Tobacco Education and Research Oversight Committee (TEROC) 
Meeting Minutes

Tuesday, June 2, 2020
9:00am – 4:00pm

Location
This meeting was held as a teleconference without a physical location due to COVID-19 and Executive Order N-29-20 signed by Governor Gavin Newsom on March 17, 2020

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

Others in attendance:
Chris Anderson, TEROC Plan writer
Deborah Colosi, Tobacco Related Disease Research Program (TRDRP)
Ginny Delaney, TRDRP
Phillip Gardiner, African American Tobacco Control Leadership Council (AATCLC)
Uta Grieshammer, TRDRP
Liz Hendrix, California Tobacco Control Program (CTCP)
Norval Hickman, TRDRP
Kristen Mar, CTCP
Francisco Michel, California Department of Education (CDE)
Mayra Miranda, CTCP
Lou Moerner, Alliance for Data Dissemination to Achieve Equity (ADEPT) and the LOOP
April Roeseler, CTCP
Nadine Roh, CTCP
Gordon Sloss, CTCP
Rebecca Williams, CTCP
Chunxia Wang, CDE

1. Welcome and Introductions
The TEROC chair, Dr. Michael Ong, called the meeting to order. Members and guests introduced themselves.

2. Agenda
The TEROC Plan writer reviewed the meeting agenda.

3. Key Takeaways from February TEROC Meeting and Draft Outline
The writer summarized key takeaways from the February 14, 2020 TEROC meeting:
- There will be a web version of the Plan, to be developed in-house by the California Tobacco Control Program (CTCP). The goal is to make the site attractive, navigable and user-friendly.
- The new Plan should make better use of infographics.
- The list of recipients will be expanded and collateral materials will be developed for dissemination near the time the Plan is released, e.g., 1-pagers and a webinar. TEROC may form a dissemination subcommittee if needed.
- Major themes suggested for the introduction include triangulum, health equity, endgame, the evolving product landscape, and youth.
- Several possible titles were considered. The favored one was “Old Wolf, New Sheepskin.”
- The “core values” have evolved from guiding principles for making funding decisions in tight budgetary times to a statement of principles that drive and animate work in tobacco control. They should be winnowed down to the ones that really are most essential.
• The theme of health equity should be woven through the whole plan, including in all objectives. This new emphasis requires a deeper look at the social determinants of health and the systems changes that are needed to reach health equity.

The writer then reviewed the draft outline and members and guests provided feedback, including the following:

• Keep the number of strategies per objective low. Consolidate sub-strategies as needed.
• Consider putting the executive summary at the very front of the document since it may be the only part some people read.
• Consider putting the call to action upfront as well, perhaps in the beginning of the introduction.
• Add more headings to help readers navigate the document.
• Consider switching to a title more suggestive of health equity.
• Shorten the introduction and make it more concise, similar to a Twitter feed.
• Quotes from the field could add to the “call to action.”

4. Production and Dissemination of Plan
Mayra Miranda then summarized progress on the dissemination plan.

• With the expanded list of recipients, it needs to be decided who gets a digital copy and who gets a hard copy or both.
• The Plan will be disseminated in January 2021.
• Podcasts will be developed from December 2020 to January 2021 with the chair or other members.
• CTCP or the LOOP will develop a webinar to help educate the field about the Plan.
• Several 1-pagers will also be developed, each a summary of an objective. Rover may help with this.
• Ms. Gretta Foss-Holland, of CTCP, will design and lay out the Plan and develop infographics.

Members and guests then gave feedback, including the following:

• Integrate infographics into the 1-pagers.
• Include other members in the podcasts, which can be done remotely by phone. They can also include young people as speakers. Podcasts are housed in the Rover library but can also be posted on multiple web sites and disseminated in emails and through social media.
• Instagram, Twitter, and TikTok are currently the most popular platforms. It takes time to think of how to position content for various platforms and audiences.
• If TEROC were to open its own social media accounts and post the Plan there, it would need to be followed up with additional content later on. But not all content needs to be new, nor does it all have to come from TEROC. Content can be borrowed, re-used, and re-cycled.
• TEROC should have a social media policy before posting regularly.
• The same is true for any web site “owned” by TEROC. It would need to be monitored and maintained.
• In any content used to help disseminate or educate about the Plan, include other voices from the field and emphasize how the Plan can be used.
• The roll-out of the Plan and associated materials could be year-long.

