Introduction

This is the 2nd of 3 summaries from the 2012 Tobacco Gap Analysis.

This summary is intended to provide a quick look at commercial tobacco cessation educational materials that are designed for or used by Al/AN communities.

For anyone addicted to commercial tobacco, quitting is incredibly difficult. For Al's it is even more so because most of the tribal nations living in the 48 contiguous states also use tobacco for ceremonies or as a sacrament. Tobacco is rarely used in this manner by Alaska Natives. Thus, the addicted Al who quits using commercial tobacco is repeatedly exposed to tobacco smoke during religious activities.

This gap analysis is helpful for public health professionals and Al/AN Programs to understand what cessation materials are available and the gaps in these materials.

“I think to understand a smoker, you need a whole lot of insight in addiction, one of the most powerful predilection for self-delusion ever, and smoking is probably the most insidious, because it doesn’t corrupt the intellect like say heroin or alcohol. Which is much harder to point out the dangers, since you won’t usually see a smoker homeless because of the addiction, but you do run into quite a bit more “closet” smokers, who won’t smoke in public because of the perception, but will when they are home.”

Kim Crawford, Oglala Sioux Tribe
Community Research Representative
Rapid City Regional Hospital
Rapid City, South Dakota
What is the 2012 Tobacco Gap Analysis?

The 2012 Gap Analysis identifies what topics or target populations are missing (gaps) or need to be updated. The analysis is an assessment of educational materials (brochures, booklets, pocket guides) that AI/AN tobacco programs are using today. A four member team developed and tested an evaluation tool.

How did NACR obtain AI/AN Tobacco Educational Materials?

In 2012, NACR and CDC staff asked AIAN programs for copies of AI/AN tobacco educational materials that they were currently using. Mayo Clinic's Native CIRCLE, a national repository of AI/AN cancer educational materials created in the latter 1990s, responded along with others. They provided copies of AI/AN tobacco materials about AI/AN tobacco. Most of the AI/AN tobacco cessation materials were available from Mayo Clinic's Native CIRCLE: http://www_NativeAmericanPrograms.org

Highlights of the Cessation Materials Review

This Summary highlights 8 of the 21 AI/AN brochures, booklets, fliers and pocket guides that focused on tobacco cessation. All 8 cessation materials are listed in the table below.

The Team's Opinion

- Any material scoring 74 or higher (out of 102 points) is evaluated to be of use for AI/AN Tobacco programs
- Materials scoring lower typically have significant weaknesses.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Title</th>
<th>Average Score</th>
<th>Year Produced</th>
<th>Intended Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strength to Quit</td>
<td>90.25</td>
<td>2009</td>
<td>adults, teens</td>
</tr>
<tr>
<td>2</td>
<td>Words of Wisdom to Quit Smokeless Tobacco</td>
<td>88.75</td>
<td>2009</td>
<td>adults, teens</td>
</tr>
<tr>
<td>3</td>
<td>Tips and Tools to Quit Smokeless Tobacco</td>
<td>84.25</td>
<td>Unknown</td>
<td>adults, teens</td>
</tr>
<tr>
<td>4</td>
<td>Tips to Quit Commercial Tobacco</td>
<td>83.5</td>
<td>2009</td>
<td>adults, teens</td>
</tr>
<tr>
<td>5</td>
<td>Becoming a Smoke Free Family</td>
<td>76.5</td>
<td>2010</td>
<td>Family</td>
</tr>
<tr>
<td>6</td>
<td>#2 Basic Tobacco Intervention Skills</td>
<td>76.25</td>
<td>2009</td>
<td>adults, teens</td>
</tr>
<tr>
<td>7</td>
<td>Keep It Sacred (ITCMII)</td>
<td>71.5</td>
<td>Unknown</td>
<td>program planners</td>
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<tr>
<td>8</td>
<td>Smoking Kills People We Love – Quitline</td>
<td>63</td>
<td>2009</td>
<td>Family</td>
</tr>
</tbody>
</table>
Excerpts from the Highest Ranking Materials

The "**Strength to Quit**" (ranked as #1 AIAN Tobacco material) is a pocket guide released in 2009. A picture of 5 panels is included in Gap Analysis Summary 1 and the graphic to the right shows 2 more panels. Each panel has a question and the bullets below provide answers. The inside panels include interactive boxes to write in the planned “quit date” and personal reasons to quit tobacco. Most of the content is relevant to people of other racial groups, but the graphics and quotes are from AIs. Similarly, cultural messages are incorporated.

A consortium collaborated on the development of this material: State of Arizona, Mayo Clinic’s Spirit of Eagles, University of Arizona Health Care Partnership, Indian Health Service Medical Program and the Healthcare Partnership.

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**Excerpt from “Strength to Quit”**

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The 2nd ranked material was “**Words of Wisdom**”, a pocket guide with respectful American Indian graphics and photos. It was produced in 2009 and includes interactive spaces for the user to write the date they planned to quit smoking. It also includes comments about respecting sacred tobacco.

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**Excerpt from “Words of Wisdom to QUIT Smokeless Tobacco”**

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The 2nd ranked material was “**Words of Wisdom**”, a pocket guide with respectful American Indian graphics and photos. It was produced in 2009 and includes interactive spaces for the user to write the date they planned to quit smoking. It also includes comments about respecting sacred tobacco.

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**“Tips and tools to help you Quit Smokeless Tobacco”** was the 3rd ranked material. It was designed in 2009. It includes interactive spaces for users to write in their “quit date”, their support persons, times that may be difficult for them and so on. The graphics are very respectful. It included a few culturally relevant, messages, such as, “Remember that tobacco is sacred and should be used for prayer or ceremonial uses.”

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**Excerpt from “Tips and tools to help you Quit Smokeless Tobacco”**
What are the Gaps?

- There were few provider materials to help AI/ANs who want to quit using commercial tobacco.
- Materials that are culturally relevant and help explain cessation treatments (patch, lozenges) are scarce.
- AI/ANs need more materials on tobacco cessation during pregnancy.
- There is a need for Alaska Native-specific cessation materials, particularly for smokeless/spit tobacco and forms of tobacco like Igmi (sometimes called Blackbull or Dediguss). Such materials need to include messages that smokeless tobacco should not be used for the babies’ teething pain.

References

Thank you to the Tobacco Gap Analysis Team:

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