Policy Process Evaluation for Equity

Measuring the HOW along with the WHAT in commercial tobacco prevention policies at the point of sale

ChangeLab Solutions

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We recognize the important role of ceremonial and traditional uses of tobacco in many Indigenous communities. This resource is intended to address commercial tobacco, not tobacco products used as part of an Indigenous practice or other recognized religious or spiritual ceremonies or practices. All references to *tobacco* and *tobacco products* in this document refer to commercial tobacco.

Health equity is a *way*, not just a *what*

Public health and commercial tobacco prevention practitioners have increasingly centered equity in policy development to ensure that policies to combat commercial tobacco-related harms do not unintentionally perpetuate or exacerbate health disparities. This shift includes efforts to improve evaluation activities to better measure health equity impacts related both to outcomes and to how the policy was developed and implemented.

ChangeLab Solutions provides equity-focused resources across the point-of-sale (retail-oriented) policy process — for example, information on local decision makers' ability (or authority) to create or change policies; community-centered health equity assessments; policy selection, development, and adoption; implementation and enforcement; and, in this tool, policy evaluation planning and implementation. Three principles underlie the equity approaches in these resources:

- Building partnerships between community members and policymakers
- Carefully gathering, applying, and sharing data
- Framing our work using fairness and systems thinking

Partnerships, data, and messaging are all foundational ways that each step of the policy process can center community.

The lists of sample metrics in this resource provide local policymakers, public health practitioners, and community groups with a foundation for further conversation about how we measure the community impact of the policy *process*. These non-exhaustive lists stem from research across the field of public health; only some correspond to existing examples in commercial tobacco. In time, we hope to share examples of each metric at work and to update the research as we continue to learn from our partners.

The lists and accompanying research aim to provide …

- Inspiration for new and deeper partnerships throughout the policy process — for example, between local decision makers, partner agencies, community-based organizations, health care partners, other service providers, and residents
- Data metrics and supporting evidence to help ground and inspire new approaches to evaluating the policy process
- Avenues for building a network of communities that are making this shift in their approaches to evaluation provisions and plans

Partnerships are worth the time

Equity-driven policymaking is strengthened when decision makers share power with the people whose lives are most affected by the problem that the policy addresses. Though partnerships take time and resources to build, research increasingly shows the effectiveness of building community power to achieve health equity.

Along with a spectrum of approaches to building community partnerships, the evidence base is growing for hard-to-measure benefits such as improved involvement and agency, social connectedness, governmental and institutional trust, and more.

Data sometimes tell only part of the story

Everyone deserves the chance to live their healthiest life, regardless of who they are — including their race, ethnicity, immigration status, disability status, sexual orientation, gender, gender identity, and other characteristics — yet opportunities to thrive are not fairly distributed in our communities. Many researchers, residents, and policymakers understand health inequities as a fundamental issue of civil rights and justice.

Data can help tell that story. However, data can oversimplify issues and the people experiencing them. Structural and institutional discrimination and violence against people of color — particularly Black Americans and Native Americans — mean that data collection can be perceived as harmful surveillance. Such distrust often stems from knowledge of historical harms perpetrated in the name of data collection. Furthermore, constitutional limitations prevent governments from using some group identifiers for decision making. Many groups are identifying ways to mitigate those risks and limitations — for example, when prioritizing rural, tribal, racial, or other types of equity. The measures discussed later in this publication provide more ideas on evaluating efforts to close persistent data gaps.

How we talk about policy will change how policy works

Research consistently shows how conversations can create change and motivate action. But sometimes messages created to raise awareness about commercial tobacco harms can unintentionally and even unconsciously reinforce biases, leading listeners to shift blame from the industries and systems that are doing the harm to the individuals most harmed by unhealthy products. Other times, messaging might cause people to feel that they can't change anything because the problem is too hopeless. Still other times, messaging might give people the idea that the problem will just resolve on its own.

Rather than focusing on individual-level behavior change, we can change our framing to orient listeners to community-wide factors and environments that shape the choices available to some people and not others. We can talk about policies that can create community-level change and refocus on the benefits of making healthier environments available to all residents.

