

Current Landscape of US Youth Anti-Tobacco Groups:

Findings from Key Informant Interviews



November 2018



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at PHMC

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For more information about the American Lung Association, a holder of the Better Business Bureau Wise Giving Guide Seal, or to support the work it does, call 1-800-LUNGUSA (1-800-586-4872) or visit www.Lung.org.



About the Research & Evaluation Group at Public Health Management Corporation

The Research & Evaluation Group (R&E Group) at Public Health Management Corporation (PHMC) is dedicated to helping clients understand their communities, improve their programming, and deepen their impact on public health and education. As part of PHMC, and as a member of the National Network of Public Health Institutes (NNPHI), our team partners with clients to address pressing research questions, produce science-driven evaluations, inform programming, and facilitate technical assistance and strategy development. As public health issues vary by community and change over time, our interdisciplinary approach allows us to adjust to the shifting public health landscape with a range of methods and technologies.

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This report was created by R&E Group at PHMC, and commissioned and reviewed by Lung.

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Executive Summary

Tobacco prevention interventions must target youth, since most adult smokers began in their teens.¹ Youth programming is a component of state and community anti-tobacco interventions, and one of the US Centers for Disease Control and Prevention's (CDC) best practices for tobacco control.² **To better understand the current landscape of youth anti-tobacco groups, the American Lung Association (Lung) contracted the Research & Evaluation Group (R&E Group) at Public Health Management Corporation to perform an online search of active anti-tobacco youth groups across the US, and then conduct key informant interviews with adult program managers of these youth groups.**

An internet search in August and September 2018 of youth anti-tobacco groups yielded 35 active groups nationally. Details about program structure and activities were gathered from the groups' websites. **Twenty-nine states have at least one youth anti-tobacco group, yet 21 states have none.**

To gain deeper insights, the program managers of 25 groups found through the search were invited to participate in an interview about their program. In October 2018, **13 program managers were interviewed** over the phone. Interviews were transcribed and analyzed in NVivo 12.

Programs operate at the local, county, state, and national levels; are managed by non-profits, government agencies, and a university; and engage fewer than 10 to hundreds of youth members. **The most common activities are**

community outreach, political advocacy, and peer education. Programs use a variety of approaches to educate their members about tobacco and the tobacco industry, yet **the Campaign for Tobacco-Free Kids' "Taking Down Tobacco" is the most commonly used curriculum. Participants view program strengths through a youth development framework; they are proud of their youth's leadership development and policy involvement.** Funding and youth schedules were cited by almost all participants as challenges. Groups' levels of youth involvement ranged from allowing youth members to choose from a menu of activities and priorities to "youth-led, adult supported movements." Sustainability concerns relate to funding allocation and the perception of tobacco as an already solved issue.

The current landscape of youth anti-tobacco groups includes programs of varying scale, approach, training, and youth involvement. The increasing e-cigarette popularity among youth³ shows the continued need for youth anti-tobacco programming.

1. US Surgeon General. *Preventing tobacco use among youth and young adults: A report of the surgeon general*. US Department of Health and Human Services. Published 2012. www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/full-report.pdf

2. US Centers for Disease Control and Prevention. *Best practices for comprehensive tobacco control programs*. Published 2014. www.cdc.gov/tobacco/stateandcommunity/best_practices/pdfs/2014/comprehensive.pdf

3. Cullen KA, Ambrose BK, Gentzke AS, Apelberg BJ, Jamal A, King BA. *Notes from the Field: Use of Electronic Cigarettes and Any Tobacco Product Among Middle and High School Students – United States, 2011–2018*. *MMWR Morb Mortal Wkly Rep* 2018;67:1276–1277. doi: <http://dx.doi.org/10.15585/mmwr.mm6745a5>

Methods

In August to September 2018, the R&E Group at Public Health Management Corporation conducted an online search to identify youth tobacco prevention and education programs in the United States. The phrase "youth tobacco program" (without quotes) plus the name of each state was entered into Google. Each website from the first two pages of results was reviewed, except for links to results of a youth tobacco survey or reports by Lung or the CDC.

To be included in the review, the programs must be focused on tobacco prevention specifically (i.e. not focused on healthy lifestyles or substance abuse prevention). The programs must have youth members; media campaigns, cessation programs, and educational programs without youth membership were not reviewed. For eligible programs (n=37), details about program structure and activities were gathered from their websites. *See Appedix I for a table of groups found.*

To gain deeper insight, R&E Group created key informant interview questions (*see Appendix II for the interview guide*), with feedback from Lung. **The guiding research questions were:**

- What are the activities of youth tobacco prevention and education group programs in the US?
- How are the youth involved?
- How are youth tobacco programs being evaluated?
- How do staff of tobacco programs foresee program sustainability?

In September & October 2018, R&E Group reached out to 26 groups found in the online search to offer participation in a key informant interview about youth anti-tobacco programming in the US. No groups facilitated by Lung were contacted. R&E Group sent a maximum of two invitation emails. Potential participants were offered a \$25 Target e-gift card as an incentive.

