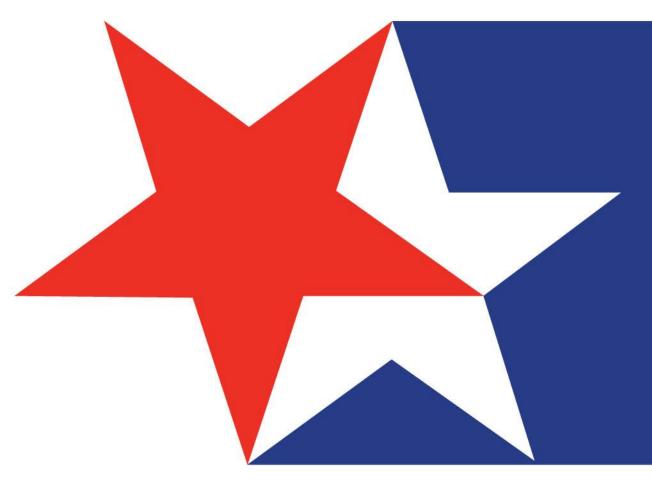
#### The Evaluators' Network

Surveillance & Evaluation (S&E) Webinar: Using Policy Surveillance Methods for K-12 Tobacco-free School Policies: Lessons from the Geographic Surveillance Learning Collaborative

November 30, 2021 3:00-4:00pm

Having trouble connecting?
Dial into the session by calling 1 312 626 6799
Webinar ID 886 4000 2712