Reframing Example: The Economic Case

Sharing data about consumer spending or health care costs might be important, but without context and framing, such data might inadvertently shift the focus to individual choice. That shift risks stigmatizing communities that are disproportionately harmed by commercial tobacco. To avoid contributing to these outdated narratives, describe assets, benefits, and savings rather than costs.

Measuring the community impacts of policy partnerships

A. Centering community

B. Sharing power

C. Building community trust

D. Equitable enforcement

A. Centering community

In assessing efforts to center the communities that are disproportionately affected by commercial tobacco-related harm, evaluation metrics may include the number and type of opportunities for community members to participate in the design and implementation of policies. Relatedly, metrics about uptake rates and data about participants can contextualize the degree to which participation opportunities represent the community.

Measure "centering community" by documenting the use or number of multiple, varied opportunities for participation by residents and other partners, such as ...

- ☐ Interactive media touchpoints that broaden reach into a range of areas or groups in the community, using principles of digital and language accessibility/justice
- ☐ Direct input tools like surveys and community hearings throughout the policy process (e.g., planning, drafting, implementation)[A1]
- ☐ Advisory committees, boards, panels, or review bodies that invite community members to provide input to the decision-making process[A2]
- ☐ Job opportunities for policy planning and implementation, with a focus on hiring people from communities most affected by the policy issue
- ☐ Records, reports, or stories on how participation opportunities have informed implementation goals and processes

Measure "centering community" by gathering data to understand the uptake of participation opportunities for residents and other partners, such as the number of ...

- ☐ Different linguistic or cultural versions of materials or engagements in media/outreach efforts, surveys, and hearings[A2]
- ☐ Sources or venues sought for their ability to reach audiences across the range of community groups most affected by the policy issue[A3]
- ☐ Unique participants via various participation opportunities
- ☐ Project hires from the community most affected by the policy issue
- ☐ Participants who indicate lived experiences related to the policy issue
- ☐ (or rate of) Participants with specific demographic identifiers like those reflected in community-wide data[A2]

Measure "centering community" by gathering, using, and sharing data during community participation opportunities in ways that emphasize partnerships and lived experience — for example,

- ☐ Forming partnerships with, for example, community-based organizations, resident groups, or community-embedded institutions to gather, use, and share data[A2]
- ☐ Implementing disaggregated data-gathering techniques[A4]
- ☐ Collecting qualitative data through a variety of means, to complement numerical data and statistics[A4, A5]
- ☐ Reporting data and findings in easy-to-use public sources, like press releases, social media, published reports, websites, and interactive data dashboards
- ☐ Establishing ongoing, periodic systems to update data over time[A4]

KEY RESOURCES ON CENTERING COMMUNITY

A1. Urban Institute, Changing Power Dynamics Among Researchers, Local Governments, and Community Members: A Community Engagement and Racial Equity Guidebook

A2. Agency for Toxic Substances and Disease Registry, Centers for Disease Control and Prevention, Program Evaluation and Evaluating Community Engagement, in *Principles of Community Engagement*, 2nd ed., chap. 7

A3. City Energy: A Joint Project of the National Resources Defense Council and the Institute for Market Transformation, Engaging the Community in Policy Development

A4. Rose SW, Ickes M, Patel M, et al., Centering Equity in Flavored Tobacco Ban Policies: Implications for Tobacco Control Researchers, *Preventive Medicine*, 2022;165(Pt B):107173

A5. Tobacco Prevention and Cessation Division, Indiana Department of Health, Indiana Community Partner Evaluation

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B. Sharing power

Growing evidence connects community power in policy development to policy efficacy, including improvement of health outcomes. Measuring and evaluating power-sharing efforts can be done by documenting the influence that community participation opportunities have had on the policymaking process and by honoring the value that community partners are bringing to the work.

Measure "sharing power" by documenting how community participation has influenced policy development, recording when, how, or how often ...

