

Evaluating smoke-free policies – a clear view



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Presentation Outline



- Background on OSH
- Main evaluation approaches
- Considerations in selecting an approach
- Examples
- References
- Q & A

Office of Smoking and Health (OSH)

Lead federal agency for comprehensive tobacco prevention and control

■ Goals

- Preventing initiation of tobacco use among young people
- Eliminating nonsmokers' exposure to secondhand smoke
- Promoting quitting among adults and young people
- Identifying and eliminating tobacco-related health disparities

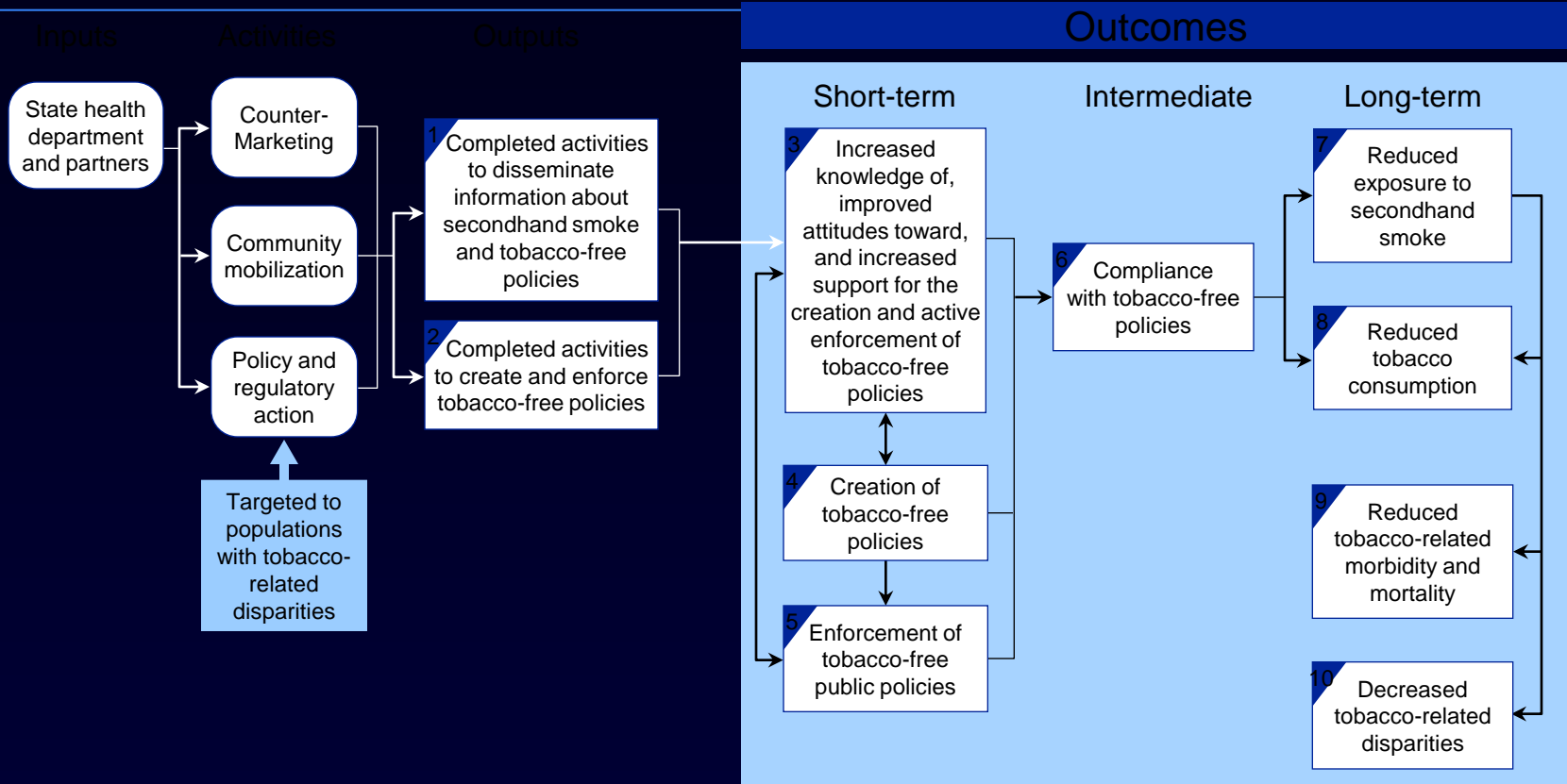
Office of Smoking and Health (OSH)

- State and community interventions
- Health communication interventions
- Cessation intervention
- Surveillance and evaluation
- Administration and management