#### Using Policy Surveillance Methods for K-12 Tobaccofree School Policies

Lessons from the Geographic Surveillance Learning Collaborative





Law Research





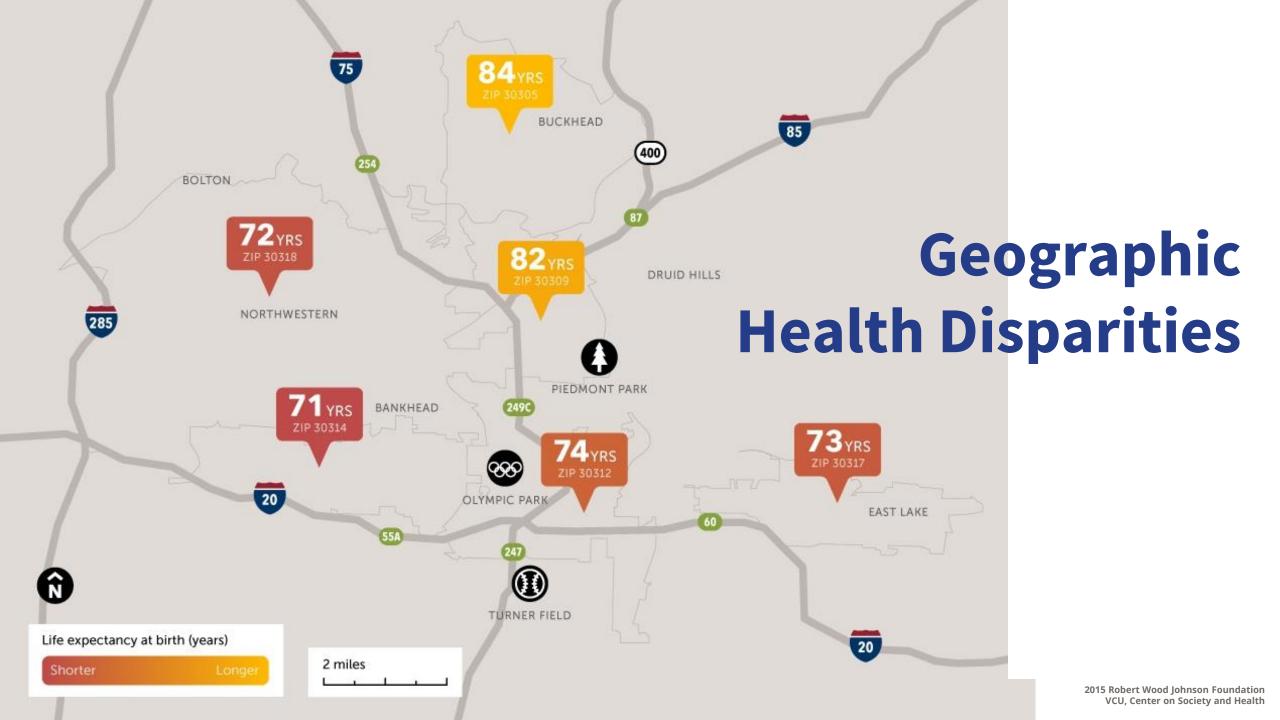






#### Andrew C Romero, M.Ed

Director, Geographic Health Equity Alliance CADCA (Community Anti-Drug Coalitions of America) aromero@cadca.org



# Uneven Access to Smoke-Free Laws and Policies and Its Effect on Health Equity in the United States: 2000–2019

Tobacco control measures have played an important role in the reduction of the cigarette smoking prevalence among US adults.

However, although overall smoking prevalence has declined, it remains high among many subpopulations that are disproportionately burdened by tobacco use, resulting in tobacco-related health disparities. Slow diffusion of smoke-free laws to rural regions, particularly in the South and Southeast, and uneven

Amy Y. Hafez, PhD, Mariaelena Gonzalez, PhD, Margarete C. Kulik, PhD, Maya Vijayaraghavan, MD, and Stanton A. Glantz, PhD

The US adult cigarette smoking prevalence declined from 20.9% to 14.0% between 2005 and 2017. Although the overall prevalence fell across all racial and ethnic groups, differences in prevalence remained among US subpopulations, resulting in continuing tobacco-related health disparities. Subpopulations disproportionately burdened by tobacco use include low-income

residences. Although tobacco control interventions are benefiting the overall population, inequity in access to smoke-free laws and policies has contributed to perpetuating tobacco-related health disparities.

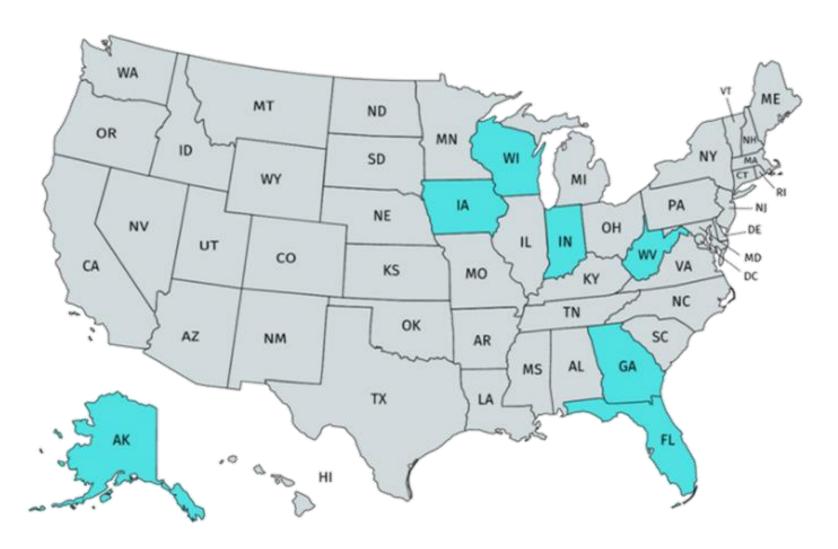
Here we examine the role comprehensive smoke-free laws have played in reducing smoking prevalence and how coverage by of other products such as ecigarettes and inhaled cannabis.)
Promising practices and policies to reduce tobacco-related health disparities would specifically target at-risk subgroups, such as racial/ethnic and low socioeconomic subpopulations that have driven smoking-related disparities, while continuing to strengthen the policy framework in place that has been beneficial with respect to