- ☐ Decisions about policy planning and implementation are made by (or delegated to) community partners (e.g., via committee, consensus, deliberation sessions)[B1]
- ☐ Approval opportunities are allocated to or shared with community partners prior to final decision making[B1]
- ☐ Guidance or leadership from community partners has changed or shaped the outcome of a policy plan, draft, implementation, or other aspect of the process[B1]
- ☐ Opportunities for substantive community input are provided, throughout the policy process[B1]

Measure "sharing power" by identifying and reflecting the value that community partners (residents, community-based organizations, and other community-connected institutions) bring to the work by, for example,

- ☐ Contracting with or otherwise funding community partners to perform various aspects of the policymaking process (e.g., gathering or sharing of assessment data, issue prioritization and selection, implementation responsibilities, or evaluation)[B2, B3]
- ☐ Supporting funding efforts and outreach for community partners who are connected to the policy issue or policy process
- ☐ Hiring staff for policy planning and implementation who share a geographic area, population group or identifiers, or lived experiences with people whose lives are most affected by the policy issue
- ☐ Compensating community members involved in the policy process for their time[B2] (while considering whether or how doing so may affect public benefit eligibility)[B4]
- ☐ Providing stipends, reimbursement, or other forms of compensation for participating community partners' needs related to, for example, transportation, child or adult care services, or meals[B2]

KEY RESOURCES ON SHARING POWER

B1. Tamber PS, A Model Linking Community Engagement, Health Improvement and Community Power

B2. Urban Institute, Changing Power Dynamics Among Researchers, Local Governments, and Community Members: A Community Engagement and Racial Equity Guidebook

B3. Caloca K, Schnaidt V, To Build Shared Vision in Communities, Trust Them to Lead, *Nonprofit Quarterly*, May 23, 2023

B4. Office of Planning, Research and Evaluation, US Department of Health and Human Services, Elevating Family Input in TANF and Child Support Programs: Resources for Program Staff, Leaders, and Families

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C. Building community trust

Measuring trust in government, institutions, and each other may seem like an abstract or subjective exercise, but identifying ways to collect information about community trust has broad implications across public health and health outcomes. There are ways to ask residents and partners about their feelings and observations, and there are external measures that can be used as proxies to indicate changes in levels of community trust.[C1]

Measure changes in "community trust" by collecting data and stories that include self-reported feelings and observations about community trust.[C2]

These types of questions or data may lead to challenging conversations. Evaluators should mindfully consider which settings, messengers, and skills will best facilitate such conversations[C3] — for example, asking questions directly (e.g., in surveys or focus groups) or via partners (e.g., in a hospital's community health needs assessment), to assess the following questions:

How much do you, as a [community member], trust [representatives, government employees,[C4] local institutions, neighbors, etc., specific to the policy] to …

- ☐ Give you a say in decisions that affect you?
- ☐ Resolve problems that affect your community?
- ☐ Treat you as an equal?
- ☐ Have your best interests at heart?
- ☐ Help keep you safe?
- ☐ Go out of their way to help you?
- ☐ Share your goals and vision for your community?
- ☐ Understand your experiences, goals, and needs?
- ☐ Reserve judgment about differences between your life and theirs?
- ☐ Celebrate differences between your life and theirs?

Measure changes in "community trust" by partnering with data experts to identify external metrics that, all else equal, may be associated with or indicative of changes in community trust,[C5] such as …

- ☐ Increased rates of community partners' participation in the policy process[C5]
- ☐ More invitations to join or support community partners' events and activities
- ☐ Increased voter turnout
- ☐ Increased uptake or utilization of preventive and other health care services[C6]
- ☐ High rates of adherence to or compliance with policies (compared with, for example, similar policies implemented with fewer opportunities for community participation)
- ☐ Increased rates of consistency between census reporting and tax reporting (This type of assessment could be made in partnership with an academic institution.)

