



KEEP IT SACRED

NATIONAL NATIVE NETWORK



Technical Assistance Webinar

Using Campaigns and Social Media to Address Commercial Tobacco Use

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Public Health Advisor
Indian Health Service

1991 – MPH – Health Behavior – University of Oklahoma

1987 – BS – Health Education – University of Utah

Using Campaigns and Social Media to Address Commercial Tobacco Use

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Indian Health Service

Alberta Becenti is the Public Health Advisor for the Health Promotion/Disease Prevention program for the IHS Headquarters in Rockville, Maryland. She works with 11 IHS Area HP/DP Coordinators to plan and implement activities focusing on obesity, tobacco, and cancer prevention in the community, clinic, school, and worksite. She has work in the field of health promotion and wellness for more than 20 years.

Using Campaigns and Social Media to Address Commercial Tobacco Use

Michelle Johns, MA, MPH

Public Health Educator

CDC's Office on Smoking and Health – Health Communications Branch

1999 – MA – Communication Studies – New Mexico State University

1999 – MPH – Public Health – New Mexico State University

1997 – BA – Communication Studies – New Mexico State University

Using Campaigns and Social Media to Address Commercial Tobacco Use

Michelle Johns, MA, MPH

Public Health Educator

CDC's Office on Smoking and Health – Health Communications Branch

Michelle Johns has served as a public health educator within the Centers for Disease Control and Prevention's Office on Smoking and Health, Health Communications Branch for 20 years. She is the cultural communications subject matter expert and a lead for custom communication technical assistance, and serves as a champion for culturally responsive practices among awardees, partners, and tribal populations in order to reduce health disparities and promote health equity. Most notable is her work on the National Tobacco Education Campaign entitled, *Tips From Former Smokers*[®], resulting in over 9 million quit attempts since 2012, and over half a million smokers who have quit for good.

Faculty Disclosure Statement

- Funding for this webinar was made possible by the Centers for Disease Control and Prevention DP18-1808 Consortium of Networks to Impact Populations Experiencing Tobacco-Related and Cancer Health Disparities grant. Webinar contents do not necessarily represent the official views of the Centers for Disease Control and Prevention.
- No commercial interest support was used to fund this activity.

Accreditation

The Indian Health Service (IHS) Clinical Support Center is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The IHS Clinical Support Center designates this live activity for 1 hour of *AMA PRA Category 1 Credit™* for each hour of participation. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The Indian Health Service Clinical Support Center is accredited with distinction as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

This activity is designated 1.0 contact hour for each hour of participation.

CE Evaluation and Certificate

- Continuing Education guidelines require that the attendance of all who participate be properly documented.
- To obtain a certificate of continuing education, you must be registered for the course, participate in the webinar in its entirety, and submit a completed post-webinar survey.
- The post-webinar survey will be emailed to you after the completion of the course.
- Certificates will be mailed to participants within four weeks by the Indian Health Service Clinical Support Center.

Learning Objectives/Outcomes

By the end of this webinar, participants will be able to:

1. Identify smoking prevention and cessation campaigns that can be adapted for AI/AN populations.
2. Enlist available resources to increase awareness about the negative health effects of commercial tobacco use and exposure to secondhand smoke.
3. Educate patients/community on the Smokefree.TXT messaging program that provides 24/7 encouragement, advice, and tips to quit.



Using Campaigns and Social Media to Address Commercial Tobacco Use

Alberta Becenti, MPH
Indian Health Service

July 10, 2019



Outline

- Background
- Tobacco use
- Health effects of tobacco use
- Collaborative approaches
- Campaign
- Smokefree.TXT

Background

- Smoking is the single most preventable cause of death in the United States.
- Each year, approximately 480,000 persons in the United States die from smoking-related illnesses.
- An estimated 41,000 of these smoking-related deaths are a result of secondhand smoke exposure.
- Smoking has been estimated to cost the United States \$300 per year.
 - \$170 billion in direct medical expenses and \$156 billion in lost productivity each year.

Source: Centers for Disease Control and Prevention:

https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm



Background

Significant health disparities among American Indian/Alaska Native.

