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**Fall**



**Prepared For:**

**Oregon health authority**

**Tobacco Industry Denormalization (TID) Focus Group Research**

**June 2014**

**Prepared BY:**

**DHM RESEARCH**

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1. | INTRODUCTION & METHODOLOGY

Davis, Hibbitts & Midghall, Inc. (DHM Research) conducted eight focus groups with communities of color for the Oregon Health Authority. The purpose of the research was to assist in the development of a Tobacco Industry Denormalization (TID) communications plan.

**Research Design:** The eight focus groups were held on June 2 – June 5, 2014 at a professional facility in downtown Portland. The participants were recruited from Clackamas, Multnomah and Washington counties, and were separated by the following racial and ethnic communities:

* Latino (June 2 & 3)
* African American (June 2 & 3)
* Asian (June 2 & June 4)
* Native American (June 3 & 5)

A total of 53 people participated in the groups. Eighteen (18) participants identified themselves as smokers. See Appendix A for their complete demographic profiles.

**Statement of Limitations:** The focus groups were led by a professional moderator and consisted of both written exercises and group discussions. Although research of this type is not designed to measure, with statistical reliability, the attitudes of a particular group, it is valuable for giving a sense of the attitudes and opinions of the population from which the sample was drawn.

This memo highlights key findings from the discussions. Each section reviews a major topic from the group discussions and includes representative quotations, as well as evaluative commentary. The quotes and commentary are drawn from both written exercises and group discussions.[[1]](#footnote-1) The referenced Appendices provide the complete responses to all written exercises.

**DHM Research:** DHM Research has been providing opinion research and consultation throughout the Pacific Northwest and other regions of the United States for over three decades. The firm is non-partisan and independent and specializes in research projects to support public policy-making. [www.dhmresearch.com](http://www.dhmresearch.com)

2. | SUMMARY & OBSERVATIONS

**K-12 education and jobs and the economy were the most important issues that participants would like the Oregon state government to address. Public health and smoking were rarely mentioned as priority issues.**

* This is consistent with DHM Research findings across many statewide surveys and focus groups.
* Other issues mentioned by participants included housing and homelessness, infrastructure, crime and public safety, and environmental protection.

**“Respect,” “Family,” “Compassion,” and “Honesty” were key values that participants felt everyone in the community should share.**

* Of all the values, respect was mentioned most often and consistently across all the groups. Participants typically defined respect as listening to and including people of different backgrounds in the community—people of different races and ethnicities, genders, sexual orientations, and ages. There was strong sense that communities of color are frequently ignored by leaders and government.
* Caring for and valuing family was an important community value, and protecting and children was of special importance.
* Compassion, and related values of empathy, kindness and helping those in need were important to all the groups. The Asian group participants also emphasized tact as a value that is important in their community.
* Honesty was another important value. Often, however, it was talked about in the negative, that too often people are dishonest and cannot be trusted, particularly the government and elected leaders.

**Participants said that, when making decisions, elected officials and policy makers should be informed about their communities, respectful of all constituents, honest, and selfless.**

* Participants emphasized the responsibility of leaders to be knowledgeable about key issues in the community and the types of people that live there.
* Respect for *all* members of the community, not just those with money, was also heavily emphasized. Participants said the best way to show respect is to include all constituents in the decision-making process, especially those with barriers to participating.
* Honesty, as well as straightforward communication, were particularly important values among African Americans and Asians, many of whom felt that elected officials often say one thing and do the opposite.
* Selflessness and altruism were also stressed by participants. They wanted leaders to do what’s best for the community and not just what will get them reelected.

**The participants were asked about four values that have been shown in other research to be critical to evaluating public policy: equality, efficiency, security, and freedom.**

* *Equality:* Participants emphasized the importance of equality regardless of individual characteristics such as race, religion, gender, and sexual orientation. There was not consensus about who is responsible for ensuring equality or if equality of outcome or opportunity is most important.
* *Efficiency:*This was the most difficult of the four values for the participants to articulate. Those who did discuss it related it most to not wasting time and doing work quickly.
* *Security:* Participants defined security both as physical—e.g., protecting oneself from crime or violence—and mental—e.g., having a sense of personal well-being.
* *Freedom:* Of these four values, freedom was the most discussed and debated. Participants generally agreed that freedom means being able to do what one want—so long as not to infringe on someone else’s freedom. They wrestled with how to draw these lines and whether government is more likely to protect freedom or infringe upon it.
* It should be noted that several of the participants expressed cynicism about these values. They felt that these were no more than rhetoric employed by those in power.

**Participants were asked about efficiency, equality, security, and freedom in relation to health and wellness.**

* *Equality:*Participants frequently mentioned that the current system of health is very unequal and that the rich get much better care than the poor.
* *Efficiency:*A lack of efficiency in health was noted by many participants, mainly due to limited access for those without money or insurance.
* *Security:* Most described security as the ability to get healthcare or other treatment when needed, and that their lack of access to care was noted as an obstacle to obtaining security.
* *Freedom:* Participants generally agreed that freedom means the ability to make individual choices about their health. However, there was significant contention over the extent of one’s freedom in relation to health.

**Nearly all the participants overestimated the percent of people who use tobacco in Oregon generally and among their racial and ethnic group.**

* Across all the groups, the participants estimated that 47% of all Oregonians use tobacco.
* The Latino, African American and Asian groups all estimated that their communities use tobacco less than other Oregonians. Only the Native American groups estimated that their community uses tobacco more frequently.

**The participants generally did not believe that they were affected by tobacco advertising (or advertising in general).**

* As has been witnessed in other research, the participants saw themselves as rational actors who make choices by carefully weighing the costs and benefits. They were unlikely to recognize or accept that they are also motivated by emotionalism and clever advertising.
* Even the smokers in the group were hesitant to admit that tobacco advertising influenced when they started to smoke or their preferred brands of cigarettes.

**When presented with information about the amount of money that the tobacco industry spends in marketing at convenience stores and other retail settings, the participants became more supportive of restrictions on tobacco advertising.**

* The participants were stunned by the amount of money that the tobacco industry spends on marketing ($1 million an hour) and that the vast majority is placed in retail settings that are frequently visited by children.
* Framed in this way, the participants were generally persuaded that the tobacco industry is targeting children with their advertising and become much more supportive of placing limits on the placement and design of advertising in retail spaces.

**The OHA video testimonials were well received by all groups.**

* The participants reviewed three videos of everyday Oregonians who have taken steps to reduce access to tobacco. All were viewed positively, especially the “George” video.
* Most participants felt that the videos were relevant to their community. However, a few participants commented that “Health Media Club” did not include any people of color.

3. | KEY FINDINGS

3.1 | Warm-Up: General Issues

We started the focus groups by asking the participants to list important issues that they would like the Oregon state government do something about. The purpose of this opening question was to get a general sense of the issues that the participants were concerned about, and to have a quick group exercise that engaged all the participants.