In October 2018, R&E Group conducted phone interviews with 13 eligible program managers.

See Appendix III for a list of participants. One additional scheduled interview was stopped because their program did not have youth members, and an additional completed interview was not included in analysis after determining it was a curriculum implementation rather than a unique program. Both of these programs were then removed from the table produced by the online search (n=35).

Interviews lasted approximately 30 minutes, with 14 questions (though due to time constraints, not all participants were asked all questions). Nine participants accepted the e-gift card (5 declined). All participants agreed to be listed in this report, and 11 consented to having any quotes attributed to them.

13 interviews were recorded and transcribed according to the recording (n=10) or live during the call (n=3). **Data were analyzed in NVivo 12 according to predetermined foci of interest as well as emergent themes.** Components of the table of programs were updated as informed by interview information.

To engage youth throughout these activities, meetings and member communication happen in a variety of ways. Meetings are held in person, over the phone, and online via video conferencing (live and recorded). Meetings happen as frequently as weekly (for chapters), or as infrequently as quarterly (for youth boards). Communication happens via texting, the GroupMe app, the Facebook messenger app, and email.

Community outreach is the most common activity (n=13). Several programs offer pre-created resources. Outreach can take many forms:

- Planning a year-long project
- Creating Public Service Announcements (PSAs) and billboards
- Conducting social media campaigns
- Participating in community health fairs
- Hosting community-based training
- Talking to the media
- Marching in community parades
- Giving out educational outreach materials
- Holding a film festival/competition
- Presenting at organizations' meetings
- Hosting events like tobacco trivia games, cleaning cigarette butts, or encouraging smoke-free pledges

Policy advocacy is the second most common activity and happens at a range of levels and targets a variety of initiatives (n=12). Programs are advocating for policy change at the local level (n=8), at the school or school district level (n=5), at the state level (n=8), and at the national level (n=1). Policy work aligns well with CDC recommendations, which instruct, "Tobacco control program staff must remember that efforts should focus on changing community policies. Research clearly shows that environmental changes, especially those targeted at policy

change, have the most impact on changing social norms around tobacco use."^{1(pp14)}

Local efforts are enacted through speaking to city councils, testifying to town boards of health, participating in town halls, talking to their legislators, writing letters to the editor, and talking to their mayor. Engagement ranges from smaller touchpoints to large-scale coordinated efforts, which Carly Caminiti detailed,

We have a very, very coordinated effort with the state. ... The youth tobacco prevention is just one part of it, but we also have adult staff people who are funded by [the Department of Public Health] DPH, who work across the state and do local media work. ... Then also they do presentations to adults, like school nurses or school staff or [parents] ... and then we are the presenters towards young people. ... And then there are statewide [technical assistance] providers as well that work with different organizations across the state. ... Once we're in the know about some town that's looking at updating their tobacco regulations, then we all get our ducks in a row and work together.

School policy work is done through connecting with local school boards, principals, and other administrators. School policy enforcement is considered "low hanging fruit," compared to higher levels of influence. Since some programs' states already have comprehensive smoke-free school policies, these programs focus on increasing awareness of the policies through signs, especially as related to e-cigarettes. Molly Kincaid shared their approach to school policy change,

We would go and find a town and we do about a 35 to 40 minute radius, and we'd invite groups to the area. And they come and then the staff would have printed out their current

school policy. And we'll teach them all about the No Limits 101, the Big Tobacco 101, and how important policy change is. And we'd actually give them time to examine their current tobacco policy and help them find any loopholes. And then we'd bring in some adults for like a mock school board or mock city council and we would have them actually practice presenting to them so they can go back into their community and hopefully focus on policy change.

State policy change work includes testifying at the state house, speaking with and writing to members of Congress, connecting with other elected officials, and doing media outreach such as letters to the editor or conducting interviews.

Several programs hold rallies at their state house. Naa Aku Addo described theirs,

They rally every year in February at the State House, and it's all dependent on the topic that they're focusing on in that year. They actually just dressed up in hazmat suits, as part of their rally at the State House ... to show exposure of second hand smoke and how that impacts youth. ... They marched from the high school and straight onto the capitol and really made a lot of noise on the State House steps. ... They go in, get introduced on the House floor, and then they get to engage their local decision makers in talking about how tobacco is impacting their lives. ... We have a couple of students who identify that they want to speak to the media because we have media present over there. We have a couple of students who really want to go into committees and just talk to different committee members, not necessarily their local legislators. And also just seeing them learn about how policy is made is definitely something that excites them, and understanding how factors in policy making can really impact the policy that's presented.

National policy is addressed through comments on US Food and Drug Administration (FDA) proposed regulations and draft guidances.

