
Smoking Cessation
Leadership Center



University of California
San Francisco

Far From Over: The Horrific Legacy of Menthol Cigarette Marketing to Black Communities, co-hosted by the National Medical Association

Joy D. Calloway, MBA, MHSA, Executive Director, National Medical Association

James F., Tips From Former Smokers® campaign participant

Carol McGruder, Co-Founding member and Co-Chairperson of the African American Tobacco Control Leadership Council (AATCLC)

August 8, 2023

Moderator

Catherine Bonniot

Deputy Director

Smoking Cessation Leadership Center
University of California, San Francisco

A National Center of Excellence for Tobacco-
Free Recovery

Catherine.Bonniot@ucsf.edu



Disclosures

This UCSF CME activity was planned and developed to uphold academic standards to ensure balance, independence, objectivity, and scientific rigor; adhere to requirements to protect health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and include a mechanism to inform learners when unapproved or unlabeled uses of therapeutic products or agents are discussed or referenced.

All speakers, planning committee members and reviewers have disclosed they have no relevant financial relationships to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Catherine Bonniot, Anita Browning, Joy Calloway, MBA, Christine Cheng, Brian Clark, James F., Jennifer Matekuare, Carol McGruder, Ma Krisanta Pamatmat, MPH, CHES, Jessica Safier, MA, and Maya Vijayaraghavan, MD, MAS.

Thank you to our funders



Housekeeping

- All participants will be **automatically muted** and **the audio will be streaming via your computers**, when you join the webinar.
- Please **make sure your computer speakers are on** and adjust the volume accordingly.
- All participants **cameras will be off** when you join the webinar.
- **This webinar is being recorded** and will be available on SCLC's website, along with a PDF of the slide presentation.
- Use the **'Q & A' box** to send questions at any time to the presenters.

CME/CEU Statements

Accreditations:

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

UCSF designates this live activity for a maximum of *1.25 AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the webinar activity.

Advance Practice Registered Nurses and Registered Nurses: For the purpose of recertification, the American Nurses Credentialing Center accepts *AMA PRA Category 1 Credit™* issued by organizations accredited by the ACCME.

Physician Assistants: The National Commission on Certification of Physician Assistants (NCCPA) states that the *AMA PRA Category 1 Credit™* are acceptable for continuing medical education requirements for recertification.

California Pharmacists: The California Board of Pharmacy accepts as continuing professional education those courses that meet the standard of relevance to pharmacy practice and have been approved for *AMA PRA category 1 Credit™*. If you are a pharmacist in another state, you should check with your state board for approval of this credit.

California Psychologists: The California Board of Psychology recognizes and accepts for continuing education credit courses that are provided by entities approved by the Accreditation Council for Continuing Medical Education (ACCME). *AMA PRA Category 1 Credit™* is acceptable to meeting the CE requirements for the California Board of Psychology. Providers in other states should check with their state boards for acceptance of CME credit.

California Behavioral Science Professionals: University of California, San Francisco School of Medicine (UCSF) is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for behavioral health providers. UCSF maintains responsibility for this program/course and its content.

Course meets the qualifications for 1.25 hours of continuing education credit for **LMFTs, LCSWs, LPCCs, and/or LEPs** as required by the California Board of Behavioral Sciences. Provider # 64239.

Respiratory Therapists: This program has been approved for a maximum of 1.25 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, 9425 N. MacArthur Blvd. Suite 100 Irving TX 75063, Course #190549000.

California Addiction Counselors: The UCSF Office of Continuing Medical Education is accredited by the **California Consortium of Addiction Professional and Programs (CCAPP)** to provide continuing education credit for California Addiction Counselors. UCSF designates this live, virtual activity, for a maximum of 1.25 CCAPP credits. Addiction counselors should claim only the credit commensurate with the extent of their participation in the activity. Provider number: 7-20-322-0724.



- **Free CME/CEUs** will be available for all eligible California providers, who joined this live activity thanks to the support of the California Tobacco Prevention Program (CTPP)
- For our California residents, SCLC offers regional trainings, online education opportunities, and technical assistance for behavioral health agencies, providers, and the clients they serve throughout the state of California.
- For technical assistance please contact (877) 509-3786 or Jessica.Safier@ucsf.edu.



- CDC Tips Campaign 2023

- Find resources at:

<https://www.cdc.gov/tobacco/campaign/tips/index.html>

Today's Presenter

Joy Calloway, MBA, MHSA

Executive Director

National Medical Association



Today's Presenter

James F.

Tips From Former Smokers® campaign
participant



Today's Presenter

Carol McGruder

Co-Founding member and Co-Chairperson

African American Tobacco Control Leadership Council (AATCLC)





National
Medical
Association

UCSF Smoking Cessation
Leadership Center

*Far From Over: The Horrific Legacy of Menthol
Cigarette Marketing to Black Communities*

Joy D. Calloway, MBA, MHSA
NMA Executive Director

Participant Outcome

Explain and appreciate the **alignment of the NMA mission** with the **goals and objectives** of this and other tobacco cessation/menthol harm awareness and reduction initiatives



Feel the *Mild* side of KOOL.
KOOL *Milds*.

These cigarettes are 100% Mild.
Mild, but not too light.

Warning: The Surgeon General Has Determined That Cigarette Smoking is Dangerous to Your Health.

MENTHOL

SMOKING GENERALLY AVOIDS: Smoking By Pregnant Women May Result in Fetal Harm, Premature Birth, And Low Birth Weight.

CAMEL MENTHOL LIGHTS

Ready to try a great, fresh taste?

Newport tastes fresher!

and tastes better than any other menthol cigarette!

Longer...yet milder

U.S. Government figures show Pall Mall Menthol 100's lower in "tar" than the best-selling menthol king.

So good, it's got to be KOOL!


Nothing satisfies like KOOL's smooth taste. America's #1 Menthol.

Warning: The Surgeon General Has Determined That Cigarette Smoking is Dangerous to Your Health.

"KOOL! 'Cause we don't like rough puffs."

Come up to KOOL. America's #1 selling menthol.

Startling Facts & Figures

- **Tobacco kills more people than alcohol, car crashes, murders, AIDS, and suicides combined** according to the campaign for Tobacco-Free Kids in 2023.
 - Despite starting to smoke later and smoking fewer packs per day, **African Americans who smoke menthol successfully quit smoking at a lower rate** than non-menthol smoking African Americans.
 - Research shows that **if menthol cigarettes were banned nationally, 44.5% of African Americans who smoke menthol would try to quit.**
- 

Mission(s) Alignment

NMA

To advance the art and science of medicine for people of African descent through **education, advocacy, and health policy** to promote health and wellness, **eliminate health disparities**, and sustain physician viability.

SCLC

To **eliminate disparities** in commercial tobacco use and increase the number of providers who help individuals quit. We aim to drive health systems transformation to promote cessation in disproportionately impacted populations through **providing technical assistance, organizing leadership summits, and producing national webinars** for education.



