Georgia Tobacco-Free Colleges & Universities Tool Kit

2014

This tool kit is to assist the colleges and universities within the state of Georgia in adopting, implementing and enforcing a tobacco-free campus policy.

DPH
Georgia Department of Public Health

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Tobacco –Free Colleges & Universities Policy

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Understanding the Problem

Tobacco is the leading cause of preventable and premature death, killing an estimated 443,000 Americans each year. (USDHHS, 2012). In Georgia, about 10,000 adults age 35 years and older die every year from tobacco-related illnesses (2011 Georgia Behavioral Risk Factor Surveillance System).

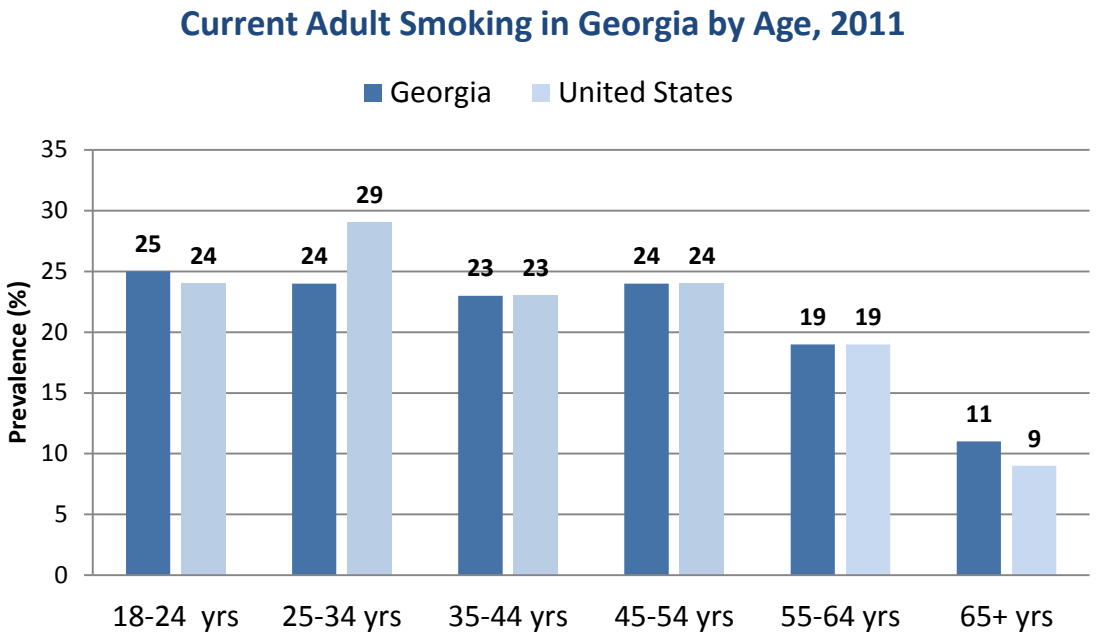
According to the 2012 Surgeon General's Report on Tobacco Use Among Youth and Young Adults:

- In 2010, there were more than 20 million students enrolled in degree-granting institutions. This does not include faculty, staff, and visitors to campuses who are also impacted by a smoke-free or tobacco-free campus policy.
- Many risk factors, including tobacco use, peak from 18-25 years of age; college attendance could be a turning point in choosing not to use tobacco products.
- 24.8% of full-time college students aged 18-22 years old were current smokers in 2010.
- The number of smokers who initiated smoking after age 18 increased from 600,000 in 2002 to 1 million in 2010.
- Progression from occasional to daily smoking almost always occurs by age 26.
- While smoking rates are higher for their peers not enrolled in college, college students and campus policies offer a unique opportunity to create and sustain tobacco-free living.

As 1 in 5 college students report use of some type of tobacco product, tobacco use on college campuses remains a major concern (Johnston, O'Malley, Bachman, & Schulenberg, 2008). As students transition into this new phase of their lives, initiation of tobacco use during college years is also a concern as 11.5 percent of college students reportedly started smoking occasionally over the course of their four years in school (Johnston, et al., 2008). According to 2010 data from the American College Health Association (ACHA, 2011a):

- 15.2 % of college students have used cigarettes within the last 30 days
- 17.3 % of college students report being lifetime users and/or use additional tobacco products

In Georgia, 21% (1.5 million) adults are cigarette smokers and cigarette use is highest among the college aged population than any other age group:



Georgia BRFSS data, 2011

According to the 2011 Georgia Behavioral Risk Factor Surveillance System (BRFSS) data, smoking prevalence among young adults ages 18-24 is 25% (240,000).

Health Effects of Smoking

As we know, smoking causes disease and death. Even young adults under age 30 who started smoking in their teens and early twenties can develop smoking related health problems, such as:

- Early cardiovascular disease.
- Smaller lungs that don't function normally.
- Wheezing that can lead to a diagnosis of asthmas.
- DNA damage that can cause cancer almost anywhere in the body. (USDHHS, 2012)

According to the Tobacco Technical Assistance Consortium's College Tobacco Prevention Resource, smoking and tobacco use can also lead to other health issues and high-risk behaviors such as:

- College students who smoke are more likely to participate in the risky behaviors that pose some of the greatest health threats to 18-24 year olds.

- Concurrent dependence on tobacco and alcohol occurs in about 10.0% of young adults ages 21-25

- Adolescents who smoke are seven times more likely to abuse or become addicted to illicit drugs than are nonsmoking teens

- The Harvard College Alcohol Study determined that student tobacco users are 4.62 times more likely to smoke marijuana and 3.6 times more likely to engage in high-risk drinking than are nonsmokers. Smokers are more likely to use illicit drugs than high-risk drinkers.

- College students who are smokers are 50.0% more likely than nonsmokers to have had two or more sexual partners in the last month. Even light smokers are over three times more likely to participate in high-risk sexual behavior when concurrently using alcohol or other drugs than nonsmokers.

- Smokers have lower grade point averages (GPA) than nonsmokers. The Harvard College Alcohol Study found that smokers are 27.0% less likely than nonsmokers to have an above B grade average. Daily smokers were found to have even lower GPAs than high-risk drinkers.

Smokeless tobacco and other trending tobacco products

In addition to smoking, smokeless tobacco products are also popular among young adults. Smokeless tobacco products contain tobacco that is chewed, sucked on or sniffed and not smoked. The major smokeless tobacco products on the market today include snuff ('dipping'), chewing tobacco, snus, and dissolvable tobacco.

In Georgia, 4.4% (317,000) adults use smokeless tobacco and the prevalence of smokeless tobacco use is highest among young adults aged 18-24 years (6%, 56,000), when compared to other age group. (2011 Georgia Behavioral Risk Factor Surveillance System)

New trends in tobacco products such as waterpipes (hookah), cigars, little cigars, cloves, smokeless tobacco, and electronic cigarettes, are also of concern on college campus as ACHA reports indicate:

- Over 24% of college students have ever used hookah
- 21% of college students have used cigars, little cigars, and clove cigarettes
- College students report 81.8% of their peers use tobacco

The Dangers of Secondhand Smoke

Secondhand smoke (SHS) causes illnesses, disease, and even death among those who may never even use tobacco products. Adopting and implementing a tobacco-free policy not only helps to save the lives of smokers and other tobacco users but also protects the rest of the campus community who may be at risk for secondhand smoke exposure.

SHS is a mixture of gases and fine particles that includes:

- Smoke from a burning cigarette, cigar, or pipe tip
- Smoke that has been exhaled or breathed out by the person or people smoking
- More than 4,000 chemicals; many of these chemicals are toxic and class "A" carcinogens such as formaldehyde, benzene, lead, chromium, ammonia, toluene, and carbon monoxide (USDHHS, 2006).

Most exposure to SHS occurs in homes and workplaces.

Secondhand smoke exposure also continues to occur in public places such as restaurants, bars, and casinos and in private vehicles. It is important to understand the dangers of secondhand smoke to understand the importance of protection nonsmokers. Other important SHS facts include:

- There is no safe amount of SHS (USDHHS, 2006)
- About 39% (1.2 million) of adults in Georgia have been exposed to SHS within the last seven days. (Georgia SHS and Heart Disease Data Summary, 2012).
- SHS kills and causes immediate harm to non-smokers (USDHHS, 2006)
- Over 49,000 Americans die each year due to exposure to SHS primarily from heart disease and lung cancer (CDC, 2013)
- About 1,430 Georgia adults each year die due to exposure to SHS. (MMWR, 2009)
- Everyone has the right to breathe clean air; no-one has the right to adversely impact another's health by exposing them the SHS (Tobacco Control Legal Consortium, 2013).

Additionally, the ACHS has also recognized the dangers of SHS and as such, has encouraged all colleges and universities to promote a smoke or tobacco-free environment. (ACHA, 2011b). A copy of their position statement of no tobacco use is included. **(Appendix 3)**

The Cost of Tobacco

In addition to health hazards, the use of tobacco presents a significant financial burden, not only on the individual user, but on other related entities including the general public and institutional budgets.

In the State of Georgia

- Each year Georgia spends approximately $1.8 billion in healthcare costs and $3.2 billion in lost productivity costs due to cigarette smoking among adults
- If the current adult smoking prevalence persists, an estimated 219,000 Georgia residents who were between ages 0-17 years in 2010 could die prematurely from smoking related illnesses during their adulthood
- This projected number of smoking-related deaths could result in an estimated $4 billion in future healthcare costs

(Davis, Lavender, Bayakly, Ray, Moon, 2012)

On College Campuses

College campuses endure the following institutional costs associated with campus tobacco use:

- Loss of productivity and sick leave
- Increased health care costs
- Increased liability
- Increased risk of fires on campus and possible increase of insurance premiums
- Maintenance costs of cleaning up cigarette butts and other tobacco litter

Benefits of a Tobacco-Free Policy

The *2006 Surgeon General's Report on Health Consequences of Involuntary Exposure to Tobacco Smoke* found that workplace smoking restrictions reduce secondhand smoke exposure and smoking in the workplace. (USDHHS, 2006) Furthermore, the CDC cites other studies which have shown that workplace smoking bans and restrictions can reduce the amount of daily smoking among workers and increase the number of employees who stop smoking. The findings of these studies include:

- An association between workplace smoking policies, particularly more restrictive policies, and decreases in the number of cigarettes smoked per day, increases in attempts to stop smoking, and increases in smoking cessation rates. (USDHHS, 2006)

- Sufficient evidence that smokefree workplaces and designated public places reduce tobacco use among workers or community members. (Hopkins, Razi, Leeks, Priya, Chattopadhyah, Soler, 2010)

- Smokefree-worksites policies are associated with lower cigarette consumption and higher cessation among employees. (Bauer, Hyland, Li, Steger, Cummings, 2005)

Best practice recommendations for tobacco control consist of the following objectives:

- Prevent initiation among youth and young adults
- Promote quitting among adults and youth
- Eliminate exposure to secondhand smoke
- Identify and eliminate tobacco-related disparities

Implementing a tobacco-free policy on campus helps to address all four of the best practice recommendations. Furthermore, addressing tobacco use and influence on campuses could prevent a new cohort of lifetime smokers.

PRE POLICY ADOPTION

Step 1. Build a diverse Tobacco-Free Campus Coalition

To start the process of adopting a tobacco-free campus, begin by creating a tobacco-free campus coalition. Identify individuals who will help create and support the tobacco-free campus initiative. This tobacco-free campus coalition will develop the strategies, objectives, and overall tobacco-free campus plan. The tobacco-free coalition should include representatives from each of the groups that will be affected by the new tobacco-free policy. This includes:

- ☐ Students (nursing, biology, respiratory, physical therapy, public health, psychology, policy, business, marketing, advertising, etc…)
- ☐ Administration
- ☐ Faculty
- ☐ Staff
- ☐ Contractors/Vendors
- ☐ Visitors
- ☐ Athletics
- ☐ Safety
- ☐ Environmental
- ☐ Health Services
- ☐ Community Neighbors

Tobacco-free Coalition Tasks:

1. *Identify Coalition Leadership* – Select 2-3 individuals who will be responsible for leading the taskforce. They will also serve as the liaisons to the school leadership and administration regarding taskforce activities; therefore, it may be best to select influential school administrators/faculty for this role.