In order of frequency, programs are targeting or have targeted the following policy initiatives:

- **Smoke-free spaces** (including e-cigarettes and potentially marijuana), such as parks, communities, school campuses, cars with minors inside, and other outdoor common areas (n=8)
- **Tobacco 21**, to increase the minimum age of purchase to 21 years old (n=4)
- **Flavor bans** to limit flavored tobacco sales to adult-only retail locations (n=4)
- **Retail restrictions**, related to prohibiting sales in healthcare institutions, marketing in stores, updating tobacco retail license restrictions, and limiting the sale of single cigars or cigarillos (n=3)
- **Blunt wrap bans** (n=1)
- **HUD ruling enforcement**, by educating public housing authorities (n=1)
- **Price increases** for the sale of single cigars (n=1)
- **Smoke-free media**, primarily movies (n=1)

Four programs operate under restrictions around political advocacy.

Some programs' funders do not allow the programs to lobby, so the programs have to educate youth members on policy updates, either without organizing any direct contact with policy decision makers or by meeting with decision makers only to share education, concerns, and updates about the program's activities. In those cases, no recommendations to policy makers can be made. One group with such restrictions created an art installation and elected officials were invited to and attended its opening. They also "adopt a decision maker" and send

them updates to “cultivate a relationship”, without directly lobbying for a policy. A couple programs are operating in states with preemption, that “local laws cannot be greater than the laws at the state level,” which also inhibits a program’s ability to advocate for anti-tobacco policy locally.

Peer education is another popular activity (n=10).

Some see it as “the most effective way of reaching the teens.” This activity is usually presentations or events in schools to audiences of the same or younger age. Some program managers will do events by themselves as requested if no students are available, but they try to encourage youth to present as often as possible. Peer education is a strategy to educate youth, engage them in the fight against tobacco companies, and recruit new members.

Hosting conferences or summits is an activity of about half of the groups interviewed (n=8).

This allows youth members to plan an event for their peers, and can include topics such as Tobacco 101, team building, leadership, message crafting, social justice, public speaking, and policy advocacy. These conferences also serve as a way to connect chapters of the same program and set the stage for the coming year.

Attending external conferences connects groups to regional and statewide campaigns (n=3).

Assessing retail environments or providing training is the least common activity (n=2).

Based on program manager report, the activities most liked by the youth members are:

- **Community outreach (n=4)**
- **Interacting with policy decision makers (n=4)**

- Peer education (n=2)
- Participating in statewide anti-tobacco events, like Kick Butts Day (n=2)
- Social media (n=1)
- Attending conferences (n=1)

Goals ● ● ● ● ● ● ● ● ● ● ● ● ● ● ● ●

When asked about program goals (n=9), about half of participants referenced youth tobacco use in general (n=5), such as “to eradicate tobacco use entirely” and “to change social norms regarding tobacco use and to make the next generation tobacco- and nicotine-free.” **Others' goals were more focused on the youth members (n=4),** such as “to provide as much education and training as possible” and “to create future leaders.”

Educational Curricula ● ● ● ● ● ● ● ● ● ●

Groups are using a variety of educational curricula and resources to train their youth members. See Appendix IV for a list of curricula used. **By far, the most popular resource is the Campaign for Tobacco-Free Kids’ “Taking Down Tobacco” (TDT) program.** Ten participants are using TDT, either exclusively or along with other resources. Participants appreciated the online modules that provide skills-based training and allow for independent completion. One participant who used the TDT curriculum questioned why programs would create their own resources, when this curriculum is robust, was created by experts, and already exists. Not all shared this perspective, though, as one participant lamented that “there’s not much out there.”

Nine programs are creating their own original

trainings or combining segments of several resources. Some mentioned utilizing state data about youth tobacco use and tailoring their trainings to their audience. Topics include e-cigarettes, policy advocacy, public speaking, etiquette, working with different personalities, creative brainstorming, and the unjust targeting of people of color and the LGBTQ community by the tobacco industry. One participant mentioned that youth members are creating a cohesive curriculum, and one said their trainings are driven by the topics that youth members want to study.

Youth Involvement ● ● ● ● ● ● ● ●

Youth are involved with programming at various levels of engagement. At one level, seven participants spoke of ways in which they presented a menu of options for youth to choose from. Some mentioned offering pre-created activity kits for chapters to use, pre-approved projects to choose from (with the option to create original projects as well), or pre-approved supplies. Several spoke of needing to combine youth interest with program requirements. One participant presented several impactful policy foci and allowed the students to choose their priority. Some viewed participant feedback as youth input into program activities.