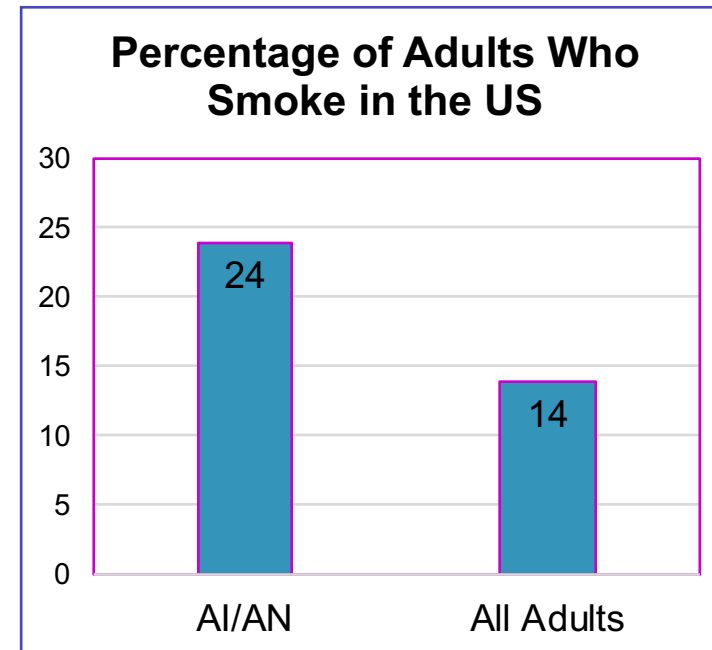
- Cardiovascular Disease
- Cancer
- Diabetes

Many of these health conditions and diseases are related to lifestyle behaviors.

- physical inactivity, commercial tobacco use, and poor diet

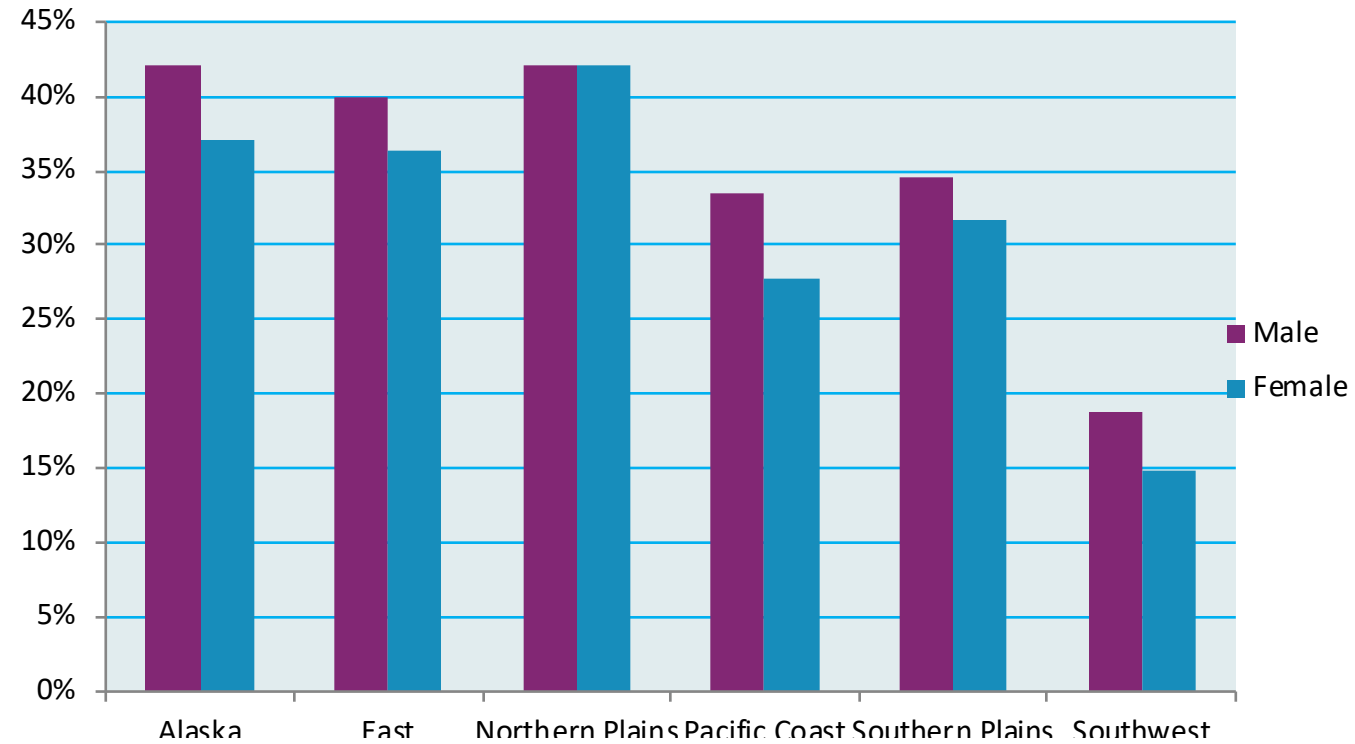
Tobacco Usage

- An estimated 34.3 million people, or 14% of all adults (aged 18 years or older), in the United States smoke cigarettes.
- 24% of AI/AN adults in the United States smoked cigarettes.