2. *Develop a Tobacco-Free Action Plan* – The tobacco-free coalition will be responsible for executing the remaining pre and post adoption steps as well as developing an overall action plan. The action plan will include developing goals and objectives around policy implementation, cessation services, policy enforcement, and evaluation. A sample action plan is provided. **(Appendix 9)**

3. *Identify Coalition Responsibilities* – Determine which members of the group will be responsible for completing specific activities and reporting their results back to the group. Develop a meeting schedule and determine meeting agendas based on anticipated updates on assigned responsibilities.

4. *Schedule Coalition Trainings* – Coalition members should be trained on relevant tobacco use and prevention topics as well as pre and post adoption processes, as needed. Initial trainings should cover a brief history on tobacco use and tobacco prevention efforts within Georgia and nationwide. As you move throughout the process, additional trainings should focus on collected campus data, secondhand smoke, and training selected coalition members as speakers and spokespersons. Please contact the Georgia Tobacco Use Prevention Program for more information on available trainings.

NOTE: The Tobacco-free coalition should remain in place even after a tobacco-free policy has been adopted and implemented. This will allow for continuing monitoring and updating tobacco-free campus efforts as needed.

Step 2. Research and collect data on current campus tobacco statistics

Once a tobacco-free coalition has established, it is important to know and understand the campus community. Members of the coalition will be responsible for overseeing the completion of various assessments and data collection activities to assess the campus community, environment, and climate. These data and findings will help to understand tobacco-related issues on the campus, possible solutions to the problems, identify areas of support, and the overall process it will require to create campus change. This information will assist the tobacco-free coalition in developing an action plan to implement a tobacco-free policy on campus.

Recommended methods of data collection include:

a. *Surveys* – Surveys can help determine the usage of tobacco products on campus such as which students use them, what kind of products they use and where those products are used on campus. Surveys can also help to assess people's beliefs and perceptions around tobacco use on campus as well as their knowledge of a campus tobacco policy. Surveys are also a good way to assess attitudes, knowledge, and exposure to secondhand smoke. **(Appendix 6)**

b. *Environmental Scans* – An environmental scan is a visible assessment of your campus environment to determine where tobacco is present on campus, where it is used on campus, and where it is disposed of on campus. This will help developing an action plan and in determining the locations where tobacco-free signage may be needed. **(Appendix 7)**

c. *Key Informant Interviews* – Conduct interviews with influential individuals on campus who can provide insight on the best methods of implementing and enforcing the new policy.

d. *Campus Health Clinic Data* – Collect tobacco-related data from the campus health clinic to determine current campus tobacco use and tobacco related visits/conditions.

e. *Cigarette "Butts Pick-Up" Day* – Schedule a day to pick-up cigarette butts and other tobacco related litter around campus. Be sure to note where cigarette butts are located to determine where signage and enforcement efforts may need to be focused. Invite other organizations to assist in the pick-up day to increase awareness of the issue and support for the new tobacco policy. **(Appendix 8)**

f. *Focus Groups* – Conduct focus groups to obtain direct feedback and understanding of beliefs, perceptions, and behaviors related to tobacco-use on campus as well as to learn about possible incentives to encourage compliance with the new tobacco-free policy.

g. *Readiness Assessment* – Explore the current state of campus readiness towards the impending tobacco-free campus policy. Explore the values (written and non-written) of your institution towards tobacco use. Also assess any previous campus tobacco prevention efforts and its resulting success, challenges/barriers, and outcomes.

NOTE: In conducting the various assessments and data collection activities, be sure to anticipate opposition and develop appropriate responses. Additionally, some of these recommended activities may require approval from the school's Institutional Review Board (IRB).

Conversely, conducting the assessments may create an opportunity to educate the campus community about the proposed policy and generate additional support. Create brief talking points based on the tobacco prevention information obtained during coalition trainings to assist in the educational effort.

Step 3. Develop an Action Plan

After obtaining a clearer understanding of the presence and perceptions of tobacco on campus, an action plan should be developed to address the identified issues. The tobacco-free coalition will be responsible for developing this plan which will define coalition responsibilities and objectives as well as the required steps for policy adoption and implementation.

The action plan should address four major components:

A. Implementation of the new policy
   - Implementing an education campaign to communicate the policy adoption
   - Creating a tobacco-free environment by making physical changes on campus (e.g. removal of ashtrays, placing signage, etc.)

B. Cessation Resources and Services
   - Providing cessation resources and services
   - Promoting the Georgia Tobacco Quit Line

C. Enforcement of the new policy
   - Developing an enforcement plan to identify responsible parties for monitoring compliance
   - Defining violations and reprimands

D. Evaluation of the policy implementation
   - Assessing the policy for on-going compliance as well as any needed adjustments

Other key items to consider during planning

Determine a budget for policy implementation

The budget for the tobacco-free policy implementation may vary depending on campus size and physical layout. The majority of the costs will mainly focus on communicating the policy via signage and other materials and creating a tobacco-free campus environment. Below are the budget items to consider:

- ☐ Temporary signage
- ☐ Permanent signage
- ☐ Print materials for education campaign
- ☐ Public Service Announcements (PSAs) as part of the education campaign
- ☐ Removal of cigarette butts and other tobacco product litter
- ☐ Removal of ashtrays and on-campus smoking areas

Identify stakeholders and decision makers

Identify the individuals who will be responsible for adopting and supporting the new policy. Obtaining the support of campus leadership early in the process will aid in the implementation phase and in gaining community support. Prepare packets of information to educate these individuals on the harms of the tobacco use and the importance of the tobacco-free campus policy. Be sure to include the results of the campus data collection activities so they have a clear understanding of the campus' tobacco-related issues.

Establish communication channels

Education and communication are essential throughout the entire process and is especially important once the new policy has been adopted. The new policy will need to be communicated to all affected groups including students, staff, faculty, visitors, and the community at large. Find out what channels your college or university uses to communicate all other important updates and notices to students, staff, faculty, visitors, and the community. This may include messages on the website, social media, email or text blasts, publications or other media outlets.

Step 4. Presentation to Decision makers

At this point, the following steps should have been completed:

- Developed and convened the tobacco-free coalition
- Obtained a better understanding of the campus and its tobacco-related issues
- Constructed an action plan to address the issues identified.

If so, it is now time to educate the campus decision makers about the importance of adopting a tobacco-free policy to address the campus specific data and findings.

The decision makers may vary based on the college or university organizational structure. In most cases, the group that will vote to adopt a tobacco-free policy will be the institution's Board of Trustees; however, do not neglect to meet with other influential individuals and groups to gain additional support. This can include members of the senior administration and individuals in charge of health and/or residential life.

Tips for Meeting with Decision Makers:

- Select only a few people from the coalition to meet with the decision maker. Too many people in one meeting may overwhelm the decision maker.
- Remain professional. But be confident and firm about the established views. Practice what will be said with someone who can ask questions that are likely to be asked or express a different point of view.
- Make sure the individuals presenting at the meeting are knowledge on the issue and able to answer questions. Specific statistics may or may not be needed, but it is important to be able to share with decision makers why it is important to create a tobacco-free campus.
- Become familiar with decision maker's level of influence. It would be useless to ask him/her to do so something if they aren't able to do it.
- Be organized. Have a copy of the proposed tobacco-free policy (if possible). Become familiar with the content of the current policy and whether or not it is being enforced.
- Know exactly what the decision maker is being asked to do. If the person does not agree with what is wanted from them, have an alternative request in hopes of leaving the meeting with some sort of commitment from the individual (e.g., if they do not offer to be the spokesperson for the policy, ask if they will write a letter of support).

Talking Points for Decision Makers:

- ☐ Tobacco-free campus policies can eliminate secondhand smoke exposure on campuses.
- ☐ Throughout the U.S., 69% of college employees prefer a smoke-free college over one that allows smoking (American Lung Association of Oregon).
- ☐ Use assessment data about how many students prefer a tobacco-free environment.
- ☐ Some colleges have experienced an increase in enrollment after going tobacco-free; none reported a decrease.

(Adapted from Wake Forest Tobacco-Free Policy Manual)

POST POLICY ADOPTION

Step 1. Implement the New Policy

Education Campaign to communicate the new policy

As previously noted, educating the campus and community about the policy is essential at every step of the process. Continuing to educate the campus community about what the policy is and why it is happening will increase the likelihood of greater support and adherence.

It is also very important to communicate the newly adopted policy to all those impacted – students, faculty, staff, visitors, and community – through a well-developed education campaign. This will ensure that everyone is made aware of the new policy. An effective education campaign is also an important part of the enforcement process. Refer back to the Education Campaign Worksheet you completed while developing the action plan (**Pre Policy Adoption Step 3**).

The education campaign plan should include the following components and steps:

a. Identify speakers and spokespersons and train them on key talking points
b. Develop a plan to promote cessation services and the Georgia Tobacco Quit Line.
c. Develop key messages that speak to the concerns of various groups. Examples: "you have the right to breathe clean air" and "there are no safe levels of exposure to secondhand smoke".
d. Develop media materials (flyers, posters, brochures
e. Placement of highly visible signage
f. Educate about SHS, health impact, economic impact, campus cleanliness/litter, safety, etc.
g. Disseminate data collection findings.
h. Update the policy in all campus-related content and materials including handbooks, websites, etc.
i. Launch radio and in-house T.V. announcements.
j. Use existing media channels: newsletter, e-blasts, website, newspaper, etc.
k. Present to influential bodies and seek support – such as student senate, faculty senate, and staff council.
l. Conduct presentations to various groups to educate about the new policy.

m. Participate at health events/fairs to educate about the new policy.
n. Organize educational forums and rallies around the new policy.

NOTE: When implementing your campaign, be sure to document your activities as well as keep track of your successes and challenges. It is also helpful to obtain regular feedback to address perceived barriers to enforcement.

The new policy should be communicated and updated in all school related content and materials. These documents and content locations include:

- ☐ School website
- ☐ Student Handbook
- ☐ Faculty/staff handbook
- ☐ Employment applications
- ☐ Vendor contracts
- ☐ Student admission applications
- ☐ Student welcome packets and orientation guides
- ☐ Facebook page, other web and social media
- ☐ Alumni publications
- ☐ Letters to parents
- ☐ Local newspaper to notify community
- ☐ Other relevant campus agreements and contracts (e.g. conference and facility rental agreements)

NOTE: Include information about the Georgia Tobacco Quit Line and other local resources in each of these communication channels for those who are tobacco-dependent and may desire assistance to quit.

Create a tobacco-free campus environment

Once the campus community has been notified of the new policy, begin to make the necessary changes to create your tobacco-free campus environment.

A. Install new tobacco-free signage – Announce the new policy to anyone on campus by posting prominent, highly visible signs.

a. *Temporary signage* – Temporary signage can be used to notify the campus of the impending new policy implementation if the policy will be implemented several months after policy adoption. Consider placing temporary signage in the areas where tobacco is commonly used to prepare tobacco users for the upcoming change.

Temporary signage such as sandwich boards and roll-aways can be used to post the signage to visitors during special events such as conferences, meetings, and ceremonies.

b. *Permanent signage* – Permanent signage should be placed in highly visible locations and especially in the areas previously occupied by smokers and tobacco users such as areas which previously houses ashtrays and smoking areas. Refer back to your data assessments; cigarette butts pick-up data, and environmental scans to determine locations for permanent signage.

