TCCC Policy Platform

TRIBAL COMMUNITY
COORDINATING CENTER
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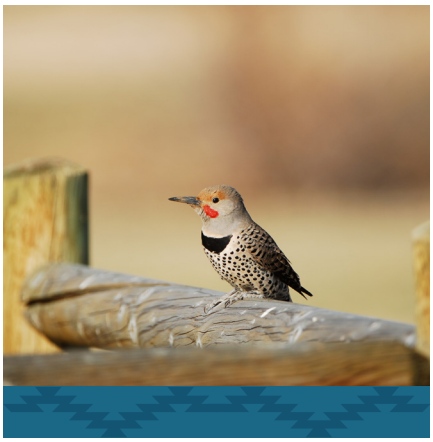

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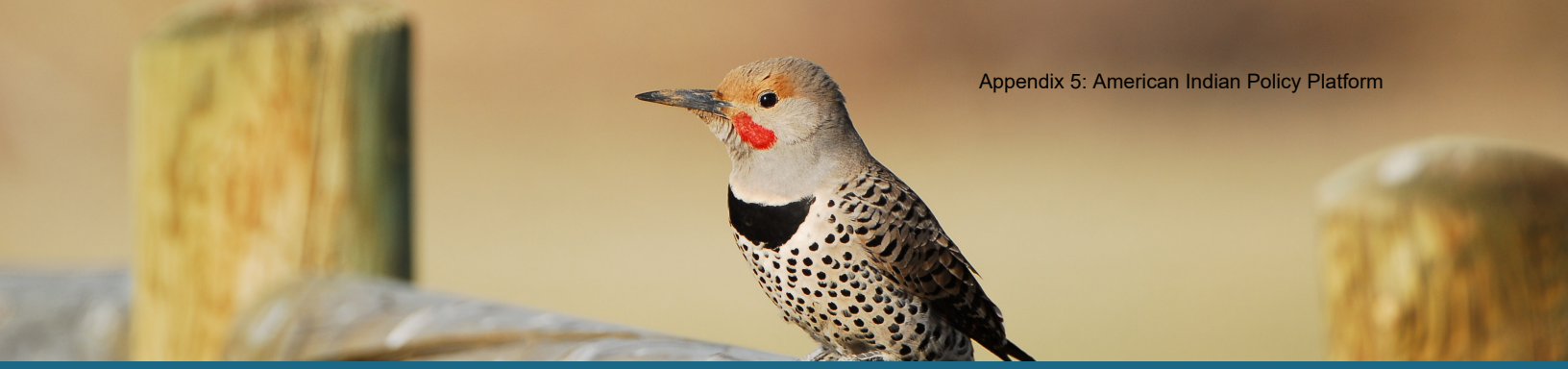

Introduction

California Tribes and Tribal Nations

There are 109 (111 including the two that cross state lines) Tribal Nations in 34 counties in the State of California. There are 12 tribes and 6 regional and statewide projects funded by the California Department of Public Health, California Tobacco Control Program (CTCP) to reduce tobacco-related disparities among American Indian (AI) communities—including the Tribal Community Coordinating Center.

The Tribal Community Coordinating Center is funded to engage California Tribes to assess their readiness to work in tobacco control, coordinate tobacco control learning, communication, and policy activities, and build the capacity of emerging tribal leaders to champion tobacco education activities. The funded Tribal projects address youth engagement, household smoking, tobacco litter, the California Tribal commercial tobacco excise tax, California Tribal smokefree worksites, smokefree outdoor recreational areas, tobacco product definition, cessation assessment and referrals systems, smokefree entryways, AI smokefree gaming, smokefree non-recreational public areas, smokefree multi-unit housing, smokeless tobacco use, and tobacco cessation services.

This is the first time that the California Department of Public Health, California Tobacco Control Program (CTCP) has funded California Tribes directly to conduct Tribal specific projects. This has allowed Tribes the opportunity to join the fight against commercial tobacco, albeit about 15 years later than other populations in California.

