use and secondhand smoke exposure within communities served by MFH. To achieve this goal, community grantees engaged in various capacity-building, educational, cessation, and advocacy activities within their local communities. Activities fell into four categories, described below:

- **Capacity-Building:** conducted by grantees to prepare sites for implementing their programs
- **Education:** conducted to increase knowledge or skills to prevent tobacco use
- **Advocacy:** argued for, recommended, or defended policy change regarding tobacco issues (e.g., policies to reduce exposure to secondhand smoke)
- **Cessation:** implemented at a worksite or in a community to increase cessation

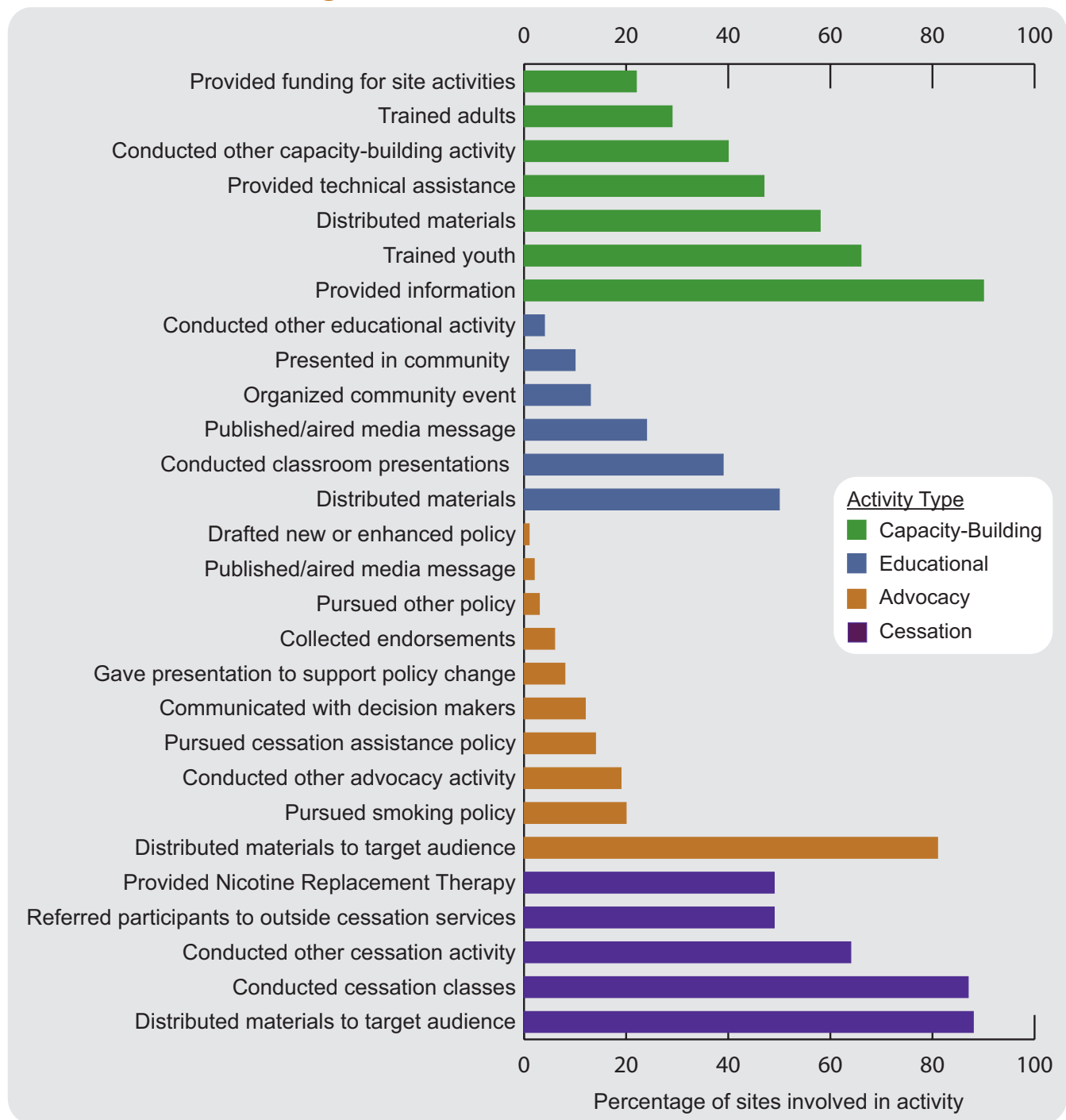
TPCI community grant sites active in 2010



These four categories encompass a wide range of activities, from training youth (capacity-building) to pursuing a smoking cessation policy (advocacy). The graphic on the next page shows the percentage of sites involved in specific activities within the four categories. Note that not all sites were funded to implement each of these activities. Therefore, the percentages reflect the number of sites involved in each activity out of the total number of sites that could have possibly implemented the activity.