B. Update campus environment and facilities to reflect the new policy - In addition to signage, add and remove items to reflect a tobacco-free environment. This may include:

a. Removal of ashtray and smoking/tobacco related amenities on campus
b. Repurposing previously designated smoking areas

Step 2. Promote cessation resources and services

It may be difficult for current student and staff that use tobacco products to adjust to the new policy and this concern should be taken into consideration. One way to assist them is to promote and/or offer tobacco cessation resources and services for those who may want to quit and need assistance in doing so. Promotion of the following services should be made available to every on campus and should be implemented as outlined in your action plan.

A. Georgia Tobacco Quit Line

The Georgia Tobacco Quit Line is a public health service funded by the Georgia Department of Public Health through the Georgia Tobacco Use Prevention Program (GTUPP). GTUPP partners with a national tobacco cessation vendor to provide telephone and web-based counseling services in accordance with the United States Public Health Service Treating Tobacco Use and Dependence Clinical Practice Guideline.

English: 1-877-270-STOP (877-270-7867)
Spanish: 1-877-2NO-FUME (877-266-3863)
Hearing Impaired (TTY Services): 1-877-777-6534

Hours of Operation: The Georgia Tobacco Quit Line is available every day, 24 hours a day, and 7 days a week (including holidays).

What are the benefits of calling the tobacco quit line?

- Receive FREE helpful quitting tips/techniques and support.
- Eliminate barriers of traditional cessation classes such as waiting for a class to be held or having to drive to a location in order to be in a class.
- Provide easy access for people who live in rural or remote areas. They can simply pick up the phone and call instead of having to drive long distances to attend a class.
- Empower callers who may feel uncomfortable with seeking help in a group setting.

Evidenced-based Intervention

The Georgia Tobacco Quit Line (GTQL) offers effective, evidence-based interventions to help Georgians quit smoking and using any other smokeless tobacco products (i.e., dip or snuff). For Georgians whose primary language may not be English, there are qualified interpreters available.

Eligibility

- Professional assistance is available 24 hours a day and 7 days a week.
- Any tobacco user 13 years or older living in Georgia.

Who Should Call the Quit Line?

Anyone can call the Georgia Tobacco Quit Line; not only tobacco users. The general public, relatives, friends, as well as healthcare and public health professionals.

Health Improves Within 20 Minutes After Quitting

- 20 minutes *after quitting*, your heart rate drops.
- 2 weeks to 3 months, *after quitting* heart attack risk begins to drop. Lung functions begins to improve.
- 1 to 9 months, *after quitting* coughing and shortness of breath decrease.
- 1 year *after quitting*, added risk of coronary heart disease is half that of a smoker's.
- Within 5 years, *of quitting* risk of cancer of the month, throat and bladder is cut in half.
- 10 years, *after quitting* risk of dying from lung cancer drops by half.

B. Campus Health Services

Some institutions offer tobacco cessation support and services through their on campus health facilities. It is important to engage the appropriate individual(s) responsible for health services early in the process to determine what services are currently available on your campus and which services/program your institution may be willing to explore.

C. Employee Benefits Cessation Services

Some employers offer tobacco cessation services to their employees as part of their health benefits packets. Contact the appropriate benefits representative within your institution to determine all available options for employees and determine the best method of educating faculty and staff of these services.

D. Other Local Services

Contact other local health services and related organizations to determine what other tobacco cessation services may be offered in your area. Some of the organizations you may want to start by contacting are the local health department, local American Cancer Society chapter and local American Lung Association chapter.

Step 3. Develop and Implement Enforcement Plan

A policy is only as effective as implemented and enforced. As previously mentioned, one of the first and best methods for enforcement is education around the new policy. This can be done through several of the components of the education campaign such as highly visible signage and policy language in all relevant campus publications. Another educational enforcement approach may be to distribute reminder cards to individuals who violate the policy.

An enforcement plan can also be created for those wishing to utilize a more formalized enforcement process. This plan will help to determine those responsible for policy enforcement and how and where the policy compliance will be monitored on campus. An enforcement plan template is provided. **(Appendix 17)**

Provide training to those who will be responsible for monitoring the campus for policy compliance, those responsible for receiving and responding to complaints, and those responsible for addressing violations. Please contact the Georgia Tobacco Use Prevention Program for training assistance.

Step 4. Evaluate Policy

Refer back to the evaluation plan that was developed as a part of the action plan in *Pre-Policy Adoption, Step 3*. Remember to continually look at your progress against this evaluation plan to ensure you are still on track. By evaluating your progress, as well as any changes that have occurred, you will learn what steps are still needed and any adjustments that you need to make.

Once the policy has been fully adopted, it will also be important to evaluate the implementation of the policy to determine the success, challenges, and what else is needed to complete the implementation. Assessing the policy implementation will allow you to make needed adjustments to ensure continual adherence to the new policy.

Some of the key elements to assess include:

- ☐ Compare pre and post health clinic data on tobacco use
- ☐ Compare pre and post surveys of tobacco use, beliefs, and perceptions
- ☐ Reassess the areas where tobacco litter and cigarette butts were located
- ☐ Conduct another cigarette butts pick up day to see if the amount of litter has decreased
- ☐ Evaluate the level of engagement in cessation services
- ☐ Conduct post surveys to determine the level of awareness of the new policy and the education campaign

An evaluation plan template is provided. **(Appendix 18)**

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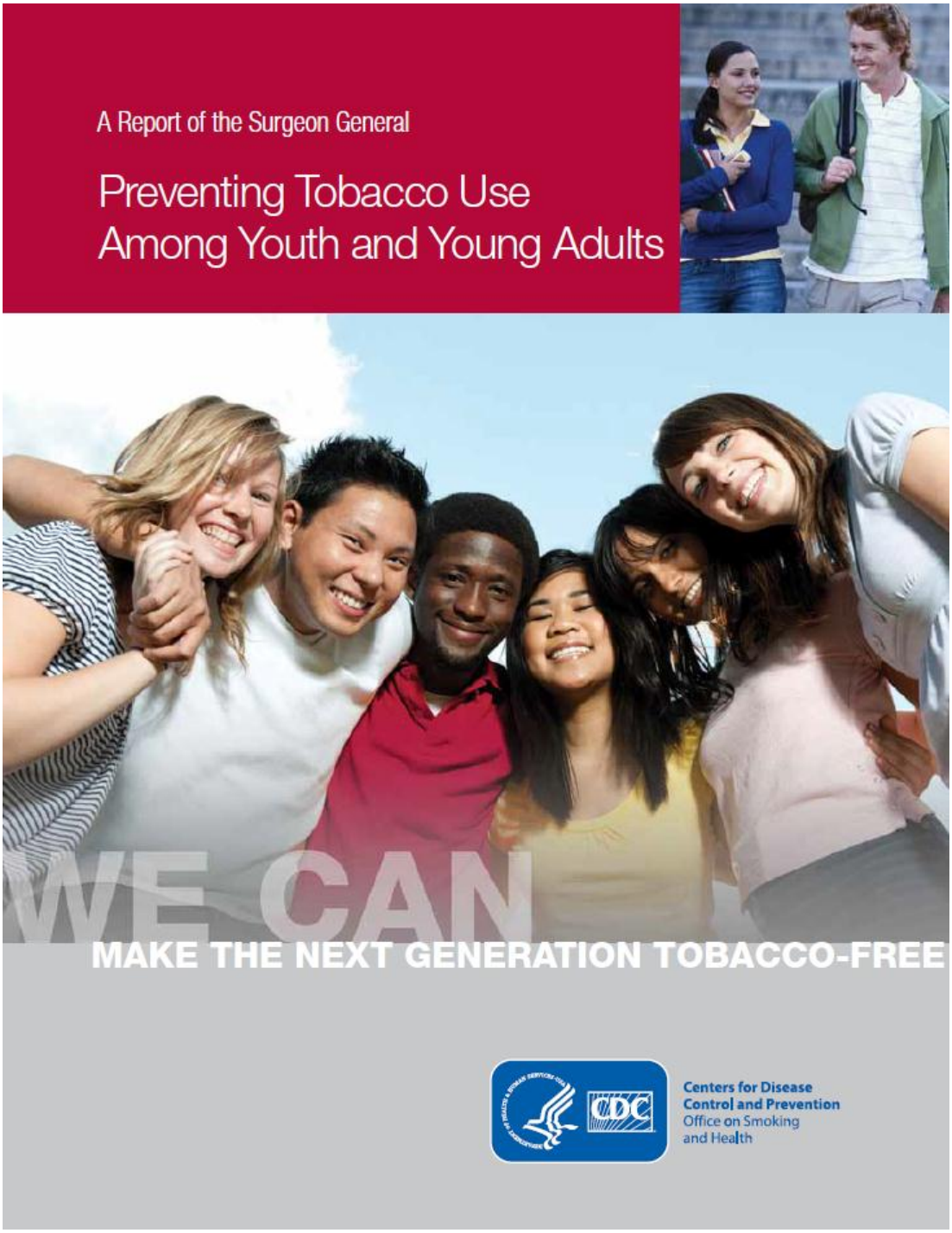
APPENDIX 1

Surgeon General's Report, 2012

Full document link: http://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/



APPENDIX 2

Georgia Model College/University Tobacco-Free Campus Policy

_____ University is committed to providing a healthy, comfortable, and productive learning environment for the students, faculty, and staff of this campus.

The 2006 U.S. Surgeon General's Report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke* has concluded that (1) secondhand smoke exposure causes disease and premature death in children and adults who do not smoke; (2) children exposed to secondhand smoke are at an increased risk for sudden infant death syndrome (SIDS), acute respiratory symptoms and slows lung growth in their children; (3) exposure of adults to secondhand smoke has immediate adverse effects on the cardiovascular system and causes coronary heart disease and lung cancer; (4) there is no risk-free level of exposure to secondhand smoke; (5) establishing smoke free workplaces is the only effective way to ensure that secondhand smoke exposure does not occur in the workplace, because ventilation and other air cleaning technologies cannot completely control for exposure of non tobacco users to secondhand smoke; and (6) evidence from peer-reviewed studies that smoke free policies and laws do not have an adverse economic impact on the hospitality industry. (U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General.* U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006.)

In addition, the 2009 Institute of Medicine Report: *Secondhand Smoke Exposure and Cardiovascular Effects: Making Sense of the Evidence* states that study results consistently indicate that exposure to secondhand smoke increases the risk of coronary heart disease by 25 to 30 percent.

Lastly, the *Georgia Smoke free Air Act of 2005* states that most public places are to be smoke free. The act also states, under "290-5-61-.09 Enforcement

(3) The enactment of any other local law, rules and regulations of state or local agencies, and local ordinances prohibiting smoking that are more restrictive than the Act are enforceable.
(4) The Act shall not be construed to permit smoking where it is otherwise restricted by other applicable laws.
Authority O.C.G.A. Secs. 16-12-2, 31-2-4, 31-5-9, 31-12A-10, 31-12A-11, 31-12A-12, 31-12A-13.

In light of these findings, _____ University shall be entirely tobacco-free effective_____ [date]. This policy applies to students, staff, faculty, visitors and vendors. The Tobacco Free Policy applies to all _____ University facilities and vehicles, owned or leased, and operated regardless of location.