## Geographic Surveillance Learning Collaborative

Years 1 and 2

Elizabeth Gerndt, MPH
Project Director
Counter Tools
elizabeth@countertools.org

## **Geographic Surveillance Learning Collaborative Year 1**



## **Geographic Surveillance Learning Collaborative Year 2**

#### **Participating States**







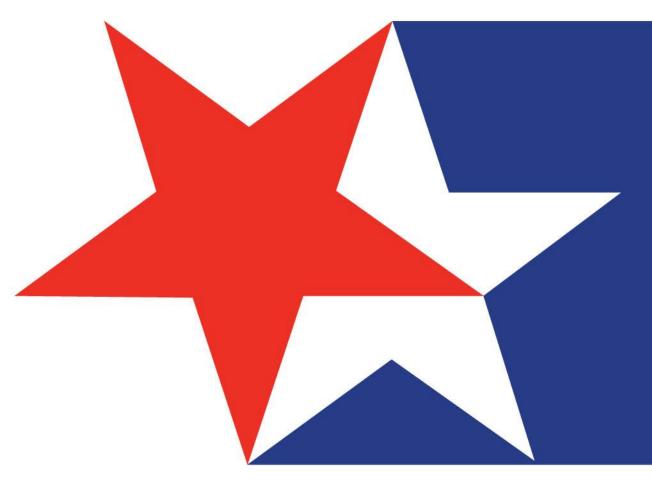
#### Facilitators & Training/TA Providers







Center for Public Health Law Research



#### Using Policy Surveillance Methods for K-12 Tobaccofree School Policies

Lessons from the Geographic Surveillance Learning Collaborative





Law Research





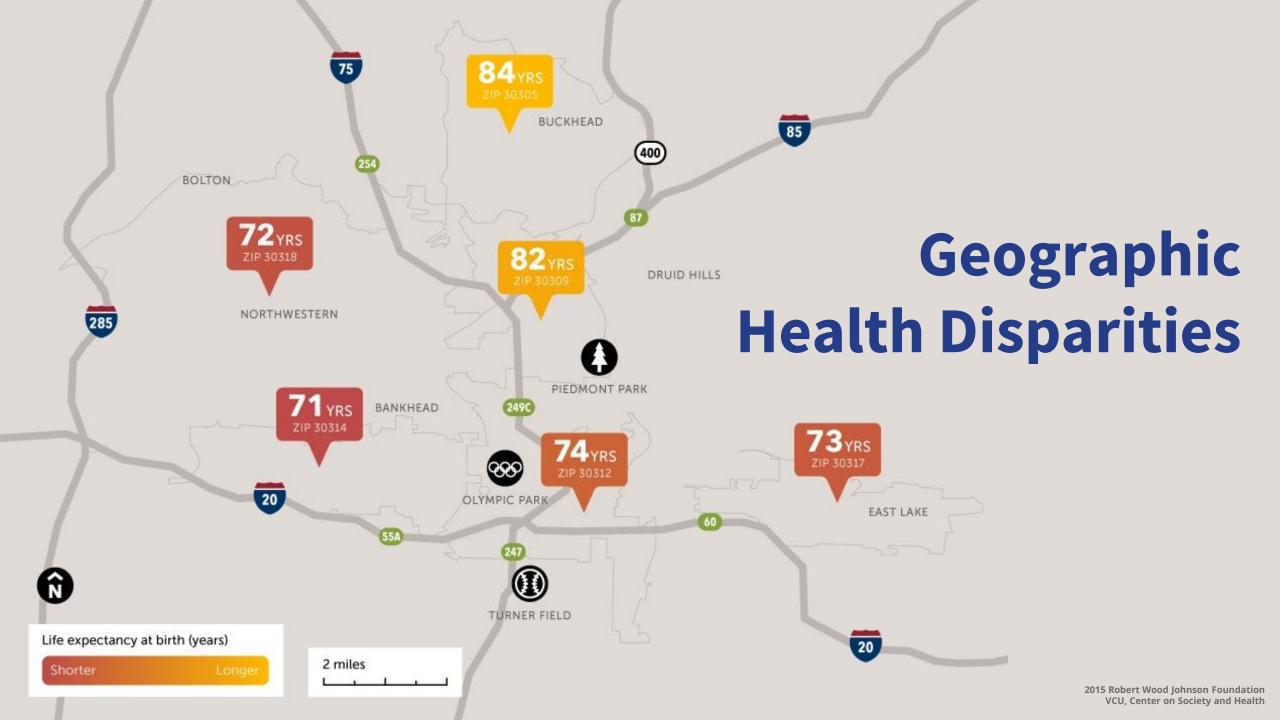






#### Andrew C Romero, M.Ed

Director, Geographic Health Equity Alliance CADCA (Community Anti-Drug Coalitions of America) aromero@cadca.org