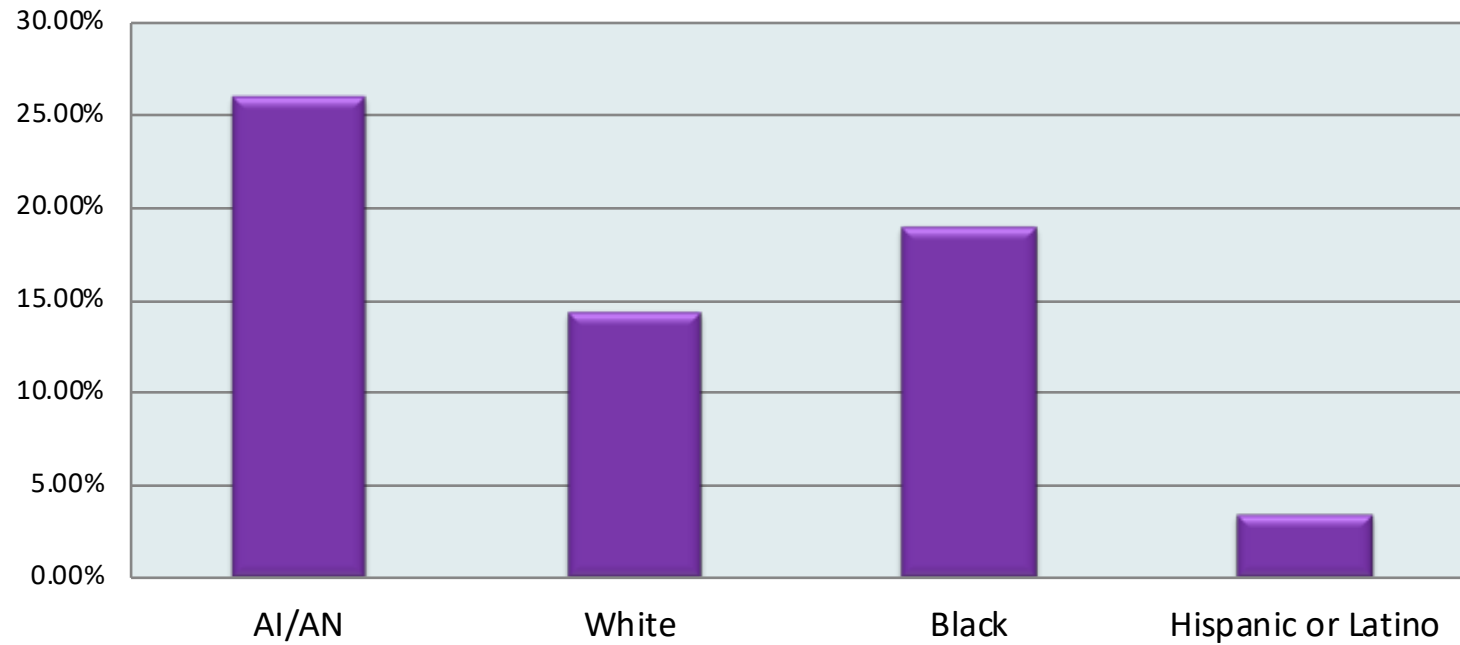
Source: CDC Morbidity and Mortality Weekly Report, Tobacco Product Use Among Adults – United States, 2017. November 9, 2018, 67(44):1225-1232.

Cigarette Smoking Prevalence among AI/AN Adults by Region and Gender



Source: Cobb et al. *American Journal of Public Health*, April 22, 2014 .

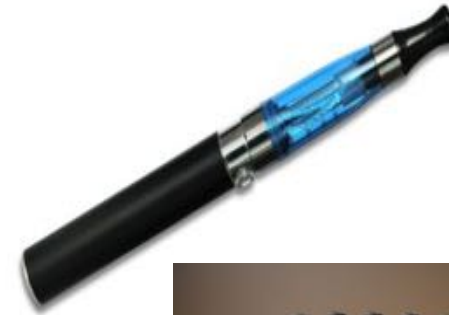
Smoking During Pregnancy Among Women by Ethnicity



Source: Cobb et al. [American Journal of Public Health, April 22, 2014](#) .

E-cigarette Users Among Adults

- Current e-cigarette use was higher among non-Hispanic AI/AN adults (10.7%) and non-Hispanic white adults (4.6%) than among Hispanic (2.1%), non-Hispanic black (1.8%), and non-Hispanic Asian (1.5%) adults.