Revised on June, 2012
Adopted from the tobacco-free college model policy of the Americans for NonSmokers' Rights

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All tobacco products or products that resemble the use of tobacco are prohibited. Tobacco products are defined to include but are not limited to cigarettes, e-cigarettes, candy cigarettes, chewing tobacco, blunts, blunt wraps, pre wrapped blunt cones & tubes, cigars, cigarillos, bidis, pipes, cigarette packages or smokeless tobacco containers, lighters, ash trays, key chains, t-shirts, coffee mugs, and any other items containing or reasonably resembling tobacco or tobacco products. Tobacco use includes smoking, chewing, dipping, or any other use of tobacco products shall not be permitted in any enclosed place, including private residential space within university housing. Tobacco use shall also not be permitted in, amphitheaters; or in, and within bleachers and grandstands used for spectators at sporting and other public events. This policy applies to all students, faculty, staff, visitors, and vendors.

Enforcement for Students
Consequences for students engaging in the prohibited behavior will be provided in accordance with the school's behavior management plan. Students who violate the college/university's tobacco use policy will be referred to the appropriate campus authority for screening, information, counseling, and referral.

Enforcement for Staff, Visitors, and Vendors.
Consequences for employees who violate the tobacco use policy will be in accordance with personnel policies and may include verbal warning, written reprimand, or termination. Visitors and vendors using tobacco products will be asked to refrain while on school property or leave the premises. If they refuse, law enforcement officers will be contacted to escort the person off the premises or cite the person for trespassing in case the person refuses to leave the school property. In the case of a violation within the building of a school, the person is in violation of the Georgia Smokefree Air Act of 2005 (O.C.G.A. 31-`2a-1 et seq.). Signage will be prominently posted in all visitors' and vendors' areas and college and university staff and officials will communicate policy to visitors and vendors upon arrival and infractions.

Enforcement at Outdoor School Sponsored Events on Campus Grounds
All outdoor school sponsored events on campus (ex. athletic events, meetings or functions by community groups renting college/university property) must be tobacco free. This policy must be clearly stated in all contracts, correspondence and verbal and written announcements to all attendees, visitors, vendors, and contractors.

Opportunities for Cessation
The administration will identify and or offer programs and services for students who are ready to quit tobacco use. The administration will identify and/or offer programs and services for college/university staff that use tobacco products to support them in complying with the policy that prohibits tobacco use on university grounds and during university related events.

Revised on June, 2012
Adopted from the tobacco-free college model policy of the Americans for NonSmokers' Rights

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APPENDIX 2

Copies of this policy shall be distributed to all faculty and staff and shall be included with information given to all admitted students. Announcements shall also be printed in campus newspapers to insure that everyone understands the policy. No Tobacco/Smoking signs shall be posted at all building entrances. No ashtrays shall be provided at any location on campus. Cigarettes shall not be sold on university grounds, either in vending machines, the student union, or any area on campus.

This policy is being announced three months prior to its implementation in order to give tobacco users time to adapt to its restrictions and to facilitate a smooth transition to a tobacco free environment. On-site tobacco cessation programs shall be made available to assist and encourage individuals who wish to quit smoking. Questions and problems regarding this policy should be handled through existing departmental administrative channels and administrative procedures.

The success of this policy will depend on the thoughtfulness, consideration, and cooperation of tobacco users and non tobacco users. All students, faculty, and staff share in the responsibility for adhering to and enforcing this policy.

In further recognition of the incompatibility of _____ University's educational mission and the promotion of tobacco products, effective _____ date, no tobacco-related advertising or sponsorship shall be permitted on university property, at university sponsored events, or in publications produced by the university. For the purposes of this policy, "tobacco related" applies to the use of a tobacco brand or corporate name, trademark, logo, symbol, or motto, selling message, recognizable pattern or colors, or any other indicia of product identical to or similar to, or identifiable with , those used for any brand of tobacco products or company which manufactures tobacco products.

_____ _____

Signature of Chief Administrator **Date**

Revised on June, 2012
Adopted from the tobacco-free college model policy of the Americans for NonSmokers' Rights

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APPENDIX 3 ACHA No Tobacco-Use Position Statement

NOVEMBER 2011

ACHA Guidelines

Position Statement on Tobacco on College and University Campuses

The American College Health Association (ACHA) acknowledges and supports the findings of the Surgeon General that tobacco use in any form, active and/or passive, is a significant health hazard. ACHA further recognizes that environmental tobacco smoke has been classified as a Class-A carcinogen and that there is no safe level of exposure to environmental tobacco smoke (ETS), a recognized toxic air contaminant. In light of these health risks, ACHA has adopted a NO TOBACCO USE policy and encourages colleges and universities to be diligent in their efforts to achieve a 100% indoor and outdoor campus-wide tobacco-free environment. *This position statement reflects the viewpoint of ACHA and serves only as a guide*[*] to assist colleges and universities with evaluating progress toward becoming or maintaining tobacco-free living and learning environments that support the achievement of personal and academic goals.

ACHA joins with other professional health associations in promoting tobacco-free environments. According to the ACHA-National College Health Assessment (ACHA-NCHA) conducted in spring 2011, 85% of college students described themselves as non-smokers (never smoked or have not smoked cigarettes in the last 30 days); 92% reported being non-smokers for hookah/water pipes (never used or have not used in the last 30 days); and 96% described themselves as non-users of smokeless tobacco (never used or have not used in the last 30 days). ACHA supports the health goals of the U.S. Department of Health and Human Services' Healthy People 2020 initiative to reduce the proportion of adults who smoke to below 12% by the year 2020 and to positively influence America's college students to help them remain or become tobacco-free. Additionally, ACHA actively supports the Healthy Campus 2020 goals to reduce cigarette use (within the last 30 days) by college students to below 14% and smokeless tobacco use (within the last 30 days) to below 3% by the year 2020.

Efforts to promote tobacco-free environments have led to substantial reductions in the number of people who smoke, the amount of tobacco products consumed, and the number of people exposed to environmental tobacco hazards. ACHA acknowledges that achieving a tobacco-free environment requires strong leadership and support from all members of the college/university community. Because the improvements to health can be so significant, ACHA recommends the following positions be taken to address policy, prevention, and cessation as it pertains to tobacco issues:

1. Develop a strongly worded tobacco policy that reflects the best practices in tobacco prevention, cessation, and control. These include the following recommendations:
   a. Tobacco is defined as all tobacco-derived or containing products, including, but not limited to, cigarettes (clove, bidis, kreteks), electronic cigarettes, cigars and cigarillos, hookah-smoked products, and oral tobacco (spit and spitless, smokeless, chew, snuff).
   b. Tobacco use is prohibited on all college and university grounds, college/university owned or leased properties, and in campus-owned, leased, or rented vehicles.
   c. All tobacco industry promotions, advertising, marketing, and distribution are prohibited on campus properties.
   d. The sale of tobacco products and tobacco-related merchandise (including logo

[*] Compliance with the elements of this position statement is not and cannot be mandated by ACHA; nor is compliance a condition for institutional membership in ACHA.

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containing items) is prohibited on all university property and at university-sponsored events, regardless of the operating vendor.

e. The distribution or sampling of tobacco and associated products is prohibited on all university owned or leased property and at university-sponsored events, regardless of the venue.

f. Tobacco industry and related company sponsorship of athletic events and athletes is prohibited.

g. The college/university does not permit tobacco companies on campus to conduct student recruitment or employment activities.

h. The college/university does not accept any direct or indirect funding from tobacco companies.

i. The campus provides and/or promotes cessation services/resources for all members of the college/university community.

2. Inform all members of the campus community by widely distributing the campus tobacco policy on an annual basis. The tobacco policy is clearly posted in employee and student handbooks, on the college/university website, and in other relevant publications. Key components of the policy are also shared with parents, alumni/ae, and visitors. The general policy should be included in prospective student materials in both printed and electronic formats.

3. Offer and promote prevention and education initiatives that actively support non-use and address the risks of all forms of tobacco use.

4. Offer and promote programs and services that include practical, evidence- and theory-informed approaches to end tobacco use, including screenings through health and counseling services, free/reduced-cost tobacco-cessation counseling, free/reduced-cost nicotine replacement therapy, and medication options on campus.

5. Advocate for requiring the inclusion of tobacco use cessation products, medications, and services in student health insurance plans.

6. Provide a comprehensive marketing and signage effort to ensure that all college/university visitors, vendors, guests, and others arriving on property owned or leased by the institution are aware of the tobacco-free policy.

7. Plan, maintain, and support effective and timely implementation, administration, and consistent enforcement of all college/university tobacco-related policies, rules, regulations, and practices. Provide a well-publicized reporting system for violations.

8. Collaborate with local, state, and national public health entities and tobacco prevention and control public, private, and national non-profit tobacco-related organizations in support of maintaining a healthy tobacco-free environment.

9. Develop and maintain a tobacco task force on campus to identify and address needs and concerns related to tobacco policy, compliance, enforcement, and cessation. Key individuals and departments to invite/include:

   a. Undergraduate and graduate students (particularly from student-elected/ representative organizations)

   b. Health and counseling center professionals

   c. Faculty (including faculty senate or other faculty governing bodies)

   d. Residence life/housing

   e. Judicial affairs

   f. Campus safety/police

   g. Human resources

   h. Neighborhood liaisons

   i. Facilities

   j. Other important stakeholders specific to your campus

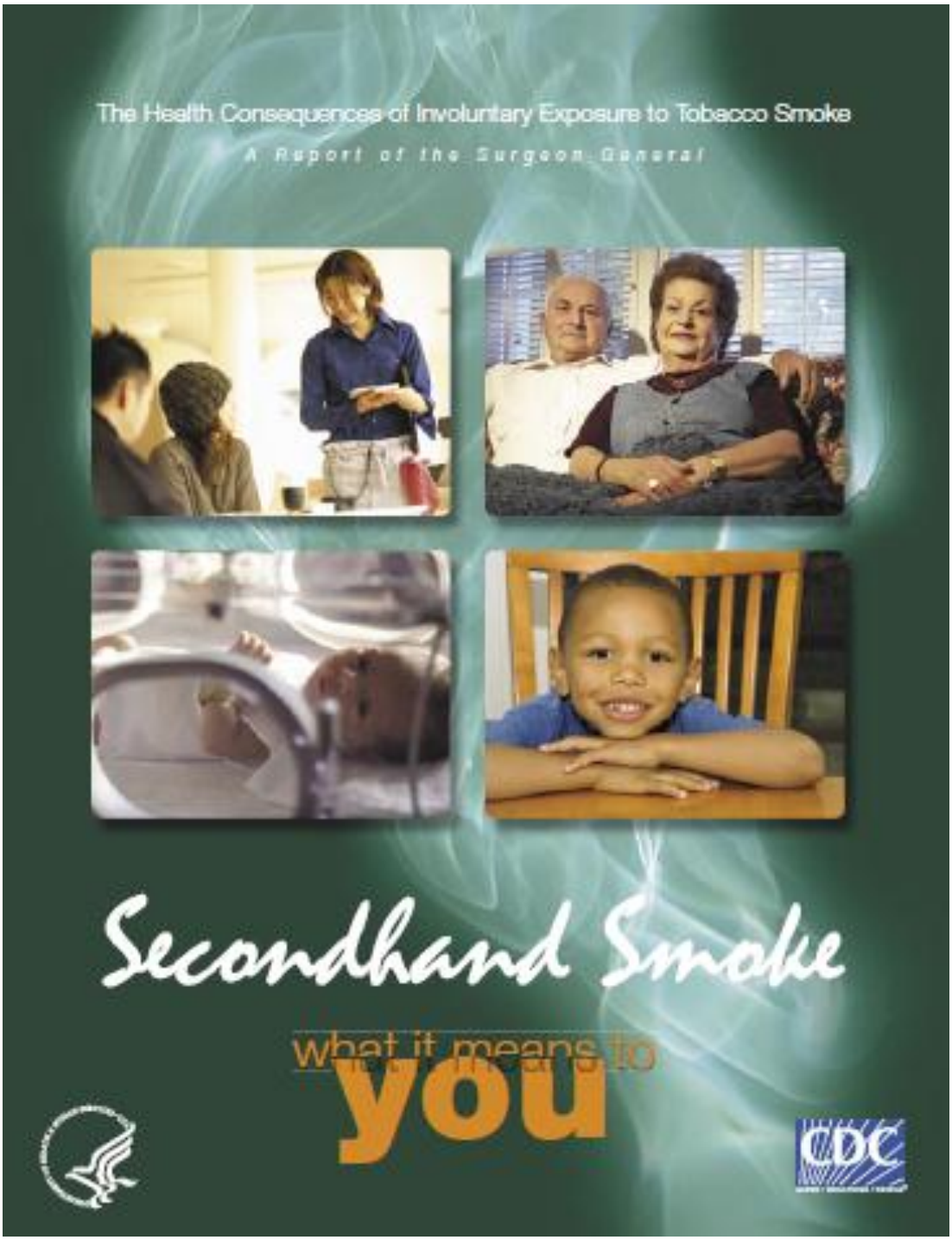
American College Health Association
1362 Mellon Road, Suite 180
Hanover, MD 21076
(410) 859-1500
(410) 859-1510 fax
www.acha.org