POLICY EVALUATION



Eliminating Nonsmokers' Exposure to Secondhand Smoke



Eliminating Nonsmokers' Exposure to Secondhand Smoke

■ Short-term Outcomes

- Outcome 3: Increased knowledge of, improved attitudes toward, and increased support for the creation and active enforcement of tobacco-free policies
- Outcome 4: Creation of tobacco-free policies
- Outcome 5: Enforcement of tobacco-free public policies

■ Intermediate Outcomes

- Outcome 6: Compliance with tobacco-free policies

■ Long-term Outcomes

- Outcome 7: Reduced exposure to secondhand smoke
- Outcome 8: Reduced tobacco consumption

Evaluating Smoke-free Policies

- Public support
 - Compliance
 - Air quality monitoring
 - Employee health
 - Economic impact
-
- Hospital admissions for heart attacks
 - Impact on smoking behavior



Public Support

- Pre-implementation data
 - assess public readiness
 - document levels of public support
 - establish a baseline to measure change
- Post-implementation data
 - track changes in public support
 - track shifts in social norms over time
- Timing
 - within 3 months before the law takes effect
 - within 3 months after this date
 - regular intervals thereafter



Compliance



- Pre-implementation
 - not essential
 - establish a baseline to measure change
- Post-implementation
 - short-term: compliance levels and inform education and enforcement activities
 - longer-term: ongoing compliance levels, track trends in compliance, and inform education and enforcement activities
- Timing
 - within 3 months before the law takes effect
 - within 3 months after this date
 - regular intervals thereafter

Air Quality Monitoring

- Pre-implementation
 - establish a baseline to measure change
- Post-implementation
 - changes in air quality
- Timing
 - within 3 months before the law takes effect
 - within 3 months after this date



Employee Health



- Pre-implementation
 - documents secondhand smoke exposure and related health effects among nonsmoking employees in venues that allow smoking
 - assess changes in employee exposure and health outcomes
- Post-implementation
 - Changes in secondhand smoke exposure
 - Changes in health outcomes
- Timing
 - within 3 months before the law takes effect
 - within 3 months after this date
 - 1 year after the law has taken effect

Economic Impact



- Pre-implementation

- Use data from other sites that have implemented comprehensive smoke-free laws
- Data needed for baseline usually collected by government agencies as a matter of routine

- Post-implementation

- Objective local data as soon as possible
- Employment data: 6-9 months after the month in question
- Taxable sales revenue: about 18 months after the quarter in question

- Timing

- Baseline data usually collected by other governmental agencies
- Ongoing

Considerations in Selecting an Approach

Stage of the law

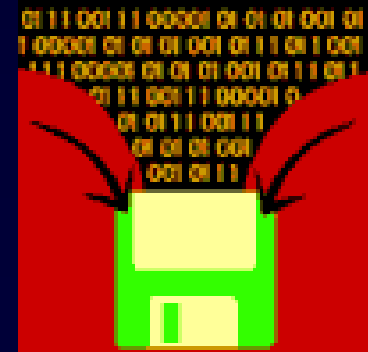
- What stage has the site reached in the policy process? Is the law still under consideration, or has it been enacted? If it has been enacted, has it taken effect? How long has the law been in effect?
 - The law has not yet been passed
 - The law has been passed but not implemented
 - The law has been in effect for less than 1 year
 - The law has been in effect for 1 year or longer



Considerations in Selecting an Approach

Questions being asked

- What kinds of information are decision makers, the news media, the business community, and the public requesting? What aspects of the law and its impact are generating the most discussion?
 - Public support for or compliance with the law
 - Air quality and secondhand smoke levels in hospitality venues
 - Secondhand smoke exposure and related health effects among nonsmoking employees
 - The economic impact of the law



Considerations in Selecting an Approach

Limitations of coverage



- Does the law contain exemptions or other provisions that have the potential to significantly reduce its reach and impact?
 - Exemptions for bars, restaurant bar areas, casinos, other gaming venues, or other specific venues
 - Ventilation provisions
 - Provisions allowing smoking in adults-only settings
 - Economic hardship exemptions
 - Long phase-in periods for certain settings, such as bars and casinos
 - Other provisions that create gaps in coverage or weaken protections

Considerations in Selecting an Approach

Available resources

- What resources are available to design and conduct an evaluation?
 - Funding: minimal, moderate ($< \$25,000$), or significant ($\geq \$25,000$)
 - Labor (including paid staff and volunteers)
 - Access to an Institutional Review Board (IRB)
 - Access to statistical expertise for survey design, implementation, and data analysis
 - Level of inquiry - state, local (county, municipal)



Examples – Minnesota (ClearWay)