NCHS Data Brief, October 2015: <http://www.cdc.gov/nchs/data/databriefs/db217.pdf>

Traditional vs. Commercial Tobacco

Traditional tobacco use

- Sacred or ceremonial use for religious or medicinal purposes
- Used as an offering to a elder, healer, or others as a sign of thanks or respect

Commercial tobacco use

- Recreational use

Source: National Native Network <http://keepitsacred.itcni.org/tobacco-and-tradition/traditional-tobacco-use/>



Traditional Use of Tobacco

Some Tribes have used traditional tobacco for centuries

- Prayer
- Blessing
- Medicinal
- Spiritual
- Offering
- Healing
- Protection
- Gift

Traditional Tobacco

Tobacco or other plant mixtures are harvested for the purpose of ceremonial or medicinal purposes.

- Tobacco varies across tribes and regions.
 - Some use wood barks, herbs, and plants that does not contain nicotine.

In some Tribes, specific individuals or people grow, harvest, and prepare traditional tobacco.

Tobacco Usage Impacts on Health

- Tobacco use is known to cause health problems and diseases.
 - Cancers (lung, bladder, kidney, pancreas, nose, and throat)
 - Heart disease
 - Lung disease
 - Emphysema
 - Diabetes
 - Chronic Obstructive Pulmonary Disease (COPD)
 - Gum disease

Smoking and Diabetes

- Smokers are 30–40% more likely to develop type 2 diabetes than nonsmokers.
- People with diabetes who smoke are more likely than nonsmokers to have trouble with insulin dosing and with controlling their disease.
- Smokers with diabetes have higher risks for serious complications, including:
 - Heart and kidney disease
 - Poor blood flow in the legs and feet
 - Peripheral neuropathy

Source: U.S. Department of Health and Human Services. [The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General.](#) , 2014 [accessed 2014 May 5].

Secondhand Smoke Impacts on Health

- It has been linked to health concerns in non-smokers such as:
 - Asthma
 - Sudden Infant Death Syndrome (SIDS)
 - Respiratory infections
 - Ear infections

Source: Centers for Disease Control and Prevention https://www.cdc.gov/tobacco/basic_information/secondhand_smoke/

Collaborative Approaches to Support (commercial) Tobacco-Free Communities

- Key Partners
 - Indian Health Service/Tribes/Urban Indian Health, states, non-profit organizations and other stakeholders
- Multi-level strategies
 - Communities, schools, & worksites
- Multi-disciplinary





*Bemidji Area Indian Health Service
 Health Promotion Program
 Partners Meeting*

Funding Partners in TRADITIONAL TOBACCO movement in MN



Mystic Lake Hotel / Prine Lake MN



19 & 20 April 2017



Vision

Keeping Tobacco Sacred: Honoring our Indigenous Lifeways.

Mission

By Honoring our Legacy of Traditional Tobacco, We See Generations Commercial Tobacco-Free by Sharing Our Culture, Traditions and Teachings Among all Indigenous People.



National Indian Health Service
Health Promotion Health Education
Blueprint for Commercial Tobacco Prevention & Reduction
April 2017

Vision
KEEPING TOBACCO
CASCADY HONORING OUR
INDIGENOUS LIFE WAYS

National Indian Health Service
Health Promotion Health Education
Blueprint for Commercial Tobacco Prevention & Reduction

Mission
BY HONORING OUR LEGACY
OF TRADITIONAL TOBACCO WE SEE
GENERATIONS COMMERCIAL
TOBACCO-FREE BY
GLAZING OUR CULTURE, TRADITION &
TECHNIQUE AMONG ALL INDIGENOUS
PEOPLES.

• UNIVERSAL SCREENING
OF TOBACCO (prevalence)
- Identify high risk individuals
- Universal access to
treatment
- Supportive environment
- Policies

• HONORING
SYSTEMS MUST
TRADITIONAL HEALING
PRACTICES

• ID. STAKEHOLDERS
- Tribal
- State
- Federal
- Community

• DEFINE OBJECTIVES
- Short term
- Long term
- Measurable
- Achievable
- Specific
- Time-bound

• COALITION-BUILDING

• ADVOCACY + DEMONSTRATION
- Grass roots
- Policy change
- Supportive environment

• PARTNER with
tribal communities
to DEVELOP
tobacco
prevention
interventions

• YOUTH ADVOCACY
- Develop youth
advisory
committees
- Support youth
leadership
- Engage youth
in tobacco
prevention
efforts

• ACTIVE EDUCATION
- Develop
culturally
appropriate
tobacco
prevention
materials
- Engage
tribal
members
in
education
efforts

• TRADITIONAL TOBACCO
- Support
tribal
members
in
tobacco
prevention
efforts

• DEVELOP
TRADITIONAL
TOBACCO ORIGIN
- Support
tribal
members
in
tobacco
prevention
efforts

