MFH Tobacco Prevention and Cessation Initiative

Community Grants Strategy 2005-2010 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 between 2005 and 2010. Several changes to the TPCI structure occurred during this time period. In 2009, changes to the Initiative's structure included:

- The end of the regional and community grantee structure.
- The integration of School and Worksite Strategies into one Community Grants Strategy.

Data for this report are primarily taken from the Tobacco Initiative Evaluation System (TIES), a web-based database for grantees to enter data required for the Initiative evaluation. Grantees began entering information in the database in January 2007. Activity data for 2005 and 2006 were collected from grantees retrospectively and in aggregate (*i.e.*, activity data are not available by site for this time period). This and previous evaluation reports are available at http://ctpr.wustl.edu/tpciproducts.

Community Grants Strategy Overview

During 2005 through 2010, seven different programs were implemented as part of the TPCI Community Grants Strategy. This section provides a summary of the programs that were implemented and the number of grantees and sites involved with the programs.

<u>Campus-Community Alliances for</u> <u>Smokefree Environments (CASE)</u>

• College and community leaders worked together to change policies to increase smokefree workplaces and college campuses, and access to cessation resources.

Community-Based Cessation

During 2005-2010, the TPCI Community Grants Strategy included 71 grantees who worked at 859 workplace, school and community sites in 75 Missouri counties, and were involved in 101 policy changes.

• Grantees selected 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.

Community Grants Strategy Overview (continued)

Employer Tobacco Policy Project

• Employers were surveyed to assess their interest in strengthening their workplace tobacco policies and were provided toolkits with more information.

Freedom from Smoking (FFS)

• Community members and employees learned strategies to help them quit smoking and remain smokefree.

Smokebusters

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• Teens learned about the effects of smoking, how to communicate this knowledge to other youth and the public, and how to advocate for policy change.

Teens Against Tobacco Use (TATU)

• Teens learned about the effects of tobacco use and developed skills to teach younger children about the dangers of tobacco use.

Youth Empowerment in Action (YEA!)

• Youth participated in a program to empower them to make their own decisions through media literacy education and hands-on media production.

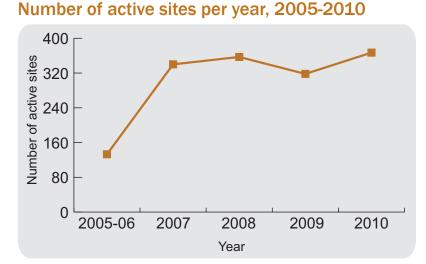
	2005-	2006	200	7	20	08	20	09	20	10	2005-	2010
Program	Grantees	s Sites	Grantees	Sites	Grantees	s Sites	Grantees	s Sites	Grantees	s Sites	Grantees	Sites
CASE	2	6	2	13	2	14	7	38	7	52	8	56
Community- based Cessation	0	0	0	0	0	0	3	10	11	25	11	30
Employer Policy Project	2	0	2	51	2	8	0	0	0	0	2	58
FFS	11	26	16	114	17	163	16	111	15	166	22	403
Smokebusters	4	42	5	42	7	59	5	58	8	81	12	94
TATU	10	51	14	102	14	92	10	101	5	43	15	187
YEA!	1	8	1	18	1	21	0	0	0	0	1	31
Total	30	133	40	340	43	357	41	318	46	367	71	859

Number of grantees and sites by program, 2005-2010

How many community grant sites were involved in TPCI between 2005 and 2010?

A total of 859 workplace, school and community sites were active for at least one month during the 2005-2010 time period. A site was considered active during any given month if it was involved in at

least one programmatic/policy activity. Between 2005 and 2010, sites were active for an average of eight months and an average of sixteen new sites joined every month. The line graph to the right shows the number of active sites per year. Between 2005 and 2006, there were 133 active community grant sites. In 2007, the number increased markedly to 340 active sites. The number of active sites remained high (*i.e.*, more than 300) for the subsequent reporting years.



Where were the 2005-2010 community grant sites located?

As shown on the map, sites implemented activities throughout most of the MFH coverage area, with higher concentrations in the Bootheel, St. Louis City/County, central, and southwest regions. Active sites were located in 75 different Missouri counties. Of these counties, 57 had TPCI grantees who implemented

TPCI community grant active sites, 2005-2010 Number of Sites 0 - 4 5 - 12 13 - 27 28 - 48 Out of MFH Coverage Area 49 - 103

multiple program types. In particular, eleven of these counties had four or more TPCI community programs implemented sometime between 2005 and 2010 (see table on next page).