5. Introduction
The writer then reviewed the draft introduction and members and guests offered the following feedback:

• The introduction provides good and compelling information but is too long and may have too much narrative. It may not need as many facts and figures, details, and supporting points. Some content, e.g., details of the tobacco-free vision, could be bulleted.
• Use more headings. Each could be a summary of the main points.
• Given how prominent cannabis now is in the objectives, provide more of a lead-in to this topic.
• The discussion of health equity at times veers away from tobacco.
• Since the new Plan has no letter from the chair, and the “About TEROC” section is now at the end of the document, the first mention of TEROC seems to come out of nowhere.
• One member asked whether the Plan is supposed to come from TEROC or from the state. (Note: the current Plan seems to come from TEROC. The technical supplement repeatedly uses the phrase, “TEROC recommends.”)
• One member suggested addressing how COVID-19 has changed the world, since everything outside of the pandemic now seems irrelevant to many. But another member noted that important issues of the day can change and there is a new crisis every year, for example, the E-cigarette and Vaping Associated Lung Injury (EVALI) crisis. In contrast, everything currently in the introduction will continue to be relevant regardless.
• One member noted that TEROC should be more forceful on the issue of social justice, especially with regard to what youth of color experience. This includes the problem with purchase, use, and possession (PUP) laws and excessive enforcement, as well as the menthol issue. Another member noted that these specifics should go into Objectives 2 and 4 rather than keep the introduction concise and high-level.
• Say more about institutionalized racism and the systemic changes needed to address it. The last paragraph does a good job with this but that the issue could be foregrounded more.
• The introduction may not need to name the specific priority populations.
• The Plan should be careful to counter excessive enforcement action against individuals. The Plan shouldn’t criminalize tobacco addiction and addiction should not become a point of contact with the justice system. Good enforcement involves education, referral, restorative justice, etc. Sometimes the word “enforcement” is interpreted as only the undesirable kind, i.e., issuing citations or otherwise punishing individuals, especially individuals of color. The Plan needs to be careful with the wording around this issue so readers don’t misunderstand what kind of “enforcement” is acceptable to TEROC.
• On the topic of enforcement, the committee also discussed who is empowered to change how enforcement is done and why they are not usually at the table. TEROC questioned what the Department of Justice (DOJ) does with their grants. Some communities that don’t have a tobacco retailer licensing (TRL) ordinance received DOJ grants. How can TEROC bring attention to that? TEROC can advise DOJ but DOJ may not follow the advice. It was agreed that TEROC should invite DOJ to address TEROC periodically, similar to the updates from the Department of Finance (DOF).
• CTCP staff noted that DOJ posts information about who receives grants on their website and that CTCP pushes this information out to the field. Most of DOJ’s enforcement efforts are retail-oriented, e.g., using youth decoys. They also fund enforcement that is not geared toward youth access. In many cases the funded enforcement activities include education and social norm change.
• Health equity has two main parts that are important to highlight in the introduction: (1) the problem with disparities in prevalence and (2) the problem with enforcement. The intent is to lift up and empower communities, not to exacerbate disparities. The introduction should stick to this higher level and leave the specifics for the objectives and strategies.
• The chair suggested cutting the length of the introduction down to half and sticking to the main ideas versus providing a full blown discussion.

The committee then provided input on three other elements of the Plan and introduction:

Title
• The introduction makes good use of the controlling metaphor in the title. However, it was noted that the wolf metaphor (“Old Wolf, New Sheepskin”) suggests the theme of countering industry. It can be stretched to include health equity, but is probably not an ideal fit. The committee opted to select a new title more suggestive of health equity.
Vision, mission and goals

- Combine goals 1 and 2 to encompass all tobacco use in one goal.
- Goal 2 may be out of the Tobacco Related Disease Research Program’s (TRDRP) scope. Agencies do not have authorization to work on preventing cannabis use, although they can and do work in the intersection of tobacco and cannabis. Agencies can also with cannabis regulators, e.g., to share lessons learned in tobacco control. It was suggested to include a softer goal on cannabis more in line with Objective 7.
- One member suggested changing the wording in goal 3 from “eliminate” to “reduce” to make it more realistic and achievable, but some others liked having a more aspirational goal. It was noted that the first part of the goal is realistic and achievable. It was also noted that TEROC goals are generally not achieved in the time period covered by the Plan.