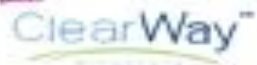
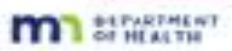
• MEDIA/CAMPAINS
- Develop
culturally
appropriate
tobacco
prevention
materials

• DIGITAL STORY BRANDING
- Engage
tribal
members
in
tobacco
prevention
efforts

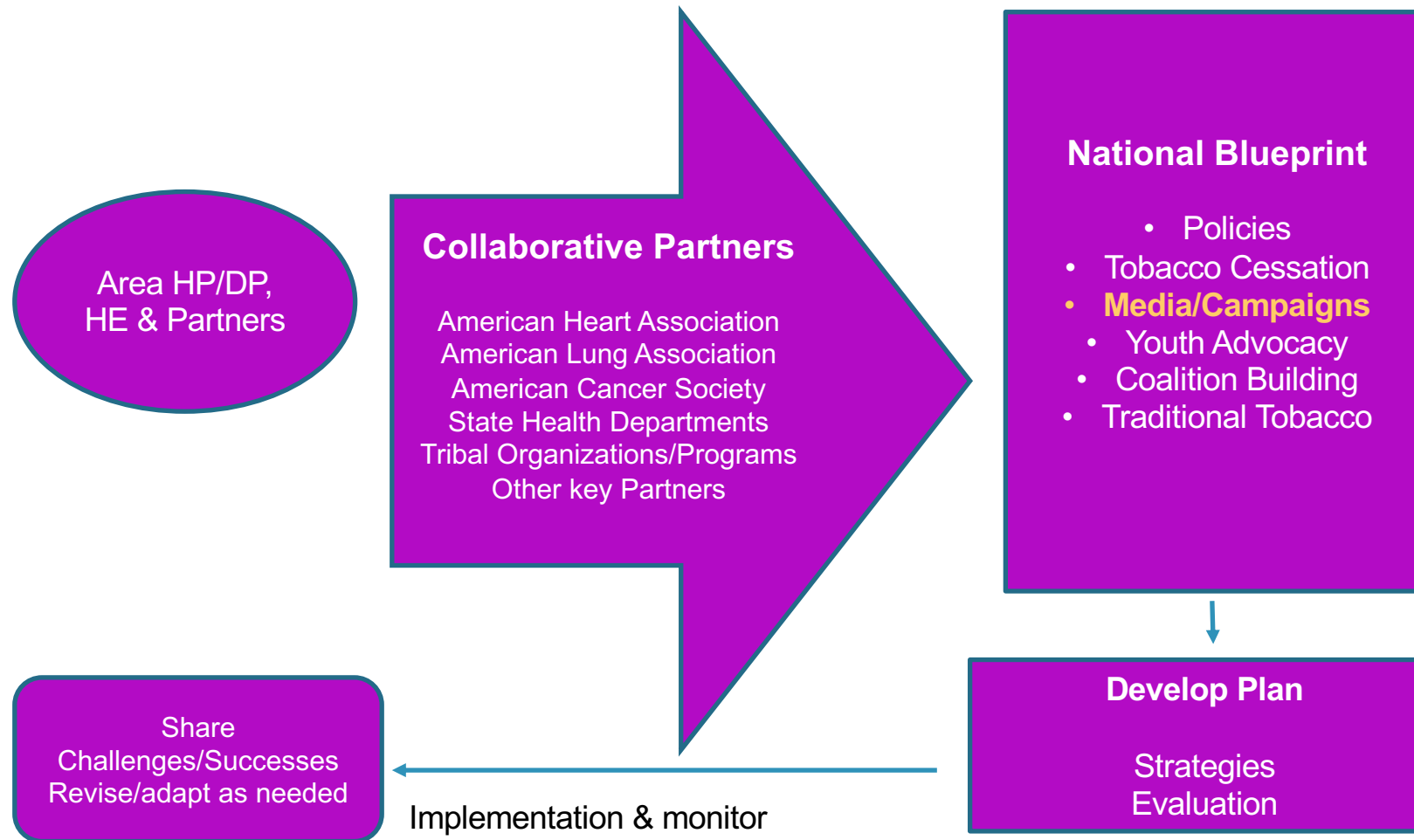
• TOBACCO CESSATION
- Support
tribal
members
in
tobacco
prevention
efforts