National Medical Associat... · 01 May

CDC's **Tips From Former Smokers**® campaign began in 2012, and was the first federally-funded national tobacco education campaign. Over the past 10+ years, **Tips** has helped more than 1 million people quit smoking. Visit: [CDC.gov/Tips](https://www.cdc.gov/Tips) for more information. #CDCTips #NMA



National Medical Associati... · 13 Jun

Did you know that smoking is the leading cause of preventable death in the US? And did you know that the African American community is disproportionately affected by smoking-related illnesses? Watch below and visit the NMA website to learn more bit.ly/3JbYmaO #TIPS #CDC



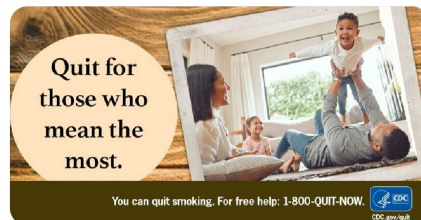
National Medical Associat... · 21 May

BE A LEADER! Yes, even you can start a movement to optimize the health of your community. Lead the way on **No Menthol Sunday**. More information available now on [NoMentholSunday.org](https://www.NoMentholSunday.org) #NMS2023 #NoMentholSunday #NMA



National Medical Association · 12 Jul

Having a hard time staying smokefree? Remember who you quit for in the first place to help get back on track. Reply with your reason for quitting tobacco. Visit [CDC.gov/quit](https://www.CDC.gov/quit) for free help. #TIPS #quitsmokingtoday #NMA #NationalMedAssn #tipsfromformersmokers #CDC



National Medical Associati... · 13 Jun

Did you know that smoking is the leading cause of preventable death in the US? And did you know that the African American community is disproportionately affected by smoking-related illnesses? Watch below and visit the NMA website to learn more bit.ly/3JbYmaO #TIPS #CDC



Carol McGruder

- Founder/Co-Chair, African American Tobacco Control Leadership Council (AATCLC)



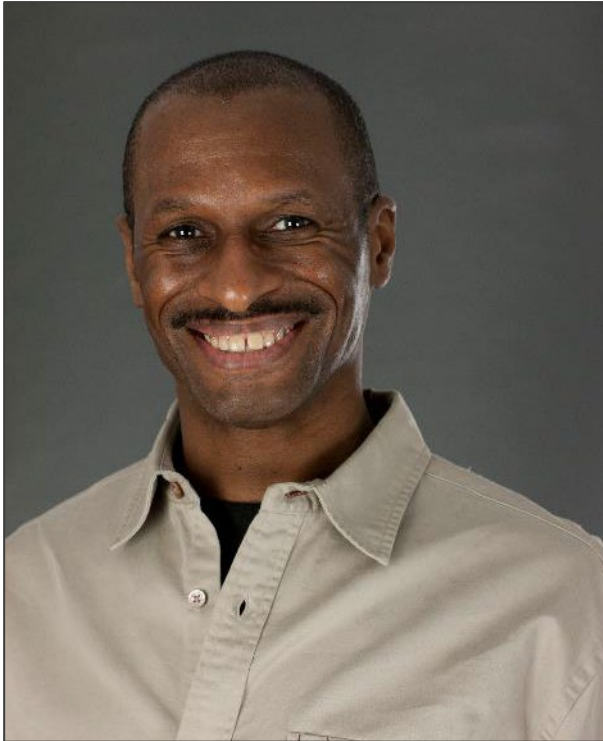


JAMES F.

- TIPS from Former Smokers Campaign Participant

**THANK
YOU**

JAMES F. FEATURED IN CDC'S *TIPS FROM FORMER SMOKERS*[®] CAMPAIGN



- For more information about CDC's [Tips From Former Smokers](https://www.cdc.gov/tips)[®] campaign, please visit [CDC.gov/Tips](https://www.cdc.gov/tips).
- James's story: [James F.'s Story | Real Stories | Tips From Former Smokers | CDC](#)

Far From Over: The Horrific Legacy of Menthol Cigarette Marketing to Black Communities



UCSF Smoking Cessation
Leadership Center

National Center of Excellence for
Tobacco-Free Recovery



National
Medical
Association





Formed in 2008. We educate the African American community about tobacco use and cessation, partner with community stakeholders and public health agencies to inform and affect the direction of tobacco control policy, practices, and priorities, as it affects the lives of Black American and African immigrant populations. We work at the intersection of public health and social injustice.



**Family Smoking Prevention and
Tobacco Control Act, 2009**

Granted the FDA
the authority to
regulate tobacco
products to
protect the
public health

African Americans-Menthol

- Perniciously targeted by all major tobacco companies
- “Urban” programs included
 - Co-optation of Black leadership, heavy media campaigns, free giveaways to children, van programs, retailers programs, event sponsorship
- Over 80% of African Americans smoke mentholated cigarettes
- Over 90% of Black youth initiate with menthol cigarettes
- Addiction is about science and opportunity
- Menthol is a Human Rights and Social Justice Issue

THE LEAST OF THESE: U.S. TOBACCO CONTROL POLICY, MENTHOLATED CIGARETTES, AND AFRICAN AMERICANS

Carol McGruder, BA; Phillip Gardner, DrPH; and Valerie B. Yerger, ND
African American Tobacco Control Leadership Council, USA

World Conference on Tobacco or Health
Singapore 2012

Background
In June 2009, U.S. President Barack Obama signed the historic Family Smoking Prevention and Tobacco Control Act (The Act), which gave the U.S. Food and Drug Administration (FDA) the authority to regulate tobacco products in the United States. One of the provisions of the Act was the banning of all flavors in cigarettes, all flavors, that is, except menthol. Other flavors like chocolate, vanilla, cinnamon, strawberry and others were banned because it was widely recognized that these flavors attracted and encouraged young people to begin smoking.



And though 98% of young African American smokers initiate smoking with mentholated cigarettes, the health and welfare of these young people were not a priority of the initial legislation. Menthol's exclusion from the list of banned flavorings prompted seven former Secretaries of Health, including Drs. Joseph Califano and Louis Sullivan, and a former Surgeon General to write a joint letter with the National African American Tobacco Prevention Network that vehemently opposed the exclusion of menthol from the list of banned flavors.

With Dr. Califano further stating that The Act as written relegated, "Black children to the back of the [public health] bus." This public outcry led to an eleven hour amendment (initiated and co-authored by Congresswoman Donna Christensen and the U.S. Congressional Black Caucus) being added to the legislation.

This amendment mandated that the issue of mentholated cigarettes be given top priority by the newly formed FDA Tobacco Products Scientific Advisory Committee (TPSAC).