The participants identified a wide range of issues that they are concerned about. Some of the most common were:

|  |  |  |
| --- | --- | --- |
| * K-12 education and funding
* Job opportunities and improving wages
* Attracting and retaining business
* Affordable housing and homelessness
 | * Honest and effective elected leaders
* Road maintenance and repair
* Improving public transportation
* Crime and public safety
 | * Police harassment
* Neighborhood gentrification
* Economic inequality
* Marijuana legalization
* Affordable healthcare
* Environmental protections
 |

Across all the groups, K-12 education and jobs and the economy were mentioned most frequently. Public health issues generally, and smoking in particular, were rarely identified as priority state issues.

These are the same range of issues that DHM Research has found that the general population of Oregon is concerned about. In statewide surveys and focus groups, education and economic issues are consistently the top two concerns. Housing and homeless, infrastructure, public safety and the environment are common second tier issues, and ebb and flow as priorities over time and across the state.

There are, however, two issues that came up that are worth noting. One is that that the African American groups made a point to emphasize problems of police harassment. They called them *“rude” “disrespectful,”* and *“lacking people skills.”* One participant went so far as to say that he would *“rather get killed than call them.”* The other is a recognition of the very difficult financial conditions that many of these participants experience. Of the 53 participants, 14 had household incomes below $15,000 and 31 had household incomes below $30,000. The challenges and concerns that they discussed were much more immediate and pressing than would be the case with more affluent participants.

3.2 | General Values

**COMMUNITY VALUES:**

We asked participants to make a list of the values they think are important for all people in the community to share. Four common values emerged throughout many of the groups: respect, family, compassion, and honesty.

**A. Respect**: All of the groups mentioned respect more often than any other value. Participants most often referred to respect for other people, including those of different races, ages, sexes, etc., and to treating others how they would like to be treated. They said people could show this respect by listening to and including people of different backgrounds in the community. For example, one participant explained that leaders must consider minorities when making policies: *“I feel like they need to start respecting these minorities, and consider them, and see the possibility to attract them and involve them in these decisions.”* Others mentioned respect for themselves, for the environment, and for the community. Frustration over a perceived lack of respect in society was brought up by several participants. One remarked,

* *“In Oregon, my experience is that it’s not that people don’t respect you. They say, ‘I respect you,’ but it’s what they do with you to show whether or not they really respect you. Respect comes with trust, empowerment, and inclusion.”*

Of the four ethnic groups, African Americans placed the greatest emphasis on respect, and the phrase *“treat people how you would like to be treated”* was repeated several times throughout the discussion. Latinos placed greater emphasis on respect for cultural diversity, while Native Americans more often mentioned mutual respect. Asians tended to emphasize inclusion of minorities and respect for elders.

**B. Family**: Family was also frequently mentioned as an important community value, and participants placed a particular emphasis on children. Many talked about providing for their children and being a good role model for them. One participant remarked, *“I think people should value their loved ones, their family. If you don’t love your family, then you don’t love anybody.”* Of the groups, Latinos placed the greatest value on family, especially children, although it was also brought up frequently in Native American and African American groups. Native Americans were the only group that mentioned family cohesiveness while African Americans more often mentioned taking care of their family. Asians were the only group where family did not come up in the written exercises or discussions.

**C. Compassion**: Nearly every group brought up compassion, or a value closely related to it, such as empathy, kindness, or helping others. Participants emphasized providing help to those in need and making an attempt to understand their problems. Several said that it will be impossible to solve any problems in our society without acting compassionately towards others. African Americans placed special emphasis on helping others by caring for the homeless and participating in community service. One participant responded, *“Just because somebody is without doesn’t mean that they can’t have what you have. So give them a little bit of something that you have and help them out.”* Latinos more often mentioned acting *“selflessly”* while Native Americans placed greater emphasis on empathy or putting themselves in others’ shoes. Asians tended to value compassion more in terms of acting kindly and tactfully towards other people.

**D. Honesty**: Honesty and a related value, truthfulness, were frequently mentioned by participants as other important values, especially among the Asian groups. One participant described how a lack of honesty can be harmful to minorities:

* *“We as minorities, a lot of times we tend to trust what we hear or what we are given because why would you not? We probably should not be very gullible, but it really hurts when people are not taking you seriously.”*

Other groups took honesty in a different direction. One African American participant described how it’s easier to tell the truth than to lie, saying *“It’s really hard to tell a lie one day and then remember it next week, because somebody might ask you about that lie, and you have to remember what you said the first time.”* Latinos and Native Americans also mentioned honesty but tended to assign it less importance.

**VALUES FOR COMMUNITY LEADERS:**

Next, we asked participants to list values that elected officials and policy makers should consider when making laws, rules, and regulations. Common themes included becoming informed about the community, having respect and concern for all residents, honesty, and selflessness.

**A. Informed about the community**: Participants stressed that leaders need to become informed about the needs and wants of residents in their community by engaging and listening to them. They said that leaders have a responsibility to use information and data to understand what is going on in the community so they can make good decisions. One participant suggested expanded opportunities for engagement with residents:

* *“They should become more familiar with the communities that their decisions affect…come into the communities and have an open forum where people can come and actually voice what’s going on with them.”*

Another explained that learning about the demographics of the community is necessary to make informed decisions:

* *“Look at the wealth of the community. What kind of people live in the community? Are they rich, middle class, or poor? Nobody needs some big, giant, gray thing, no matter where you are. [Look at] who is really going to benefit. Is it going the benefit the people that live there?”*

However the information is gathered, participants stressed, it must be used in a way so that the decisions made by leaders benefit all types of people.

**B. Respect for all members of the community**: Closely related to becoming informed, many participants said that leaders must show respect for all their constituents, especially minorities and the lower class. They said that the best way to be respectful is to include them in the decision-making process, by listening to a broad spectrum of opinions and actively engaging those with barriers preventing them from participating. Several Asian participants explained that their culture is such that Asian residents are less likely to speak up in public. Leaders have to be cognizant of these values and make an active effort to solicit their input. Many participants expressed frustration at politicians who seem not to care about the people they represent:

* *“Many of our lawmakers believe they’re omnipotent. They can do as they please. The constituent will conform, or else, if you don’t like it, leave. That’s their attitude.”*
* *“Politicians are supposed to care about their community. They’re supposed to want to help them, but when it comes down to it, it is all about them. How do you expect to respect them if they can’t respect you?”*

Participants stressed making sure decisions benefit everyone in the community rather than just a few. One African American participant summed it up as *“Making decisions for the whole community and not who is going to your funding dinner tonight.”* This was a popular sentiment among Latinos and Native Americans as well.