Counties with Tribal Nations

Alpine	Imperial	Mono	Shasta
Amador	Inyo	Placer	Siskiyou
Butte	Kern	Plumas	Sonoma
Colusa	Kings	Riverside	Tehama
Del Norte	Lake	Sacramento	Tulare
El Dorado	Lassen	San Bernardino	Tuolumne
Fresno	Madera	San Diego	Yolo
Glenn	Mendocino	San Joaquin	
Humboldt	Modoc	Santa Barbara	

Traditional Tobacco Use

Traditional tobacco has been used in Tribal communities for thousands of years. Traditional tobacco is defined as "the use of tobacco plants or manufactured products by American Indians with religious, ceremonial, or medicinal purposes."[1] There is no single Tribal practice of tobacco use but there are some commonalities,[2] such as its use as a medicine to promote physical, spiritual, emotional, and community well-being, and as a component of ceremonial practices.[3]

Commercial tobacco is different from sacred tobacco in that it is manufactured for recreational purposes and includes toxic additives such as tar, arsenic, and formaldehyde.[2] Because sacred tobacco can be difficult to acquire, commercial tobacco products may be used as part of traditional ceremonies. For example, in a Minnesota-based sample, 60% of respondents used commercial tobacco for traditional uses.[4] Culturally appropriate approaches to tobacco control include respecting the value of sacred tobacco use while reducing the negative effects of commercial tobacco use on Tribal community health.[5]

Traditional tobacco differs from commercial tobacco in that commercial tobacco is used solely as a product, while traditional use of tobacco is part of a cultural process. This process includes growing, tending, harvesting, and using prayer and ceremonial procedures at each step. The traditional use of tobacco also encompasses using a blend of plants, that in some cases does not include the tobacco plant. It is also important to note that not all California Tribes use traditional tobacco for ceremonial purposes.

While traditional tobacco use and education is important among our Tribal projects, the focus of this policy platform is on the reduction of commercial tobacco use only.

Traditional Tobacco	vs	Commercial Tobacco
Encompasses using a blend of plants in some cases does not include the tobacco plant		**Toxic additives** such as tar, arsenic, and formaldehyde
Part of a cultural process Such as growing, tending, harvesting, using in prayer and ceremonial procedures		**Only used for sales** used solely as a product for revenue
Used for medicinal purposes such as healing or pain relief		**Targeted at Tribal Communities** including tribal youth

Commercial Tobacco Use

Nationally and in California, American Indian and Alaska Natives (AIAN) communities have disproportionately higher rates of commercial tobacco use and exposure to secondhand smoke. In California, AIAN adults had the highest cigarette smoking rate (19.1%)[6] and flavored e-cigarette use (18.4%) compared to other racial and ethnic groups.[7] Among middle and high school youth in California, AIAN youth were more likely than the general adolescent population to use tobacco in the past 30 days (19.7% compared 12.7%).[6] Additionally, AIAN adults in California reported fewer smokefree households (75.7% compared to 88.0% of general CA population), which contributes to greater exposure to secondhand tobacco exposure among AIAN adolescents than youth in general (53.8 vs. 46.8%).[6]

AIAN communities have historically experienced a disproportionate number of consequences from smoking, including asthma, heart disease, lung cancer, and chronic obstructive pulmonary disease. For example, the California AIAN community has consistently had the highest asthma rate of any racial/ethnic groups (14.3% in 2013-14).[8] While decreasing in California's general population, the incidence rate for lung cancer among AIAN adults aged 35 and over increased from 77 per 100,000 in 1988 to 113. 4 per 100,000 in 2013.[9] California AIAN adults aged 45 and older had a mortality rate of 128 per 10,000 where chronic obstructive pulmonary disease was listed as an underlying cause, the highest of all racial/ethnic groups.[9]

While intentions to quit remain high (88.4% in 2013-14), AIAN adults struggle to quit their smoking behaviors.[9] Smoking behaviors, including challenges with cessation, are made more complex by their relationship with historical trauma, other forms of substance use, and mental health disorders experienced by AIAN people.[10–14] Additionally, the tobacco industry has strategically targeted AIAN communities by promoting commercial tobacco through sponsoring cultural events and by using American Indian imagery in cigarette brands.[15]

While CTCP has been addressing tobacco control for the past 30 years, AIAN projects have begun their first cycle of direct funding in the last several years. It is crucial to the development of Tribal tobacco projects to build capacity, adapt tools to be culturally appropriate, establish relationships, generate education and outreach materials, and to focus on community needs assessments. Once this critical work is established, Tribal tobacco projects can focus their work on policy priorities.