Violence and Concerted Action Led To Menthol Amendment

- > African American Scholars and Researchers
- > National African American Tobacco Prevention Network
- > National Print and Video Media Outlets (New York Times)
- > Former Secretaries of Health/U.S. Surgeon General
- > United States Congressional Black Caucus

Tobacco Products Scientific Advisory Committee -- Progress

- > Convened Hearings
- > Issued Report March 2011
 - "Banning menthol would be in the interest of Public Health."
- > The FDA has decided to conduct further study on menthol

Predatory Tobacco Industry Targeting Doubled Menthol Smoking Prevalence Among U.S. African Americans

Predatory Tobacco Industry Activities Included

- > Programs targeted at African Americans in inner cities
- > FREE product giveaways
- > Co-Opting Black Leadership Groups
- > Targeted Media Campaigns



Starting in the late 1990's, Lorillard enticed Black children to smoke menthols by distributing free Newport cigarettes in urban neighborhoods. Marie Evans, one of those children, began smoking at age 13 and smoked for 40 years before dying of lung cancer at 54.



Menthol Use among Black Smokers Doubled Between 1971 and 2001



CONCLUSIONS
Though African Americans and other marginalized populations are the most burdened by tobacco-related diseases and the accompanying health inequalities, they are usually the last to benefit from public health policies that are designed to safeguard and/or improve public health. Public health policies that in theory should be designed to protect those who are the most afflicted, "the least of these." These policies often sacrifice the needs of minority populations to protect the needs of the healthier majority population. Sometimes the health interests of minority populations are used as a bargaining chip in the negotiations.

This becomes a social justice issue as minority populations must defend their community from the predatory activities of the tobacco industry, while at the same time they must fight for parity and inclusion of their health interests in the public health arena.

ACKNOWLEDGMENTS
National African American Tobacco Prevention Network

The "Inner City" Youth Marie Evans

- Grew up in Boston public housing
- Given free Newports at the age of nine
- Addicted to cigarettes at age 13
- Dead at 54
- Family awarded \$152 million judgment
- Family Settled for \$79 million







A background pattern of a network of small grey dots connected by thin grey lines, creating a complex web-like structure. A solid green horizontal bar is at the bottom of the page.

Trickle Down Public Health Policy



Social Injustice

- The Tobacco Industry targets everyone
 - But they are particularly pernicious in the Black community
 - We have so many other issues to deal with
 - Tobacco control gets pushed to the back burner
 - Police Brutality/Systemic Institutional Racism is REAL
- Priority Populations are often a bargaining chip in public health policy negotiations-Benign neglect
- Doing NOTHING is not an option



AATCLC and ASH File Lawsuit Against The FDA

JUNE 19, 2020

The Complaint Highlights the Lack of Action to Protect Thousands of African Americans From Tobacco-Related Deaths

JUNE 17, 2020 – Today, The African American Tobacco Control Leadership Council (AATCLC) and Action on Smoking and Health (ASH) held a virtual press conference announcing their joint complaint against the FDA. The complaint requests that the court compel the FDA to fulfill its mandate to take action on FDA's own conclusions that it would benefit the public health to add menthol to the list of prohibited characterizing flavors and therefore ban it from sale.



[Read the full complaint here.](#)

"We stand before you today to announce that we are suing the United States Food and Drug Administration for their failure to implement public health policy that protects the health and

Plaintiffs vs.
FDA

African American Tobacco
Control Leadership Council

Action on Smoking and Health

American Medical Association

National Medical Association



FDA Commits to Evidence-Based Actions Aimed at Saving Lives and Preventing Future Generations of Smokers

Efforts to ban menthol cigarettes, ban flavored cigars build on previous flavor ban and mark significant steps to reduce addiction and youth experimentation, improve quitting, and address health disparities



For Immediate Release: April 29, 2021

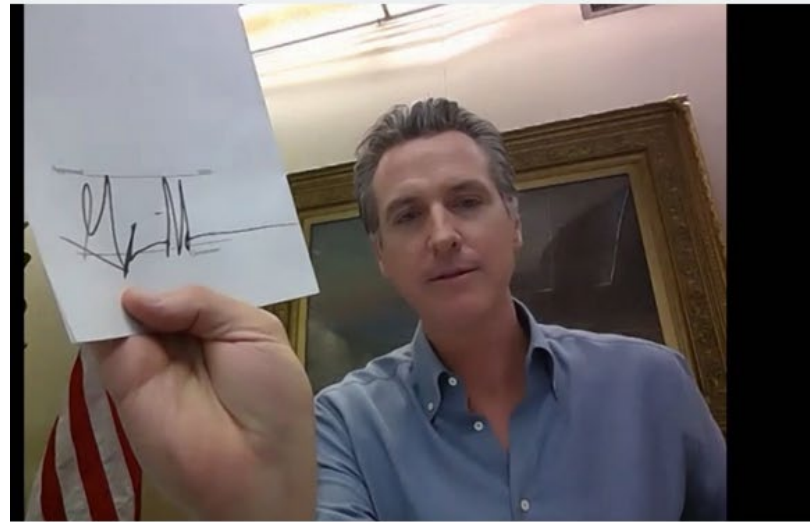
****FDA Commitment is only to start the “rule-making” process. No timeline given on when they will start. The “rule-making” process is long and will be fraught with tobacco industry interference including lobbying and potential lawsuits.****





African
Americans Are
Used As A Tool
To Blunt Public
Health For
Everybody

Virtual Signing August 28, 2020



Governor Newsom Signs Landmark Bill to End the Sale of Flavored Tobacco Products in Stores

A screenshot of a Zoom meeting grid with 20 participants. The participants are arranged in a 5x4 grid. The participants are: Matthew Myers, Carol McGruder, Bonnie Halpern-Fels..., Lisa Lu, Kellie Hawkins, Phil Gardiner, Annie Tegen, Lindsey Freitas, Kimberly Bankst..., Eric Batch, Jano Dekermenji..., Jamie Morgan, Agamroop Kaur, Amanda Staples, Valerie Yerger, Candace Barger, Edward Sanders, Twlia Laster, Primo Castro (He/Hi...), AWei, Jennyfer Cortez, greg, Connor Lam, Jim Knox, and meredithberkman. A yellow sign is visible in the grid, reading: "END SALE OF CANDY-FLAVORED TOBACCO INCLUDING MENTHOL. FROM CALIFORNIA TOBACCO". There are also yellow hand icons in the grid.

NEW LAW TO SAVE THOUSANDS OF BLACK LIVES

Finally, the day has come. Beginning 1/1/2021, menthol cigarettes and other flavored tobacco products will no longer be sold in stores. That means the tobacco industry gets no more free passes to prey on the Black community with their deadly products, predatory product discounts and backdoor deals with community leaders to profit from our demise. It's a huge step toward protecting the lives of our community. [Learn more about the law and how it affects you.](#)

* SOURCES



<https://tobaccofreeca.com/we-are-not-profit/>

News

Community Leaders Come Together Against Racism and Discrimination Protesting Senate Bill 793

By [blackandmagazine](#) - August 17, 2020

👁 100 💬 0



Black & Magazine Newswire





What Black
Leadership
Looks Like!

