Corres-Pechacek



date April	27,	19 _82	
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to Terry Pechacek

from Henry Blackburn

I'd be grateful for your calling me today on any gross deficiencies in this, and responding at your leisure with your rewrite of it.

Thanks.

Enclosure

/jml

BA Form 536 S-92050

MHHP SMOKING CAMPAIGN

THE MHHP SMOKING PREVENTION EFFORT ASSUMES THAT THE HEALTH HAZARDS OF SMOKING ARE QUITE WELL ESTABLISHED IN THE MINDS OF THE PUBLIC, ALONG WITH THE PHYSICAL AND PSYCHOLOGICAL BENEFITS OF STOPPING. THE IDEA IS TO MOTIVATE INDIVIDUALS AND TO PROVIDE THEM WITH SKILLS TO ADOPT OR MAINTAIN A NON-SMOKING HABIT. Non-SMOKERS AND EX-SMOKERS AND THE COMMUNITY AS A WHOLE ARE MOBILIZED TO PROVIDE A SOCIALLY SUPPORTIVE ENVIRONMENT.

GOALS ARE TO ORGANIZE THE COMMUNITY TO CREATE A NON-SMOKING ENVIRONMENT AND TO ESTABLISH FIRM LINKS BETWEEN THE COMMUNITY AND THE MHHP PROGRAM FOR THE LONG-TERM CAMPAIGN. OTHER GOALS ARE TO CREATE A COMMUNITY PERCEPTION THAT THE PROGRAM IS EMPATHETIC AND HELPFUL TOWARD SMOKERS (IN CONTRAST TO ACCUSATIVE AND LEGISLATIVE IN APPROACH). MHHP GOALS ARE TO INSTITUTE WIDELY SELF-INITIATED SMOKING CESSATION ACTIVITY USING ALL THE COMMUNITY STRATEGIES AND DELIVERY SYSTEMS.

THERE ARE DISTINCT COMMUNITY-WIDE EDUCATION GOALS INVOLVING CESSATION RATE, REDUCTION OF CIGARETTE CONSUMPTION AMONG SMOKERS (CONFIRMED BY SERUM THIOCYANATE LEVEL), IMPROVEMENT OF EFFORTS OF NON-SMOKERS TO SUPPORT SMOKERS QUITTING EFFORTS AND PREVENTION OF THE ONSET OF CIGARETTE SMOKING AMONG YOUTH.

THE STRATEGY IS TO DELIVER A PROGRAM THROUGH A LOCAL TASK FORCE KNOWN AS THE SMOKING ACTION COMMITTEE WHICH COMBINES THE STRENGTH OF EXISTING LOCAL PROGRAMS AND INTERESTED LEADERS WITH NEW SKILLS AND LEADERSHIP WITH THE DEVELOPMENT OF SPECIFIC TASK FORCES PROMOTING A NON-SMOKING ENVIRONMENT AS AMONG HEALTH PROFESSIONALS, AT WORKSITES, AND THROUGH PUBLIC AFFAIRS-MARKETING APPROACHES.

THE SMOKING PROGRAM IS INTIMATELY RELATED TO OTHER MHHP PROGRAMS IN ITS CONTACTS WITH THE MEDIA PRODUCTION UNIT AND CAMPAIGN, WITH EDUCATION AND EVALUATION WHICH RUNS PARALLEL TO CAMPAIGN DEVELOPMENT, WITH COMMUNITY-BASED WORKSITE PROGRAMS, WITH THE ADULT EDUCATION CLASSES AND WITH THE HEALTH EDUCATION CENTER.

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THE SMOKING EFFORT IS STAFFED BY A 75% TIME FACULTY MEMBER AND 75% TIME HEALTH EDUCATOR AND SECRETARIAL SUPPORT IN THE CENTRAL UNIVERSITY UNIT, PLUS MEETINGS OF A CENTRAL WORKING GROUP REPRESENTING EDUCATIONAL EVALUATION, YOUTH EDUCATION, DIRECT EDUCATION, MEDIA, AND COMMUNITY-BASED PROGRAM. IN MANKATO IT IS STAFFED BY A PART-TIME HEALTH EDUCATOR WHO STAFFS THE SMOKING ACTION COMMITTEE AND BY SECRETARIAL SUPPORT.

THE MAJOR ACCOMPLISHMENT OF THE SMOKING CAMPAIGN IS DEVELOPMENT OF THE SMOKING ACTION COMMITTEE AND THE CARRYING OUT OF THE FIRST MAJOR MHHP COMMUNITY CAMPAIGN WHICH INCLUDED A MAJOR TABLOID (HEARTBEAT) ON SMOKING ISSUES.

A MAJOR PROBLEM OF THE SMOKING GROUP HAS BEEN INSUFFICIENT ORGANIZATIONAL STRUCTURE AT THE OUTSET OF THE CAMPAIGN, DIFFICULTIES IN COMMUNICATION, AND DELAYED PRODUCTION OF AN ELABORATE SELF-INITIATED SMOKING PROGRAM CALLED "QUIT AND WIN."

MAJOR EVALUATION EFFORTS ARE TO IDENTIFY SUBGROUPS, SUCH AS HEALTH PROFESSIONS, WORKSITES, CHURCHES AND HOUSEWIFE GROUPS, WHICH HAVE PARTICULAR NEEDS OR OPPORTUNITIES TO PARTICIPATE IN THE SMOKING PROGRAM, TO ANALYZE THE RAPID SURVEYS BEFORE AND AFTER THE JANUARY 1982 CAMPAIGN, AND TO COMPLETE ANALYSIS OF THE RISK FACTOR SURVEYS IN ALL MHHP COMMUNITIES.

RESEARCH COMPONENTS OF THE PROGRAM IN ADDITION TO THESE EVALUATIONS INCLUDE STUDIES ON INCENTIVE OPTIONS IN WORKSITE PROGRAMS (SUCH AS MINIMAL CONTACT VERSUS CARBON MONOXIDE SCREENING IN CLASSES, VERSUS MONETARY INCENTIVES), RANDOMIZING THE WORKSITES SO AS TO INCLUDE HARD-TO-REACH BLUE COLLAR GROUPS.

SHORT-TERM PLANS INCLUDE COMPLETION OF THE QUIT AND WIN PROGRAM AND THE DEVELOPMENT OF A QUITTERS RAFFLE AND PREPARATION OF A NHLBI COMMUNITY QUIZ ON SMOKING BEHAVIOR IN SPRING 1982, LONGER TERM PLANS INVOLVE EVALUATION OF ALL EFFORTS THROUGH THE SUMMER OF 1982, PREPARATION FOR THE 1983 FIRST FARGO/MOORHEAD CAMPAIGN

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AND THE 1983 SECOND MANKATO INTERVENTION CAMPAIGN AND THE DEVELOPMENT OF IDEAS FOR INVOLVING COMMUNITY GROUPS IN "RESEARCHABLE PROGRAMS". AS WELL AS SERVICE PROGRAMS.

THE MORE UNIQUE ASPECTS OF THE MHHP SMOKING CAMPAIGN INCLUDE ITS REMARKABLE EMPHASIS ON THE NON-SMOKING PART OF THE POPULATION, ITS COMMUNITY-WIDE STRATEGY AND ITS DISTINCT EMPHASIS ON SELF-INITIATED QUITTING.

POTENTIAL LIMITATIONS RESULT FROM THE UNIQUE STRATEGY, THAT IS, THE FAILURE RATE IN SELF-INITIATED EFFORTS IS USUALLY HIGH AND MUST BE COUNTERED IN THE COMMUNITY EDUCATION EFFORT.