At another level, and these two approaches were not mutually exclusive (i.e. some participants exposed both views within their interview), **ten participants spoke of youth-led programs, where the adults offer support and guidance for youth-created initiatives.** Participants believe that youth should lead programming since they know the best ways to engage their peers and choose relevant priorities. Two participants referred to

youth as “extensions of [their] staff.” Gustavo Torres uses the Hart’s Ladder framework,² which contextualizes youth programming on a scale from manipulation to youth/adult equity,³ to continually assess youth engagement across their programming. Torres summarized,

When we work with adults specifically, we ask them a couple key questions on how they engage and work with young people: ... “Did youth input receive equal weight when making the decisions as compared to adult input? Were youth consulted on activities and timelines? ... Did the youth voice really help shape the direction and purpose of the product, initiative, campaign, or event? And were youth engaged in practices held in youth-friendly spaces at locations and times that were convenient for youth?” ... [It’s] an opportunity to grow and deepen an organization’s approach to youth engagement. We really need to recognize young people’s right to participate in the decision-making process, and ... [acknowledge] the great skills and strengths that they bring to the table. So we really ensure that young people are really seen as a valued stakeholder into creating effective and inclusive programs, policies, and environments, to [try] to reduce tokenistic approaches to youth engagement.

Why is it important to engage youth? Participants responses were framed in three major ways: empowering youth as change makers (n=10), preventing future smokers (n=6), and combatting the tobacco industry’s targeting of youth (n=4).

Participants were especially passionate when speaking about youth as change makers. Many noted that policy makers and other adults listen to youth, and that youth have a strong voice about issues that affect them, as well as other social injustices. “Youth are the current leaders of today,

... helping to shape their communities for the life they're going to be growing into." Participants said that youth involvement in policy change allowed direct connections to decision-makers that would have otherwise been blocked. Additionally, youth come up with uniquely creative initiatives. Youth are also listened to by their peers, who can relate to them. Peer outreach also allows for constant "[ambassadors] out there amongst the people you're trying to reach." In addition to policy makers and peers, the tobacco companies are also watching. Two participants are encouraged when the tobacco industry is scared of the buying power of youth, or when the industry changes tactics to adapt to youth counter-attacks.

Regarding prevention, Anna McGovern stated, "There's really no point to doing youth [smoking] prevention without including the youth." Two participants noted the US Surgeon General's conclusion that nearly 90% of adult daily smokers started before age 18 years old.⁴ Therefore, youth intervention was viewed as essential to preventing future smoking. Several participants expressed wanting to prevent the next generation of smokers. After referencing that statistic, Laura Taylor said,

It's that age-old public health story of stop killing the snakes in the town that's infested with snakes. Go upriver to kill the nest. So I think that if you're not going upriver, then it's just going to be what we've seen for so many years- just this huge public health problem that we're trying to treat the symptoms and not the cause. It's so important to start early, and it's never too early to start talking about tobacco prevention.

Regarding the tobacco industry's targeting of youth, four participants mentioned the industry's "targeting" of or "marketing" towards youth

specifically, so youth are primed to fight back because one, it affects them, and two, "no one can speak better about the importance of curbing the ridiculous tactics of the tobacco industry better." An anonymous participant remarked,

The tobacco industry has evolved as the generations have evolved. We've gone from traditional combustibles, and they figured that this generation like electronics, so they created electronic products. So it's important [youth] know that the marketing strategies as well as the different products will consistently evolve.

Program Evaluation ● ● ● ● ● ● ● ●

All programs have a system for tracking activities (n=13), such as event and training attendance, tracking materials distributed, and online training monitoring. Both adults and youth may be responsible for tracking activities. Programs are tracking youth member participation, audience reached, type of activity performed, and/or the goal of the activity. Programs want to balance getting this information with being mindful of the staff/youth burden of an ongoing request.

Many programs gather event feedback (n=8). Feedback is gathered via pre-/post- or post-event surveys at a training/event/conference. Survey respondents are youth members, group advisors, and/or event audience. One participant uses a mandatory evaluation, required before attendees can board the bus home. Some evaluation questions were focused on attendees to understand reach, knowledge, social support, satisfaction, and future topics. Other evaluation questions focused on youth members to consider event improvement, youth involvement in planning and facilitating, and their opinion of if

the event met its goals or not.

Programs collect feedback from youth members (n=6) and adult advisors (n=2), through focus groups, ongoing surveys, pre-post program surveys of knowledge and confidence, post-event surveys, meeting discussions, and end of the year surveys. Within evaluations, programs are also looking broadly, considering changes within community and policy that help “move the needle.” This includes decision maker surveys, adult tobacco opinion surveys, youth tobacco use surveys, case studies of community changes, and tracking progress of policy proposal priorities.

Five programs are collaborating with an evaluation team/organization. Four programs use an internal team of researchers or epidemiologists, and one program is required to have an external evaluator.

Some changes made in response to evaluation findings were adding trainings and mini-grants related to member requested topics, organizing more social events, and making changes to events.

Strengths ● ● ● ● ● ● ● ● ● ● ● ● ● ● ● ●

Half of participants named youth development as a strength of their program (n=7). The anti-tobacco groups offer youth an opportunity to improve knowledge, skills, and confidence while broadening their horizons. In an insight echoed by many others, Shannon Glaz shared,

You really get some great young leaders. Once they're given some opportunities, it's really great to get to see them start to shine and realize that they have a voice. ... It's awesome to see them start to bloom as young people ... I just can see how much it helps them in all aspects of their lives.