Dr. Shirley N.
Weber.

Former Chair
of California
Legislative
Black Caucus

Juul Reaches \$462 Million Settlement With New York, California and Other States

The case ends major litigation over claims about the marketing of e-cigarettes to adolescents, resolving thousands of lawsuits and amounting to billions of dollars in payouts to states, cities and people.



Give this article



49



A 2016 Juul ad. Many states, schools, parents and public health experts accused the company of marketing practices that wooed minors into vaping and becoming addicted to nicotine. via Stanford Medicine

FINANCE · ALTRIA

Altria invested \$13 billion in Juul. As the U.S. moves to ban e-cigarettes, their value has gone up in smoke

BY MATTHEW PERRONE AND THE ASSOCIATED PRESS

July 28, 2022 at 9:36 AM PDT



July 28, 2022 at 9:36 AM PDT

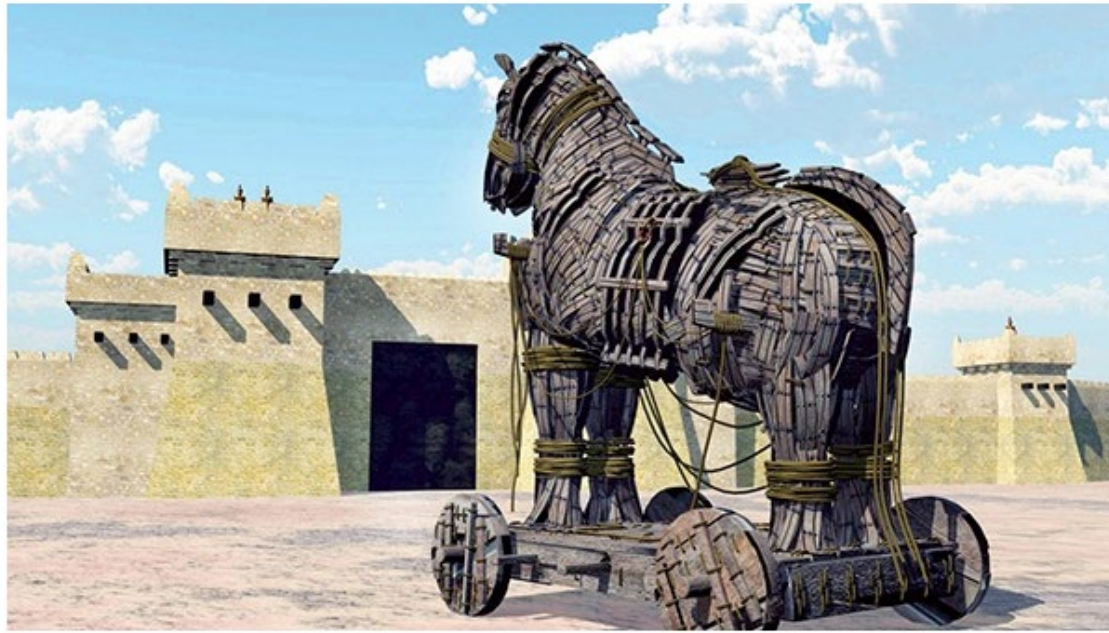


PATRICK T. FALLON—AFP/GETTY IMAGES

Cigarette maker Altria's \$13 billion investment in the troubled vaping company Juul has gone up in smoke—now worth less than 5% of its

Beware of those who come bearing gifts

Published 3 years ago on 2020/10/12



The New York Times

Black Leaders Denounce Juul's \$7.5 Million Gift to Medical School



Give this article



Students on the campus of Meharry Medical College in Nashville. The school has been criticized for accepting a large grant from Juul Labs, the e-cigarette manufacturer. William DeShazer for The New York Times

By **Sheila Kaplan**

June 19, 2019

GOVERNMENT & POLITICS HEALTH CARE

As Jealous Ponders Bid for Baltimore Mayor, Could Work for Juul Be a Factor?

By Bruce DePuyt | Josh Kurtz • May 8, 2019



Benjamin T. Jealous (D) on the campaign trail in 2018. File photo

Former Maryland gubernatorial hopeful Benjamin T. Jealous (D), who is now pondering a run for mayor of Baltimore, has landed a consulting gig with Juul, the leading electronic cigarette manufacturer.

Politico reported on Monday – and *Maryland Matters* has since confirmed – that Jealous, the former head of the NAACP who lost the 2018 race for governor to incumbent Lawrence J. Hogan Jr. (R), is

consulting with Juul's CEO.

Sierra

THE MAGAZINE OF THE SIERRA CLUB

Ben Jealous

Ben Jealous is the executive director of the Sierra Club, America's largest and most influential grassroots environmental organization, with millions of members and supporters. Previously, Ben led the NAACP from 2008 to 2013 as the youngest-ever president and CEO of the nation's oldest and largest civil rights organization. From 2020 to 2022, he was president of People for the American Way.

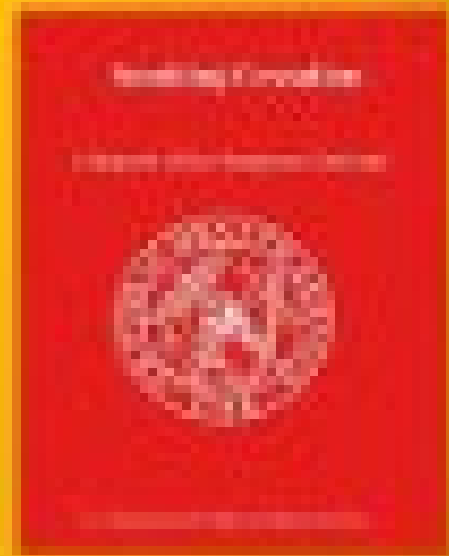
He is a professor at the University of Pennsylvania and the author of *Never Forget Our People Were Always Free*. The son of a white New England outdoorsman and a Black mother who had to leave Maryland because interracial marriage was illegal in her state at that time, Ben has dedicated his life to progressive social change.



SMOKING CESSATION: PAST, PRESENT, & FUTURE

International Council and President
National Center for Chronic Disease Prevention and Health Promotion
Office for Smoking and Health

© 2011. All rights reserved. This report is published by a policy unit of IASO.



5 A's for Smoking Cessation

Integrated 5 A's Smoking Cessation Intervention Program



The 5 A's smoking cessation plan is a brief intervention approach developed by the [US Public Health Service](#) to enhance motivation for smokers to change their behavior. Patagonia Health's EHR has a built in assessment tool to provide an easy way to conduct the 5 A's approach in helping patients quit smoking and document their progress.



The 5 A's Approach includes:

Ask: Take just a few minutes with your patients to learn about their tobacco use and habits.