Core values

- Members support including the shortened list of core values as a sidebar in the Plan.
- It was suggested to add a core value for evidence/science.
- It was also suggested to list health equity first, since it’s the primary theme of the Plan.

6. Objectives

Members and guests then provided feedback on the draft objectives and strategies:

Objective 1 (Capacity)

- Consolidate the sub-strategies to shorten the text and highlight the main strategies more clearly.
- Be cautious with references to expertise, which can sound too top-down. There is a need to tap into community expertise. Community assets, i.e., don’t go into a community assuming they don’t know how to address tobacco, and the language of bidirectional partnership should be used. Be aware of implicit bias and colonial language when discussing working with Tribes.
- State the marginalized communities, e.g., LGBTQ, native Hawaiian, Pacific Islanders, and other groups that need to be reached. This could be done in a call-out box.
- The introduction has language about building the power and influence of community groups and some of that should be included in this objective.
- Change the wording in Strategy 5a. It’s not about enforcement of tax policy, because the state has no jurisdiction on Tribal lands. The issue is the challenge of tax evasion when there are differential tax rates, e.g., if California had a high tax and Nevada had no tax, there could be an impact on use and prevalence if Californians went to Nevada to buy tobacco products. The issue should be framed broadly.
- Deal with military bases and Tribal lands separately.
- For Strategy 6, the main issue is preemption.

Objective 2 (Disparities)

- Collapse sub-strategies, as in Objective 1.
- Consider re-ordering the three parts of Strategy 2.
- In Strategy 2a, support universal healthcare to help address the inequities in access to cessation treatment. Many undocumented immigrants are not eligible for publicly supported insurance. This may fit better in Objective 5.
- Strategy 3 doesn’t belong in Objective 2, but should be somewhere in the Plan.
- Also somewhere in the Plan, TEROC should recommend repealing the supermajority vote requirement.
- Reword Strategy 4 so it’s not so much about compliance.
- Strategy 4b could move under Objective 3. Strategy 4a could be dropped, but the focus on adopting culturally appropriate interventions and using social norm change approaches should be kept. The
workgroup can resolve what to do with Strategy 4a. Advocates in some communities may actually want stronger enforcement against retailers that keep selling tobacco to minors despite repeated warnings. Communities have worked hard for regulatory authority and TEROC should not undermine them. It was noted that the willingness to use heavier-handed enforcement strategies increases the more upstream the violation occurs.

Objective 3 (People & Environment)
• Keep Strategy 1a even if the California Air Resources Board is unlikely to follow the recommendation.
• Concerning Strategy 3, CTCP worked with the Public Health Law Center on a document on tobacco product waste (TPW), which was reviewed by the Department of Toxic Substance Control (DTSC). It should be released later this month. This may obviate the need to develop new strategies on TPW. However, DTSC probably will not declare TPW as hazardous waste as some had hoped.
• TRDRP funded Georg Matt to do research on predicting TPW, especially in low income neighborhoods.
• The bullets in Strategy 3 are broader than the wording suggests.
• De-emphasize individual enforcement and highlight more upstream solutions.
• It’s unclear why military bases and Tribal lands are in this objective and not in others. Strategy 4 could be worded more broadly to work cooperatively with members of communities disproportionately impacted by both SHS and environmental contaminants.
• Dr. Claradina Soto asked to review the next draft of the section on Tribes and supported wording that emphasizes the “need to provide resources to empower and mobilize communities to collaborate on tobacco control.”

Objective 4 (Youth)
• Strategy 4 is a good place to address PUP laws and the problem of excessive enforcement.
• Strategy 3 is not so much about enforcement and more about ensuring that non-TUPE-funded schools have a tobacco policy and have the same resources and knowledge of best practices as TUPE schools.
• Some of the strategies could be broadened to include colleges. Include young adults in the objective itself. The California Youth Advocacy Network (CYAN) may have ideas about strategies, especially for college-age youth.
• Include a strategy listing research needs, e.g., tobacco litter on campus, tobacco-free campus policy implementation strategies to inform best practices, crossover points between tobacco and cannabis use among young people, strategies to increase use of the California Smokers’ Helpline (Helpline) or other cessation technologies and EVALI.
• Dr. Pam Ling asked to review the next draft of this objective.