The youth, as well, can see changes in themselves. Kathleen Bates said,

They talk so much about how those skills and that sort of leadership mentality has helped them grow into something that they never saw themselves being before.

A few participants said being connected to national networks or other anti-tobacco initiatives is a strength of their program (n=3).

Participants spoke of relationships with national campaigns, universities, other youth anti-tobacco groups, and the Youth Engagement Alliance for Tobacco Control, a national anti-tobacco leadership team. Having these connections help program managers brainstorm ideas, share resources, and feel connected to a broad, coordinated effort. Scott Stensrud recommends reaching out to other programs, and he shared their response to asking to adapt their work,

All of the groups so far are like, “Absolutely!” So instead of trying to recreate the wheel, [we're] looking to see what other groups are out there, where they've been successful, and then asking them for best practices, and tips and advice, and any collateral that they might have, instead of trying to start everything from the ground floor. Because there's a lot out there. There's an amazing amount of work that has been done, and some really good work. So [we're] starting at that and taking it to the next level, versus trying to make this stuff up on [our] own.

Some participants also felt that diversity was a strength (n=3); that their youth members well represented their service area geographically as well as the socio-demographically. Other strengths were having strong chapter advisors and community liaisons (n=2) and targeting members' specific ethnic community (n=1).

massively wealthy tobacco companies.

The next most common barriers cited were tobacco control relevance (n=5) and youth engagement (n=4). Relevance is important for both youth and policy makers. For youth, that includes keeping programs current with their behaviors (i.e. the use of e-cigarettes) and using relevant technology for communication and outreach. For policy makers, it's difficult to keep tobacco control a priority. Scott Stensrud described,

We refer to [it] here as "tobacco fatigue," because the legislators and people think, "We've done all this. ... You guys are coming back to us again? ... There's other people out there that want stuff! We can't just be focusing on tobacco." ... Tobacco fatigue and the assumption that things are alright. And I would've agreed with that a couple years ago, but then the whole vaping thing pops up, and it's a whole new ballgame.

It can be difficult to sustain youth engagement when competing with extracurricular activities, changing technology, other current issues, and the slow process of policy change. Liz Anker said,

Policy change is very slow. [It] took more than 10 years to get clean indoor air. That can be a challenge when working with teens. We have a 5, maybe 6, year window of time working with youth. ... It's really important for our coordinators to find and celebrate and highlight with the youth the incremental wins along the way. Making sure the small victories that contribute to the whole, the youth can see the process of policy change over the long term, and understand their efforts here are not wasted. They are contributing little by little to move the needle. ... For a teen, it's important to see: You are making change here. We're getting there.

Other barriers include needing better coordinated efforts within and across states (n=2), not getting approval from schools to allow educational field trips without a teacher present (n=1), and having advisors that struggle to take a backseat to let the youth lead (n=1).

1. US Centers for Disease Control and Prevention. *Best practices for comprehensive tobacco control programs user guide: Youth engagement—state and community interventions category*. Published 2010. www.cdc.gov/eval/tools/strategies/index.html
2. Hart RA. *Children's participation: From tokenism to citizenship (Innocenti Essays No. 4)*. United Nations International Children's Emergency Fund (UNICEF). Published 1992. www.unicef-irc.org/publications/pdf/childrens_participation.pdf
3. Fletcher A. *Ladder of student involvement in schools*. Published 2011. <https://adamfletcher.net/wp-content/uploads/2015/03/2011-school-ladder.pdf>
4. US Surgeon General. *Preventing tobacco use among youth and young adults: A report of the surgeon general*. US Department of Health and Human Services. Published 2012. www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/full-report.pdf

Discussion

Strengths & Limitations ● ● ● ● ● ●

Strengths of the online search are that it provided a broad overview of current active programs nationally, and it created a list of potential contacts for interviews.

Limitations of the online search relate to the nature of the method: programs with poor search engine optimization and/or no, little, or outdated online presence would be absent from the results. Furthermore, this review may include some inactive programs with websites that remain posted. Additional potential discrepancies are illustrated by the high occurrence of findings that were changed in response to different information provided by 13 of 14 interview participants. Therefore, the findings presented in the table should be considered an approximation. Findings from the interviews likely represent program activities more accurately.

Strengths of the interviews included the use of probing questions, the detailed transcripts from recorded interviews, and the relevance of this report to participants' work, as expressed by several participants.

Limitations of the interviews include that results are not intended to be nationally representative, as groups were not contacted with a purpose of generalizability. The conversational format, lack of anonymity, and knowledge of report dissemination to Lung and other participants could have inhibited participants from presenting less desirable information.

Conclusion ● ● ● ● ● ● ● ● ● ● ● ● ● ● ● ●

From an online search, 35 youth anti-tobacco groups were found in 28 states, plus 2 programs that span multiple states.