- Public support for policy: 2007, 2008
- Public support for increased tobacco price: 2009
- Employee exposure pre- and post-law implementation: 2008
- Economic impact: 2007, 2008
 - http://www.clearwaymn.org/index.asp?Type=B_BASIC&SEC=%7b9DA7A798-C552-47DF-B331-0D4C6B8E9049%7d

Examples – New York

- Health and economic impact: 2006, 2008
 - http://www.health.state.ny.us/prevention/tobacco_control/docs/
- Indoor air quality: 2004
 - <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5344a3.htm>

Examples – California

- Health and economic impact: 2008, 1999, 2010, 2010
 - <http://www.plosmedicine.org/article/info:doi/10.1371/journal.pmed.0050178>
 - <http://www.cdph.ca.gov/programs/tobacco/Documents/CTCPCostOfSmoking1999.pdf>
 - http://elib.cdc.gov:2171/content/19/Suppl_1/i68.full.pdf?sid=5edc041e-9f34-4f2d-ae10-15b39248ef88
 - http://www.cdph.ca.gov/programs/tobacco/Documents/CTCPHealthEconCon_10.pdf
- Compliance: 2003
 - <http://elib.cdc.gov:2171/content/12/3/269.full.pdf?sid=a9e333e3-a4c2-4868-8d91-db46a4b67029>
- Changes in knowledge, attitudes, and beliefs: 2004
 - <http://tobaccocontrol.bmj.com/content/13/1/87.full.pdf>



Examples - Others

- Impact (public support, compliance, air quality, economic impact) - New Zealand
 - <http://tobaccocontrol.bmj.com/content/17/1/e2.full>
- Medicaid coverage - Massachusetts
 - <http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0009770>
- Public support and economic impact - Texas
 - http://www.cdc.gov/tobacco/basic_information/secondhand_smoke/case_study_texas/overview/

Model Policies and Technical Assistance

- Public Health Law and Policy
 - <http://www.phlpnet.org//phlp/phlp-can-help-you-achieve-your-policy-goals>
- Tobacco Policy Project/State Legislated Actions on Tobacco Issues (SLATI)
 - <http://slati.lungusa.org/>
- Tobacco Control Legal Consortium
 - <http://publichealthlawcenter.org/programs/tobacco-control-legal-consortium>

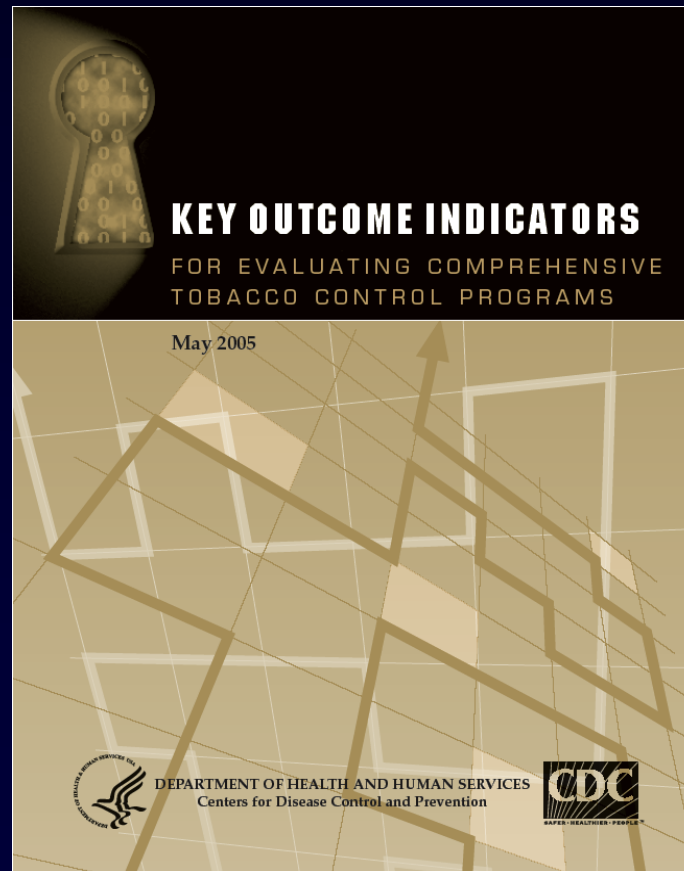
Evaluation Toolkit for Smoke-Free Policies

http://www.cdc.gov/tobacco/basic_information/secondhand_smoke/evaluation_toolkit/index.htm



Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs

http://www.cdc.gov/tobacco/tobacco_control_programs/surveillance_evaluation/key_outcome/index.htm



QUESTIONS?



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



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