Advise: Provide an educational and personalized message to the smoker to help them understand the health risks of smoking. Include the dangers of second-hand smoke as well as share language they can use to help peer smokers quit

Assess: Determine the patient's willingness to quit – does the patient want to quit, or have no desire to quit or just not yet.

Assist: Provide help for patients to quit smoking. Walk them through the 5R's exercises:

- 1 Relevance – Discuss why and how quitting is relevant to the patient?
- 2 Risks – Discuss the risks they take by smoking
- 3 Rewards – Identify the rewards they would benefit from by quitting
- 4 Roadblocks – Address the roadblocks the patient will face and help find a way around them
- 5 Repetition – Review the 5 A's at every visit

Arrange: Schedule appointments and follow-ups with specialists as needed.

Patients Not Ready To Make A Quit Attempt Now (The "5 R's")

Patients not ready to make a quit attempt may respond to a motivational intervention. The clinician can motivate patients to consider a quit attempt with the "5 R's": Relevance, Risks, Rewards, Roadblocks, and Repetition.

1. **Relevance** - Encourage the patient to indicate why quitting is personally relevant.
2. **Risks** - Ask the patient to identify potential negative consequences of tobacco use.
3. **Rewards** - Ask the patient to identify potential benefits of stopping tobacco use.
4. **Roadblocks** - Ask the patient to identify barriers or impediments to quitting.
5. **Repetition** - The motivational intervention should be repeated every time an unmotivated patient has an interaction with a clinician. Tobacco users who have failed in previous quit attempts should be told that most people make repeated quit attempts before they are successful.

SAMHSA ADVISORY

- ☒ ASK about tobacco use. Identify and document tobacco use status for every client at every visit.
- ☒ ADVISE to quit. In a clear, strong and personalized manner, urge every tobacco user to quit.
- ☒ ASSESS willingness to make a quit attempt. Is the client willing to make a quit attempt at this time?
- ☒ ASSIST in quit attempt. For the client willing to make a quit attempt, offer medication and provide or refer for counseling or additional treatment to help the client quit. For clients unwilling to quit, provide interventions designed to increase future quit attempts (e.g., motivational interviewing).
- ☒ ARRANGE follow-up. For the client willing to make a quit attempt, arrange follow-up contacts, beginning with the first week after the quit date. For clients unwilling to make a quit attempt, address tobacco dependence and willingness to quit at their next clinic visit.

☒ ARRANGE follow-up. For the client willing to make a quit attempt, arrange follow-up contacts, beginning with the first week after the quit date. For clients unwilling to make a quit attempt, address tobacco dependence and willingness to quit at their next clinic visit.

Smoking Cessation Medications. There are seven FDA-approved medications for smoking cessation.

Five are nicotine-replacement therapies:

Nicotine patch (over the counter)

Nicotine gum (over the counter)

Nicotine lozenge (over the counter)

Nicotine nasal spray (prescription)

Nicotine inhaler (prescription)

Two are non-nicotine medications:

Bupropion (Zyban[®], by prescription only)

Varenicline (Chantix[®], by prescription only)





African Americans and Cessation

Lower quit rates, though more quit attempts

Higher relapse rates

More likely to smoke w/in 10 min of awakening

Melanin concentration is positively related to number of cigarettes smoked daily, higher levels of nicotine dependence, and greater

nicotine exposure (King, Yerger, et al., 2009. Link between facultative melanin and tobacco use among African Americans. *Pharmacology, Biochemistry and Behavior*, 92 (2009), 589-596.)

Investing in Tobacco Regulatory Science

The TCORS program is designed to generate scientific evidence in seven key areas:

- Diversity of tobacco products
 - Reducing addiction
 - Reducing toxicity and carcinogenicity
 - Adverse health consequences
 - Communications
 - Marketing of tobacco products
 - Economics and policies
-

Tobacco Centers of Regulatory Science (TCORS)