American Indian imagery in cigarette brands

Policy Priorities

Tobacco policy among Tribal communities is fundamentally different than tobacco policy among other communities. Tribal communities are sovereign nations with the rights and ability to control policy and laws and reshape norms around commercial tobacco use while honoring tradition.[16] Traditional public health approaches may not work in Tribal communities because they typically rely on national- and state-level data and "best practices" that do not recognize the diversity and unique context of Tribal communities.[16] The most successful policy approaches designed by and for AIAN communities and implemented at the Tribal level are those that:[16]

- Respect the sovereignty of Tribal Nations
- Align with community priorities, including traditional tobacco practices
- Invest time and resources in community outreach and relationship building
- Adopt culturally relevant messaging and strategies
- Address historical trauma and holistic health
- Leverage of both youth and elder leadership
- Value Native voices and insights

In partnership with the funded Tribal Partners, the Tribal Community Coordinating Center has identified four policy priorities for reducing commercial tobacco use among California Tribes. Tribal Partners and their communities lead the selection and adoption of policies based on their own unique contexts and priorities. The policy priorities include:

Smokefree Homes & Workplaces

Cessation Services

Tobacco Product Waste Reduction

Excise Taxes On Tobacco

Smokefree Homes & Workplaces

Smokefree policies protect the right to clean air by reducing exposure to secondhand smoke in public spaces, including work environments and multi-unit housing.[17] Voluntary smokefree homes can also be implemented by individual households. Comprehensive restrictions on smoking at workplaces and homes are linked to reduced exposure to secondhand smoke for nonsmoking employees and residents, increased smoking cessation rates, and reductions in hospital admissions due to cardiovascular disease, perinatal risk such as low birth weight and pediatric asthma, and risk of alcohol use disorder.[18–20] Additionally, thirdhand smoke (the smoke pollutants that accumulate in dust and on surfaces) can be reversed when smokefree policies are put in place, as was demonstrated in a longitudinal study at a California Tribal casino.[21]

Smokefree state-level policies and their positive impact on health outcomes are not felt equitably across communities and can be strengthened by implementing local policies and programs. Smokefree homes programs for Tribal communities can build on the values of respect, family, and intergenerational ties to support households in adopting voluntary smoking restrictions[20] and, in combination with cessation services, increase successful quit attempts among household members who smoke.[22] Experiences from smokefree policy work in Tribal businesses suggest the need for smokefree champions in leadership positions, clear presentation of scientifically credible information on air quality and health risks, and an assessment and discussion of how smokefree policies will impact revenue in workplaces.[23]

California Tribal partners have set objectives to increase the number of smokefree environments, including:

- Smokefree households through voluntary pledges,
- Smokefree policies for Tribal-owned housing and health clinics,
- Policies regulating smoking in recreation facilities and other public spaces, and
- Smokefree indoor workplace policies for gaming and non-gaming/leisure businesses.

Tobacco Product Waste Reduction

Despite heavy marketing by tobacco companies on the benefits of filters in cigarettes, cigarette butts and other forms of tobacco waste are a major environmental problem, accounting for at least 34% of total litter collected in California.[24,25] Discarded tobacco products, including cigarette butts and liquid nicotine from e-cigarettes, are toxic to human and environmental health due to leaching of nicotine, arsenic, pesticides, and heavy metals toxic to plants, aquatic life, and animals.[24] Additionally, discarded cigarette butts have been linked to wildfires that cause major damage to wildlife, vegetation, and structures.[25] Policies that seek to address tobacco product waste may help reduce littering, prevent environmental damage, and improve the public's understanding of the environmental effects of tobacco.

California Tribal partners have set objectives to prohibit improper disposal of tobacco product waste to reduce tobacco litter. To achieve these objectives, partners will:

- Collaborate with Tribal entities including security and grounds keeping, youth coalitions, prevention advisory boards, and CBOs;
- Implement community education on litter awareness and dangers of improper disposal;
- Develop model policies in collaboration with leaders, coalitions, and stakeholders; and
- Develop waste and litter advertisements, press releases, and earned media.

Cessation Services

Cessation programs can be effective at increasing quit rates for people who smoke,[26,27] including Indigenous populations.[28] Cessation services may include quit lines, interventions provided by health care providers, group-based cessation programs, and pharmacotherapy. It is critical, however, that cessation programs are tailored to the individuals and communities they seek to benefit, especially since Tribal communities are diverse and value different approaches.[2]