**C. Honesty**: Similar to their responses for general community values, participants said they want their elected officials and policy makers to be honest with their constituents. Many perceived politicians as saying one thing while doing the opposite and desired more honest communication. Typical responses included:

* *“If you’re going to say something, then back it up and do it.”*
* *“If you have to do something that is a detriment to this and that, but is a benefit to this and that, then don’t just tell me the benefits. I want to know why it’s going to be bad and what your reasoning was for having this go about. I don’t need it to be sugarcoated.”*

African Americans and Asians placed the greatest emphasis on honesty, though it came up in several instances during the Latino and Native American discussions as well.

**D. Selflessness**: Participants described a sense of selflessness or altruism that they would like to see in their public officials. They want leaders to act for the good of the community rather than for their own benefit. As one Latino participant put it, leaders should do *“whatever is good for the community as a whole and […] not just something that will get them reelected and keep the money flowing to them.”* To many participants, selflessness involved a certain amount of compassion for all members of the community, no matter their income, race, sex, or age.

3.3 | Equality, Efficiency, Security, & Freedom

We asked participants to write down the first words, images, and thoughts they came up with about four specific values (equality, efficiency, security, and freedom) and how those values related to health and wellness. We then asked each group to discuss several of these values.

**A. Equality**: Equal treatment and equal opportunity were two of the most prominent themes that emerged from the written exercises and group discussions on equality. Participants particularly emphasized the importance of equality regardless of individual characteristics like race, religion, gender, age, and sexual orientation. Across all ethnic groups, a rift emerged between those who interpreted equality as everyone having the same thing and those who interpreted it as everyone having the same opportunities. Many felt that it would be impossible and impractical for everyone to be truly equal, and that treating everyone equally and providing them equal opportunities would be more feasible and more beneficial. One Latino participant remarked,

* *“I might not like somebody next to me. They’re not equal in my eyes to the person I’m dating, the person who’s my best friend, or the person who’s in my band. There’s no equality, but that doesn’t mean that you get to mistreat them. So, fairness is being fair to everyone. If I have to deal with this person I don’t like, I’m fair in that I do the job that we’re supposed to do.”*

Several participants mentioned a lack of equality in today’s society, while others were more optimistic than others that society is progressing towards equality. In general, answers were consistent across all ethnic groups.

When it came to equality in relation to health and wellness, participants were quick to say that the current system of health is very unequal. Many Latinos and African Americans expressed frustration that the wealthy have access to much better healthcare than the poor do. As one African American participant wrote, *“If you have money, you get what you need. If you don’t, hope you can heal yourself.”* Equality would mean equal access to healthcare, many said, without having to worry about the limits of a particular plan. It would mean having the choice to get care or not, without individual differences getting in the way. However, there were also several dissenting voices in the discussion who argued that health will never be equal and neither should it be equal. One Latino participant wrote, *“Ideally equality is for everyone but in reality not everyone is equal,”* continuing that some people, like *“hobos, drunks, crazies, etc.”* don’t deserve equal treatment.

**B. Efficiency**: Speed and time were common themes in the efficiency discussions, and participants frequently talked about getting things done quickly so as to not waste time and work. Typical responses included:

* *“Ability to do something fastest and in the best way.”*
* *“Tasks done in a timely fashion [with] little waste.”*

Other participants brought up not wasting other resources like money, energy, water, and materials, and having the proper skills and resources to perform tasks. Several mentioned machines in their answers, like one participant who talked about machines outperforming people at their jobs.

With regards to health and wellness, all groups were quick to mention a lack of efficiency in healthcare. Many participants said that people do not have access to services due to money and issues with insurance. Others described how better health can lead to greater efficiency and, conversely, how greater efficiency can lead to better health. One participant wrote, *“If you do something efficiently, you have more time to do what you want, which leads to [better] health and wellness.”* Interestingly, multiple participants in the Latino groups mentioned *“pediatrics”* during the efficiency discussion, saying that they have never had a problem with the health of their children.

**C. Security**: Two types of answers were prevalent in the security discussions: a sense of physical security for oneself, one’s families, and one’s community; and a sense of mental security, or peace of mind, about having an income, a job, a place to live, etc.

Those in the first camp talked about feeling safe from crime and violence in their homes and their neighborhoods, providing answers such as:

* *“I don’t have to worry about being robbed.”*
* *“Being safe to walk down the street at night.”*

Participants in the second camp described security as not having to worry about if they’ll have enough money, if they’ll have a house to live in, or other things that create stress about the future. As one participant put it, *“If you’re not stable financially, or with housing, you’re not going to feel secure.”* Several other participants brought up protection—of themselves, their family, and their property—and a few mentioned the Second Amendment and gun rights.

When asked about security in relation to health and wellness, many talked about the ability to get healthcare or other kinds of treatment when they need it. One participant explained, *“Security [is] if I need to take care of anything medical or any health issues I have…I know I can go to the hospital and not get turned away.”* Affordability was frequently mentioned as a barrier to getting healthcare, and several participants expressed frustration about having to check their insurance or their deductibles before going to get treatment. Another common theme was the link between greater security and better health. As one participant explained, *“If you’re not feeling secure or stable, it affects you mentally and emotionally, and that can cause your health to deteriorate.”* Security allows people to maintain better mental health, participants said, and gives them more time to devote to their health and wellness.

**D. Freedom**: By far, freedom invoked the lengthiest and most contentious responses among participants. Most agreed that freedom refers to the ability of a person to make their own choices and decisions in life, from what they do for work to what they eat to where they live. Frequent written responses included *“being able to do what you want”* and *“the ability to act in your own interest.”* Others mentioned individual liberties and rights like freedom of speech, freedom of the press, and freedom of religion. Most participants also agreed that freedom must have some sort of limit. For example, one explained,

* *“[People should be able to] act in [their] own interest without any sort of external limitation. Of course, that depends…I don’t think everyone should just be doing everything they want to, if it hurts others.”*

Where the agreement ended was to what extent freedom should be limited. Some participants, especially among the African American groups, argued that people should have broad freedom to do whatever they want, without restraint, as long as it falls within the confines of the law. Others, including many in the Asian groups, placed greater emphasis on understanding one’s independence and controlling freedom so as to respect others’ rights to safety and health. Many Native Americans expressed their frustration that freedom doesn’t actually exist in society. One remarked,

* *“Freedom is rhetoric…You have a privileged class of people that have pretty much the freedom to do whatever they want to, and then you have the vast majority of everybody else who has economic reasons, racial reasons, gender reasons, sexual orientation reasons why [they] can’t have that.”*

The contentious discussion carried into health and wellness. The freedom to make individual choices about health, such as how to eat, whether to smoke, and whether to get insurance, was the most common theme voiced by participants, although the extent of those freedoms was the subject of significant debate. Some argued that people should be able to do whatever they want with their own health, that they should be able eat whatever they want, use certain drugs if they want, and make other similar kinds of decisions. Others were adamant that they can only do what they want as long as it doesn’t affect other people. In response to a question about smoking, one participant explained,

* *“I know that I have a right to smoke. There are lots of places where I can smoke. But if I see that there are other people around that shouldn’t be inhaling my smoke because that’s not their choice, I would choose to be respectful of that.”*

Also contentious was the question of who gets to make decisions about their own health. While many agreed that adults should be able to make their own choices, the discussion about freedom for minors and the mentally ill was less conclusive.