11/11

APPENDIX 4

Surgeon General's Report, 2006

Full document link: http://www.surgeongeneral.gov/library/reports/secondhandsmoke/index.html



APPENDIX 5

Coalition Building Best Practices

How to Build an Effective Coalition

Planning

- Assess problem and determine significance
- Identify methods that are currently in place that address the problem
- Determine who would support a coalition
- Define the community capacity for a coalition and identify potential barriers
- Ensure that coalition activities ultimately focus on policy or environmental change rather than individual-level change

Formation

- Clarify mission
- Recruit members – include substantive representation from all identified stakeholders; community representation is KEY
- Formalize rules, roles, procedures, and responsibility (e.g., bylaws, standard operating procedures, goals and objectives, memoranda of understanding)

Implementation

- Define the community capacity for a coalition and identify potential barriers
- Conduct needs assessment
- Set priorities based on results of needs assessment and funding
- Select appropriate strategies to achieve coalition goals
- Raise community awareness of coalition and problem
- Generate additional funds for coalition

Maintenance

- Coalitions must provide benefits (e.g., solidarity, appreciation, evidence of impact) that exceed costs (e.g., time, frustration) to sustain membership and momentum
- Assign tasks based on skills and available resources
- Define action steps that are broad enough to address funders' goals and also the goals of the coalition

Adapted from Centers for Disease Control and Prevention Best Practices User Guide: Coalitions

APPENDIX 6

Tobacco-Free Campus Assessment Survey (students, staff & faculty)

Instructions to coalition: Use this survey to collect important information from staff, faculty and students on your campus. Some questions may be more relevant for your campus than others, so please pick the items you think are most applicable to the campus. Please also add the necessary IRB approval information to the instructions below. A customizable Word document is available on our website: www.wakehealth.edu/tobaccofreecolleges.

Instructions to participants: This survey is for faculty, staff, and students of _____ college/university to help us determine the best tobacco policy for the campus. Your participation will be very helpful in determining priorities and therefore we greatly appreciate your participation. This survey is voluntary and anonymous.

The first few questions ask for some background information about you.

1. What is your gender?

☐ Female ☐ Male ☐ Prefer not to answer

2. What is your age? _____

3. What is your highest level of education?

☐ High school ☐ Some College ☐ Associate Degree
☐ Bachelor degree ☐ Graduate or Professional degree

4. What is your race/ethnicity? (Choose as many as apply)

☐ Asian ☐ Black or African-American ☐ White ☐ Hispanic or Latino
☐ Native Hawaiian or Other Pacific Islander ☐ Other ☐ American Indian or Alaskan Native

5. Do you consider yourself to be?

☐ Straight (heterosexual) ☐ Gay or lesbian ☐ Bisexual ☐ Other

6. At _____ college, are you currently a:

☐ Full-time student
☐ Part-time student
☐ Full-time staff
☐ Part-time staff
☐ Full-time faculty
☐ Part-time faculty
☐ Other

7. Do you reside: (Choose best response)

☐ On-campus dormitories/housing
☐ Off-campus college housing
☐ Off-campus private housing
☐ Other

8. Are you a member of: (Choose as many as apply)

☐ Club
☐ Student government
☐ Sports team
☐ Academic society
☐ Fraternity/Sorority
☐ Other college organization

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The following questions ask about secondhand smoke exposure.

9. When I walk through campus, I am exposure to secondhand smoke:

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Always

10. Is secondhand smoke on campus a concern/annoyance for you?

☐ Yes, a concern/annoyance ☐ No, not a concern/annoyance ☐ No opinion

The following questions ask about your personal tobacco use.

11. Have you ever tried any tobacco product, even one time (e.g., cigarette, cigar, hookah, pipe, smokeless, etc.)?

☐ Yes (go to next question) ☐ No (skip to question # 17)

12. How old were you when you smoked a whole cigarette for the first time?

☐ 8 years old or younger
☐ 9 – 12 years old
☐ 13 – 17 years old
☐ 18 – 21 years old
☐ 22 years old or older
☐ I have never smoked a whole cigarette (skip to question # 16)

13. During the past 30 days, on how many days did you smoke cigarettes?

☐ 0 days (skip to question # 16)
☐ 1 or 2 days
☐ 3 to 5 days
☐ 6 to 9 days
☐ 10 to 19 days
☐ 20 to 29 days
☐ All 30 days

14. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

☐ Less than 1 cigarette per day
☐ 2 to 5 cigarettes per day
☐ 6 to 10 cigarettes per day
☐ 11 to 20 cigarettes per day
☐ More than 20 cigarettes per day

15. Were the cigarettes that you typically smoked menthol?

☐ Yes ☐ No

16. During the past 30 days, on how many days did you use each of these tobacco products? (Please choose one answer in each row).

Number of days	0	1 or 2	3 to 5	6 to 9	10 to 19	20 to 29	All 30
Cigars, Cigarillos, Little Cigars							
Traditional Pipe							
Bidis, Kreteks (Clove cigarettes)							
Waterpipe or Hookah							
Chewing Tobacco, Snuff, Dip							
Snus							
Dissolvables tobacco (sticks, strips, orbs)							

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The next series of question ask you about tobacco-use issues at your college.

17. Please use the scale to assess the extent of smoking at the following locations:

Extent of Smoking	No problem	Minor	Serious	Severe	No Opinion
Dormitories					
Classroom buildings					
Cafeterias					
Indoor recreational/exercise areas					
Student Center					
Entrances/Exits to/from buildings					
Outside on the campus					
Off-campus housing					
Parties, student hangouts					
On-campus events (i.e. concerts or athletic events					

18. Since the semester started, have you been at an event where tobacco companies offered free samples of tobacco products?

☐ Yes ☐ No

19. In the last 30 days, have you seen any advertising of tobacco products on campus?

☐ Yes ☐ No

20. Have you received emails from tobacco companies to your college email address?

☐ Yes ☐ No

The next questions ask about cessation services available on campus.

21. When you've gone to the campus health center for service, were you asked if you used tobacco?

☐ Yes
☐ No
☐ I've never gone to the campus health center for service (skip to #24)

22. Were you advised to quit using tobacco?

☐ Yes
☐ No
☐ I don't use any tobacco products (skip to # 26)

23. Were you referred to any service that might help you quit?

☐ Yes
☐ No

24. Have you ever participated in a program to help you quit using tobacco?

☐ Yes
☐ No
☐ I don't use any tobacco products (skip to # 26)

25. Would you use NRT (Nicotine Replacement Therapy), such as nicotine gum, patches or inhalers to help you quit if they were offered at no cost to you?

☐ Yes
☐ No

APPENDIX 6

26. Does your college have special groups, classes or counselors to help students who want to quit using tobacco?

☐ Yes
☐ No
☐ Not sure

The following questions focus on your beliefs regarding a college tobacco use policy.

27. Colleges have a responsibility to lessen the risk of tobacco addiction by adopting policies that discourage tobacco use.

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

28. Colleges have a responsibility to adopt policies that ensure people have smoke-free air to breathe.

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

29. Colleges should regulate tobacco use on campus.

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

30. Which type of college tobacco-use policy do you believe would be best for the college community? (choose only one)

☐ Allows smoking inside campus buildings
☐ Allows smoking outdoors on campus in all locations
☐ Allows smoking outdoors at specific locations only
☐ Prohibits smoking anywhere on campus at all times
☐ Prohibits all tobacco use anywhere on campus at all times

31. Colleges should not allow tobacco companies to promote tobacco use on campus through advertising, sponsorship of student events and/or financial support of student organizations.

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

32. When you hang out, what type of place do you like to socialize in?

☐ Places where no smoking is allowed indoors
☐ Places where smoking is allowed indoors at some times or in some places
☐ Places that allow people to smoke anywhere

The next questions address the current tobacco-use policy if one exists.

33. What is the current written policy on tobacco use at this college?

☐ Prohibits only smoking inside buildings
☐ Prohibits only smoking outdoors
☐ Prohibits all tobacco use
☐ No written tobacco-use policy—SURVEY IS FINISHED
☐ I do not know—SURVEY IS FINISHED

34. To what extent do people comply with the policy?

☐ Totally ☐ Mostly ☐ Somewhat ☐ Not at all

35. To what extent is the policy enforced?

☐ Totally ☐ Mostly ☐ Somewhat ☐ Not at all

Thank you for your time. The survey is now complete.

Adopted from Wake Forest School of Medicine Tobacco-Free Policy Manual

APPENDIX 7

Campus Tobacco Environmental Scan

Instructions to coalition: Complete the following environmental scan by physically visiting the campus and checking the appropriate response to the questions. Keep in mind that the time of day (during/in between classes, lunch time, etc.) and weather can affect your findings.

Campus: _____Weather: _____
Conducted by: _____ Date: _____ Time: _____

Where do you see smoking on campus?	**YES**	**NO**
Near building entrances? If yes, which buildings?		
Academic buildings		
Administrative buildings		
Residence halls		
Library		
Bookstore		
Campus convenience stores		
Student Center		
Dining facilities		
In or around athletic facilities?		
On sidewalks, bus stops or other "public" areas?		
In parking lots?		
In designated smoking areas?		
Other:		

Where do you smell smoking on campus?	**YES**	**NO**
Near building entrances? If yes, which buildings?		
Academic buildings		
Administrative buildings		
Residence halls		
Library		
Bookstore		
Campus convenience stores		
Student Center		
Dining facilities		
In or around athletic facilities?		
On sidewalks, bus stops or other "public" areas?		
In parking lots?		
In designated smoking areas?		
Other:		

APPENDIX 7

Ashtrays and tobacco related litter	**YES**	**NO**
Are there ashtrays or receptacles on campus?		
Outside doors?		
Several feet from doors?		
In designated smoking areas?		
Are they full?		

Where are cigarette butts/litter found?	**YES**	**NO**
Near building entrances? If yes, which buildings?		
Academic buildings		
Administrative buildings		
Residence halls		
Library		
Bookstore		
Campus convenience stores		
Student Center		
Dining facilities		
In or around athletic facilities?		
On sidewalks, bus stops or other "public" areas?		
In parking lots?		
In designated smoking areas?		
Other:		

Enforcement Signs	**YES**	**NO**
Are there "no smoking" or "no tobacco" signs on campus?		
Near building entrances? If yes, where are the signs located? List buildings and locations below		
Building location		
Are they visible?		
Are they in a good location?		
Building location		
Are they visible?		
Are they in a good location?		
Building location		
Are they visible?		
Are they in a good location?		
Building location		
Are they visible?		
Are they in a good location?		