From key informant interviews, performing outreach events and advocating for policy change are the most common program activities, with diverse types of events and policy priorities. The Campaign for Tobacco-Free Kids' "Taking Down Tobacco" training program is widely used for evidence-based education and skill building. Evaluation commonly consists of tracking members' activities and gathering event feedback, and can include other methods of eliciting adult and youth feedback, such as surveys, focus groups, and discussions. Some programs approach youth involvement by offering a menu of pre-selected options; some instead envision adults as support for youth-created initiatives. Other common themes were valuing peer education, striving to eradicate youth tobacco use, wanting to foster youth development, and struggling to compete with youths' busy schedules and maintain programmatic funding.

Youth involvement is important to engage youth as change makers, prevent future smokers, and combat the tobacco industry's targeting of youth. As the recent popularity of e-cigarettes among youth has created "a whole new ballgame," youth anti-tobacco programming remains relevant for changing policies, affecting social norms, and improving health outcomes. *See Appendix V for program planning questions to consider.*

Youth Anti-Tobacco Groups in the US

State/ District	Program	Managing Organization	Educate peers	Advocate for policy change	Assess retail environ- ments	Perform outreach events	Host trainings/ conferences
AL	<i>None found</i>						
AK	Alaska Tobacco Control Alliance Youth Encouraging Alaskans' Health (YEAH!) Teen Ambassadors*	Alaska Tobacco Control Alliance	✓			✓	✓
AZ	Students Taking A New Direction (STAND) Youth Coalition	Arizona Department of Health Services	✓	✓		✓	
	Counter Strike	Arizona Attorney General's Office & Arizona Department of Health Services			✓		
AR	Project Prevent Youth Coalition*	Arkansas Department of Health	✓	✓	✓	✓	
CA	California Youth Advocacy Network (CYAN) Youth Board of Directors	Public Health Foundation Enterprises, Inc.		✓		✓	✓
	Nevada County Tobacco Use Prevention Youth Coalition*	Nevada County Health and Human Services	✓	✓	✓	✓	
CO	Breathe Easy (BE) Teams	Jefferson County Public Health	✓	✓		✓	
CT	<i>None found</i>						
DE	Kick Butts Generation (KBG) Forces	American Lung Association	✓			✓	
DC	<i>None found</i>						
FL	Students Working Against Tobacco (SWAT) chapters & Youth Advisory Board	Florida Department of Health		✓		✓	
GA	<i>None found</i>						

State/ District	Program	Managing Organization	Educate peers	Advocate for policy change	Assess retail environ- ments	Perform outreach events	Host trainings/ conferences
HI	Youth Council at the Coalition for Tobacco-Free Hawai'i (CTFH)	Hawai'i Public Health Institute	✓	✓		✓	
ID	<i>None found</i>						
IL	REALITY Illinois	Illinois Department of Public Health		✓		✓	
IN	VOICE Squad	Indiana Teen Institute				✓	
IO	Iowa Students for Tobacco Education and Prevention (I-STEP) chapters & youth Executive Council	Iowa Dept. of Public Health		✓		✓	✓
KS	Resist chapters & Youth Council	Kansas Department of Health and Environment		✓		✓	
KY	<i>None found</i>						
LA	Next Era clubs & Leadership Team	Louisiana Campaign for Tobacco-Free Living	✓	✓		✓	
ME	<i>None found</i>						
MD	<i>None found</i>						
MA	The 84*	Massachusetts Department of Public Health		✓		✓	✓
MI	<i>None found</i>						
MN	Hmong Youth Tobacco Prevention Team*	Tobacco-Free Alliance	✓	✓		✓	
MS	Generation FREE Teams & Youth Advisory Board	The Partnership for a Healthy Mississippi					✓
MO	<i>None found</i>						
MT	reACT	Montana Public Health and Safety Division	✓	✓		✓	
NE	No Limits Groups & Youth Board*	Nebraska Dept. of Health and Human Services	✓	✓		✓	✓

Appendix I

State/ District	Program	Managing Organization	Educate peers	Advocate for policy change	Assess retail environ- ments	Perform outreach events	Host trainings/ conferences
NV	Breakdown	Southern Nevada Health District		✓		✓	
NH	<i>None found</i>						
NJ	<i>None found</i>						
NM	Evolverment New Mexico	New Mexico Department of Health		✓		✓	
NY	Reality Check*	New York State Department of Health	✓	✓		✓	✓
NC	<i>None found</i>						
ND	<i>None found</i>						
OH	<i>None found</i>						
OK	<i>None found</i>						
OR	<i>None found</i>						
PA	Tobacco Resistant Unit (TRU)	Pennsylvania Alliance to Control Tobacco (PACT) & the American Lung Association	✓	✓		✓	
RI	<i>None found</i>						
SC	<i>None found</i>						
SD	<i>None found</i>						
TN	Tennessee Stop Tobacco and Revolutionize Our New Generation #TNStrong*	Tennessee Department of Health		✓		✓	✓
	#WeDontPuff Youth Advisory Council*	Shelby County Health Department	✓	✓		✓	
TX	Students, Adults and Youth Working Hard Against Tobacco! (Say What!)*	Texas Department of State Health Services	✓	✓		✓	✓
	Peers Against Tobacco		✓	✓			
UT	Weber-Morgan Governing Youth Council	Weber-Morgan Health Department	✓	✓		✓	