# Uneven Access to Smoke-Free Laws and Policies and Its Effect on Health Equity in the United States: 2000–2019

Tobacco control measures have played an important role in the reduction of the cigarette smoking prevalence among US adults.

However, although overall smoking prevalence has declined, it remains high among many subpopulations that are disproportionately burdened by tobacco use, resulting in tobacco-related health disparities. Slow diffusion of smoke-free laws to rural regions, particularly in the South and Southeast, and uneven

Amy Y. Hafez, PhD, Mariaelena Gonzalez, PhD, Margarete C. Kulik, PhD, Maya Vijayaraghavan, MD, and Stanton A. Glantz, PhD

The US adult cigarette smoking prevalence declined from 20.9% to 14.0% between 2005 and 2017. Although the overall prevalence fell across all racial and ethnic groups, differences in prevalence remained among US subpopulations, resulting in continuing tobacco-related health disparities. Subpopulations disproportionately burdened by tobacco use include low-income

residences. Although tobacco control interventions are benefiting the overall population, inequity in access to smoke-free laws and policies has contributed to perpetuating tobacco-related health disparities.

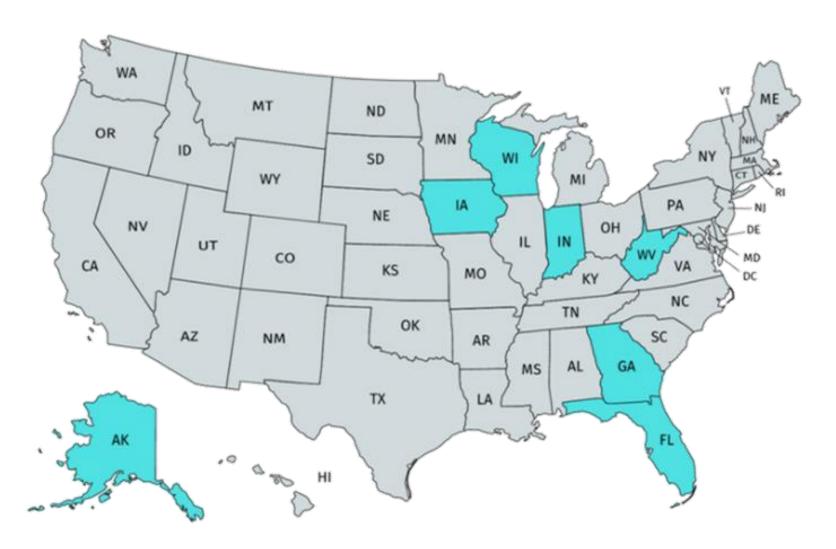
Here we examine the role comprehensive smoke-free laws have played in reducing smoking prevalence and how coverage by of other products such as ecigarettes and inhaled cannabis.)
Promising practices and policies to reduce tobacco-related health disparities would specifically target at-risk subgroups, such as racial/ethnic and low socioeconomic subpopulations that have driven smoking-related disparities, while continuing to strengthen the policy framework in place that has been beneficial with respect to

## Geographic Surveillance Learning Collaborative

Years 1 and 2

Elizabeth Gerndt, MPH
Project Director
Counter Tools
elizabeth@countertools.org

## **Geographic Surveillance Learning Collaborative Year 1**



## **Geographic Surveillance Learning Collaborative Year 2**

#### **Participating States**







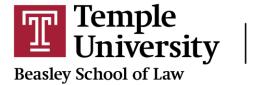
#### Facilitators & Training/TA Providers