3.4 | Perceptions of Tobacco Use

After discussing values, we turned the conversation to tobacco related issues, including rates of use among different communities, perceptions of the tobacco industry, and reviewed advertisements and messaging employed by OHA. To begin the tobacco discussions, we first asked each of the groups to estimate the percentage of Oregonians who smoke tobacco, and then the percentage of those in their racial or ethnic group who smoke.

**Table 1**

**Tobacco Use Estimates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Groups** | **All Oregon Estimate** | **Ethnic/Racial Group Estimate** | **Difference** |
| Latino | 58% | 37% | -19 |
| African American | 51% | 49% | -2 |
| Asian | 36% | 28% | -8 |
| Native American | 38% | 50% | +12 |
| ***Total*** | ***47%*** | ***41%*** | ***-6*** |

Across all groups, the participants estimated that 47% of all Oregonians smoke tobacco. The true percentage of Oregonian smokers is 18%. That these participants overestimated the state’s smoking rate by nearly 30 percentage-points is consistent with past research, which indicates that people tend to believe that smoking is more common than it is in reality.

Before revealing the actual Oregon smoking rate, we spent time asking the participants what they thought about their estimates. What did it mean to them that on average they thought between 36-58% of their fellow Oregonians smoked? Reactions varied, but one of the most frequent reactions was resignation and deferring to people’s individual choice. Some examples of their reactions include:

* *“It’s a cycle. It’s going to be passed down from generation to generation…People have been smoking forever.”*
* *“They put enough warnings on the stuff. People should know. They’ve been a lot to tell people that cigarettes are bad.”*
* *“It’s freedom of choice, to me. If you want to smoke, you should be able to smoke.”*
* *“It’s their choice if they’re going to smoke or not. You can’t go up and them no. You can’t take their cigarettes away from them.”*
* *“I think we’ve done a reasonable amount about it [informing the public about tobacco risks]. There’s not really much further to go…People should be allowed to, if they would like to smoke, choose their option.”*
* *“Well if you stepped in, you’d be taking that person’s rights away, and you should do that. That’s your thin line.”*

On the other hand, very few participants felt that existing tobacco controls are too restrictive or that they did not work, and there was little support for rolling back current restrictions, even among the smokers in the groups.

When we revealed Oregon’s true smoking rate, the participants were taken aback that their estimates were so much higher. They explained that because smoking is highly visible and a frequent social behavior, that they are more likely to recall people smoking. They described seeing groups of people smoking outside of buildings and at bus stops with their family and friends. All of these experiences led them to believe that tobacco use is more common than it actually is.

Each group estimated the smoking rates for their respective racial or ethnic group. Their estimates ranged from 28% (Asian) to 50% (Native American). Native Americans were the only group to estimate that they had higher smoking rates than the total Oregon population.

When the actual percentage for each group was revealed to each of the groups, the reactions varied depending on whether their community’s smoking rates were higher or lower than Oregon’s average.

**Latino:**

Although the Latino groups overestimated the overall and Latino population smoking rates, they were correct in estimating that as a community their smoking rates tend to be lower. Asked why their rates were lower, several mentioned *“cultural”* differences, a preference for *“healthier”* living, and family expectations. Typical comments were:

* *“I think that it acts like reverse peer pressure. If you do smoke, you don’t want to admit it.”*
* *“I feel like Latinos and Mexicans have a healthier lifestyle. Down in Mexico, you really don’t see fast food.”*
* *“I think it is more accepted in America. Hispanics won’t disrespect your mom by smoking in front of her or any family members.”*

It should be noted that at least a couple of the participants suggested that tobacco use is less among Latinos because they are more likely to drink alcohol or smoke marijuana instead.

**African American**

The African American participants were surprised (and some questioned) to learn that their smoking rates were higher than Oregon as a whole. Asked why this might be, the most frequent explanation was economic stress. For example, a participant explained:

* *“You have to look at the population of the income status too because a lot of African Americans in the city of Portland metropolitan area are below income. [That] causes a lot of stress in the communities they live in, so they smoke because they’re nervous or on edge. That relieves them sometimes. They pick up the cigarette so they don’t have to deal with the rest of the bullshit.”*

There was a lot of agreement and nodding of the heads around the table in reaction to this comment. It lead to another participant sharing that he has two jobs, one with predominately middle-income colleagues and one with low-income colleagues. He said that none his more affluent co-workers smoke, but a majority of his low-income co-workers do. From his perspective, then, higher smoking rates among African Americans are more related to income (and education, class, etc.) than race.

Some African American participants also said that smoking rates are higher because smoking is more accepted in the community, which decreases the stigma and even makes it culturally appealing. Several commented that their parents and relatives smoked at home when they were growing up, and others mentioned that they started smoking when they were minors to feel more like adults in their community.

We read the following statement about tobacco advertising to one of the African American groups and asked for their reactions:

* “Starting in the 1970’s, big tobacco latched onto the African American community’s preference for menthol cigarettes and successfully linked it most notably to the Kool Brand. It amplified the effect in black magazines and neighborhoods with tailored ads that made smoking menthol seem integral to the black experience. More than 70% of African-American smokers prefer menthol compared to 30% of white smokers.”

While some reacted to this statement with laughs of knowing acknowledgment, overall their reactions were mooted. Moreover, few seemed to react negatively or with a sense that the tobacco industry was “targeting” African Americans with their advertising. To the contrary, most thought that the tobacco industry was acting like a typical business and tailoring their products and messages to meet consumer demand. Common reactions to the statement were:

* *“They’re making a cigarette. I don’t think they look at us and say ‘Okay, we just want to sell to black people.’”*
* *“That’s what advertising is.”*
* *“I think they’re seeing what a majority is doing, then they they’re going by that. They’re seeing black people, ‘Oh, they like the Newports. They like the Kools. Okay, then we’ll tailor to that.’”*

**Asians**

The Asian community has one of lowest smoking rates in Oregon as well as nationally. Like the other groups, they overestimated their rates, but they were correct in that Asians use tobacco less than other Oregonians. When informed that smoking rates among Asians in Oregon are as low as 3%, they were quite surprised. Typical reactions were:

* *“Hey, look at that!”*
* *“Wow.”*
* *“I’m actually shocked by that, which is good actually. It’s a good shock.”*

**Native Americans**

Native Americans also overestimated their use of tobacco and the rates of Oregonians. However, they were aware that Native Americans tend to use tobacco more than others. When we shared with them the tobacco rate in all of Oregon is 18% but for Native Americans it is 38%, a typical reaction was, *“That sounds about right.”*

When asked why smoking rates are higher among Native Americans, common explanations were traditional practices and heritage, boredom, and usage as a social outlet.