APPENDIX 7

Promotions and Marketing	YES	NO
Does the campus stores(s) sell tobacco products?		
If yes, how many stores on campus sell tobacco? _____		
Do they visibly display "We Card" signs?		
Are there tobacco-related ads on display?		
Are cigarette paraphernalia for sale? (e.g. matches, lighters, etc.)		
Are there store immediately adjacent to campus that sell tobacco?		
If yes, how many stores adjacent to campus sell tobacco? _____		
Do they visibly display "We Card" signs?		
Are there tobacco-related ads of display?		
Are cigarette paraphernalia for sale? (e.g. matches, lighters, etc.)		
Are there ads for tobacco products on campus?		
In the campus newspaper?		
While around athletic facilities?		
In other non-campus publications?		

Cessation	YES	NO
Are there smoking cessation materials displayed on campus?		
In the student health center?		
In the student center?		
If yes, List the locations below		

Adopted from Wake Forest School of Medicine Tobacco-Free Policy Manual

APPENDIX 8

Campus Cigarette Butt Clean-Up Instructions

Supplies

o Disposable gloves
o Long-handled litter pick up tools
o Small containers for each volunteer (e.g., garbage bags, clean yogurt or milk containers, jars, etc.)
o 1 "Official Tally Container" – a large container to hold all the butts collected. This should be clear, thick plastic with a secure lid (e.g., 72 oz. peanut butter container, red vines container, etc.)

Optional:
o T-shirts, hats, large buttons, etc. for each participant. Brightly colored gear helps to identify the participants and can bring some attention to the effort.
o Camera to snap pictures of the event; and, if needed, a photo release for volunteers to sign indicating you may use their photo.

1-3 weeks before your event:

- ☐ Select your butt clean-up date and time. We expect you'll spend 1-3 hours for this event.
- ☐ Gather all your supplies
- ☐ Recruit volunteers. You may consider offering an incentive to volunteers – a free T-shirt, snacks, or a raffle ticket for a chance to win a $10 work well.
- ☐ Do a walk-through of the campus if you're not familiar with it to identify high traffic areas and places where there is more litter.

You may choose to:

- ☐ Invite campus leaders to the clean-up event
- ☐ Contact the school newspapers to tell them you'll be cleaning up the campus. Invite them to cover your event and give them details on the location and time.

APPENDIX 8

Day of event:

- ☐ Plan on 1-3 hours for your event
- ☐ Split the campus into sections for each volunteer, or team of volunteers.
- ☐ Take pictures
- ☐ Have each volunteer collect cigarette butts and other tobacco litter in their individual containers, counting as they go along (it may be helpful to have teams of 2 people – one to collect and one to tally the number of butts)
- ☐ As volunteers report back, put all butts and tobacco-related litter in the Official Tally Container, using extra garbage bags and containers if needed. Keep track of how many butts were collected from which section of campus. You should also have a final count of how much litter was collected, how much time was spent cleaning up, and how many volunteers participated (see below "findings" worksheet).
- ☐ Dispose of gloves and wash your hands well

After your event:

Keep the Official Tally Container, if possible. This may come in handy if you plan on doing tabling events, presenting to decision-makers, and/or other educational activities related to tobacco.

You may choose to:

- ☐ Send photos and testimonial letters to campus administration with your final count, and inform them about tobacco-free campus policies.
- ☐ Send out a press release with your findings and information about tobacco-free campuses to your campus newspaper.
- ☐ Attend a board of trustees meeting and present your findings and information about tobacco-free colleges.

Adapted from Seattle & King County Public Health

APPENDIX 9

Action Plan Template

Policy Steps	Responsible Party	Communication and Media Support Required	Resources Needed	Timeframe	Tracking Measures
1. Build Coalition					
2. Conduct Assessment: ***Ensure sufficient data to establish a problem that a tobacco-free policy could address***					
3. Set Policy Goals and Create Action Plan					
4. Identify and Develop Policy: ***Adapt model tobacco-free campus policy or select other policy option to address identified tobacco issues***					
5. Make your case: ***Present data to demonstrate problem, develop talking points and issue brief that lays out issue and policy solution; educate students, faculty and broader community***					
6. Present to decision makers					
7. Implementation: ***Create a tobacco-free campus***					
8. Education Campaign					
9. Cessation Program					
10. Evaluate Policy Impact: ***Determine the impact of the policy through data collection***					

Adapted from Wake Forest School of Medicine Tobacco-Free Policy Manual

APPENDIX 10

Education Campaign Plan Worksheet

This worksheet should be used as a guide. Don't worry about filling in each item in this exact order. Developing a counter-marketing plan is an iterative process; you'll revise and improve on each step as your campaign progresses. The most important thing is that you think through each step and that every activity moves you closer to your goal. Before you complete this worksheet, it would be helpful to review Chapter 2: Planning Your Counter-Marketing Program and other relevant information in this manual. The Counter-Marketing Planning Worksheet Guidelines on the following pages provide a quick reference to use in completing the worksheet.

Tobacco-Free Goal:

Problem Statement and Background:

Target Audience(s):

Education Campaign Objective(s):

Strategy Statement:

Campaign Activities

Campaign Channels:

Opportunities for Collaboration:

Campaign Evaluation Plan:

Tasks and Timeline:

Budget and Resources:

APPENDIX 10

Tobacco Control Goal

- Base your goal(s) on data collection and research that was completed
- Complete a separate Education Campaign Worksheet for each goal, because you need a separate plan for each goal you're addressing. Make sure overlapping areas are consistent and complementary.

Problem Statement and Background

- Describe the problem you're addressing. Specify the group(s) affected, how it is affected, and the severity of the problem. Give supporting epidemiologic data from current research and scientific literature.
- Identify who might be able to positively influence this situation or the affected group(s).
- Explain why your agency is addressing the problem.
- Assess and list your program's strengths, weaknesses, opportunities, and threats (SWOTs); its assets and resources; links to or influence with the target audience(s); current activities; and gaps and barriers to achieving the needed change.

Target Audience(s)

- Define the group(s) you want to reach, the desired results, and how you'll measure those results.
- Select target audience(s). Decide which audience segments represent the highest priority for reaching your goal. Consider which audience segments are affected disproportionately by tobacco-related health problem(s), which segments can be most easily reached and influenced, and which are large enough to justify intervention.
- Describe each group you plan to reach with your campaign. Detail any knowledge you have about how each group is affected, as well as gaps in knowledge to be addressed through market research or other research. Include demographics, cultural and lifestyle characteristics, media preferences (channels, message appeals, activities, and types of involvement in the issue), and other traits that will help you understand how best to reach each group, as well as related feelings, attitudes, knowledge, and behaviors.
- Determine which secondary audience(s) can influence the behavior of your primary audience(s).

APPENDIX 10

Counter-Marketing Program Objective(s)

- Set objectives that reflect the desired results of counter-marketing efforts within the given time frame and resources, and within the context of a comprehensive tobacco control program.
- Write objectives that are SMART (specific, measurable, achievable, relevant, and time-bound).

Strategy Statement

- To develop a strategy is usually an iterative process; as you learn more about one element, other elements may need to be adjusted.

- Write a strategy statement for each target audience that includes:
    - Description of the target audience
    - Description of the action you want the audience to take as a result of exposure to your program, as specified in the objectives
    - List of obstacles to taking the action
    - Description of audience's perceived benefit of taking the action
    - Explanation of why the benefit, and the audience's ability to attain it, will be credible and meaningful to the audience
    - List of potential channels and activities that will reach audience members
    - Description of image, tone, look, and feel of messages and materials most likely to reach the target audience

Activities and Channels

- Assess the current media environment related to your goal, and decide which counter-marketing approach(es) to use, such as advertising, public relations, media advocacy, grassroots marketing, and media literacy training.

- Determine for each target audience which approaches (or combination of approaches) best address the problem and your program objectives.

- Ask "what is the *best* way to reach each target audience". Select channels and activities that fit your target, budget, time constraints, and resources. Consider the attributes and limitations of each type of channel.

APPENDIX 10

Opportunities for Collaboration

- Determine whether you want to recruit partners for collaboration, and consider how many partners would be optimal.

- Identify organizations that have similar goals and are willing to work with you.

- Be strategic in selecting organizations as partners. Consider which community-based organizations and businesses may help you achieve your goal by providing:
  - Access to a target audience

  - Enhanced credibility for your message or program, if the target audience considers the organization to be a trusted source

  - Additional resources, either financial or in-kind

  - Added expertise

  - Co-sponsorship of events

  - Consider the requirements for collaboration with each partner, including time for additional approvals, minor or major changes in the program to match each partner's needs and priorities, and how these requirements fit with the direction and procedures of your organization.

Evaluation Plan

- Develop plans for formative research and evaluation, process evaluation, and outcome evaluation. Base the design of your evaluation plan on the objectives of the counter-marketing program.

- Determine the most important questions for the evaluation, the information you'll need now and in the future, how you'll gather the information, and how you'll analyze it to determine whether you've met your objectives.

- Identify evaluation experts, either internal or external to your agency, who will work with you throughout the design and implementation of your program to develop plans for the various types of evaluation.

- Perform *formative research* (research on the target audience before you develop the counter-marketing campaign) to help you gain valuable insights that will guide the development of your message and materials, as well as the channels of delivery.

APPENDIX 10

- Conduct *formative evaluation* (research conducted during the development of your program to pretest and pilot test your interventions, messages, and programs) to determine (1) whether the materials you are developing effectively communicate what you intended, and (2) how the target audience will be influenced by your materials.

- Perform *process evaluation* to determine whether your program was implemented as planned. It can answer questions such as:
    - Did partners contribute as expected? Why or why not?
    - Did you have the right amount of resources?
    - Did you schedule enough time for campaign development and implementation?
    - Was your issue covered by the news media your target audience sees or reads?
    - Was your issue covered by the media in the way you had hoped? Was your approach to framing the messages reflected in the media coverage?
    - Have you become a source for journalists covering this issue?

- Conduct *outcome evaluation* to help you answer the following important questions:
    - Did your counter-marketing program achieve the outcomes you expected?
    - Did you build awareness of the ads you ran? Of the program elements?
    - Did the audience recall the campaign's main messages?
    - Did the audience increase its knowledge as desired/intended?
    - Did the audience change beliefs and attitudes as desired?
    - Did the audience change its behaviors?
    - What did the target audience think of your campaign? Did members become involved in the program?
    - Did a policy (e.g., clean indoor air ordinance or tax increase) change as desired?

APPENDIX 10

Tasks and Timeline

- List all activities that need to occur before, during, and after implementation of your counter-marketing program.
- Identify major milestones, such as launch and start dates for specific activities.
- Include smaller tasks to be accomplished from the time you write the plan until the time you intend to complete the program evaluation. By building these tasks into the timeline, you'll be more likely to remember to assign the work and stay on schedule.
- Review and update your task list and timeline regularly. It is a flexible management tool that can help you track your progress.

Budget and Resources

- List all anticipated expenses, including staff time and other resources.
- Include all budget and resources available (staff, in-kind, internal, and external).
- Assess the financial and human resources available to help you anticipate funding needs, thoroughly plan your campaign to fit your budget, and make optimal use of all available resources.
- Recall that if your plan calls for efforts to lobby for a particular bill, you'll need to use funding not provided by the Centers for Disease Control and Prevention.

Adapted from Centers for Disease Control and Prevention Designing and Implementing an Effective Tobacco Counter-Marketing Campaign

APPENDIX 11

Communication Checklist for Tobacco-Free Policy Implementation

Top Priorities:

1. Implementation date defined
2. Create a campus administration implementation team
3. Order free signage from Tobacco Prevention and Control Branch; think strategically about entrances and high-need areas
4. Set date to remove all ashtrays and smoking material receptacles that currently exist on campus.
5. Develop a communication plan (ideas below).
6. Create a plan for handling violations
    a. Create reminder handouts for distribution at outdoor sporting events and other potential problem areas.
    b. Train administrators, staff, students and community volunteers to politely remind folks seen violating the policy to respect school policy.