Center for Public Health Law Research



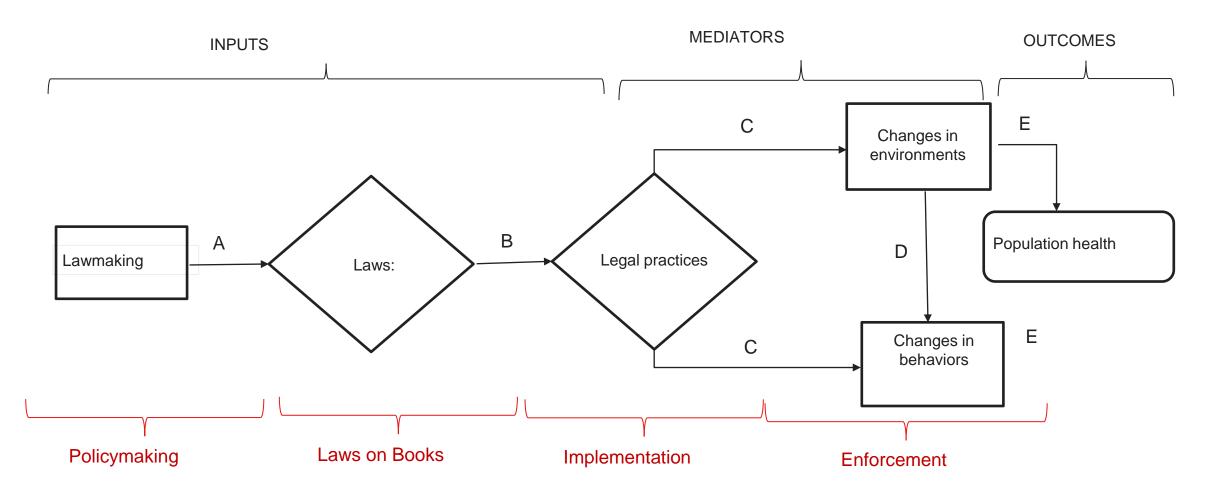
## Policy Surveillance

Joshua Waimberg, JD, MBA Legal Training Manager

#### **Logic Model**



Center for Public Health Law Research

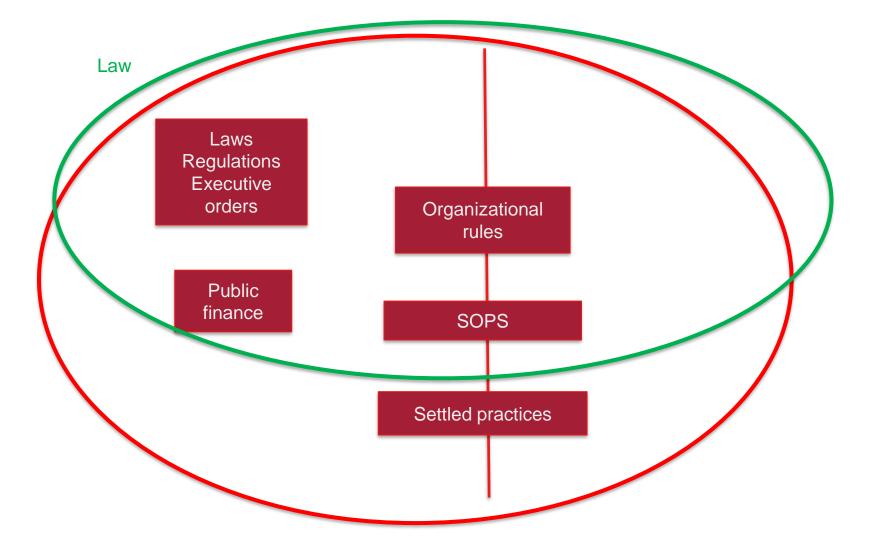


Legal Activities and Processes

Logic Model of Public Health Law Research (Burris et.al. 2010)

#### What Are We Measuring?





#### **Legal Mapping**



Center for Public Health Law Research



A process for assessing and capturing important features and variation in laws and policies, across time and space.