• ACTION
- Engage
tribal
members
in
tobacco
prevention
efforts

Mystic Lake Hotel / Prairie Lake, MN

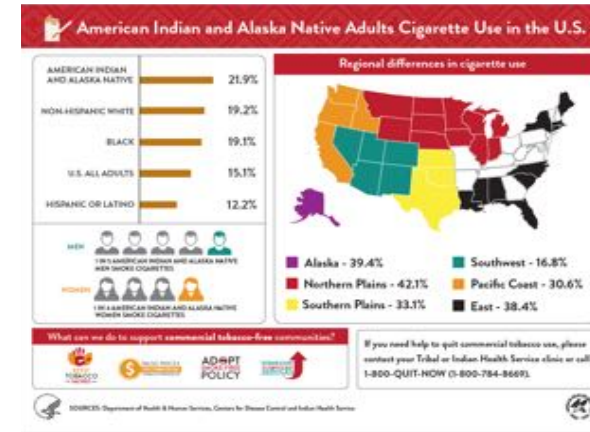


19 & 20 April 2017



Tobacco Prevention Campaign

- Infographics
- Posters
- E-toolkit
- Digital Stories of former users



Smokefree.TXT messaging





What's coming

- Cancer prevention campaign
 - Infographics
 - Posters
 - Digital stories of cancer survivors

Thank you

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USING CAMPAIGNS AND SOCIAL MEDIA TO ADDRESS COMMERCIAL TOBACCO USE

JULY 10, 2019



Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion

Office on Smoking and Health



OVERVIEW

Will share a number of our division communication initiatives (not comprehensive):

- 2019 *Tips From Former Smokers*[®] Campaign
- Social Media
- Quitline Videos
- E-Cigarettes Among Youth Initiative

When CDC references tobacco on our website, in presentations, and in materials, we are referring to commercial tobacco and not the sacred and traditional use of tobacco by some American Indian communities.

Commercial tobacco use is the leading preventable cause of disease, disability, and death.



34M

An estimated **34.3 million** U.S. adults smoked in 2017.



480,000

Cigarette smoking and secondhand smoke exposure kill about **480,000** people in the U.S. each year.



2 in 5

About **two in every five children** are exposed to secondhand smoke.



1 vs. 30

For every one smoking-related death, **at least 30** people live with a serious smoking-related illness.



\$300B

Each year, cigarette smoking costs the US more than **\$300 billion**, including \$170 billion in direct medical costs and \$156 billion in lost productivity.

2019 TIPS® CAMPAIGN: WHAT YOU NEED TO KNOW



New Ads



Media Buy



Website Resources



Partnerships

TIPS FROM FORMER SMOKERS

For years, celebrities were used to get people to smoke. Leonard Nimoy hoped he could get you to stop.

Mr. Spock. That's the first thought when most people hear the name Leonard Nimoy. However, Mr. Nimoy's passion for the arts went far beyond his character on "Star Trek." He was also a writer, poet, photographer, singer and director.



In his late teens, he started smoking cigarettes to emulate the famous actors of his time. Fame and acclaim would follow him for the rest of his life. So, too, would the effects of cigarette smoking.

Mr. Nimoy did quit smoking, but his smoking caused him to develop COPD. Soon after, he began educating the public on COPD and became an advocate for adults to quit smoking and for youth to never start.

Eventually, COPD took its toll and in February 2015, Leonard Nimoy died surrounded by his family.

His daughter, Julie Nimoy, and son-in-law, David Knight, are now carrying on Mr. Nimoy's mission to help educate people about the harmful effects of smoking by working with the Centers for Disease Control and Prevention to include his story as part of the Tips From Former Smokers® campaign. Mr. Nimoy would be proud.

If you or someone you know wants help to quit smoking, call 1-800-QUIT-NOW or go to CDC.GOV/TIPS.



TIPS[®] CAMPAIGN KEY MESSAGES



Smoking causes immediate damage to your body, which can lead to long-term health problems.



For every person who dies because of smoking, at least 30 people live with a serious smoking-related illness.



Now is the time to quit smoking. If you need help, free assistance is available by calling 1-800-QUIT-NOW.

2019 MEDIA BUY

- Began on April 1st and runs through October 6th
- National TV and Digital
- Local Placements
- Targeted Outreach



2019 Tribal Media Activity Summary

Health Clinics

Good Health TV
Broadcasting in 192
clinics in 29 states

Magazines Newspapers

Whispering Winds
Alaska Magazine
Native Oklahoma

Navajo Times
Lakota Country
Juneau Empire
Bristol Bay Times
Albuquerque Journal
Billings Gazette

National Radio

Native One Voice
Native American
Calling
Indigefil
NV1

Local Radio

Alaska: KFBX; KFAT;
KGOT; KTKU, KINY;
KSUP
Arizona, New Mexico:
KTNN;
KANW
Oklahoma: KOKL
South Dakota: KDKO,
KOYA

Digital Media

Geo-targeting to tribal
communities based on
Census data and select
properties such as
Anchorage Daily News