Communication to Students

- ☐ Post tobacco-free campus signs strategically at entrances of buildings, grounds, parking lots, and in vehicles.
- ☐ Place details in student handbooks and orientation guides and at student orientation meetings; include an explanation & justification of the policy, outlines the consequences for violations, as well as asks for support in compliance and enforcement of the policy
- ☐ Spread the information through campus organizations, activities, and newspapers/newsletters.
- ☐ Place cessation information at student health center(s) if applicable; Educate students about tobacco cessation support resources such as 1-877-270-STOP. One can also direct them to the Georgia Tobacco Quit Line on the web. https://dph.georgia.gov/georgia-tobacco-quit-line
- ☐ Involve student groups, particularly those associated with health-related majors, to promote the policy change within their peer groups
- ☐ Include information on school website; best to initially include it on every web page as a banner or something similar for the first year, and then on home page and/or within policies that are available on the web
- ☐ Assuming you have a Facebook or Twitter account, use social media to your advantage in getting the word out; ask students to share the information

APPENDIX 11

Communication to Faculty, Staff, and Contractors

- ☐ Provide faculty and staff with a copy of the policy and a letter of explanation from the College president.
- ☐ Discuss the policy at faculty/staff meetings and new staff orientation.
- ☐ Include policy information at in-service training for campus faculty/staff.
- ☐ Include information in faculty/staff newsletters.
- ☐ When contracting with others for various projects on campus be sure it is spelled out quite obviously that this is a tobacco-free campus for everyone, including contractors
- ☐ Educate staff about tobacco cessation support programs such as 1-877-270-STOP. One can also direct them to the Georgia Tobacco Quit Line on the web. https://dph.georgia.gov/georgia-tobacco-quit-line
- ☐ Inform potential faculty/staff of the new policy in all job interviews and on all job applications.

Communication to the Public

- ☐ Include an article outlining the policy and implications of the policy in campus newsletters and local/community newspapers.
- ☐ College president writes a guest editorial to the local paper explaining the rationale for the policy. Inform alumni groups of the policy by including information in alumni publications.
- ☐ Inform community organizations that use campus facilities of the policy through language in the facility use contract.
- ☐ Assuming you have a Facebook or Twitter account, use social media to your advantage in getting the word out; ask students to share the information
- ☐ Announce the new policy at all events, meetings, concerts and plays. Info can be placed in brochures or bulletins when there is an event open to the public.

Additional activities for the effective date:

- ☐ Send out a press release publicizing policy
- ☐ Set up tables at well-traveled areas on campus to provide materials that celebrate the policy and give away information about cessation opportunities.
- ☐ Announce policy at all athletic events, meetings and other student and faculty events
- ☐ Post a copy of the policy and a list of cessation resources around campus

Adapted from North Carolina Department of Health and Human Services

APPENDIX 12

Sample College/University President's Launch Letter

President's Message

[Enter date]

Today's the day. [College/University name] is now officially tobacco free at locations we own or wholly lease.

This is a tremendous accomplishment for us as an institution. We are walking the talk of promoting healthy behaviors, and we are reducing the physical and social costs of tobacco use. Everyone benefits—our faculty, our staff, our students, our vendors and visitors.

This was a day that was reached after a long, deliberate and well-thought-out process that involved discussions and collaboration by the University System of Georgia, Georgia Department of Public Health, [Other as applicable], and others. Our goal was to implement this policy in a way that was respectful of smokers and nonsmokers alike.

That's why for months before the start of today's tobacco-free policy [College/University name] staff/coalition worked with Georgia Tobacco Use Prevention Program to reach out to smokers with information and resources to help them quit. The timeline allowed everyone to plan on how to adapt to this new policy and, if possible, find ways to quit using tobacco.

And I'm please to say this approach has been successful. I understand how difficult it can be to quit and I want to acknowledge and congratulate those of you who have stopped using tobacco. If you are ready to quit, I encourage you to visit https://dph.georgia.gov/georgia-tobacco-quit-line or call 1-877-270-STOP (1-877-270-7867).

Taking our campuses tobacco free was the right thing to do for a lot of reasons. We should all be proud of our accomplishment and of the roles we've played in making this happen. In implementing this phase of wellness initiative, we are not only improving the health of those here at [College/University name], we are becoming a model for other institutions.

I would like to extend my sincere thanks to everyone in our organization for the professional and understanding manner in which we have implemented this new policy.

Adapted from Oregon Health Authority Tobacco-Free State Properties

APPENDIX 13

President's Sample letter to College/University Employees

[Enter date]

First Name Last Name
[Address]
[City, State Zip]

Dear, [First Name Last Name]:

As an employee of [College/University name], I want us to set a standard for healthy behavior. One important way of doing that is ending tobacco use around our facilities. On [Enter date], the tobacco-free campus policy will go into effect at facilities wholly owned or leased by [College/University name]. As we renew leases at other sites, we will add those locations to the policy. Eventually, all campuses will be tobacco free, creating healthier environments for our employees, students and visitors.

I want to take this opportunity to thank you for doing your part in helping students and visitors understand the policy and the reasons behind it. If you work directly with members of the public, we have created tip cards to help you talk with partners, vendors and visitors. These will be distributed by [Distribution date]. Also, cards and posters with information about the policy and links to quit resources will be distributed by [Distribution date] to your respective offices. You can download the files for the cards and posters at [resource website].

I know this change may be difficult for some. If you use tobacco and want to quit, I encourage you to visit https://dph.georgia.gov/georgia-tobacco-quit-line or call 1-877-270-STOP (1-877-270-7867).

I'm proud to lead [College/University name] as we go tobacco free. When [Enter date] arrives, let's all take a deep breath and know that, together, we are helping create a healthier environment to work and learn.

Sincerely,

President
[First Name Last Name]
[College/University name]

Adapted from Oregon Health Authority Tobacco-Free State Properties

APPENDIX 14

Employee Tobacco-Free Tip Card

GEORGIA TOBACCO-FREE COLLEGES & UNIVERSITIES

In an effort to protect the health of many Georgians, the Board of Regents overseeing the University System of Georgia has directed all colleges and universities within its system to begin going **tobacco free in August 2014**. Tobacco use will not be allowed in any buildings and/or on the grounds of colleges and universities within the University System of Georgia including:

Parking lots –Courtyards – Campus Housing – Dining Halls

Tobacco facts and resources

- Tobacco use is the No. 1 cause of preventable deaths in Georgia.
- Almost 10,000 adult Georgians die every year from tobacco-related illnesses.
- 3 million Georgians are exposed to any secondhand smoke on one or more days in the past seven days.
- Tobacco use cost Georgia nearly $5 billion in healthcare costs and loss of productivity.

If you see an employee, client or visitor using tobacco on campus, use these tips:

- Be polite and friendly.
- Assume the person isn't aware of the policy.
- Explain tobacco use is not permitted on any campus that is a part of the University System of Georgia.
- Offer a Georgia Tobacco Quitline brochure.
- Remind the person of links between tobacco use and health risks.
- Empathize with the person's situation.
- Make a decision based on the situation — you may not want to insist, but offer a Georgia Tobacco Quitline brochure.

University System of Georgia's website:
http://www.usg.edu/

Georgia Tobacco Quitline

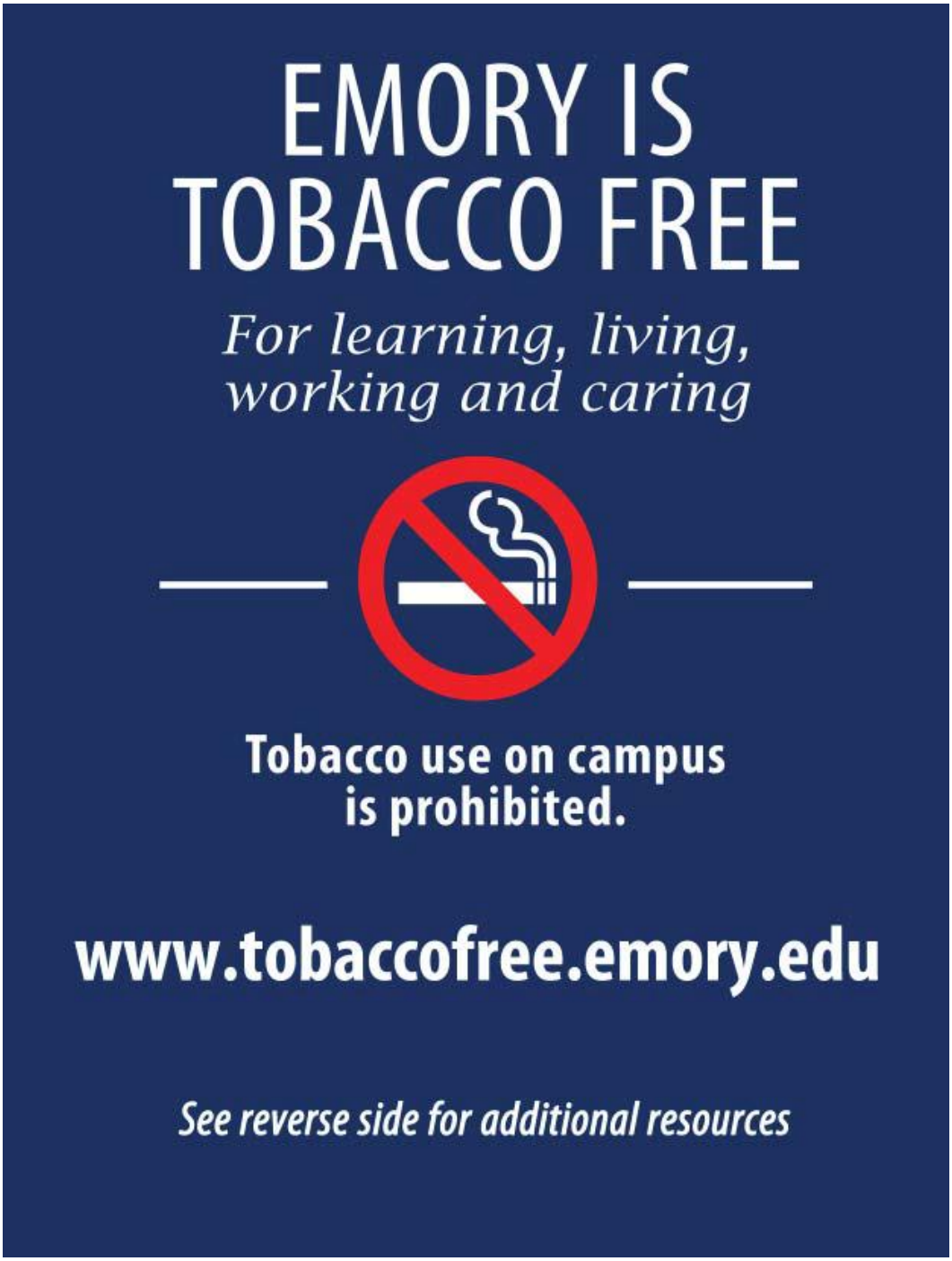
1-877-270-STOP (7867)
Spanish: 1-877-2NO-FUME (266-3863)
http://dph.georgia.gov/georgia-tobacco-use-prevention-program

(This document is intended for Staff Use)

Adapted from Oregon Health Authority Tobacco-Free State Properties

APPENDIX 15

Sample Signage



Adopted from Emory University Tobacco-Free Policy

APPENDIX 16

Quit Line Brochure – Outside Fold

QUITTING TAKES PRACTICE

GEORGIA TOBACCO QUIT LINE

WHEN CAN I CALL?