State/ District	Program	Managing Organization	Educate peers	Advocate for policy change	Assess retail environ- ments	Perform outreach events	Host trainings/ conferences
VT	Vermont Kids Against Tobacco (VKAT)	Vermont Department of Health	✓	✓	✓	✓	
	Our Voices Xposed (OVX)*		✓	✓		✓	✓
VA	<i>None found</i>						
WA	<i>None found</i>						
WV	RAZE	American Lung Association	✓	✓		✓	
WI	FACT	American Lung Association	✓	✓		✓	
WY	<i>None found</i>						
Multiple states	Teens Against Tobacco Use (T.A.T.U.)	American Lung Association	✓	✓		✓	
	Campaign for Tobacco-Free Kids National Youth Ambassadors*	Campaign for Tobacco-Free Kids		✓		✓	

* program findings from the online search were updated based on information given during the interview

Key Informant Interview Guide

Guiding research questions

What are the activities of youth tobacco prevention and education group programs in the US?

How are the youth involved?

How are youth tobacco programs being evaluated?

How do staff of tobacco programs foresee program sustainability?

Email to potential participant

Subject: Interviewing Youth Tobacco Program Managers/Facilitators

Hello (name),

I'm a Project Manager with the Research & Evaluation Group at Public Health Management Corporation in Philadelphia. We are conducting key informant interviews with program managers and facilitators of youth tobacco prevention and education programs across the US. This work is contracted by the American Lung Association in West Virginia, and we plan to analyze the interviews for an internal (not public) report that includes best practices in youth tobacco group programs, a scan of active groups, and insight into the current landscape of programming. We found your program (program name) through an online search for US youth tobacco programs, and we are interested to learn more about the activities, youth involvement, evaluation, and sustainability of youth tobacco programs.

Interviews will take place over the phone during the first three weeks of October and we expect that interviews will take about 30 minutes. We are offering a \$25 Target e-gift card, to be sent after the interview, as appreciation for your time.

If you are interested, please confirm your role with (program name), and we can schedule a time to talk. We really appreciate your consideration, and we hope to hear from you soon.

Thank you,

(Staff name)

Project Manager

Research & Evaluation Group at PHMC

Phone call: Introduction

Thank you for taking the time to speak with me today. I'm (Staff name) and I am a Project Manager with the Research & Evaluation Group at Public Health Management Corporation in Philadelphia.

As I mentioned in my email, we are conducting interviews with program managers and facilitators of youth tobacco prevention and education programs across the US. This is for work contracted by the American Lung Association in West Virginia. We want to better understand the activities, youth involvement, evaluation, and sustainability of youth tobacco programs.

The interview today will last about 30 minutes. Do I have your permission to record and transcribe the interview?

We would like to include in the report a list of all participants and program names interviewed. Do I have your permission to list your name and program?

If no: Ok, then I will keep that information private.

If yes: Do I have your permission to attribute any direct quotes that may be featured to you?

If no: Ok, then I will list your name and program, but not attribute any quotes to you.

Phone call: Questions

Prompts will be used if a participant is giving short and/or vague responses.

Q1. Can you please give an overview of your program?

Q2. What are the most common activities?

Follow up: Of those, which do youth like the most?

Q3. Does the program use an educational curriculum?

Prompt if they used an established curriculum: What is the name of the curriculum? Who is the creator?

Prompt if they designed it themselves: What sources or references did you use to create the content?

Q4. What involvement do youth have with advocacy related to state, local, or school policies?

Prompt: What specific activities are youth doing to enact policy change?

Q5. What do you think are strengths of your program?

Prompt: Why do those make your program stronger?

Q6. What are some of the challenges?

Prompt: What are the effects of these challenges?

Q7. What input do youth have into the program activities?

Appendix II

Q8. *If there's a youth board/council in addition to groups/chapters:* Please describe the role of the youth council.

Prompt: How do council activities differ from group/chapter activities?

Q9. Thinking about the big picture of tobacco prevention and cessation as a public health issue, why do you think youth involvement is important?

Prompt: Why are youth tobacco programs needed?

Q10. What is the overall goal of the program?

Q11. How do you evaluate your program?

Prompts: What would you consider success? How do you measure outcomes? How do you use evaluation to make changes to the program?

Q12. How does the program track youth activities?

Prompts: How do youth report their activities? How do they track their reach?

Q13. What barriers exist to the sustainability of your program and other youth tobacco programs in the US?

Q14. Is there anything else you'd like to share about your perspective on youth tobacco programs?

Phone call: Thank you & Incentive

Ok, that concludes our questions. I really appreciate your time. Do you have any questions for me?