#### LEGAL EPIDEMIOLOGY

The scientific study and deployment of law as a factor in the cause, distribution, and prevention of disease and injury in a population.

#### PUBLIC HEALTH LAW PRACTICE

The application of professional legal skills in the development of health policy and the practice of public health.

#### **Legal Mapping Models**



Center for Public Health Law Research

	Mapping Model	Type of Data Produced	Time and Place Studied	Essential Team Resources
Legal Epidemiology	Policy surveillance	Produces robust data using a rigorous scientific process	Tracks laws over time and across multiple jurisdictions	Team of at least three is required
	Legal assessments	Produces robust data using a rigorous scientific process	Maps laws at one specific point in time, across multiple jurisdictions	Team of at least three is required
Public Health Law Practice	Legal scan	Quick scan of a topic or domain	Maps laws across multiple jurisdictions at one specific point in time	Can be completed by one person
	Legal profile	Quick scan of a domain, or multiple domains	Maps laws in one specific jurisdiction at one specific point in time	Can be completed by one person

## Legal Epidemiology

The scientific study and deployment of law as a factor in the cause, distribution, and prevention of disease and injury in a population.



Policy Surveillance

#### What is Policy Surveillance?



Center for Public Health Law Research

■ The systematic collection, analysis, and dissemination of laws and policies across jurisdictions or institutions, and over time.

#### **Why Policy Surveillance Matters**



Center for Public Health Law Research



Create reliable data for evaluation



Create accessible, non-partisan information



Track change over time & measure progress



Diffuse innovative policy ideas



Build workforce capacity

#### Who Uses Policy Surveillance?





**Policymakers** see what element of laws have the most movement in other states and can learn to track their own laws.



Advocacy groups track progress of campaigns and efforts to change laws and determine where to focus efforts and resources.



**Social scientists** access scientifically sound data that can be used to evaluate the health influences of the laws.



Government agencies use this as a metric for the success of larger programs.

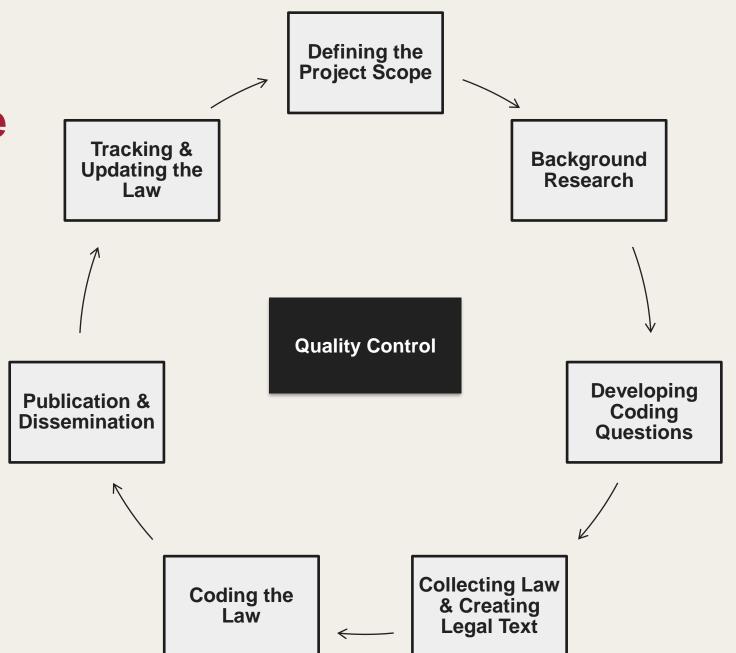


The public have easier access to key laws in the community.



Health professionals measure progress and plan initiatives.

# The Policy Surveillance Process



#### Selecting a Project Topic



Four primary criteria to consider when selecting a topic for a policy surveillance project:

- 1. Do the laws vary by jurisdiction?
- 2. Are the laws measurable, in written form?
- 3. Has the topic not already been extensively studied?
- 4. Does the topic affect public health?

#### **Coding Example**



Center for Public Health Law Research

QUESTION LEGAL TEXT RESPONSE

What behaviors are restricted while driving?