Most sites provided capacity-building information, while the smallest number of sites were involved in advocacy activities, particularly drafting a policy or collecting endorsements. However, more sites distributed materials to their target audience as part of their advocacy activities in 2010 compared to 2009 (81% versus 68%, respectively). It should be noted that some intermediate advocacy activities (e.g., holding a coalition meeting) may not have been captured by the version of TIES used to collect data during this time period. Therefore, numbers of advocacy activities conducted may be higher than evidenced by current available data. The percentage of sites that conducted cessation classes also increased in 2010 compared to 2009 (87% versus 68%).

Percentage of sites involved in capacity-building, educational, advocacy, and cessation activities during 2010



What was the reach of the activities implemented by community grant programs in 2010?

The table to the right shows estimates of the number of people reached by or involved in several of the community grant program activities. These numbers are not mutually exclusive. That is, an individual might have attended a community awareness event and also received an educational brochure.

Overall, more people were reached by advocacy and cessation activities than by educational activities, when educational media message reach is not included.

The table also compares the reach in 2010 to 2009. Reach for all youth-led educational activities was down in 2010 compared to 2009. However, reach for three out of five measured advocacy activities and both cessation activities increased in 2010 compared to the previous year.

Reach of TPCI community grant programs in 2010

Capacity-Building	Total [*]	Compared to 2009 ^{**}
Trained adults	1,668	↑ 22%
Trained youth ^a	893	↓ 34%
Provided funding	\$63,396	↓ 55%
Youth-led Education	Total [*]	Compared to 2009 ^{**}
Distributed brochures or other materials ^a	14,473	↓ 44%
Conducted classroom presentations ^a	14,143	↓ 33%
Presented in the community ^a	2,043	↓ 46%
Organized community awareness event ^a	5,174	↓ 69%
Published or aired educational media messages ^a	2,000,810	↓ 93%
Advocacy	Total [*]	Compared to 2009 ^{**}
Distributed materials to target audience ^b	21,042	↑ 64%
Presented in the school or community ^a	864	↑ 41%
Published or aired media messages encouraging policy change ^a	341	↓ 91%
Collected endorsements ^a	406	↑ 263%
Communicated with decision makers ^a	85	↓ 61%
Cessation	Total [*]	Compared to 2009 ^{**}
Distributed materials to target audience ^b	48,822	↑ 72%
Referred participants to outside cessation services, provided nicotine replacement therapy, or conducted cessation classes ^b	3,376 ^c	↑ 19%

^{*} Unless otherwise specified, totals are an estimate of the number of people reached by or involved in each activity. *Note:* For numbers related to media messages it is an estimate of the number of "hits" a message may have had (*i.e.*, an individual may have heard the message more than once).

^{**} Change in reach compared to 2009.

^a Reach for this activity was only collected by school-based programs.

^b Reach for this activity was only collected by worksite- and community-based programs.

^c This is the total number of people who received *at least one* of the cessation services/resources.

Outcomes

What were the quit rates of community grant cessation programs during 2010?

Grantees followed-up with program participants at 3, 6, and 12 months after a cessation class. Quit rates were calculated by dividing the number of participants who reported not using tobacco in the last seven days by the number a grantee attempted to contact for follow-up. The table to the right presents quit rates for each follow-up time period. As a comparison, studies have estimated that 6 month quit rates among untreated smokers range from 6% to 12%.

Quit rates for community grant cessation programs during 2010

Time Since Program Completion	Follow-ups Attempted	Reported Abstinent*	Quit Rate**
3 months	898	300	33%
6 months	444	138	31%
12 months	201	54	27%

* The number of participants who reported not using tobacco during the 7 days before the survey.