Missouri counties with four or more TPCI community grant programs, 2005-2010

	CASE	Employer Policy Project	FFS	Smokebusters	TATU	YEA!
Adair	\checkmark	√	\checkmark	√		
Boone	\checkmark	\checkmark	\checkmark	\checkmark		
Butler		_ √ _	√	<u>√</u>	_ √ _	
Cape Girardeau	<u> </u>	_ √ _	√		_ √ _	
Dunklin		<u>√</u>	√	✓	_ √ _	<u> </u>
Jasper	<u> </u>		<u>√</u>	✓	<u>√</u>	
New Madrid		<u>√</u>	<u>√</u>	<u>√</u>	_ √	
Pemiscot		_ √ _	✓	_ √ _		<u> </u>
Scott		_✓	\checkmark	_ √	_ √ _	<u> </u>
St. Louis	_ √ _		√		_ √	<u> </u>
Stoddard			\checkmark		√	_ √

Activities and Outputs

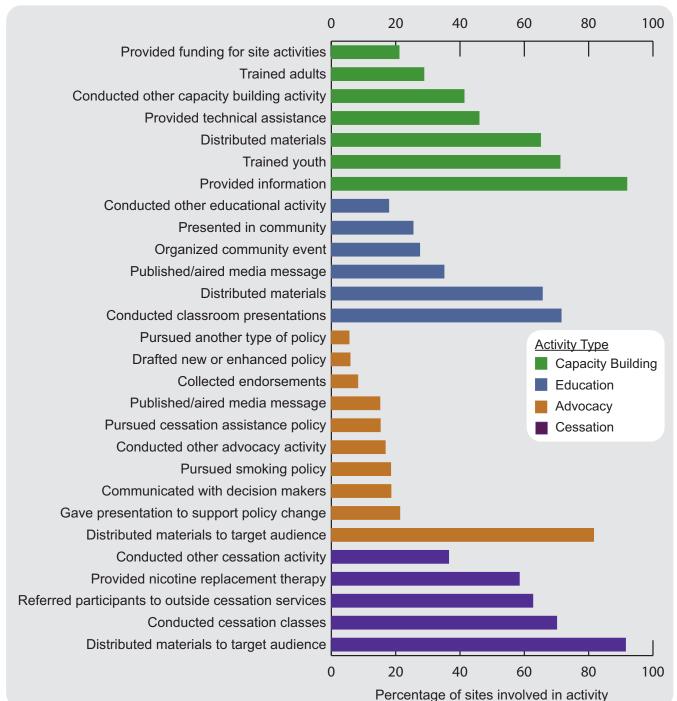
What activities were community grant sites involved with in 2005-2010?

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

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

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 in 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 implemented the activity.

Most sites provided capacity building information and materials to their target audiences. There were comparatively fewer sites that implemented advocacy activities. 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.



Percentage of sites involved in capacity building, educational, advocacy, and cessation activities, 2007-2010

Activities and Outputs (continued)

What was the reach of the activities implemented by community grant programs in 2005-2010?

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 may have attended a community awareness event and received an educational brochure. Additionally, an individual may have been involved in the same activity for two or more months and therefore counted more than once.

Overall, more people were reached by educational and cessation activities than by advocacy activities. Again, note 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.

Reach of TPCI community grant programs, 2005-2010

Total [*]	Capacity Building				
3,908	Trained adults				
8,592	Trained youth ^a				
\$530,347	Provided funding				
Total⁺	Education				
111,424	Distributed brochures or other materials ^a				
128,031	Conducted classroom presentations ^a				
67,794	Presented in the community ^a				
85,007	Organized community awareness event ^a				
35,953,780	Published or aired educational media messages [®]				
Total [*]	Advocacy				
79,165	Distributed materials to target audience ^b				
17,448	Presented in the schools or community ^a				
760,158	Published or aired media messages encouraging policy change				
9,308	Collected endorsements ^a				
-,					
10,892	Communicated with decision makers ^a				
· · · ·					
10,892	Communicated with decision makers ^a				
10,892 Total [*]	Communicated with decision makers ^a Cessation				

Unless otherwise specified, totals are estimates 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).

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

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

°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 between 2007 and 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 followup time period. As a comparison, studies have estimated that 6-month quit rates among untreated smokers range from 6% to 12%. Based on the TPCI 6-month quit rate and utilization of cessation services, an estimated 1,185 people quit using tobacco. This takes into account a 35% relapse rate.

Quit rates for community grant cessation programs, 2007-2010

Time Since Program Completion	Follow-ups Attempted	Reported Abstinent [*]	Quit Rate [™]
3 months	2555	784	31%
6 months	1532	417	27%
12 months	1063	208	20%

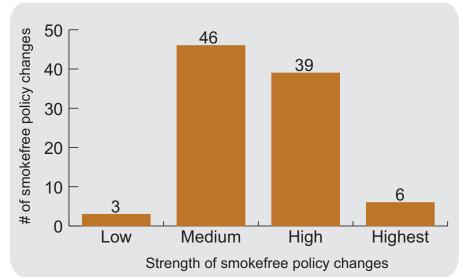
The number of participants who reported not using tobacco during the 7 days before the survey.

"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: In 2009 and 2010, 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 2005-2010?

Grantees were involved in helping to pass 101 policy changes from 2005 through 2010. Of these policy changes, 94 were smokefree policy changes and seven were solely cessation-related policy changes (*e.g.*, allowing employees time during work hours to attend cessation classes). The graphic below presents the number of smokefree policy changes, categorized by strength. The majority of the smokefree policy changes (94%) were passed at worksites or schools. Thirteen of the 94 smokefree policy changes also included provisions for cessation assistance from the employer.



Number of smokefree policy changes TPCI community grantees were involved with during 2005-2010, 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.

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

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