f SHARE

t TWEET

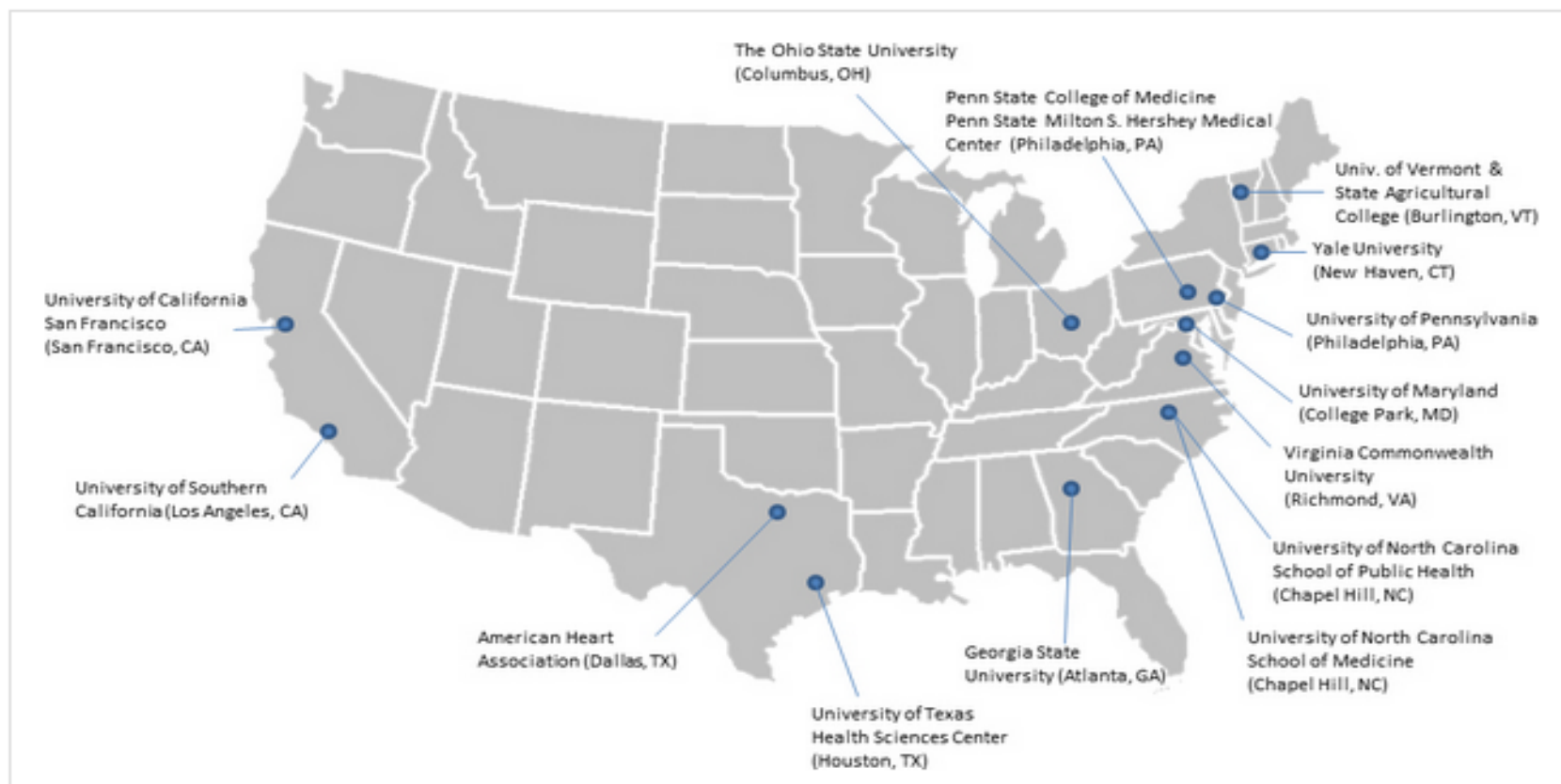
in LINKEDIN

P PIN IT

✉ EMAIL

🖨 PRINT

FDA and [NIH](#), as part of an on-going interagency partnership, awarded [14 Tobacco Centers of Regulatory Science \(TCORS\)](#) in order to generate critical research that informs the regulation of tobacco products. The research centers will receive more than \$273 million in grants from 2013-2018. What scientists are learning about tobacco through the TCORS program is helping to inform and assess FDA's prior, ongoing, and potential regulatory activities. TCORS investigators also have the flexibility and capacity to respond to FDA's research needs as issues are raised in today's rapidly evolving tobacco marketplace.









Addio - eC... · In stock
Camel cigarettes P...



Oregon Public Broadcasting
Black Americans with menthol ...



Slate Magazine
How menthol cigar...



Stanford Research i...
Targeting Black Wo...



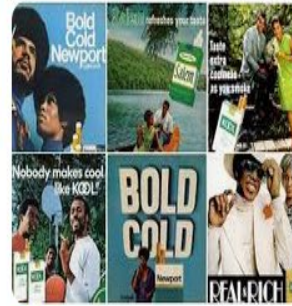
Stanford Research i...
Targeting Black Wo...



Campaign for Tobac...
TOBACCO COMPAN...



Flashbak
Sex Sells Tobacco: ...



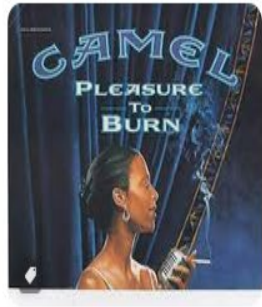
WHYY
Pushing Cool: Big Tobacco, Racial ...



Slate Magazine
How menthol cigarettes became Black...



USA Today
racially targeted me...



eBay · In stock
2001 CAMEL CIGARETTES 2 PA...



Stanford Research i...
Targeting Black Wo...



Truth Initiative
tobacco industry's ...



Stanford Research i...
Targeting Black Wo...



The Daily Beast
Menthol Cigarettes

French 'Oral Sex' Anti-Smoking Ad Sparks Scandal (PHOTOS)

French 'Oral Sex' Anti-Smoking Ad Sparks Scandal (PHOTOS)

French Anti-Smoking Ads Spark Scandal For Equating Smoking To Oral Sex

Apr 26, 2010, 05:12 AM EDT | Updated May 25, 2011

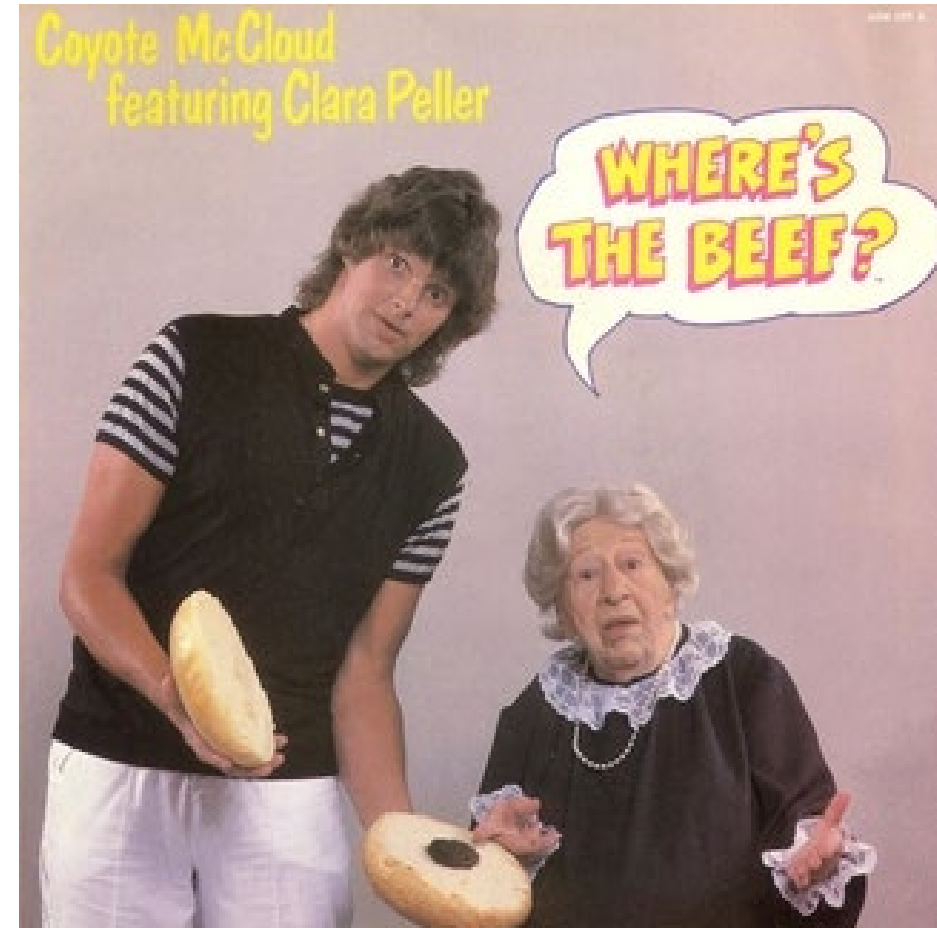


(AP) PARIS — A provocative anti-smoking ad campaign featuring teens in a subservient sexual position has sparked a storm of controversy in France, with the country's family



All the Hundreds of Millions of Research Dollars Spent For This Old Turkey.....

Where is the INNOVATION in Cessation!!
We must demand RESULTS!



Assertive Cessation

- **Does not shame the patient**
 - **BUT IT IS NOT A NEUTRAL HEALTH INTERVENTION**
- **Cessation counselors educated on these issues and taught how to integrate it into their work.**
- **Includes information on Tobacco Industry Targeting**
DOJ RICO- Tobacco Industry are Federally Adjudicated Racketeers- (2006)
- **Includes information on POLICY work at local, state, and national levels**
- **Patient does not have to set a quit date to receive the services that they have paid for through tobacco taxes**
- **Patient must OPT-Out (Refuse treatment)**
- **Community and Peer providers/messengers**
- **“Evidenced Based” is a Criminal Bar when there is to little evidence being gathered!!! WHO IS GATHERING THE EVIDENCE**
- **INNOVATION!!!!!!**



Brut.