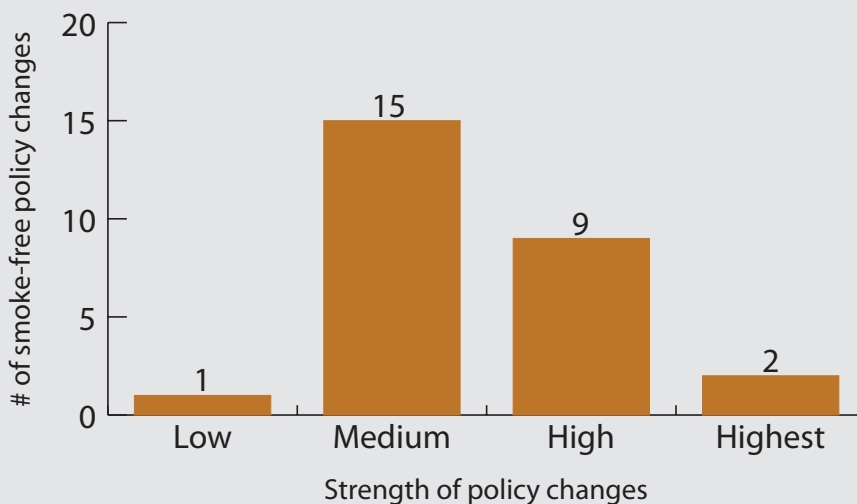
** This is the intent-to-treat quit rate, which assumes those not reached for follow-up are tobacco users. It is a conservative estimate.

Note: One program reported significantly higher quit rates than others. That program's data are not included here. A case study about the program will be developed.

What policy changes occurred during 2010?

Grantees were involved in helping to pass 27 smokefree policy changes during 2010. Some of these policy changes will go into effect during 2011 or later. Once all of the policy changes are implemented, they will affect more than 70,000 people. The graphic below presents the number of smokefree policy changes, categorized by strength. Smokebusters grantees in the northeast region reported 12 of the policy changes. The majority of the smokefree policy changes (93%) were passed at worksites or schools. Eight of the smokefree policy changes included provisions for cessation-related assistance from the employer (*e.g.*, allowing employees time during work hours to attend cessation classes), compared to four in 2009. Two of the smokefree policies were community-wide, and one policy created a smokefree city park. Two worksite policies did not include a smokefree component, but did include provisions for cessation-related assistance from the employer.

Number of smokefree policy changes TPCI community grantees were involved with during 2010, by strength



Levels of Strength for a Policy Change

Low- The policy applies to one area of the facility (*e.g.*, offices, breakroom, a section of a restaurant).

Medium- The policy applies to all indoor areas of a facility with no exemptions; it applies to all employees, patrons, and visitors. OR It applies to the entire campus of the facility, only some of the time.

High- the policy applies to the entire campus of the facility (inside and outside of the property) with no exemptions; it applies to all employees, patrons, and visitors.

Highest- the policy is a community-wide smokefree workplace policy.

Below, two policy changes that occurred in 2010 are highlighted in order to provide a more descriptive example of the policy work conducted by TPCI grantees.

Policy Profile: Smokefree Worksite Campus and Cessation Assistance

Grantee: Randolph County Health Department

Site: General Electric Capital Corporation

Location: Moberly; Randolph County; Central Missouri

In October 2010, GE Capital Corporation, a large employer in Moberly, passed a smokefree policy that includes all indoor facilities, the entire campus, and all company vehicles. The policy applies to all employees as well as visitors to the facility. In addition to protecting employees and visitors from secondhand smoke, the policy also states that GE Capital Corporation will assist their employees with quitting smoking in several ways: provide financial coverage for cessation services, provide self-help materials for cessation, allow employees time to attend cessation classes during work hours, and offer cessation classes on site.

Randolph County Health Department helped GE Capital Corporation pass this policy by providing informational resources and data that assisted the employer throughout the process. They continue to offer encouragement and assistance, although the company has had little complaint and no violations of the new policy. For the full text of this policy, please contact Danielle Pauley at dpauley@wustl.edu.

Policy Profile: Community Smokefree Policy

Grantee: National Council on Alcoholism and Drug Abuse-St. Louis Area

Site: City of Creve Coeur

Location: St. Louis County; St. Louis Metro Region

In November 2010, the Creve Coeur City Council passed a comprehensive smokefree policy for the entire community, with the exception of the local VFW Hall. Students involved in the Teens Against Tobacco Use (TATU) program at Westminster Christian Academy worked with the supporting Council Member and Creve Coeur Mayor on the ordinance. TATU students on the Poster Squad held posters about the ordinance at the City Council meetings, and several students spoke at the meetings to show their support of a tougher ordinance. For the full text of this policy, please contact Danielle Pauley at dpauley@wustl.edu.

For more information about this report or other evaluation activities, please contact:

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