The participants shared the importance of tobacco to their community, calling it “*sacred.”* There was a noticeable tension when talking about tobacco use among Native Americans because, on one hand, smoking is part of their traditional ceremonies, and tobacco has an honored place in their community. On the other hand, several also made a clear distinction between *“pure”* tobacco and the *“corrupted”* product that is now sold by the major cigarette manufactures.

For at least one participant, the cultural connection to tobacco wasn’t limited to traditional ceremonies or to Natives Americans on reservations. It is also a way that some urban Natives try to stay connected to their broader community.

* *“I grew up in an urban Indian family, and we were fairly detached from our real Arapaho ancestors. As a kid, when I was picking up my smoking from my grandmother, I associated the practice of smoking a cigarette with that traditional practice. Even though it wasn’t given to me that way, it was never presented as such. And I don’t think I am alone in that. I know that from my own personal experience that I feel like I am probably going to smoke until the day I die just because it is something I got from my grandmother, and that is my Indian connection.”*

Some Native American participants said that lack of opportunity, and the boredom that can come from that, is a reason that smoking is more common in their community.

* *“Because they are poor. They live on the reservation, and they have no hope. Like I said, it was the only pleasure available to them. Drugs, alcohol and cigarettes. That is about it.”*
* *“I think when you’re poor you have few choices, and a cheap pack of cigarettes can last you a weekend worth of fun if you don’t have money to do anything else…You have one paycheck, and you spend it all on bills, and you got this much left over. It’s a cheap, simple, fun thing to do.”*

The conversation about tobacco use among Native Americans transitioned into a discussion about what, if anything, should be done about it, and who should be responsible. Consistently and forcefully, the participants said that any action taken should be initiated and lead by Natives in the individual tribes. They did not believe that the state or federal government were credible messengers when it came to health in the Native community, and they raised fears that outsiders would (once again) try to take away their traditional practices.

* *“I think you really have to have respect for sovereignty in Indian culture. You really have to respect that, even if is negative, people have engrained things that they do, and you can’t oppose it.”*
* *“I think that sovereignty is heritage, of course. That is a huge thing.”*
* *“My folks’ res is a lot different than some of the others, and I think this is why it is super important that each of the tribes should deal with it separately, as they’re supposed to.”*

3.5 | Attitudes Towards the Tobacco Industry and Tobacco Advertising

To further explore the participants’ perceptions of tobacco, we presented them with six statements about the tobacco industry and tobacco users. For each, they indicated if they agree or disagreed.

**Table 2**

**Reactions to Statements about the Tobacco Industry and Users**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TOTAL**  | **Strongly Agree** | **Smwt****Agree** | **Total****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Total****Disagree** | **Don’t know** | **NA** |
| The tobacco companies are like any other business. They are selling a legal product to willing customers. | 19 | 16 | **35** | 9 | 11 | **20** | 0 | 1 |
| Tobacco companies are no more honest or dishonest than other businesses. | 9 | 19 | **28** | 8 | 16 | **24** | 4 | 0 |
| Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same. | 26 | 15 | **41** | 7 | 8 | **15** | 0 | 0 |
| Tobacco companies are run by rich, white men, and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions. | 12 | 17 | **29** | 6 | 12 | **18** | 9 | 0 |
| Everyone knows the risks of smoking. | 22 | 20 | **42** | 2 | 10 | **12** | 2 | 0 |
| Tobacco companies have a history of lying and it is proper that government limits where and how they advertise. | 24 | 17 | **41** | 4 | 2 | **6** | 8 | 0 |

Among all the participants, the greatest agreement occurred in the following statements:

* **Everyone knows the risks of smoking.**
* **Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same.**

There was significant agreement that the public understands the risks of smoking. When discussing this statement, participants often mentioned the warning labels on packs of cigarettes, the anti-tobacco advertising, and education in schools. As has been shown in other research, education and warnings about the risks of smoking have played a significant role in encouraging smokers to quit and preventing others from starting. However, at the same time, it has also resulted in many people concluding that as long as people are informed about the risks of smoking, nothing more should be done to prevent it. So long as people are informed, they should be free to make their own health choices.

Concerning the disagreement to the statement that “everyone” knows the risks of smoking, several participants said that children don’t know the risks or are unable to appreciate them. We heard frequently throughout the groups that minors are impressionable, that their brains are still developing, and that they are incapable of understanding the long-term consequences of their actions. For these reasons, there was consistent agreement that children can and should be protected from smoking and tobacco advertising.

Another consistent theme in the groups was a disbelief that tobacco companies “target” low income and minority populations. They agreed that tobacco companies develop products and messages that appeal to some people and communities more than others, but also that they are no different in that respect than any other business. If there is a connection between advertising and varying preferences among racial and ethnic groups, participants were more likely to think that the tobacco companies are following the behaviors of the market rather than *creating* a market.

Across the groups, the participants’ initial reactions when discussing tobacco advertising were that advertising doesn’t have an effect on them. DHM Research has observed this assumption in numerous other research projects as well. Typical people think of themselves as rational beings who are immune from the emotional pulls of advertising. Even the smokers in these groups were reluctant to say that advertising had any impact on either their decision to start smoking or on their brand preferences. In this regard, OHA should be careful about developing or using messaging that implies that smokers are being manipulated or duped by tobacco companies.

When the discussion turned to tobacco use and minors, we asked the participants for reasons why minors start smoking. Common answers were to *“look cool,”* peer pressure from friends, to act older, and having smoking passed down from parents or other family members. Rarely mentioned, however, was tobacco advertising targeted at children. To test whether information about how the tobacco industry targets minors would convince them of the power of tobacco advertising, we presented the participants with the following statistics:

* The tobacco industry spends $1 million per hour on advertising
* 96% of tobacco advertising is in retail spaces, such as convenience stores
* Many place advertising near candy and tobacco in flavors, such as bubblegum, grape, and Cap’n Crunch
* 70% of teenagers visit a convenience store at least once a week
* 90% of smokers start before they are 18 years old

These facts were surprising and persuasive to many participants. They seemed particularly impressed by the $1 million per hour figure and the flavoring appealing to children. This had the effect of reframing how the participants thought about tobacco advertising and its impact. Perhaps because tobacco advertising is so commonplace in retail spaces, people stop looking for it and, therefore, stop thinking about it. These statistics forced the participants to reconsider tobacco advertising and its effect on children. Their reactions included:

* *“Kids have to be protected. It’s how they advertise and where they advertise…that is playing a part in attracting younger children to smoking cigarettes.”*
* *“I think it’s really sick they do Cap’n Crunch flavor and that they target children.*
* *“That’s actually very evil.”*

While we did not quantify it, many participants’ comments suggested that they would be more open now to restrictions on tobacco advertising in retail spaces, from limiting the placement of advertisements to behind the counter to banning advertisements completely.