Culturally relevant services can be achieved by listening to the needs and barriers to quitting by AIAN people who smoke. AIAN community members have indicated that barriers to cessation include cost and availability of cessation programs, the perceived stress-relieving benefits of smoking, and settings or norms that support smoking behaviors.[29,30] Cessation services can be made culturally sensitive by tailoring designs, images, and colors; providing factual information about the health concerns AIAN people have related to tobacco and cessation; acknowledging and celebrating traditional tobacco uses in Tribes with these traditions; and providing linkages to Tribal-specific support services.[2] Health care providers or those providing counseling services (such as through quit lines) can support their clients by responding to individual needs through different communication styles, such as allowing for reflective pauses, not interrupting, listening carefully to a person's own concerns related to smoking, and avoiding "should" statements when offering service options.[2,31] Culturally tailored group-based services, such as education programs, show promise in being more effective helping AIAN people quit by drawing on values of family and fostering belonging and social support.[32]

California Tribal partners have set objectives to implement cessation services including:

- Voluntary tobacco treatment protocols in health care, social service, and education agencies;
- Culturally adapted cessation workshops to increase quit rates; and
- Smokefree policies at Tribal-owned health and dental clinics.

To achieve these objectives, partners will collaborate with Tribal entities and service providers to:

- Provide community education on cessation services including referral information for medical, dental, behavioral, and social services staff;
- Develop a model cessation protocol in collaboration with Tribal public health, behavioral health, and social services;
- Use posters, social media campaigns, and digital storytelling to increase awareness of the effects of commercial tobacco use on AIAN health, including pregnancy.

Example of a Smoking Cessation Program

Excise Taxes on Tobacco

Excise taxes, which increase the price of tobacco products, are one of the most effective measures to reduce tobacco use rates, especially among young people.[33] As sovereign nations, Tribal governing bodies may exercise their sovereignty by applying tax authorities within their Tribe. State mandates, therefore, do not apply to items sold to Tribal members on Tribal land, including the sales of cigarettes. In some cases where the state excise taxes are higher, many non-tribal consumers rely on purchasing tobacco products from smoke shops on reservations to avoid paying higher prices.[34] Tobacco companies may be using these loopholes to market their products within or near Tribal lands, increasing exposure to Tribal populations, including youth.[35] Regulations implemented by Tribal leaders, such as price controls like excise taxes, may help reduce initiation of smoking by young people[35] and help people quit.[4]

Implementing any kind of tax law can be controversial and should be approached in ways that support the health and economic well-being of Tribal communities, especially since potential loss of revenue from tobacco sales can be detrimental to a community.[36] When Tribal communities implement excise taxes, they may consider how such taxes must be enacted (such as a referendum or executive order), how they align with other Tribal and customary laws or compacts, what products are subject to the taxes (such as cigarettes, cigarillos, nicotine cartridges for e-cigarettes, etc.), and where the revenue will be directed.[37] Some communities may choose to exclude traditional tobacco products while ensuring taxes will be broad enough that they have an effect on commercial tobacco use.[37]

California Tribal partners have set objectives to adopt and implement an excise tax on on-reservation sales of commercial tobacco products to raise awareness of the negative effects of commercial tobacco products, sometimes designating a portion of revenue to prevent and reduce commercial tobacco use. To adopt and implement excise taxes, Tribal partners will:

- Collaborate with Tribal businesses, councils, security, programs, and coalitions,
- Provide community education with Tribal council members, Tribal programs, and retailers,
- Adopt excise tax policy supported by sample endorsement, resolutions, and letters of support materials,
- Implement social media and outdoor campaigns on rationale for excise taxes.

How to Work with California Tribal Nations on Policy

Policy making in Tribal communities is different than other forms of policy making in the U.S. because Tribal Nations are sovereign and set their own policies and regulations on Tribal lands. Policies must respect the sovereignty, historical context, and traditional practices of each Tribal Nation and community. Non-tribal partners who seek to work with Tribal entities must be committed to the work of building trust and understanding of the existing systems for adopting policies and tools to develop these policies. The following resources in Table 1 can support Tribal communities in leading the way for policies that support their health and well-being.

Community Education

Community education cultivates awareness of tobacco-related health issues with an emphasis on grassroots support for policy change, using strategies such as education materials, outreach at community events, community forums, and presentations to coalitions and CBOs.

