

## **Arkansas cancer coalition workgroup for lung cancer March 29, 2016**

**Moderators:** Katherine Donald, Thaddeus Bartter

**Attendees:** Please see sign-in sheet. Included was that of tobacco control programs from across the state and the head of the cancer line from UAMS

**General discussion:** The ACC section on lung cancer was discussed: is well-written, both inclusive and succinct. Discussion moved to the link between tobacco and lung cancer. Consensus is that a grass-roots organization such as ACC is much more likely to be able to impact lung cancer via tobacco prevention, education and cessation activities than via an impact upon medical care. There is an exception. See below.

**Terminology:** There was one suggested correction. It was suggested last year (March 2015) that “ESD” for “electronic smoking device” be changed to “ENDS” for “electronic nicotine delivery system.” This was not done, and the tobacco industry is far ahead of us. Nicotine is now available in many other forms, all with a capacity for addiction and the threat of conversion to the most harmful delivery device, the cigarette. After discussion, it was suggested that the term “NDS” for “nicotine delivery system” be the terminology used. We would suggest that NDS be defined and used in future printings of this cancer plan and in future Arkansas Cancer Coalition publications.

Also mentioned was the absence of addressing the use of menthol flavored tobacco products as an avenue for initiation and as causal tobacco disparities.

**Actionable ideas:** The group had an extended discussion about ways to increase barriers to nicotine usage. It became evident that the Department of Health had tried several of the suggested approaches, often with minimal success. The Department of Health representative felt that the most unique aspect of ACC is its number of grassroots connections. A second difference is that it is slightly further remove from the political machinery of the state than is the Department of Health. At times this gives ACC and or its partners more freedom to act.

**Action:** Develop an online lung cancer listing. This has been suggested in the past. There is a network of physicians with strong interest and experience in lung cancer scattered throughout the state. There is no coherent database in which to find these individuals. The ACC could develop such a list. This could be done by asking for suggestions both from physicians and from lung cancer patients. The Department of Health suggested that this is something that they could not do for political reasons but that would be reasonable for ACC to do.

**Action:** Mini grants. The concept that progress is made one small step at a time was discussed. The group tried to find areas in which “seed money” could be truly helpful. The concept was that rather than ask for grant proposals, ACC actively list topics for which proposals could be generated and support would be offered. A number of such topics were brought up.

**Signage for tobacco free areas:** Tobacco free areas are often not clearly delineated. Signage can be an effective tool which delineates the area and also contains a negative message about tobacco itself. ACC could request proposals for an individual or group that would contact a tobacco free area such as a school and park systems, speak with administration of that area, make signs, and install them.

**Pre-teen and teen nicotine prevention I:** ACC could offer a mini grant for advertising that could spread a negative image about nicotine.

**Preteen and teen nicotine prevention II.** Tool kits can offer consistent quality information. ACC could offer a mini grant for the development of a tool kit appropriate to the preteen and teen ages. This tool kit could be used by different grassroots individuals working with school-age populations.

**Nicotine and sports:** There is a national trend towards deleting all nicotine usage from sporting events and sporting arenas, especially major league baseball. Sporting figures are “heroes.” A grant could be offered for someone who could find an Arkansas sport figure who had been directly negatively impacted by nicotine through personal injury or through family injury and publicize the dangers of NDS via a personal account.

**Youth educators:** It was stated that children respond better to older children than to adults. A grant to support the development of a youth training program or to support further development of one already in existence could have a meaningful impact.

**Summary:** The group was composed of a mixture of senior persons and grass-root activists. Terminology with respect to nicotine and tobacco industry’s rapid evolution was discussed. The concept of an accessible listing of cancer caretakers was once again brought up as meaningful and possible. A number of items that could be actionable via mini grants focused largely around nicotine prevention and cessation.