3.6 | OHA Advertisements and Messaging

During the last portion of the focus groups, we showed participants anti-smoking advertisements that OHA has run in the last year. We also showed the groups short videos titled “Oregon Heroes” that are being developed for a future OHA website. The “Oregon Hero” videos were personal testimonials from store owners who had opted not to sell tobacco and from students who promote health education in their school.

**Ad 1: “Hallway”**

“Hallway” features a mom and daughter in a hospital. The mother is ill from her tobacco use, and the narration describes the health care costs to all Oregonians due to tobacco use.

The imagery in this ad evoked a strong emotional response. Several participants said that the ad made them sad and even made them want to cry. Some of the participants who smoked said that it made them think of the experiences of their own parents and children. Perhaps because the visuals were so powerful, not all the participants picked up on the messages about the financial cost that smoking has on the state as a whole. When asked, more participants said that the ad is targeted towards smokers (and specifically smokers with children) than the general public.

The characters in the Hallway are both white. Despite this, participants tended to agree that it was interesting and relevant to all racial and ethnic groups.

**Ad 2: “Throw Away”**

“Throw Away” shows a cigarette butt traveling through a stormwater drain to a beach, and the narration describes the impacts of toxic chemicals that leech out into the environment.

Reactions to this ad were mostly positive. A participant with a typical reaction said:

* *“I think it has a good message, but it is a little bit harder to appreciate. It has a little bit broader audience [compared to “Hallway”]. It is about people who live in Oregon. We all know we have an environment that we love, and I think it is trying to advocate for all us to start telling people, ‘Don’t do it because it is toxic.’ I think they try to empower us to say, ‘It’s your environment. Help keep it clean.’”*

There are two possible downsides to this ad that are worth pointing out. One is that the message some participants took from the ad was that cigarette filters are toxic, therefore smokers should choose filter-less cigarettes. Second, some participants interpreted this more as an anti-littering ad than an anti-tobacco ad, and they felt that its main purpose was to encourage smokers to dispose of their cigarette butts properly.

While infrequent, a few participants commented that “Throw Away” was not relevant to their racial or ethnic community. For example, one Latino participant said,

* *“I think it was targeted towards hikers, and who are the people who hike the most? White people and hippies. So I think if they want to target Hispanics, maybe they can do some Hispanics in construction…Something like that. Make it more specific to things people like to do.*

**Video 1: “Mercado”**

The “Mercado” video was a testimonial of a Latino grocery store owner who had decided not to sell tobacco products. We showed this video to the Latino groups only.

Participant reactions were positive. They like that it was a *“real person,”* and described it as *“conversational,” “believable,” “sincere,”* and *“not preachy.”* Most also felt that the store owner was *“looking out for the community,”* particularly children. One participant described the store owner’s message as *“This place is for all. This is my value. And I worry about these people.”*

**Video 2: “George”**

The “George” video was also a testimonial of a pharmacy owner who stopped selling tobacco products after the 1964 Surgeon General’s report.

Reactions to this video were overwhelmingly positive. The participants described it as *“inspiring,” “great,” “good for him,” “impressive,” “honest,”* *“brave,”* and *“go George!”* While they watched the video, the participants were immersed in his story and captured by the way he told it. They found him credible and persuasive. Of all the ads and videos we presented to the participants, there were more consistently positive comments about “George” than any of the others.

**Video 3: “Health Media Club”**

“Health Media Club” was a video depicting several middle school-age girls who have researched how tobacco is marketed and advertised.

Reactions to this video were more varied than either “Mercado” or “George.” Those who liked the video commented that they were impressed that young people take an interest in their community and health. As one person said,

* *“I love that kids are taking it upon themselves to promote education of health issues in their community. They see things first hand and are trying to make a difference.”*

Hearing directly from students impressed upon some of the participants the way that children are targeted by the tobacco industry.

* *“I like any positive action on young people’s part to combat addiction and media manipulation. I have seen for myself once you’re informed you start seeing truth everywhere.”*

Some participants noticed and commented that girls in the “Health Media Club” are all white. While most found them *“charming and effective”* others didn’t find them relatable. *“Poor choice of messenger for my demographic [Native American]. I don’t relate to white girls.”*

Finally, in addition to tobacco advertising, the girls in the video also discussed e-cigarette advertising. We know from past research that the general public is confused by e-cigarettes, and that many people consider them smoking cessation aids. We heard this confusion in these focus groups as well, with several of the smokers sharing that they are using e-cigarettes to wean themselves off of nicotine. One participant took offense to the girls talking about e-cigarettes and said, *“E-cigarettes are harmful? A band of kids don’t know enough about life to tell me what’s wrong with e-cigarettes.”* However, when asked directly, nearly all participants agreed that e-cigarettes should not be sold to minors.

**Oregon Health Authority**

**FOCUS GROUP RESEARCH**

**APPENDIX A: Demographics**

|  |
| --- |
| **OCCUPATION**  |
| **Latino Session A** | **Latino Session B** | **African American Session A** | **African American Session B** |
| Line cook / chef | Home maker/ stay at home mom | Auto Mechanic | Retail store |
| Heavy EOL operator | Construction, concrete | Bar bouncer | Stay at home mother/ home maker |
| Central city concern / housewife | Cashier | Bakery | Door to door salesman |
| Working non-profit | Engineering, technician | House maker/manager | Behavior ed. assistant/ resident youth counselor |
| Bilingual investigative analyst  | Full-time student, volunteer at radio station | Disabled | Production worker/ before stroke |
| Property management, concierge | Photography assistant at auto center | NA | Sandblaster |
| Cook/ self-employed |  | Home manager/jewelry maker |  |
| Warehouseman |  | Home maker |  |
| Student |  |  |  |
| **Asian Session A** | **Asian Session B** | **Native American Session A** | **Native American Session B** |
| 7-Eleven cashier | Urban designer/ teacher | Student  | Unemployed |
| Business distributor, family child care business | Full time student | Host at Olive Garden | In-between  |
| Barista | Manager at coffee shop | General laborer | NA |
| Services Supervisor  | Education | Temporary disability/ Radiographer for airplane parts | Grant writer and communications coordinator.  |
| Child care provider | Manager at produce warehouse | Sales | Nanny |
| Supervisor at recycling plant |  | Cashier |  |
| Housewife, painter |  | Cosmetology |  |
|  |  | Home maker |  |