LA Gangsta
Gardner

R



PHAT

*Protecting the
Hood
Against
Tobacco*

PHAT's Mission

Change community norms about tobacco use, protect community residents from the Tobacco Industry's predatory tactics, and provide culturally tailored cessation services

Community Research Partners



Community Research Partners



Pilot CARA Research Findings

Large percentage of African American smokers who wanted to quit smoking

Inadequate culturally tailored cessation services for African American community

Tobacco documents played crucial role

- Framed tobacco as a social justice issue
- Elevated tobacco control to community priority

Full- CARA (PHAT): Cessation Classes for African Americans

Classes conducted in the community

Focus on tobacco as a community issue

Use of tobacco documents

Classes were free

Childcare and light refreshments provided

Incentives for those completing all sessions

Classes lasted 5-weeks

Froelicher ES, Doolan D, Yerger VB, McGruder CO, & Malone RE (2010). Combining community participatory research with a randomized clinical trial: The Protecting the Hood Against Tobacco (PHAT) smoking cessation study. *Heart Lung, 39*(1), 50-63.

Lessons Learned

Many people wanted to quit, but did not trust NRT

Classes lasting 5-weeks is too long

Observation – CRPs who smoked, quit



HUGE BARRIER



Yerger VB, McGruder CO, et al. (2008). Nicotine Replacement Therapy: Perceptions of African American smokers seeking to quit. *Journal of the National Medical Association*, 100(2), 230-236.

UNEXPECTED

The African American Pre-Cessation Enhancement Intervention (AAP-CEI)

A Labor of Love

- CONCEIVED FROM AN ABYSS OF NEED
 - TEN YEARS IN THE MAKING
 - TRUE COMMUNITY ENGAGEMENT
-
- TRIALS / “LESSONS LEARNED”



Labor Is Not Easy!

- CONCEIVED FROM AN ABYSS OF NEED
 - TEN YEARS IN THE MAKING
 - TRUE COMMUNITY ENGAGEMENT
-
- TRIALS / “LESSONS LEARNED”



African American Pre-Cessation Enhancement Intervention (AAP-CEI)

- Innovative
- Delivery of services tailored for an underserved, overburdened, and oftentimes hard to reach community
- Part of the “Protecting the Hood Against Tobacco Scum - Los Angeles (PHATS-LA)” project

AAP-CEI

- Utilized principles of social justice and community capacity building
- Offered as single contact session, at regular intervals in community settings
- Adult community residents were invited to participate if they smoked and were at least considering to quit



Curriculum Components

- Framing the issue exercise
- Tobacco industry targeting of African Americans
- Tobacco and African Americans (nicotine accumulation in melanin-containing tissues)
- Science of addiction
- “Menthol Wars”





PHATS-LA

WHAT ARE THE PROBLEMS

POVERTY	INCARCERATION	ISOLATION
HOMICIDE	DIABETES	HIV
SUICIDE	! BURNING	STIGMA
GANG VIOLENCE	DEATH	DRUGS
		CRACK





AAP-CEI Methods

Identified community partners who played a vital role in building goodwill for the project and recruited intervention participants

Closely partnered with 7 community-based organizations that serve the South-Central sector of Los Angeles or the City of Inglewood

Trained 4 community facilitators to deliver intervention

AAP-CEI Outcomes

Conducted 20 intervention groups with total of 240 smokers, most of whom are very low income

Increased community awareness of tobacco control issues and fostered positive social norm changes around tobacco use and policies (e.g., within partner organizations)

Community partners who smoked are now tobacco-free and have made institutional changes to reduce harm and support smoking cessation

Conclusions

PHATS -LA used the AAP-CEI intervention to work effectively with community members who generally are considered “low retention” study participants

AAP-CEI was well received by smokers who were ready to quit but unable or unwilling to attend a series of standard care cessation classes

Transformed smokers into tobacco control advocates

Recruited and trained facilitators who not only lived in the community, but became highly motivated and committed to delivering the AAP-CEI intervention to their fellow community members