KEY RESOURCES ON BUILDING COMMUNITY TRUST

C1. Holroyd TA, Limaye RJ, Gerber JE, et al., Development of a Scale to Measure Trust in Public Health Authorities: Prevalence of Trust and Association with Vaccination, *Journal of Health Communication*, 2021;26(4):272–280

C2. Racial Equity Tools, Community Assessment Tools and Resources

C3. Gilfoyle M, MacFarlane A, Salsberg J, Conceptualising, Operationalising, and Measuring Trust in Participatory Health Research Networks: A Scoping Review, *Systematic Reviews*, 2022;11:40

C4. Organisation for Economic Cooperation and Development, OECD Guidelines on Measuring Trust

C5. National Academy of Medicine, Assessing Meaningful Community Engagement: A Conceptual Model to Advance Health Equity Through Transformed Systems for Health

C6. Edelman, 2023 Edelman Trust Barometer. Special Report: Trust and Health

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D. Equitable enforcement

"Equitable enforcement is a process of ensuring compliance with law and policy that considers and minimizes harms to underserved communities. An equitable enforcement approach means considering equity – both at the level of the public entity's overall enforcement strategy and at the level of individual enforcement actions." —ChangeLab Solutions, ***Equitable Enforcement to Achieve Health Equity: An Introductory Guide for Policymakers and Practitioners***

Measure "equitable enforcement" planning by documenting opportunities to establish shared enforcement goals and processes, such as ...

- ☐ Enforcement plans that are framed in terms of shared goals, based on community conversations, particularly with people whose lives are most affected by the policy (e.g., retailers and other business owners, residents, community groups)[D1]
- ☐ Enforcement tools that intentionally allocate the burden of compliance — for example, who gets fined for violations — to align with shared policy goals[D2]
- ☐ Ongoing opportunities for community members to engage with enforcement bodies in non-punitive situations (e.g., meetings, committees, review sessions)
- ☐ Data collection on issues and areas that may reveal unintended consequences related to health inequities — for example, disaggregated health outcomes by block or neighborhood[D3]
- ☐ Sharing of data and data analysis to facilitate community conversations that inform policy and process changes over time

Measure "equitable enforcement" efforts by prioritizing intentional and collaborative enforcement processes and mechanisms, such as ...

- ☐ Collaborative processes for identifying effective, non-punitive enforcement measures
- ☐ Enforcement measures geared toward institutions/entities in power and parts of systems rather than toward individuals
- ☐ Graduated enforcement regimes with multiple non-punitive early steps[D3]
- ☐ Ranges of sanctions (e.g., those that use a sliding scale based on ability to pay)[D1]
- ☐ Multiple styles and opportunities for interactions between enforcement bodies and community partners to facilitate and incentivize compliance

Measure "equitable enforcement" implementation by ensuring thoughtfulness and accountability among and between enforcement bodies and community partners by, for example,

- ☐ Sharing enforcement responsibilities among a variety of coordinated enforcement bodies[D2]
- ☐ Creating opportunities for enforcement staff to periodically work with community members in multiple settings outside of direct enforcement activities
- ☐ Establishing, maintaining, and improving procedural guardrails for how, when, and by whom discretion related to enforcement may be used
- ☐ Providing enforcement training on the policy issue, its health equity implications, and its historical repercussions across different neighborhoods and demographic groups[D4]

KEY RESOURCES ON EQUITABLE ENFORCEMENT

D1. Hazarika Watts M, Hannon Michel K, Breslin J, Tobin-Tyler E, Equitable Enforcement of Pandemic-Related Public Health Laws: Strategies for Achieving Racial and Health Justice, *American Journal of Public Health*, 2021;111(3):395–397

D2. Roberts ME, Klein EG, Ferketich AK, et al., Beyond Strong Enforcement: Understanding the Factors Related to Retailer Compliance with Tobacco 21, *Nicotine & Tobacco Research*, 2021;23(12):2084–2090

D3. Tobacco Control Enforcement for Racial Equity — Decriminalizing Commercial Tobacco: Addressing Systemic Racism in the Enforcement of Commercial Tobacco Control

D4. ChangeLab Solutions, PUP in Smoke: Why Youth Tobacco Possession and Use Penalties Are Ineffective and Inequitable

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Conclusion

Building the case for community-based policy change at the point of sale for commercial tobacco

The metrics in the preceding lists may be well established among public health and commercial tobacco prevention practitioners, or they may stem from newer research in related fields. Collecting them here is intended to inspire and expand conversation about how we evaluate policymaking in four areas of community impact: centering community, sharing power, building community trust, and equitable enforcement. Each section highlights the importance of deepening our community partnerships, our use of data, and the way we communicate about our work throughout the policy process.

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