- A. Text messaging
- B. Calling
- C. Watching TV
- D. Eating a sandwich



Alaska Stat. § 28.35.161 Use of electronic devices while driving; unlawful installation of television, monitor, or similar device

- (a) A person commits the crime of driving while texting, while communicating on a computer, or while a screen device is operating if the person is driving a motor vehicle, and ......
- (2) the person is reading or typing a text message or other nonvoice message or communication on a cellular telephone, personal data assistant, computer, or any other similar means capable of providing a visual display that is in view of the driver in a normal driving position while the vehicle is in motion and while the person is driving

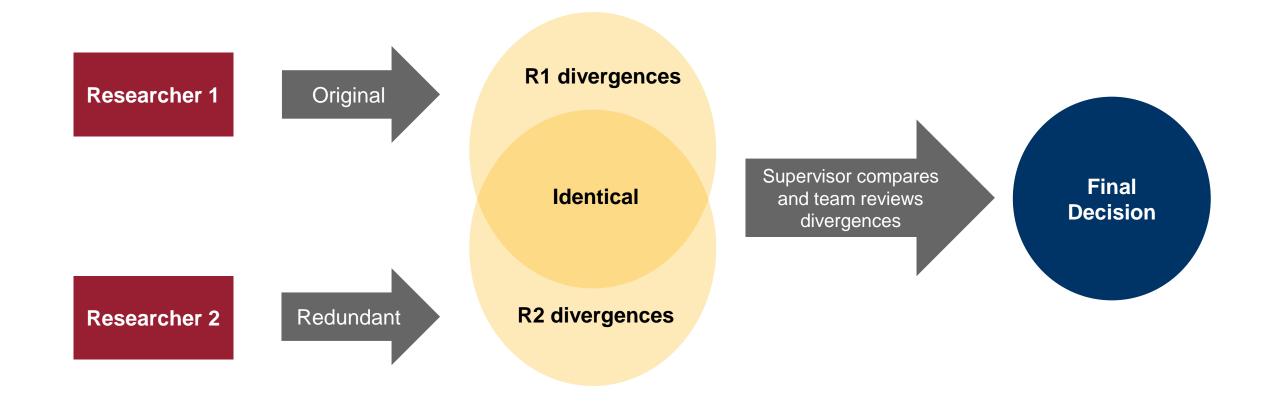


A. Text messaging

#### **Quality Control Through Redundancy**



Center for Public Health Law Research



#### **MonQcle Coding Software**



Center for Public Health Law Research

• Designed to allow researchers to identify code, and analyze legal policies and then visualize, share, and update legal research findings.





### | Florida | HEALTH

## Integrating Policy Surveillance into the work of Florida's tobacco control program

Presented by:
Robert Ostbye, MPH
Statewide Policy Coordinator
Bureau of Tobacco Free Florida

# Previous K-12 Policy Surveillance Efforts

2015-2019: Before 2019 Assessment

# Comprehensive Policy Components

2 ≤ 5

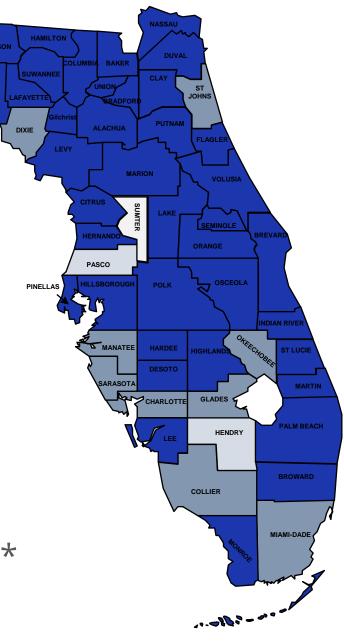
4 6 - 10

**14** 11 - 12

**47** 13

**O** Does <u>not</u> prohibit electronic smoking devices\*

\*Electronic Nicotine Delivery Systems



#### 2020: After 2019 Assessment

# Comprehensive Policy Components

2 ≤ 5 (No Change)