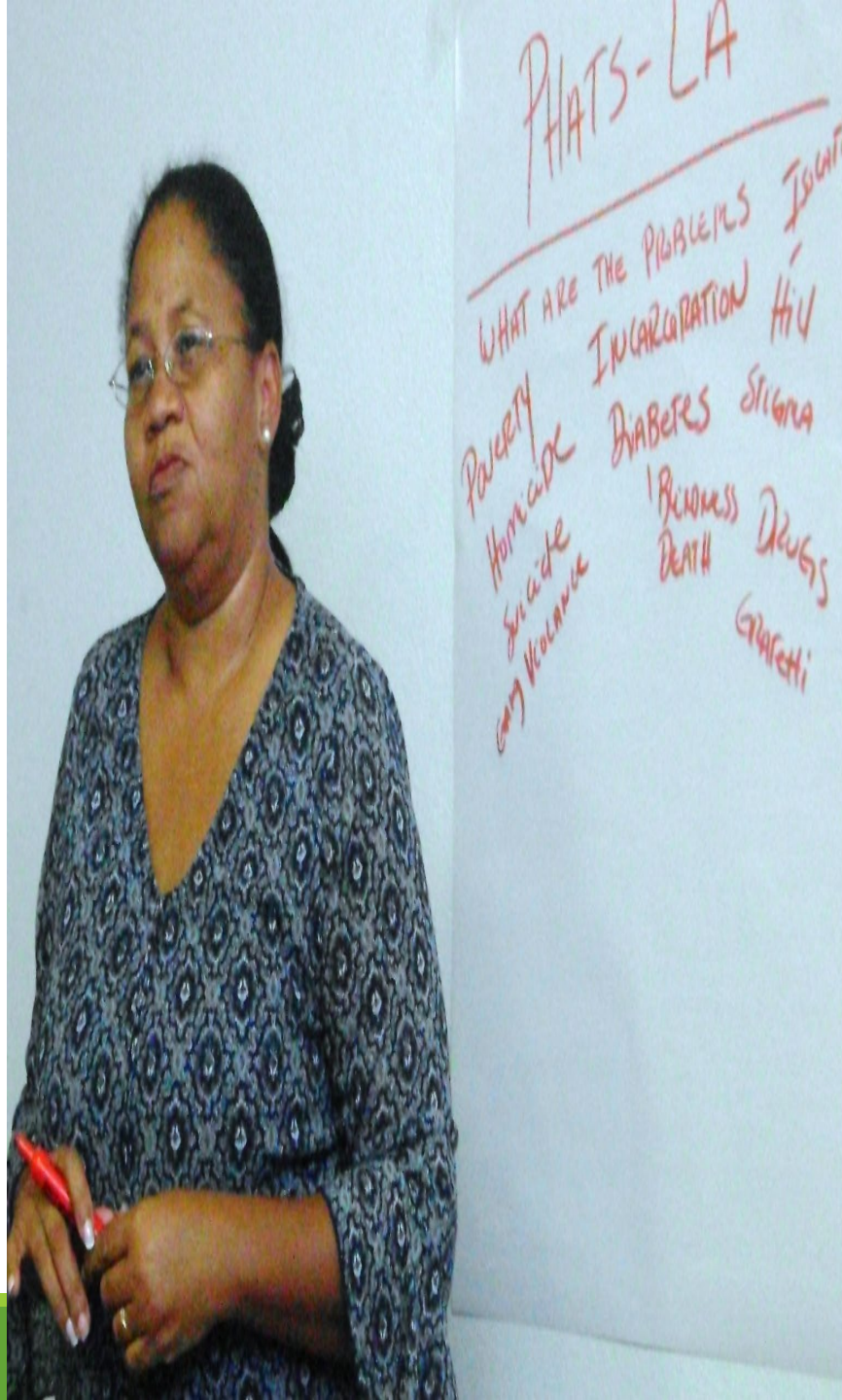


Final Words

Innovative AAP-CEI may significantly improve the cessation rates among African American adult smokers by increasing their readiness to quit, quit attempts, and subsequent participation in existing cessation programs


What are we going
to do with our
labor of love??











**Healthy communities
facilitate the
individual's ability to
make healthy choices**

www.savingblacklives.org



Lifeboats!!!

Addressing SDOH

Changing Social Norms

- People self-correct

Through Policies

- Binding and Non-Binding

Through Ordinances

- Laws with enforcement mechanisms

Through Relevant Education

Building Community Capacity Building and ENGAGEMENT

Through Services

- Smoker's Quit Lines, Mental Health Services, Stress Reduction
- On Demand Culturally Tailored Cessation

Passing Laws
to Protect
Black People
marks the
BEGINNING
of real
change. It is
not magic.

**We must work on the
demand side**

**We need health equity
reparations**

**We need all of our
community supporting
smokers**

**Culturally tailored smoking
cessation that addresses
SDOH and PDOH**

Innovation

**REJECTION of Tobacco
Industry**

**-including research
funding**

SCLC wants 1965 Voting Rights Act fully restore

The Atlanta Voice Apr 13, 2021 Updated Apr 14, 2021



President Lyndon Johnson shakes hands with civil rights activists, including Dr. Martin Luther King Jr., after signing the Voting Rights Act of 1965./LBJ Presidential Library

A graphic consisting of three overlapping, curved lines that sweep from the left towards the right, positioned above the main text.

AATCLC

*The African American Tobacco
Control Leadership Council*

Saving Black Lives

www.savingblacklives.org

888.881.6619



THANK YOU

Submit questions via the 'Q & A' box



CME/CEU Statements

Accreditations:

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

UCSF designates this live activity for a maximum of *1.25 AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the webinar activity.

Advance Practice Registered Nurses and Registered Nurses: For the purpose of recertification, the American Nurses Credentialing Center accepts *AMA PRA Category 1 Credit™* issued by organizations accredited by the ACCME.

Physician Assistants: The National Commission on Certification of Physician Assistants (NCCPA) states that the *AMA PRA Category 1 Credit™* are acceptable for continuing medical education requirements for recertification.

California Pharmacists: The California Board of Pharmacy accepts as continuing professional education those courses that meet the standard of relevance to pharmacy practice and have been approved for *AMA PRA category 1 Credit™*. If you are a pharmacist in another state, you should check with your state board for approval of this credit.

California Psychologists: The California Board of Psychology recognizes and accepts for continuing education credit courses that are provided by entities approved by the Accreditation Council for Continuing Medical Education (ACCME). *AMA PRA Category 1 Credit™* is acceptable to meeting the CE requirements for the California Board of Psychology. Providers in other states should check with their state boards for acceptance of CME credit.

California Behavioral Science Professionals: University of California, San Francisco School of Medicine (UCSF) is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for behavioral health providers. UCSF maintains responsibility for this program/course and its content.

Course meets the qualifications for 1.25 hours of continuing education credit for **LMFTs, LCSWs, LPCCs, and/or LEPs** as required by the California Board of Behavioral Sciences. Provider # 64239.

Respiratory Therapists: This program has been approved for a maximum of 1.25 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, 9425 N. MacArthur Blvd. Suite 100 Irving TX 75063, Course #190549000.

California Addiction Counselors: The UCSF Office of Continuing Medical Education is accredited by the **California Consortium of Addiction Professional and Programs (CCAPP)** to provide continuing education credit for California Addiction Counselors. UCSF designates this live, virtual activity, for a maximum of 1.25 CCAPP credits. Addiction counselors should claim only the credit commensurate with the extent of their participation in the activity. Provider number: 7-20-322-0724.



Free CME/CEUs will be available for all eligible California providers, who joined this live activity thanks to the support of the California Tobacco Prevention Program (CTPP)

For our California residents, SCLC offers regional trainings, online education opportunities, and technical assistance for behavioral health agencies, providers, and the clients they serve throughout the state of California.

For technical assistance please contact (877) 509-3786 or Jessica.Safier@ucsf.edu.

Webinar Collections with Free CME/CEUs



SCLC is offering FREE CME/CEUs for our recorded webinar collections for a total of **24 units**.

Visit SCLC's website at: <https://smokingcessationleadership.ucsf.edu/free-cmeces-webinar-collections>

Free 1-800 QUIT NOW cards

Take Control

1-800-QUIT-NOW

Call. It's free. It works.

1-800-784-8669

For details on your state services, go to: <http://map.naquitline.org>



✓ Refer your clients to cessation services

Post Webinar Information

- You will receive the following in our post webinar email:
 - ✓ Webinar recording
 - ✓ PDF of the presentation slides
 - ✓ Instructions on how to claim FREE CME/CEUs
 - ✓ Information on certificates of attendance
 - ✓ Other resources as needed
- All of this information will be posted to our website at <https://SmokingCessationLeadership.ucsf.edu>



SCLC next live webinar is, *Access to Tobacco Treatment for the Justice-Involved Part 3: Programming Innovation and Operations* with Cyrus Ahalt, MPP, Joan Gillece, PhD, Beth Jordan, MD and Tyler Mains, MD

- **Thursday, August 17, 2023**
- **1:00 pm – 2:00 pm EDT**



Contact us for free technical assistance



- **Visit** us online at smokingcessationleadership.ucsf.edu
- **Call** us toll-free at **877-509-3786**
- **Provide Feedback** - complete the evaluation, which you will see at the end of this webinar

UCSF Smoking Cessation
Leadership Center

National Center of Excellence for
Tobacco-Free Recovery



University of California
San Francisco

SmokingCessationLeadership.ucsf.edu

Toll-Free 877-509-3786