|  |
| --- |
| **EDUCATION LEVEL** |
|  | **Latino Session A** | **Latino Session B** | **African American Session A** | **African American Session B** |
| Less than HS grad |  |  | 2 | 2 |
| HS grad | 2 | 2 | 1 | 1 |
| Some college/2 year degree | 5 | 3 | 4 | 3 |
| College degree/4 year degree | 2 | 1 | 1 |  |
| Post college |  |  |  |  |
|  | **Asian Session A** | **Asian Session B** | **Native American Session A** | **Native American Session B** |
| Less than HS grad |  |  | 1 |  |
| HS grad | 1 |  | 1 |  |
| Some college/2 year degree | 4 |  | 4 | 2 |
| College degree/4 year degree | 2 |  | 2 | 2 |
| Post college |  | 4 |  | 1 |

|  |
| --- |
| **HOUSEHOLD INCOME** |
|  | **Latino Session A** | **Latino Session B** | **African American Session A** | **African American Session B** |
| Under $15,000 | 2 |  | 4 | 2 |
| $15,000-$29,999 | 3 | 2 | 1 | 2 |
| $30,000-$49,999 | 3 | 2 | 2 | 2 |
| $50,000-$74,999 | 1 | 2 | 1 |  |
| $75,000-$99,999 |  |  |  |  |
| $100,000 + |  |  |  |  |
|  | **Asian Session A** | **Asian Session B** | **Native American Session A** | **Native American Session B** |
| Under $15,000 | 2 |  | 3 | 1 |
| $15,000-$29,999 | 4 | 1 | 2 | 2 |
| $30,000-$49,999 | 1 | 2 | 3 | 1 |
| $50,000-$74,999 |  | 1 |  |  |
| $75,000-$99,999 |  | 1 |  | 1 |
| $100,000 + |  |  |  |  |

|  |
| --- |
| **AGE** |
|  | **Latino Session A** | **Latino Session B** | **African American Session A** | **African American Session B** |
| 18-24 | 1 | 2 |  | 2 |
| 25-34 | 3 | 3 | 4 | 2 |
| 35-44 | 2 | 1 | 1 | 1 |
| 45-54 | 3 |  | 4 | 1 |
| 55-64 |  |  |  |  |
| 65-74 |  |  |  |  |
| 75+ |  |  |  |  |
|  | **Asian Session A** | **Asian Session B** | **Native American Session A** | **Native American Session B** |
| 18-24 | 1 | 1 | 1 |  |
| 25-34 | 3 | 1 | 1 | 2 |
| 35-44 | 1 | 2 | 2 | 2 |
| 45-54 | 2 | 1 | 2 |  |
| 55-64 |  |  | 1 |  |
| 65-74 |  |  |  |  |
| 75+ |  |  |  |  |

|  |
| --- |
| **GENDER** |
|  | **Latino A** | **Latino B** | **African-American A** | **African American B** | **Asian A** | **Asian B** | **Native American A** | **Native American B** |
| Male | 6 | 4 | 4 | 3 | 1 | 2 | 3 | 3 |
| Female | 3 | 2 | 4 | 3 | 6 | 3 | 5 | 2 |

|  |
| --- |
| **RACE/ETHNIC GROUP** |
|  | **Latino A** | **Latino B** | **African-American A** | **African American B** | **Asian A** | **Asian B** | **Native American A** | **Native American B** |
| White/Caucasian |  |  |  |  |  |  |  |  |
| Black/African American |  |  | 8 | 6 |  |  |  |  |
| Spanish/Hispanic | 9 | 6 |  |  |  |  |  |  |
| Asian/Pacific Islander |  |  |  |  | 5 | 5 |  |  |
| Native American |  |  |  |  |  |  | 8 | 5 |

|  |
| --- |
| **PARTY AFFILIATION** |
|  | **Latino A** | **Latino B** | **African-American A** | **African American B** | **Asian A** | **Asian B** | **Native American A** | **Native American B** |
| Democrat | 3 | 4 | 4 | 5 | 3 | 2 | 4 | 3 |
| Republican | 1 |  |  |  |  |  |  |  |
| Independent |  | 1 | 1 |  | 1 | 1 | 1 |  |
| Other | 1 |  | 1 |  |  |  | 1 | 2 |
| Not Registered | 4 | 1 | 2 | 1 | 3 | 2 | 2 |  |

|  |
| --- |
| **DO YOU SMOKE?** |
|  | **Latino A** | **Latino B** | **African-American A** | **African American B** | **Asian A** | **Asian B** | **Native American A** | **Native American B** |
| Yes | 2 | 2 | 6 | 3 | 2 |  | 1 | 2 |
| No | 7 | 4 | 2 | 3 | 5 | 5 | 7 | 3 |
| NR |  |  |  |  |  |  |  |  |

|  |
| --- |
| **IF SMOKE, HOW MUCH DO YOU SMOKE EVERY DAY?** |
|  | **Latino A** | **Latino B** | **African-American A** | **African American B** | **Asian A** | **Asian B** | **Native American A** | **Native American B** |
| Less than a pack a day | 2 | 2 | 3 | 2 | 2 |  | 1 | 2 |
| About a pack a day |  |  | 3 | 1 |  |  |  |  |
| More than a pack a day |  |  |  |  |  |  |  |  |
| NR/Don’t smoke | 7 | 4 | 2 | 3 | 5 | 5 | 7 | 3 |

**APPENDIX B: WE 1**

**Make a list of the most important issues in Oregon that you would like your state government to do something about. Place a \* by the most important issue.//Why is that the most important issue and what would you like done about it?**

**Latino Session A**

* Better drinking water management, \*scrap the fluoride idea, use the Wapato facility.//I think the city should listen to the people in it and understand we don’t want that poison in our water.
* Tax breaks to company, \*People back to school, better training, more funds in school.// NA.
* \*Help the people here like the homeless, low income, eat, medical, fix the road. People need help but not so much help.//I feel like everyone should have a chance in life.
* Support to small business (access to capital), \*immigration reform, a lot of people working during their life but scared about being deported; licenses, jobs.//NA.
* Garbage location back to weekly, free childcare for low-income households.//NA.
* Angry drivers (road rage), \*unemployment/end benefits for fat/costly people, raise taxes on the bottom feeders that don’t pay a dime but use up all the benefits.//In addition to my work at Cascade I have a small company and I pay a lot of taxes and I dislike even a % going towards lazy people.
* \*More financial resources, attention to poor communities, gentrification, low income housing, budget oversight (where is money going).//NA.
* Marijuana, drug reform.//Mostly because jail costs money.
* \*Become more involved in helping people who really need help.//Because there are people who get help and don’t really need it and those who need help at the same time don’t.

