

Section 1:  
Implementing a Comprehensive  
Approach to Tobacco Prevention



## IMPLEMENTING A COMPREHENSIVE APPROACH

Comprehensive tobacco control programs effectively prevent and reduce tobacco use. A comprehensive approach includes strategies that target both the individual and the environment. Here are a few examples of individual and environmental strategies. Individual strategies include cessation and education programs while environmental strategies include tobacco free policies, rules regarding smoke-free areas, and tobacco tax increases.

The Centers for Disease Control and Prevention (CDC) promotes the use of a comprehensive approach to prevent and reduce tobacco use. In fact, the CDC states that a comprehensive approach to tobacco prevention and control requires coordination and collaboration across the federal government, across the nation, and within each state (1). This approach includes preventing young people from starting to smoke, eliminating exposure to secondhand smoke, promoting quitting among young people and adults, and identifying and eliminating tobacco-related health disparities (2). Other organizations agree, including the U.S. Department of Health and Human Services. The Surgeon General states that a comprehensive approach is one that optimizes synergy from applying a mix of educational, clinical, regulatory, economic and social strategies (3). In addition, the Tobacco Technical Assistance Consortium (TTAC) from Emory University states that a comprehensive strategy for campus tobacco prevention combines traditional tobacco education/cessation programs with efforts to create a physical, social, and policy environment that supports tobacco-free campuses (4). The TTAC hosts the College Tobacco Prevention Resource (CTPR) which aims to provide

practical information, ideas, and guidance to assist college leaders with planning, implementing, and evaluating effective campus tobacco policies and programs (4).

The Post-Secondary Tobacco Prevention Toolkit is infused with strategies and examples that may be implemented as part of a comprehensive approach to prevent and reduce tobacco use on campus. A single strategy implemented on campus may not effectively reach target goals and expected outcomes. However, several strategies that target the individual and the environment may be effective when implemented on campus. The Toolkit includes several cases study examples from the TTAC. Five Strategies for Comprehensive Campus Tobacco Prevention (4):

1. Create a tobacco-free normative environment
2. Restrict tobacco sales, advertising, and promotion
3. Increase and enforce sound tobacco-related rules and policies
4. Educate students about tobacco prevention
5. Offer tobacco cessation programs designed for college students

These five strategies are a good starting point for college campuses that are considering a comprehensive approach to tobacco prevention. The strategies target the issues that are raised by the CDC and the Surgeon General and they are designed for use on campus. Additional detail about the five strategies is outlined below (4). Several strategies tie directly to policy and curriculum and therefore that information is discussed in those Toolkit sections.

### **Strategy 1: Create a tobacco-free normative environment (4).**

Many students mistakenly believe that tobacco use is more common on campus than is actually the case. The high visibility of smoking, popular media portrayals of smoking, and heavy marketing practices of the tobacco industry to college students perpetuate this widespread belief. This misperception may, in turn, create an environment that promotes smoking.

In fact, most college students do not smoke. Correcting misperceptions about smoking prevalence is an important part of creating a healthier tobacco-free normative environment, where tobacco use is viewed as the exception rather than the rule. To this end, some schools have implemented marketing campaigns to bring student perceptions about smoking prevalence and consumption in line with actual behaviors.

Correcting misperceptions can alleviate pressure to “fit in” with the perceived norm about campus smoking. Helping nonsmokers realize that they are in the majority may encourage them to speak out in support of tobacco control policies on campus.

Changing the physical environment so that campus buildings are tobacco-free can also improve the normative environment on campus. One study found that students who live in smoke-free dorms are 40% less likely to start smoking (5).

In conjunction with eliminating smoking in campus buildings it is important to assure that smokers do not cluster at building entrances. In addition to exposing passersby to secondhand smoke, the high visibility of smokers at building entrances can bolster the misperception that a great many people smoke. Some campuses are experi-

menting with designated smoking areas located away from high traffic areas.

In making decisions about creating smoke-free spaces, it is important to consider not only students but also the positive benefit of smoke-free work environments for faculty and staff. All schools should familiarize themselves with local and state tobacco laws. As of June 2003, 1609 communities nationwide had passed local clean indoor air laws that place restrictions on tobacco use in locations such as workplaces and restaurants (6).

Strategy case study examples for creating a tobacco-free environment are highlighted in the Policy Section of this Toolkit.