Again, we're interviewing about 15 to 20 people, and then we'll analyze the data and use it in a report for the American Lung Association in West Virginia. I will send you a copy of the finished report for your reference. I'll send your \$25 Target e-gift card within the next day. Is the email address I used to contact you for the interview the right one to send the gift card to?

Thank you!

Key Informant Interview Participants

Naa Aku Addo

Tobacco Control and Prevention Program
Specialist
Vermont Department of Health
Our Voices Exposed (VT)

Elizabeth Anker

Program Manager
New York State Department of Health
Reality Check (NY)

Kathleen Bates

Program Manager
Texas State University
Say What! Teen Ambassadors (TX)

Brittney Becton

Public Health Coordinator
Shelby County Health Department
#WeDontPuff Youth Advocacy Council (TN)

Carly Caminiti

Senior Program Manager
Health Resources in Action, Inc.
The 84 (MA)

Shannon Glaz

Health Education Coordinator & Tobacco Project
Director
Nevada County Public Health
Nevada County Tobacco Use Prevention Coalition
(CA)

Molly Kincaid

Project Coordinator
Firespring
No Limits (NE)

Tou Thai Lee

Independent Consultant
Tobacco-Free Alliance of Minnesota
Hmong Youth Tobacco Prevention Team (MN)

Anna McGovern

Wellness Education Coordinator
Rural Alaska Community Action Program, Inc.
(RurAL CAP)
YEAH! (AK)

Scott Stensrud

Statewide Youth Coordinator
Hawai'i Public Health Institute
Youth Council (HI)

Laura Taylor

Tobacco Outreach Specialist
Arkansas Children's Hospital
Project Prevent Youth Coalition (AR)

Gustavo Torres

Director of Youth Advocacy
Campaign for Tobacco-Free Kids
National Youth Ambassadors (US)

Tokesha Warner

Public Health Program Director 2
Tennessee Department of Health
TNSTRONG (TN)

Thank you all for your participation and insights shared.

Educational Curricula Used

Resources named by participants:

- [“Taking Down Tobacco”](#) (TDT) by the Campaign for Tobacco-Free Kids (n=10)
- [American Lung Association](#) (n=3)
- [“Catch My Breath”](#) by the University of Texas Health Science Center at Houston School of Public Health (n=2), noted as the only e-cigarette curriculum
- [Counter Tobacco](#) by the University of North Carolina (n=2)
- [CDC’s website](#) (n=2)
- [Truth Initiative](#) (n=2)
- [National Institute of Health’s \(NIH\) website](#) (n=1)
- Credible Fights (n=1)*
- [Institute for Global Tobacco Control](#) at the Johns Hopkins Bloomberg School of Public Health (n=1)
- [Counterbalance Campaign](#) by the Vermont Department of Health (n=1)
- [“Get Smart About Tobacco”](#) by Scholastic (n=1)
- [“One Voice Youth Empowerment Model”](#) by Dover New Hampshire Youth 2 Youth Group (n=1), though it was not recommended due to lack of appreciation for diversity
- Tennessee Teens Talk Tobacco (T4) (n=1)*
- [“Tobacco 101”](#) by the Association for Nonsmokers-Minnesota (n=1)
- Creating own based on state rules about lobbying (n=1)

* no website found

Program Planning Questions

These questions can be used to guide program planning. They are driven by insights shared by participants and are organized by topic as discussed in the report.

Activities

1. Which activities are most important to the group's focus?
2. What new community outreach activities shared in this report does the group want to try?
3. How can the group facilitate policy advocacy at the local, school, state, and/or national levels?
 - a. What opportunities exist for coordination with other organizations?
 - b. How will youth members take part in choosing policy priorities?
4. What opportunities exist to better integrate youth members into anti-tobacco education activities?
5. If the group hosts conferences or summits, what are the intended benefits for youth attendees?
 - a. What are the learning objectives of its components?

Goals

6. What broad change does the group want to effect?
7. How does the group want to affect their youth participants?

Educational Curricula

8. What "Taking Down Tobacco" resources could be helpful?
 - a. For what additional topics and skills do youth members want more training?
 - b. How do the educational components consider equity?

Youth Involvement

9. How would Hart's Ladder categorize the level of youth involvement?
 - a. What steps can help move youth involvement towards youth/adult equity?

Program Evaluation

10. How can youth and adult feedback be used to make program improvements?
11. How can evaluation situate the group's work towards "moving the needle" of community norms and policies?

Strengths

12. What resources could help strengthen facilitators' engagement with youth development?
13. Which other youth anti-tobacco groups or networks would be helpful to connect with?

Challenges

14. What practices could help maintain youth engagement?
 - a. What other communication methods could be helpful?
 - b. What other locations for and methods of holding meetings could be helpful?
 - c. How does your group prioritize the number of versus the commitment of youth participants?
15. What practices could help balance staff burden of facilitators?
 - a. What reusable materials could be developed?

Sustainability

16. How can the program advocate broadly for funding of youth anti-tobacco groups?
 - a. How can the group engage stakeholders to show the continued need for tobacco prevention?