Objective 5 (Cessation)
• In Strategy 1, reword as a “transformation,” since Medi-Cal is currently not close to being a model. Proposition 56 gives Medi-Cal about $1 billion annually, paid for by tobacco users, and should be doing much more in this area.
• The Helpline doesn’t currently help people who are solely cannabis users. There is little evidence for cannabis treatment, although there is slightly more for counseling approaches than for pharmaceutical approaches. TRDRP has begun funding some research in this area. Instead of calling on the Helpline or others to provide treatment for cannabis cessation, leave this in Strategy 6 as a research need.
• In Strategy 5, mention the need for wraparound mental health services. Broaden it so it’s not as much about the Helpline.
• Youth are called out in the introduction and here in Objective 5. Look for this in other objectives.
Objective 6 (Industry)

- In Strategy 1, strengthen the language for funded projects, because industry funding represents a conflict of interest. The strategy is meant to be broad enough to include sponsorship received by groups not funded by the agencies, e.g., for rodeos, bar nights, school curricula, food closets, water, violence prevention, COVID-19 research, personal protective equipment (PPE), and branded masks. It was noted that the cannabis industry is following the same sponsorship playbook as the tobacco industry.
- Many years ago, the University of California Academic Senate decided that TRDRP cannot deny grants to researchers who take tobacco industry funding. TRDRP does require disclosure of other funding sources as a way to avoiding double-dipping, but this happens at the funding stage. The agency could move this up to the application phase and make it more transparent. Other forms of funding besides grants (e.g., consulting contracts) should also be disclosed. Problematic funding sources include front groups and foundations funded by industry. The list of such entities should be kept updated.
- Clarify that the concern is about commercial tobacco where regulation by the Food and Drug Administration (FDA) or other federal agencies is mentioned.
- Broaden the wording of Strategy 3 since it is not just about the two industries.
- Similarly, broaden Strategy 4 since it is not just about federal regulation.

Objective 7 (Triangulum)

- Strategies 3-5 seem to apply only to cannabis and may fall outside of tobacco’s scope. A strong preamble on the connections between tobacco and cannabis (e.g., co-use and sequential use) will help to justify why the tobacco program is focusing on this.
- Add language to this effect in the strategies themselves, such as, “To sustain momentum in tobacco...” Where possible, be explicit about the intersection, e.g., “Because vaping and cannabis have the potential to re-normalize tobacco use...”
- Consider moving Objective 7 up in the order of objectives, since cannabis appears in multiple places in the Plan.
- Strategy 3 isn’t solely about regulation. It includes education and other aspects of the tobacco control program. To the extent that the Plan does call for regulation, include a caveat about Tribal sovereignty.
- In states with legalized marijuana, youth perception of harm decreases, which can flow through to tobacco.
- In Strategy 2, support making it permissible to fund cannabis research. Federal law currently prohibits this.

7. Next Steps

- The committee then discussed an issue left over from the previous day’s meeting: potential TEROC oversight of the proposed e-cigarette tax. Dr. Mariaelena González moved that TEROC draft and send two letters: (1) one requesting that the proposed legislation to increase the tax on e-cigarettes be amended to include an oversight body to ensure that revenues are spent appropriately, and that that oversight body be TEROC, and (2) another letter to DOF requesting that TEROC be considered an official stakeholder on all matters related to tobacco and e-cigarettes. Dr. Pam Ling seconded the motion, which passed unanimously. Dr. Mark Starr and Ms. Pat Etem had stepped out and were not present for the vote.
- Ms. Kristen Mar, of CTCP, will reach out to subcommittee members to schedule the next round of calls to refine the objectives and consider additional elements like sidebar stories. Concerning Bagley-Keene, subcommittees can choose how they meet, whether by phone or email. Sending a complete draft to a majority of members could be a violation, because the resulting email chain could be considered a meeting subject to the open meeting requirement.
8. Public Questions and Comments
None remaining, as comments were taken throughout the meeting.

9. Adjourn
The chair adjourned the meeting at 3:00 pm.