#### **Tobacco Use Prevention Media Campaigns: Lessons Learned from Youth in Nine Countries (7).**

The Office on Smoking and Health of the Centers for Disease Control and Prevention (CDC) reviewed evaluation data on tobacco use prevention media campaigns from Australia, Canada, England, Finland, the Netherlands, Norway, Poland, Scotland, and the United States (7). The research assessed message content and classified the effectiveness of each message theme into one of four categories: effective, effective but with limited research data, inconclusive, or not effective (7). The following information is from the report and summarizes the effectiveness of message themes.

In general, successful youth tobacco use prevention mass media campaigns (7):

- Are most effective when they are part of broader, comprehensive tobacco control programs designed to change a community's prevailing attitudes concerning tobacco use.

- Include ads with strong negative emotional appeal that produce, for example, a sense of loss, disgust, or fear.

- Introduce persuasive new information or new perspectives about health risks to smokers and non-smokers.

Use personal testimony or graphic depiction formats that youth find emotionally engaging but not authoritarian.

Feature multiple message strategies, advertising executions, and media channels to consistently attract, engage, and influence diverse youth with varying levels of susceptibility to smoking.

Provide adequate exposure to media messages over significant periods of time.

Incorporate comprehensive formative, process, and outcome evaluation plans.

#### **Effective Message Theme: Health Effects**

Media campaign and message evaluation research has consistently shown that portraying the serious negative consequences of smoking in a credible manner is effective in influencing youth; in some instances, these messages were shown to have a positive influence on attitudes or behaviors concerning not using tobacco. Simply presenting health information is not enough. New information or new perspectives need to be presented in ways that engage viewers emotionally.

#### **Effective Message Theme: Deceptions of the Tobacco Industry**

The effectiveness of messages in a mass media campaign emphasizing the deceptive practices of the tobacco industry have been assessed mainly in the United States. Many, but not all, of the studies on these ads find they can successfully influence youth knowledge about the tobacco industry, attitudes toward smoking and the tobacco industry and, in some cases, smoking behaviors.

#### **Effective but with Limited Research Message Theme: Social Approval/Disapproval**

Messages addressing social approval of not smoking or social disapproval of smoking or that introduce refusal skills have been found in some studies to be effective in increasing awareness of tobacco prevention issues among youth and reducing intentions to

smoke. Research results on the effectiveness of secondhand smoke message content are positive, but the secondhand smoke message has rarely been used as a sole or major focus in a youth tobacco use prevention campaign.

#### **Inconclusive Message Theme: Cosmetic**

Findings on cosmetic, short-term effects, addiction, and athletic performance ad content are limited and results were inconclusive.

#### **Not Effective Message Theme: Individual Choice**

Research indicates that the individual choice message is not effective in preventing youth from using tobacco.

## **Strategy 2: Restrict tobacco sales, advertising, and promotion (4)**

The tobacco industry strategy of marketing to young adults has been well-documented. Advertisements, media presentations, and tobacco-related promotions are prominent both on- and off-campus. The 1998 Master Settlement Agreement restricted advertising to those under 18 years old; since then, the tobacco industry has made a visible push to advertise to 18–24 year olds, including college students.

There are several strategies to restrict tobacco sales, advertising, and promotion that you may want to consider for your campus (4):

- Ban tobacco advertising on campus, including the school newspaper and other publications and at campus events.
- Ban distribution of tobacco-related products, paraphernalia with tobacco logos, or coupons on campus.
- Ban tobacco sales on campus: vending machines, campus stores.

### **University of Washington**

The TTAC provides a great case study example of a college campus that restricted tobacco sales, advertising, and promotion (4). The University of Washington is located in Seattle, Washington and has an enrollment of 37,400 students (26,900 undergraduate, 10,500 graduate). In March 2000, the University of Washington (UW) banned the sale of tobacco products, ending 49 years of campus sales.

Two public health fellowship recipients led a campaign to ban campus tobacco sales when they realized that the student newspaper advertised tobacco products and campus stores sold tobacco. The fellows first gathered data on tobacco use among UW students. As a part of the campus tobacco assessment process, they learned that minors were buying tobacco at UW stores. This finding was confirmed by Washington Department of Health compliance checks. Letter writing campaigns, boycotts of student facilities, educational campaigns, the decision of UW to divest from tobacco stocks, awareness of tobacco sales bans on other campuses, and local media involvement all built pressure for the ban on campus tobacco sales. After an 18-month campaign, UW banned campus tobacco sales in March 2000. UW residence halls became smoke-free in the fall of 2001. Smoking rates have decreased at UW since the ban took effect. Other schools have used the UW experience as a model. The campaign to ban tobacco advertising in the school newspaper continues. Special attention is being paid to the high level of tobacco use at fraternities and sororities as well as tobacco company sponsored events at “Greek” houses.