Pandora

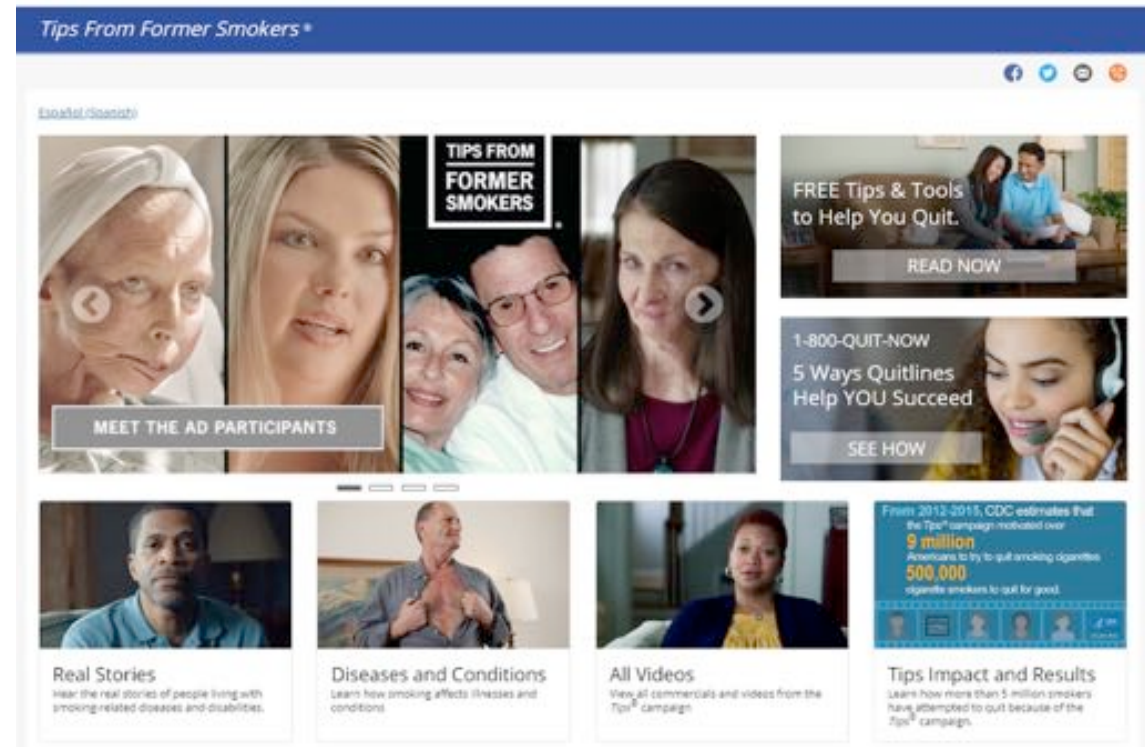
Google (Search): AI/AN
smoking related
Keywords

GOOD HEALTH TV



TIPS® RESOURCES – WEBSITE (WWW.CDC.GOV/TIPS)

- Updated Cessation Content
- Vignettes
- Published Articles
- Partner Resources



cdc.gov/Tips

TIPS® RESOURCES – HEALTHCARE PROVIDER PAGE

New updates include:

- One page layout
- Easier access to tools and resources
- Clinical tools section with cessation resources and information on tobacco dependency
- Quitline and patient-centered materials



www.cdc.gov/TipsHCP

TIPS® RESOURCES – DOWNLOADABLE MATERIALS

Download Center



Free materials including low-resolution TV ads, radio, online, print, and out-of-home ads; and public service announcements

Media Campaign Resource Center

Media Campaign Resource Center (MCRC)

[CDC](#) > [Smoking & Tobacco Use](#) >



Broadcast-quality *Tips* ads and other tobacco countermarketing ads for paid campaigns

HOW YOU CAN SUPPORT THIS YEAR'S CAMPAIGN

- Include *Tips*® in your earned media efforts
- Highlight the impact of the *Tips* campaign on your organization's website, and in other materials
- Syndicate *Tips* content on your organization's website
- Engage the healthcare community and let them know about the free resources that are found on [CDC.gov/tips](https://www.cdc.gov/tips)
- Share the ways you've successfully leveraged *Tips* with your colleagues!



FOLLOW OUR CAMPAIGN AND SUPPORT US VIA SOCIAL MEDIA

**FOLLOW US ON SOCIAL
MEDIA
@CDCTOBACCOFREE**



SOCIAL MEDIA

- We primarily use Facebook, YouTube, Instagram and Twitter and currently have 179,000 followers
- We have a robust collection of images and post content
- CDC's MCRC has a social media image library with thousands of images.
- We'd love to have tribal organizations using and adapting these images.
- Contact mcrc@cdc.gov to get registered to use these and you can add your logos, custom tagging



QUITLINE VIDEOS



- 6 videos that describe what happens when you call a quitline
- Lots of resources available for quitting:
 - quitSTART app
 - Social support
 - Sign up for free texts
 - Sample quit plans

<https://www.cdc.gov/tobacco/campaign/tips/quit-smoking/quitline/index.html>

PREVENTING E-CIGARETTE USE AMONG YOUTH

Project Overview: CDC developed a series of communication activities.

