



SUPPORTING TOBACCO-FREE LGBTQ COMMUNITIES

## POLICY PLATFORM FACTSHEET

This fact sheet offers an at-a-glance look at We Breathe’s Policy Platform. The platform highlights systemic environmental changes, cultural sensitivity/humility, funding recommendations and more to improve LGBTQ+ tobacco-related health disparities. The recommendations have been informed by community voices from Key Informant Interviews, Public Intercept Surveys, Gallery Walks, and the LGBTQ+ coming out timelines.

For the full version of the We Breathe Policy Platform, visit: [bit.ly/WBpolicy22](https://bit.ly/WBpolicy22)

### SYSTEMIC ENVIRONMENTAL CHANGES

1. Collaborate between programs and departments within the California Department of Public Health (CDPH) to address health inequities of LGBTQ+ communities
2. Streamline Sexual Orientation & Gender Identity (SOGI) data collection within CDPH and TRDRP to close gaps in data for the LGBTQ+ community
3. Collaborate with the CA Dept of Ed to include LGBTQ+ Tobacco curriculum—such as cessation services in secondary school health classes
4. Fund Gender and Sexuality Alliances (GSAs) and the campus staff who support them
5. Support minimum tobacco pricing policies to counter industry targeting of low-income LGBTQ+ communities

### CULTURAL SENSITIVITY/HUMILITY

1. Implement LGBTQ+ cultural humility trainings for all California Tobacco Control Program (CTCP) funded projects
  - a. Trainings should be conducted by LGBTQ+-serving organizations\*
  - b. Trainings will include recruitment of community members onto Community Advisory Boards and compensation provided for their time
2. Fund an LGBTQ+ Technical Assistance (TA) provider to serve all CTCP projects with SOGI data collection and other needs

### GUIDANCE FROM LGBTQ+ COMMUNITY

1. Take Policing out of schools. Police should not provide prevention work in schools. Instead, police should focus on enforcement with retailers & Tobacco Retail Licensing.
2. Do not use Prop 56 funds to support police presence in schools
3. Do not force LGBTQ+ projects to work with policing systems
4. Create alternate suspension programs (learning, mentorship)
5. Make cessation products accessible. LGBTQ+ people need 100% insurance coverage for cessation products, with the understanding that cessation products aren’t one-size-fits-all.
6. Support collaborations between cessation service providers and LGBTQ+ focused agencies.
7. Examine successful referrals in HIV/STI provider collaborations to inspire best practices for referring community members to medical providers who will provide a prescription for a cessation product
8. Fund The Last Drag intervention programs and mobile lung screenings at LGBTQ+-serving organizations\*
9. Include LGBTQ+ specific cessation resources on the statewide Quitline websites and call-in lines

### RESEARCH NEEDS

1. Fund community-based participatory research (CBPR) and require all research to include LGBTQ+ researchers and partnerships with LGBTQ+ serving, community based organizations (CBOs)\*
2. Research should use intersectionality as a lens to understand how tobacco policies and legislation have affected LGBTQ+ people
3. Mandate SOGI questions into tobacco-control data collection efforts and offer TA for implementation

### FUNDING RECOMMENDATIONS

1. Fund LGBTQ+-serving organizations\* to provide support groups where members of LGBTQ+ communities can make positive connections
2. Launch a network of LGBTQ+ culturally competent mental health providers within LGBTQ+-serving organizations\*
3. Develop an LGBTQ+ specific cessation line and cessation program (instead of funding referral programs)
4. Establish a network of LGBTQ+-serving organizations\* to provide trusted, culturally competent, and non-stigmatizing community education about tobacco

\*LGBTQ Centers & LGBTQ-focused organizations or programs are those whose mission statement and vision statement centers around LGBTQ+ lives.