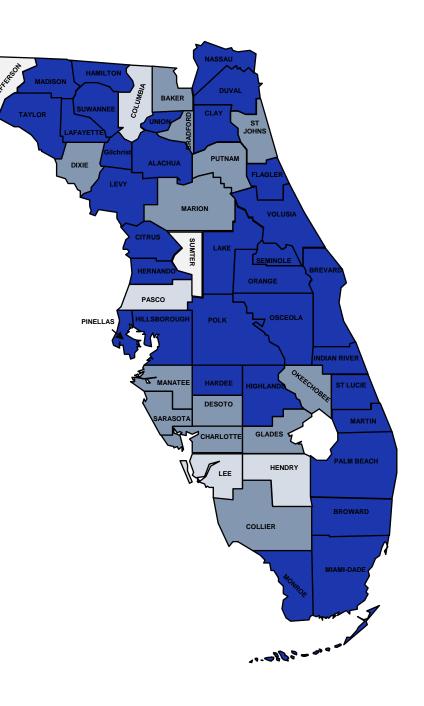
9 6 - 10 (+5)

**16** 11 - 12 (+2)

**40** 13 (**-7**)

1 Does <u>not</u> prohibit ENDS\* (+1)

\*Electronic Nicotine Delivery Systems



#### 2021:

#### After 2020 Assessment

# Comprehensive Policy Components

 $3 \leq 5 (+1)$ 

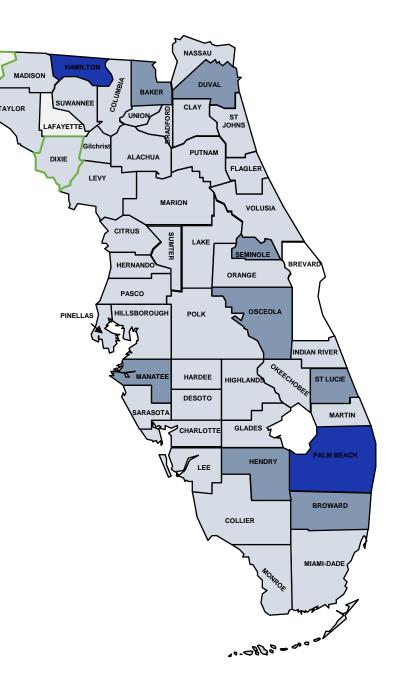
48 6 - 10 (+39)

10 11 - 12 (-6)

**5** 13 (-35)

4 Does <u>not</u> prohibit ENDS\* (+3)

\*Electronic Nicotine Delivery Systems



## Integrating methods of Policy Surveillance to the work of community-based providers

- Required work plan activity for community providers:
  - Activity Type: Assess current tobacco policies
- Adapted policy surveillance process to fit STCP structure
  - Preliminary research and question development conducted by the collaborative
  - Researcher 1: All providers (community providers in 67 counties)
  - Researcher 2: NTCP program staff (and interns)
  - Supervisor: Robert (me)
- Providers will collect and code policy using guidance document/instructions

#### Benefits of Participating in Geo Collab

- More consistent results
- More reliable policy data
- Replicable process can be applied to future surveillance efforts
  - Documentation: Research protocol, search strategy, code book, etc.
  - Methods "belong" to Legal Epidemiology domain of public health
  - Methods applicable to all tobacco-control policy surveillance
- Increased STCP competency in Legal Epidemiology and Policy Surveillance

Andrew C Romero, M.Ed
Director, Geographic Health Equity Alliance

#### Contact List

#### Andrew C Romero, M.Ed

Director, Geographic Health Equity Alliance CADCA (Community Anti-Drug Coalitions of America) aromero@cadca.org

#### Elizabeth Gerndt, MPH

Project Director
Counter Tools
elizabeth@countertools.org

#### Joshua Waimberg, JD, MBA

Center for Public Health Law Research
Temple University
jwaimberg@temple.edu

#### Robert Ostbye, MPH

Statewide Policy Coordinator, Tobacco Free Florida Florida Department of Health Robert.Ostbye@flhealth.gov