The Georgia Tobacco Quit Line is available everyday (7 days/week).

HOURS OF OPERATION:

Days: Monday-Sunday

Time: 8:00 am-midnight (EST)

Callers can call after hours, leave a message and will be contacted within two business days.

Healthcare professionals:

Please visit the "Be Smoke-Free" section at www.LiveHealthyGeorgia.org to access the Georgia Tobacco Quit Line Referral Form and information.

A Free and Effective Service

The Georgia Tobacco Quit Line is a public health service funded by the Georgia Department of Public Health through the Georgia Tobacco Use Prevention Program (GTUPP). Counseling services are available at no-cost to Georgia adults, pregnant women and teens (ages 13 and older).

Georgia Tobacco Quit Line coaches are highly trained tobacco cessation specialists.

To learn more about the Georgia Tobacco Quit Line, please call our toll-free number:

1-877-270-STOP
1-877-270-7867 (English)
1-877-2NO-FUME (Spanish)
For Hearing Impaired:
TTY services: 1-877-777-6534
www.livehealthygeorgia.org

Georgia Department of Public Health
Georgia Tobacco Use
Prevention Program (GTUPP)
Two Peachtree Street, N.W.
Suite 16-252
Atlanta, Georgia 30303-3142
(404) 657-0603

Sources: U.S. Surgeon General Report, North American Quitline Consortium (NAQC), Smoke Free Families.

YOUR REASON FOR QUITTING TODAY

When you are ready, we're here.

Call the Georgia Tobacco Quit Line Today.
A Free and Effective Service That Helps Georgians Quit Smoking and Using Tobacco

1-877-270-STOP (1-877-270-7867)
WWW.LIVEHEALTHYGEORGIA.ORG

Funding provided by the Centers for Disease Control and Prevention-Office of Smoking and Health

APPENDIX 16

Quit Line Brochure – Inside Fold

THE BEST TIME TO QUIT IS NOW

Sometimes success requires a little help. One important step to improving your health is to quit smoking.

Whether you want to quit today, or if you tried to quit in the past and need a little extra support; and have questions, the Georgia Tobacco Quit Line is available 7 days a week to help you quit for life.

A FEW GOOD REASONS TO CALL IT QUITS TODAY.

Your Family and Friends- Live a healthier and longer life and watch your family grow. Live to celebrate more priceless moments with your family and friends. They all need you.

Your Health & Quality of Life- Tobacco use is a major cause of lung cancer and other types of cancer, heart disease and chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema. It contributes to asthma, diabetes and pregnancy complications.

Your Finances- The average smoker spends $500 to $3,000 each year.

Your Future- Live a longer life to enjoy retirement.

DOES THE TOBACCO QUIT LINE WORK?

Evidence shows that callers who enroll in Tobacco Quit Line services are 2-4 times more likely to succeed than those who try to quit on their own.

WHO CAN CALL? ALL GEORGIANS

The Georgia Tobacco Quit Line is available to all Georgia adults, pregnant women and teens aged 13 and older who want to quit using tobacco.

Anyone can call the Georgia Tobacco Quit Line.

- Family members and friends-- to learn more about supporting a loved one.
- Healthcare providers-- to support their patients.
- Employers-to support their valued employees.
- School staff-to support their students and co-workers.

WHAT HAPPENS WHEN YOU CALL?

Callers are greeted by a Quit Line Coach trained in evidence-based cessation counseling. Callers receive FREE:

- Helpful quitting tips/techniques & support.
- A personalized Quit Plan, self-help materials and "Quit" kit.
- Current information about local tobacco cessation support groups and resources.
- Current information about Food and Drug Administration (FDA) approved medications that can help with cessation.

BENEFITS OF TOBACCO CESSATION

Tobacco use is a major cause of various forms of cancer, chronic obstructive pulmonary disease (COPD) and heart disease.

Health improves within minutes of quitting:

2 Weeks to 3 Months After Quitting

Heart attack risk begins to drop. Lung function begins to improve.

1 to 9 Months After Quitting

Coughing and shortness of breath decrease.

1 Year After Quitting

Added risk of coronary heart disease is half that of a smoker's.

Within 5 Years of Quitting

Risk of cancer of the mouth, throat and bladder is cut in half.

10 Years After Quitting

Risk of dying from lung cancer drops by half.

APPENDIX 17

Tobacco-Free Campus Enforcement Plan Template

AREA OF ENFORCEMENT	DETAILS OF ENFORCEMENT
RESPONSIBLE PARTY: **Identify person(s) responsible for policy compliance and monitoring (identify based on position, not individual).**	Primary Responsible Party: (Position Title) Secondary Responsible Party: (Position Title)
Train enforcement personnel.	Date training completed:
MONITORING GROUNDS: **Locate and identify specific areas on school grounds and at school events which will be monitored (examples: former designated smoking areas, back entrances, etc.)**	1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.
VIOLATIONS: **Determine process for addressing students who violate policy** (*See enforcement recommendations listed in model policy, specifically regarding recommendation for in-school suspension for first offense).*	FIRST OFFENSE: SECOND OFFENSE: THIRD OFFENSE:
Determine process for addressing staff who violate policy *(cite other policy references as needed)*	FIRST OFFENSE: SECOND OFFENSE: THIRD OFFENSE:
Determine process for addressing visitors who violate policy *(cite other policy references as needed)*	FIRST OFFENSE: SECOND OFFENSE: THIRD OFFENSE:

APPENDIX 17

AREA OF ENFORCEMENT	DETAILS OF ENFORCEMENT	
COMPLAINTS: **Determine process for handling complaints regarding policy violations.**	Complaints can be submitted via: (identify specific email address, telephone number, etc.)	
	Identify the person responsible for addressing complaints is:	
	Complaints will be responded to via (telephone, email, etc.):	
	Specify the timeframe in which complaints must be addressed/responded to:	
COMMUNICATION: **Identify specific channels for communicating policy to students, staff, visitor such as signage, handbook, newsletters, etc. Refer to Communication Checklist as needed.**	**Communication Method**	**Completed**
	Signs at all entrances	
	Signs at all athletic fields	
	Student handbook	
	Employee handbook	
	Informing at staff mtgs	
	Informing at parent (PTA) mtgs	
	Announcements at school or school-sponsored events	
	School Website	
	Stipulations in contracts	
	OTHER:	
	OTHER:	
ASSESSING AND MONITORING : **Schedule regular assessments to monitor policy implementation and enforcement. Frequency of items can be monthly, quarterly, annually, etc.**	**Areas for Assessment**	**Recommended Frequency**
	Signage on campus	Annually
	Newsletter communications	
	Staff meetings and orientations	Quarterly/As needed
	Student orientation	Annually
	School website	Annually
	Announcements at football games	
	Announcements at school events	

Created by the Georgia Tobacco Use Prevention Program, 2013

APPENDIX 18

Evaluation Plan Template

Policy Steps	Responsible Party	Communication and Media Support Required
1. Build Coalition	• Coalition staff • Coalition members	Newspaper story on coalition presence and mission
2. Conduct Assessment: ***Ensure sufficient data to establish a problem that a tobacco-free policy could address***	• Coalition staff • Coalition members with access to data that informs the impacts of tobacco use on campus	• Do poll or story in student newspaper about issues associated with campus tobacco use • Create social media site for students to comment on campus tobacco use
3. Set Policy Goals and Create Action Plan	• Coalition members • Coalition staff	None needed
4. Identify and Develop Policy: ***Adapt model tobacco-free campus policy or select other policy option to address identified tobacco issues***	• Coalition staff • Coalition sub-committee • Full coalition membership	None needed
5. Make your case: ***Present data to demonstrate problem, develop talking points and issue brief that lays out issue and policy solution; educate students, faculty and broader community***	• Coalition staff • Sub-committee of coalition membership	Guest editorial in campus paper about results of data collection
6. Prepare for and Present to decision makers. ***Get the policy adopted, prepare for hearing where policy will be discussed.***	• Coalition coordinator • Student coalition member • Other allies	• Continued media advocacy on hearing date with call to action
7. Implementation, Compliance and Sustainability: ***Determine how well the policy is being implemented and complied with; build systems to support coalition action in future***	• Coalition members • Coalition staff	• Communications on existence of new policy on campus • Media on enforcement agency success with compliance activities
8. Education Campaign: ***Education campus and community on relevant information in support of policy***	• Coalition staff • Coalition coordinator • All coalition members assigned a person or organization to speak with • Student volunteers	• Press conference announcing where there is support for the policy (if possible, requires careful tactical planning) • Letters to the editor in local paper and in campus paper expressing support for policy • Develop petition for supporters to sign calling for passage of policy • Communication and call to action on social media sites developed for policy
9. Cessation Program	• Coalition sub-committee working with campus health staff • Coalition member work with HR Benefits representative	• Information provided in employee handbook • Information provided in student handbook • Information provided on website
10. Evaluate Policy Impact: ***Determine the impact of the policy through data collection***	• Coalition members • Coalition staff	• Do a poll or story in student newspaper about changes in individual health as a result of the tobacco-free policy

APPENDIX 18

Policy Steps	Resources Needed	Timeframe	Tracking Measures
1. Build Coalition	• Recruitment plan • Organizational structure	• Months 1-2	• Coalition membership roster • Meeting minutes
2. Conduct Assessment: ***Ensure sufficient data to establish a problem that a tobacco-free policy could address***	• Members to collect data • Example of data collection tools • Training on data collection	• Months 2-3	Results shared with coalition
3. Set Policy Goals and Create Action Plan	• Data from assessments • Sample action plan template	• Months 4-5	• Action statement • Completed action plan
4. Identify and Develop Policy: ***Adapt model tobacco-free campus policy or select other policy option to address identified tobacco issues***	• Sample adopted tobacco polices • Consult with legal experts if needed	• Months 5-6	Completed draft policy
5. Make your case: ***Present data to demonstrate problem, develop talking points and issue brief that lays out issue and policy solution; educate students, faculty and broader community***	• Writing expertise • List of groups to educate about tobacco issues and policy response • Talking points • Issue brief • Spokesperson training	• Months 5-6	• Dissemination of issue brief • Number of media sources where stories/articles were placed • Number of presentations made to groups and individuals
6. Prepare for and Present to decision makers. ***Get the policy adopted, prepare for hearing where policy will be discussed.***	• Scripted presentation to decision makers	• Months 6-7	Article(s) in paper
7. Implementation, Compliance and Sustainability: ***Determine how well the policy is being implemented and complied with; build systems to support coalition action in future***	• Develop mechanism for members to give feedback • Sustainability training	• Within a few months of adoption	• Policy citations
8. Education Campaign: ***Education campus and community on relevant information in support of policy***	• Coalition members time • Media relations • Training on education campaigns • Coalition members to hold meeting with potential supporters • Volunteers to meet with key people and organizations	• Months 7-9	• Policy content in campus related documents • Policy announcement/updated on website • Social media • Number of presentations • Number of media sources with articles/stories • Signage ordered and placed
9. Cessation Program	• Georgia Tobacco Quit Line • Campus health clinic – cessation services • Employee benefit cessation programs • Other local cessation programs	• From policy adoption to 3 and 6 months following	• Number of students seeking cessation assistance • Number of staff and faculty seeking cessation assistance
10. Evaluate Policy Impact: ***Determine the impact of the policy through data collection***	• Data and stories from students, faculty and staff regarding perceptions and behavior in relation to the policy	• 6-12 months after policy adoption	• Survey results • Results shared with coalition, key decision makers, media sources

Adapted from Wake Forest School of Medicine Tobacco-Free Policy Manual