**Latino Session B**

* \*Label GMO foods, regular cleaning crews for parks, maybe turn it into a school program.//My son will be able to eat solid foods soon. Since I will be preparing his baby foods at home, I want the best quality fruits and vegetables I can get for him.
* Horrible roads, \*bicyclists want to ride in the road and act like they own road, pay to license bicycle, pay like I do, 18+.//It is important to me because it seems like they have more rights than I do. They ride in front of me all the time, can’t keep up. They have a bike lane, they need to license and pay for their lane and rights.
* Homeless, food programs for hungry, \*education.//Education is most important because potentially can help with my first two concerns. Taxes to help support schools but on the other hand high dropout rates, decreasing programs, early childhood getting recognition it deserves.
* \*Education, community outreach, marijuana laws/drug laws, prison system, jobs/wages.//Logically, you inspire someone to better themselves, through some form of betterment with knowledge, and you’ll have a richer community, city, and state. Teach people things that they are passionate about, and they’ll find purpose and riches.
* More comprehensive public awareness program around our amazing recycling program, \*gentrifying previously poor neighborhoods, more support for women’s resources.//This is a very complicated issue that affects the marketed, urban reputation of Portland and displaces previously established communities. I think Portland is almost as progressive and awesome as popularly mentioned.
* \*Money on education, more money toward recreations, more construction on roads.//It is important to me because education is our future and it is important to have a good education. Because we’ve been having budget cuts in high school more and more.
* Fix pot holes and roads, \*higher wages, better schools.//Higher wages is most important because everything is so expensive and I hope they raise the minimum wage.

**African American Session A**

* \*Work programs, housing, homelessness, gangs//People need to be able to work. It builds confidence and self-esteem. It would also help with the homeless as well as the community. Start job programs to train people on some of the city contracts.
* \*Fix all the streets, make streets safer (so people crossing don’t get hit), clean the streets up, make new homeless shelters, so people are not on the street.//I go through a lot of tires.
* \*Affordable housing, training police how to deal with people with disabilities.//It’s important because people deserve fair housing.
* \*More money for education, more jobs for those who can’t afford school, too much $ to TriMet.//Children are our future and they need to be prepared to run things when we can’t. Teach them morals and how to be productive citizens. I think they (people who can’t afford school) are being edged out by the educated. Offer incentives for businesses to higher lower educated people to give them a chance to survive.
* \*Schools, low income housing in N and NE Portland, more development on some of the empty properties.//It’s important to me because all kids need to focus on their education. I believe that some of the schools that have been closed shouldn’t have been. People should spend more money on our children.
* Homelessness, \*funding for free summer programs for the kids, fixing the streets ASAP.//Homeless: This is a very rich state. The money is spent on crazy stuff. But yet people are still sleeping outside.
* Unemployment, \*education reform, creation of jobs, immigration.//Education needs to be reformed because class sizes are too large, subjects of study such as math need to be taught, not exposed. We need to properly educate our children.
* \*Employment, housing, health care, taxes, \*education, gas prices.//There needs to be improvement in the public school system in NE Portland. Our children are falling behind and no one seems to care. Many schools are closing and nothing is being done to change it. The “good” schools have waiting lists and restrictions.

**African American Session B**

* \*Let kids get into programs to help even if they don’t consent.//It is important because I had an out of control child (minor) and no programs would help me if he didn’t want to be in the program. I suggest that the programs allow them in if the parents say it’s ok.
* Schools.//The school issue is most important to me because my kids are in school. The school system is unorganized, no money for anything, overpopulated classes. The teachers are rude. My kids seem like they have to teach themselves.
* Fix the roads.//Because some of the roads are uneven for skateboarding.
* \*School funding, working poor programs, legal weed, gay marriage.// We need to go to a longer funding model and look at new ways to keep a rainy day fund for times like we just went through. Legalizing and taxing weed is a good example!
* Public transportation, \*Portland police, road kill pick-up.//Portland police- I feel they need better communicating skills. Public transportation- needs people with better people skills.
* \*Homeless people, shelters, gangs, jobs.//Open up more shelters and feed them to get them back on their feet.
* \*Education, more facilities like Sabin/Schellenberg Center, road improvement, police.//It gives a better look at what jobs and choices are available to students.

**Asian Session A**

* \*Schooling, job opportunities, roads (local).//I picked schooling because I live in a small town and when I went to school there wasn’t enough books, they were getting rid of teachers due to payment, large classes.
* Convenience. \*safe and healthy.//We need family and children safe and out of violence.
* \*Tobacco free zone.//Often times I find people smoke right in front of the building. I always found this distracting because there are non-smokers out there who do not want to be second hand smoke victims.
* Traffic, schools/education, \*mental health services/health coverage, housing (affordable), safety.//Most of my issues/concerns are impacted by mental health care, i.e. can’t start a job without property or a house, or maybe stay safe, go to school, etc.
* Gay marriage, pot (decriminalizing), homeless/housing, \*gentrification, unemployment, minimum wage.//My neighborhood is being gentrified. My house was sold a month ago and we have to October to fund new housing. This has happened to 3 other households I know and none of us can afford to rent in the area now.
* \*Arts and music for schools, homeless.//The starred subject is important to me because all kids should have a chance to at least attempt to be artistically or musically taught.
* Incompetency in government, \*dishonesty in government, mental health facility closures, prison system as largest employer.//Pretty much covers all of what I think of as major problems in government.

**Asian Session B**

* \*Education, employment, economy, environment, trade, equality.//Education is the basis of building the foundation of a strong and competitive community. Brings out culture, art, heritage, equality and appreciation with a broad perspective.
* High quality public education, reasonable housing, healthcare.//Because it gives you the key to explore the world, help you to become the best person you can be. Successful learning for everybody.
* Water system, cost, taxes.//In my observation of past years living in Oregon, our state has poorly managed water distribution system to our community. Old water system, too high cost.
* \*Equity and inclusion, recycling, transportation alternative, green energy, dual language immersion, quality education (particularly pre-k).//With increase in minority population growth- creating policy and practices that include minorities and people of color and special needs is critical for a just and vibrant society.
* \*Roads, transportation.//Driving conditions on the roads are pretty bad and it would be nice if they can just fix up these roads just a little bit more.

**Native American A**

* \*More public school funding.//Just coming out of the public school system, I see very scarce resources and not enough money for them.
* \*Education, medical marijuana/legalization, environment.//I believe that it should be easier for students to attend college and graduate without an overwhelming amount of debt.
* \*Drug trafficking, future generations, forest restoration.//NA.
* Homelessness, schools less standardized/more experimental, protect-rebuild green areas, clean the water, \*protect wildlife and habitat.//I believe all life is sacred. I feel much more comfortable with animals and protecting them protects us.
* Jobs, \*economy, infrastructure/road repair, affordable housing and energy, uphold the Constitution and Bill of Rights.//Reduce onerous government regulation and taxes. