

Tobacco Education and Research Oversight Committee (TEROC) Meeting Minutes

**Tuesday, December 3, 2019
8:30am – 3:00pm**

Location

The Westin Los Angeles Airport
5400 West Century Blvd
Los Angeles, CA 90045

Members present: Dr. Michael Ong (chair), Ms. Mary Baum, Ms. Vicki Bauman, Mr. Primo Castro, Ms. Patricia Etem, Dr. Mariaelena Gonzalez, Mr. Jim Keddy, Dr. Pamela Ling, Dr. Wendy Max, Dr. Claradina Soto, Dr. Mark Starr

Members who joined via teleconference: none

Others in attendance:

Chris Anderson (facilitator/writer)
Daniel Barraca, California Tobacco Control Program (CTCP)
Philip Gardiner, Tobacco Related Disease Research Program (TRDRP)
Lauren Groves, CTCP
Norval Hickman, TRDRP
Kristen Mar, CTCP
Carol McGruder, African American Tobacco Control Leadership Council (AATCLC), Alliance for Data Dissemination to Achieve Equity (ADEPT)
Tracy McKnight, TRDRP
Francisco Michel, California Department of Education (CDE)
Mayra Miranda, CTCP
Lou Moerner
Sarah Planche, CDE
April Roeseler, CTCP
Gordon Sloss, CTCP
Rebecca Williams, CTCP
Jenny Wong, CTCP

Others who joined via teleconference: none.

1. Welcome and Introductions

The TEROC chair, Dr. Michael Ong, called the meeting to order. TEROC members and guests introduced themselves. The chair introduced Chris Anderson, facilitator and writer for the 2021-23 TEROC Plan.

2. Agenda and Timeline

The facilitator/writer reviewed the meeting agenda and timeline for development of the TEROC plan for 2021-23 (Attachment A). The timeline ends with the publication of the new Plan by January 2021, with a debrief in February 2021.

3. New Challenges

The chair shared thoughts on major environment changes and implications for the plan:

- It's good that the adult smoking prevalence is under 10% but California must now lead the way on vaping.
- We have a new governor, so there's an opportunity to help shape his agenda on tobacco.
- We need to "expand our lane" to deal with cannabis.

He noted cultural sensitivities about the term "master plan" and encouraged use of "the Plan" in discussion, but said to comply with statute, "Master Plan" may be needed in the document itself. April Roeseler suggested using a catchy title without "master" and stating in the introduction that document fulfills the mandates of statute Health and Safety Code Section 104370 (f).

The committee and guests provided initial thoughts on the Plan:

- Usefulness
 - TRDRP and CDE grantees often cite the Plan in proposals
 - Helps explain tobacco control priorities to coalitions
 - Highlighting the guiding principles in plan will help orient field
- Form
 - Should be concise, with detail in appendices
 - Interactive, accessible, not just a static printed document
 - Available in a fully electronic version, not just a pdf with links
 - Use infographics
- Content
 - Include data showing where the greatest needs are, report progress on reaching priority populations
 - Summarize in the introduction how much has changed since the last Plan
 - Highlight newsworthy content to attract broader audience
 - Include or link to TEROC's position statements
 - Include or link to relevant state laws
 - Include quick summary of key points in tobacco control history
- Dissemination
 - Develop 1-pagers for various target audiences with relevant, timely bullets
 - Develop a dissemination plan in parallel, so content on hot topics is ready when the Plan is rolled out
- Process
 - TEROC should avoid getting bogged down in wordsmithing
 - Include stakeholder input

TEROC members and guests identified hot topics/new challenges the Plan should address. Attachments B and C were provided as references.

- Cannabis
 - Take lead on addressing public health concerns since no one on the cannabis side focuses on this
 - The many lessons learned in tobacco control can/should be applied to cannabis
 - The cannabis industry is becoming increasingly corporatized
 - Oppose the industry getting involved in public health messaging
 - Support messaging targeting adult use, e.g., negative health effects
 - Advocate removing cannabis as a Schedule 1 drug to enable TRDRP to fund research
 - Address children's exposure to cannabis use in the home
- Wider spectrum of devices and products
 - Support research and programming around preventing kids' exposure to all forms of smoke/aerosol
 - E-cigarette, or Vaping, Associated Lung Illness (EVALI) crisis
 - A silver lining is the increased youth advocacy in response to EVALI
 - Hookah use and its tendency to be seen as an exception

- Purchase, Use, and Possession (PUP) laws and the need to avoid criminalizing youth for possession/use
- The focus on the industry, its development of new devices and products, and the creep toward viewing the industry as a partner
- Update links in plan often because field moves so fast
- Disparities/priority populations
 - Disparities in tobacco use rates despite overall progress (e.g., persistent high rates of smoking among African Americans)
 - Dichotomy between emerging issues that get a lot of attention and ongoing problems that get less
 - New or fast-growing ethnic groups (e.g., Hmong, Laotian, Punjabi, Yemeni) and their unique patterns of tobacco use or co-use
 - CTCF's priority population coordinating centers are developing policy platforms and Public Health Law Center is developing an endgame strategic plan, which could help inform plan
- Capacity building
 - The need for leadership development at local level

4. Vision, Mission and Goals

TEROC considered the vision, mission and goals, using the current Plan as a starting point (Attachment D). The facilitator/writer noted that vision statements usually answer these questions:

- Vision - What is our desired, long-term image of the future?
- Mission - What's our organization's reason for being and how do we express that in action?
- Goals - What broad, intermediate-term outcomes do we aim to achieve?

He also noted that:

- In a tight plan, each level flows from the one above it, with objectives flowing from goals and strategies flowing from objectives.
- The vision is evergreen and doesn't change much, while goals may change as the landscape changes.

Committee and guests provided comments on specific elements of the vision, mission, and goals:

- Vision
 - No changes noted
- Mission
 - Include disparities in mission
- Goal 1: Reduce the overall tobacco product use prevalence to 10 percent for adults and eight percent for high school age youth by December 2020
 - Have not met the 10 percent adult tobacco use goal if all forms of tobacco/vaping products are included. This goal seems within reach.
 - Clarify somewhere in the Plan that all forms of tobacco are included
- Goal 2: Accelerate the reduction in tobacco use prevalence and eliminate tobacco-related disparities among priority populations
 - CTCF measures this (Attachment C, page 6). Rates are accelerating except for African Americans.
 - The real goal is to "effectively inform, engage, and empower stakeholders to help drive" Goals 2 and 3
- Goal 3: Eliminate the structural, political, and social determinants that sustain California's tobacco epidemic
 - It is intended to be aspirational, but is beyond our scope
 - It is difficult to measure
 - "Eliminate" is too strong of a word, and is unachievable

- There is still value in using strong words like social determinants that underpin disparities in tobacco use and that can be targeted through funding and programming. Target the determinants that sustain tobacco use.
- This goal may be too process-oriented. The goal is to empower communities to take the information and use it, or to reach communities that are not being reached.
- It could be better connected to Goal 2 so it is clear that targeting social determinants is how TEROC recommends addressing disparities
- Alternatively, the determinants language could move to the mission section
- CTCP has funded many priority population coordinating centers and has two 5-year evaluation projects working on Goal 3, so it has led to work even though it is harder to measure
- Goals in general
 - Should fall within agency scopes
 - Should be measurable, but numbers are not needed as long as progress can be reported
 - If targets are included, how should they be set? Let's Get Healthy California uses the group with the lowest prevalence as the benchmark (Asian women)
 - The Plan should say how to measure progress, though not necessarily in the goals themselves
 - Some of the genius of measuring comes from field. Don't leave something out just because we're not sure how to measure it.
 - The health disparities piece is critical
 - There is a need to enlarge the circle of tobacco control and to engage new stakeholders to address cannabis and vaping

5. Principles

Next, the committee discussed guiding principles (Attachment D). One issue was whether these should be articulated in the Plan.

- Principles were discussed last time but not included in the final Plan for conciseness
- Historically, principles were a guide for budget priorities, and were included only when resources were limited
- They can also be thought of as core values that are helpful for readers to see
- TEROC has documents that articulate these values and the Plan could link to them

The committee discussed other core values:

- Rapid response
- Local innovation
- Interagency integration/coordination
- Helping other groups, sharing lessons learned (e.g., to inform cannabis efforts). This may fall under strategic alliance
- Continuous performance monitoring

6. Stakeholder Survey

Next, the committee discussed a stakeholder survey on the Plan conducted last summer by CTCP (Attachments E, F). The overall feedback was positive. Most respondents found it was easy to read and understand. There were few "likes" for design/organization and infographics. Some respondents found it too difficult to disseminate to their communities, were unclear how to implement items, and found it too dense/long. Many suggested addressing the whole range of substances, changing formal elements, facilitating collaboration, and helping translate recommendations into practice.

Members and guests provided other reactions to the survey findings:

- A link to the survey was distributed widely, and it is not possible to determine the exact response rate, but it is thought to be low. The 101 respondents who answered may be a skewed sample.
- A focus on priority populations stands out
- Do not disassociate menthol from other flavors
- Respondents were less likely to use the plan for policy and advocacy than for goal setting and grant writing. This may be because TRDRP accounted for nearly half of respondents.
- The Plan should be more accessible and provide guidance to users on how to use it to make the Plan more useful for policy and advocacy
- There were no responses from voluntary agencies. This can be remedied next time by clearly identifying target audience(s) and including them both in developing a dissemination plan and dissemination lists.

7. Target Audience

The committee discussed the target audience for the Plan. Many professional targets were identified:

- TEROC itself – current and future members
- CDPH, University of California, CDE - Senior leadership in each agency, the tobacco program staff, and grantees
- State government - Governor's office, legislature, key aides
- Voluntary agencies – American Health Association, American Lung Association, American Cancer Society, and priority population advocacy organizations
- Local government - counties, cities, zoning commissions
- Prospective allies in California (CA) – Department of Health Care Services (DHCS), First 5 CA, Covered CA
- University of California, San Francisco (UCSF) Smoking Cessation Leadership Center – listserv subscribers and partners
- Smokefree housing groups
- Nontraditional local partners - housing advocates, neighborhood councils, historical districts, labor, etc.
- Legal groups - ChangeLab Solutions and others with stake in tobacco or cannabis policy
- Research community “writ large” – Society for Research on Nicotine and Tobacco (SRNT), National Conference on Tobacco or Health (NCTOH)
- Emerging cannabis research and regulation community – Getting it Right from the Start, participants of North American Cannabis Summit, Research Society on Marijuana
- Civil rights organizations - Human Rights Commission – National Association for the Advancement of Colored People (NAACP), American Civil Liberties Union (ACLU), Pan American Health Organization (PAHO), signatories to World Health Organization (WHO) Framework Convention on Tobacco Control
- Federal government agencies – Centers for Disease Control and Prevention (CDC) Office on Smoking and Health (OSH), National Cancer Institute (NCI), United States Food and Drug Administration (FDA)
- Other state health departments
- The general public is not a target audience for the Plan, but local lead agencies (LLA) and their coalitions may mediate it for the public

TEROC discussed ways to make the Plan more suitable for wide distribution:

- Electronic format so it can be updated with progress updates and other tools as they are developed
- Smartphone and tablet friendly design
- Interactivity
- Tailored 1-pagers for priority populations and other key targets, webinars, and other user friendly tools
- A plain-language summary that is distinct from the executive summary and that shows “how to use it”
- There was some concern that posting progress updates and other documents online could be exploited by the industry. TEROC is a state body so they should be transparent, but it is something to be mindful of.

- There was also some concern about going overboard with summaries. In some cases, some groups may be better at summarizing for their constituents (e.g., the state CDE center in Long Beach can do this for TUPE grantees).
- There was interest in discussing dissemination and outreach further, and in convening a dissemination subcommittee soon so the Plan developed is more suitable for wide dissemination.

8. Structural Issues and Objectives

The committee then discussed the overall structure of the plan (Attachment G):

- The first half of the Plan can be streamlined with many elements removed or relocated to the back
- An executive summary should be added close to the front
- A possible order for the Plan: table of contents, executive summary, vision, context, objectives
- There may be two versions of the document, one in print with a more linear structure and the other an electronic version designed like a website, with the most important content featured most prominently
- The electronic version will have internal links for easy navigation and will also link to materials in the technical supplement
- The technical supplement will not be an alternative version of the Plan, but rather an online repository of documents that relate to the Plan, or be a place to park items that stem from the Plan, some of which may have been developed later
- The Plan could include concise progress under environmental context
- The Plan could include a logic model to ensure that the objectives and strategies relate to the overall goals

The committee also discussed how to structure the objectives section (Attachment H):

- As options for possible alternative structure, objectives could be organized by:
 - Product category (tobacco, e-cigs, cannabis) – garnered no support
 - Agency (CDPH, UC, CDE, others) – no support
 - Sphere of influence (schools, governments, corrections, military, retail, health care, etc.) – some support
 - Desired outcome (prevention, cessation, capacity, research findings, etc.) – most support among the alternative options
- Desired outcome is the one that is most similar to the current structure
- Most current objectives are already expressed as outcomes and others could be tweaked in that direction
- The chair noted that TERO always struggles with the objectives but can never come up with an alternative structure, so the Plan ends up making only incremental changes. However, the favorable survey results suggest the current structure is acceptable
- One member noted that with the current schema, there will always be prevention, cessation, environmental effects, countering the industry, etc., and that within those broad fields TERO has been able to include a lot of specific strategies

Members and guests discussed additional structural issues:

- Objectives do not always match up with the goals, except that most tend to reduce prevalence
- There is some bleed-over between principles and objectives
 - Objectives are more action-oriented: what impact will you have in the world. Principles cut across all agencies and objectives
 - Objective 7 (develop policies and practices informed by science) seems to be more of a core value than an objective
 - It would help to re-label principles as “core values”, include them in the Plan, and make clear that they are cross-cutting
- Some of the objectives do not work well for the Tobacco-Use Prevention Education (TUPE) Program

- A new objective is needed to address the triangulum of tobacco-vaping-cannabis. This is mentioned in the current Objective 6 but should be elevated to a standalone objective.
- The committee discussed whether to make the objectives like SMART goals (specific, measurable, achievable, relevant, and time-based)
 - Most favored keeping the objectives broad and open-ended
 - Objectives should indicate the direction of change and allow for measurable progress, but a numerical target or a deadline by which the target should be reached is not needed
 - Avoid setting targets that are unachievable and that set agencies up for failure
 - Remember that there are many external factors beyond our control, e.g., new products that may come on the market
- If there is a desired outcome, the Plan should give an example of how to measure the change based on the intervention or program. For work in disparities, it is helpful to look at measures specific to the target population and to build in equity sensitivity.
- It may be odd that the Plan gives a numerical target in a goal (i.e., prevalence rates). Normally, objectives are more specific and quantifiable than goals, not less.

The committee and guests also provided comments on specific objectives:

- 1 – Build Capacity
 - There was a desire to strengthen this objective to address the range of critical capacity issue facing tobacco control
 - Strengthen the call for pipeline development in social/behavioral sciences
 - There should be specifics about developing research training, careers, and leaders
- 2 – Eliminate Disparities
 - Be more specific about priority populations in #2
 - “Tobacco-related health disparities” may be too narrow because health disparities are not the only ones that should be eliminated
 - The reference in the 3rd bullet should be broader so it does not apply only to the behavioral health population
 - Address disparities based on geography
- 3 – People and Environment
 - This objective is a mashup of two topics: (1) protecting nontobacco users from secondhand smoke and other exposures, and (2) protecting the environment from litter and other waste
 - Environment here refers to the physical world, with other types of environments (for example political, social, educational) addressed elsewhere
 - Be more specific that this objective refers to litter, waste, etc. TRDRP funds research in this area, including e-waste from devices and disaggregating this topic from people should be considered.
- 4 - Youth and Young Adults
 - Youth and young adults have their own objective for two main reasons: (1) they are specifically listed in the statute, and (2) they represent the “prevention” piece at the beginning of the tobacco use pipeline.
 - The scope of this objective should be broadened by saying, “protect, inform and empower youth and young adults.” This would support youth advocacy and help distinguish it from Objective 3.
- 5 - Cessation
 - None
- 6 – Counter the Tobacco Industry
 - The 3rd strategy in this objective should be expanded into its own objective to address the triangulum of tobacco-vaping-cannabis
- 7 – Develop Policies and Practices Informed by Science

- The current Objective 7 is centered around TRDRP activities, but TRDRP does not need its own objective
- It is more of a cross-cutting core value than an objective, because all activities should be informed by science
- The Plan can eliminate this objective and redistribute its strategies, e.g., #1 to disparities, #2 to the new triangulum objective, #3 to capacity
- Objective 7 can now be for the triangulum

Consensus was achieved for the following 7 objectives: (1) capacity, (2) disparities, (3) people and environment (still including waste), (4) youth & young adults, (5) cessation, (6) countering industry, (7) triangulum.

9. Subcommittee Assignments

TEROC discussed subcommittees to further define the objectives and identify strategies for each.

- Subcommittees are subject to the Bagley-Keene Open Meeting Act. They do not make final decisions, and bring recommendations back to the full committee. There is a limit of two members per subcommittee, but the subcommittee can include any number of agency staff or subject matter experts.
- For the last Plan, there was a subcommittee for each objective. Previous Plans have also included subcommittees for other sections, e.g., principles, and TEROc can have as many subcommittees as needed.
- Members' preferences:
 - Vicki Bauman: 4 (Pam Ling or Mary Baum were also suggested as both left the meeting early)
 - Mark Starr: 7 and either 2 or 3
 - Pat Etem: 1, backup for 2
 - Wendy Max: 3
 - Michael Ong: 5, and 6 if needed (he also suggested that Pam Ling may be interested in 6)
 - Jim Keddy: 7
 - Mariaelena Gonzalez: 2 and 7
 - Claradina Soto: 2, and 1 if room
 - Primo Castro: 3 and 6

Action item: Mr. Primo Castro moved to create subcommittees, giving the chair latitude to make final selections considering members' preferences. Dr. Mark Starr seconded. The committee voted unanimously in favor.

10. Next Steps

- Mayra Miranda will contact members to set up calls in January 2020. She and Chris Anderson will host and staff all calls.
- Members can invite subject matter experts or other individuals
- The agencies are invited to participate
- Each subcommittee will work to define its objective and the strategies to support it
- Chris Anderson will synthesize the recommended objectives and strategies and bring them back to the full committee for consideration at the February 2020 meeting
- The February meeting will be in Sacramento but the location has not been determined

11. Public Questions and Comments

There were no public questions or comments.

12. Adjourn

The chair adjourned the meeting at 2:30 pm.