### **Strategy 3: Increase and enforce sound tobacco-related rules and policies (4)**

It is important for colleges and universities to have written rules and policies about tobacco use, and clearly defined sanctions for violations. Tobacco-related rules, policies, and sanctions should be developed with input from all campus stakeholders.

The school should take responsibility for publicizing and enforcing tobacco-related rules and policies.

There are several strategies to increase and enforce sound tobacco-related rules and policies that you may want to consider for your campus (4).

- Develop sound tobacco-related rules, policies, and related sanctions with input from all stakeholders: students, faculty, administration, staff, and parents.
- Publicize tobacco-related rules, policies and sanctions.
- Enforce sanctions for violating tobacco-related rules and policies.

Strategy case study examples for increasing and enforcing tobacco-related rules and policies are highlighted in the Policy Section of this Toolkit.

### **Strategy 4: Educate students about tobacco prevention (4)**

Educating students about tobacco is an ongoing process. Educational approaches may be especially useful in targeting “high-risk” groups such as freshmen, students who are concerned with weight loss, athletes, and others. Curriculum infusion is a tobacco education method by which professors incorporate information about tobacco and the tobacco industry’s marketing practices into their classes. There are many creative examples of tobacco-related curriculum infusion on campus in subjects ranging from economics to theater.

There are several strategies to educate students about tobacco prevention that you may want to consider for your campus (4).

- Implement campus-wide high quality tobacco prevention education programs.

- Implement targeted tobacco prevention education programs for high-risk groups such as athletes, freshman, fraternity and sorority members, students concerned with weight loss, art and theater students, and Lesbian, Gay Bisexual and Transgender students.
- Work with professors to implement curriculum infusion.
- Involve students as peer educators and leaders.

Strategy case study examples for educating students about tobacco prevention are highlighted in the Curriculum Section of this Toolkit.

#### **Strategy 5: Offer tobacco cessation programs designed for college students (4).**

Many students arrive on campus already addicted to nicotine and a substantial percentage of students begin smoking when they enter college. The availability of high-quality campus cessation services is of critical importance. Implementing environmental management strategies, which will create barriers to smoking (e.g., smoke-free dorms) or might make smoking less appealing (e.g., social norms marketing campaigns that decrease perceived normative pressure to smoke), may prompt students to seek out cessation services. Campuses should seek out quality cessation services that are particularly geared to college students, many of whom consider themselves “social smokers,” do not consider themselves addicted, and erroneously assume that quitting will be easy.

There are several strategies to offer tobacco cessation programs that you may want to consider for your campus (4).

- Offer a full-range of high-quality tobacco cessation programs—such as individual and

group counseling, nicotine replacement therapy, referrals to local programs, internet-based programs—that are easily accessible and well-publicized.

- Offer programs geared towards the unique needs of college students.
- Track student tobacco use status at every college health service visit, and offer tobacco users regular reminders of campus tobacco cessation options.
- Train health care providers in motivational interviewing techniques so they can conduct effective interventions at each health center visit for students who smoke.

The South Dakota Department of Health recognizes that cessation plays a key role in comprehensive tobacco prevention efforts. The South Dakota QuitLine offers services to residents throughout the state who are aiming to quit using tobacco. The QuitLine serves individuals that are thirteen years of age or older. Here’s how the South Dakota QuitLine can help. Individuals who use the service will have access to:

- Free professional tobacco cessation coaching,
- Free quitting tobacco workbooks and materials,
- Assistance with nicotine withdrawal medication, and
- Referral to local cessation services.

Call the toll-free South Dakota QuitLine at 1-866-SD-Quits (1-866-737-8487) or visit online at: [www.doh.sd.gov/tobacco](http://www.doh.sd.gov/tobacco).



## **Guidelines for Treating Tobacco Use and Dependence**

The U.S. Department of Health and Human Services offers a guide for clinicians to help smokers quit (8). This document outlines the 5 A's that may be implemented with every patient seen by Student Health Services.

- Ask about tobacco use at every visit. Implement a system that ensures that tobacco-use status is obtained and recorded at every patient visit.
- Advise all tobacco users to quit. Use clear, strong, and personalized language.
- Assess readiness to quit. Ask every tobacco user if he/she is willing to quit at this time.
- Assist tobacco users with a quit plan.
- Arrange follow-up visits.

Studies suggest that healthcare providers should routinely ask all patients about smoking, advise all smokers to quit, assist these smokers with quitting, and arrange follow up visits for these smokers (9). The three most common barriers to treating tobacco dependence by healthcare professionals include:

- “Not enough time”
- “Patients don't want to hear about it”
- “I can't help patients stop”