Goal: Educate parents, educators, and health care providers about the risks of e-cigarette use among youth.

Available:

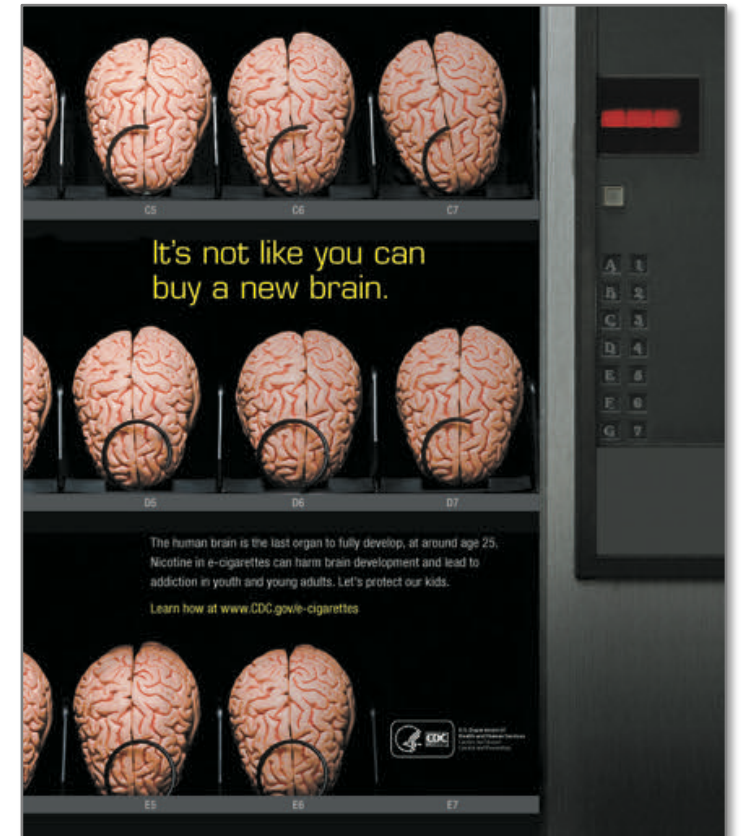
Partner toolkit (PSAs, press release, sample newsletters, articles);

Presentations (about the risks of e-cigarettes for youth & adults);

Fact sheets (targeting parents, educators, & health care providers);

Social media (posts, sample content and images)

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm



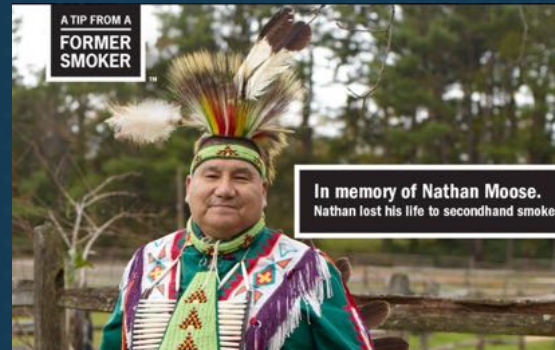
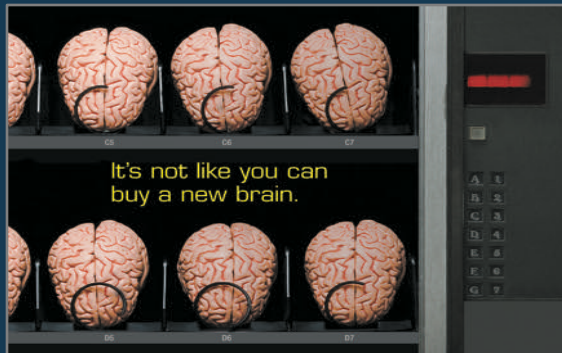
KEY TAKEAWAYS

- We have a number of campaigns and resources available to you for supporting your efforts
- We'd love to work with you to adapt any messaging for use in your community
 - Adaptations
 - Translations
 - Working with language keepers
- We welcome strategy sessions
OSHCommTA@cdc.gov or contact me:
MJohns@cdc.gov



QUESTIONS? THANK YOU!

CONTACT MICHELLE JOHNS FOR MORE INFORMATION AT MJOHNS@CDC.GOV



Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion

Office on Smoking and Health

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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