> [Tobacco control] is one of those subjects countywide, people don't want to talk about, they don't wanna be told what to do...there's push back at county level...[we're] trying to figure out what some of the norms of tobacco use are in tribal communities--thinking about why we're struggling to get people into cessation classes, and what tribal leaders can do to encourage.
> **KEY INFORMANT INTERVIEW | JUNE 2021**

> How do you develop leaders in tribal communities who are speaking truth without undermining leaders in the Council. When it comes to smoking, people already feel ostracized...crafting a message that will resonate with individual tribal members and a collective public health message.
> **KEY INFORMANT INTERVIEW | JUNE 2021**

> The community is part of what you bring, when you present an idea, the community backs up what you're trying to do, how the community believes that it's good work...the tribe is like a family.
> **KEY INFORMANT INTERVIEW | JUNE 2021**

> Us being out there in the community, putting out this pledge, it's gonna spread the awareness. For future policy work, it sets a foundation so they can build on that in the future. Us being out here with our voluntary pledge is foundation work.
> **KEY INFORMANT INTERVIEW | JUNE 2021**

Table 1

Resource Title and Link	Description
California's Clean Air Project	This website is a collection of resources, covering research papers, a casino toolkit, and video interviews with Tribal Leaders, Casino Management and Tribal youth. It also includes air monitoring information and protocols.
Smoke-Free Tribal Policy Toolkit by Keep It Sacred	This website is a collection of resources and lessons learned from Tribes and tribal communities across the continent, meant to help you design effective, community-specific commercial tobacco use prevention and control policies that limit or eliminate commercial tobacco use in tribally controlled spaces, reducing the health risks associated with secondhand smoke exposure.
Alaska Native Tobacco Prevention Community Toolkit by State of Alaska Tobacco Prevention and Control Program and the Alaska Native Tribal Health Consortium	This website is a collection of resources and lessons learned from Tribes and tribal communities across the continent, meant to help you design effective, community-specific commercial tobacco use prevention and control policies that limit or eliminate commercial tobacco use in tribally controlled spaces, reducing the health risks associated with secondhand smoke exposure.
Drafting Tribal Public Health Laws and Policies to Reduce and Prevent Chronic Disease by Public Health Law Center	This publication is designed to assist Tribal leaders, health departments, public health advocates, and community members in thinking about how to draft written public health laws and policies for their Tribes.
Smokefree Event Toolkit by Native American Rehabilitation Association of the Northwest	This toolkit is designed to make planning and hosting a smokefree powwow or other event easy and successful. It provides tools to help you clearly communicate, promote, and enforce a smokefree policy.
Tribal Tobacco Advocacy Toolkit by the Canli Coalition in South Dakota	This resource explores issues raised by Tribal governments and public health advocates about increasing commercial tobacco taxes in Indian Country, while protecting Tribal sovereignty and cultural practices.
Tribal Tobacco Policy Workbook by Northwest Portland Area Indian Health Board	This workbook will provide you with approachable steps, usable templates, and concrete examples. Using the wisdom and experience gained by Tribes across the U.S., this guidebook now shares practical lessons learned by those who successfully passed tobacco-related policies in their tribes.

Youth Coalitions

Youth coalitions are a strategy for catalyzing social change. Youth have the right to influence the policies and programs that impact them. Youth are also developmentally primed to care about issues around equity and justice. With training and support from skilled facilitators, youth have the ability to conduct effective community education and educate Tribal leaders on important tobacco-related issues. Youth coalitions provide opportunities for youth to hear and learn from elders on the traditional and historical reasons for reducing commercial tobacco use.

> … it was a realization, how much the youth matters to the adults in the community. It shows the care the adults have for their children and how much youth care about their elders.
> **KEY INFORMANT INTERVIEW, JUNE 2021**

> [In our policy work] we were able to bring a lot of our youth to help present…it has been very beneficial when they have presented along with us.
> **KEY INFORMANT INTERVIEW, JUNE 2021**

Media Education Campaigns

Media education campaigns are a strategy to increase community awareness about tobacco-related health issues or services and programs that support commercial tobacco cessation and health. These campaigns might include radio, newspaper, newsletters, social media, and magazines to educate and/or advocate for tobacco control policies and programs.

> Not every tribe is gonna see [tobacco control] as urgent, but all together we can find how we can connect to them, it is a public health problem. How urgent it is for each tribal project—if it's not urgent, why? How can we frame it so they will see it?
> **KEY INFORMANT INTERVIEW, JUNE 2021**

> There just isn't information in tribal communities about tobacco. People don't really understand what the word 'cessation' means. Just having [the] right images, right stories that will resonate. "We have to start with education about terms. The difference between smoke-free, tobacco-free, nicotine-free. And addressing traditional tobacco—where do we get it? How do we use it? The tribes want information about traditional tobacco.
> **KEY INFORMANT INTERVIEW, JUNE 2021**

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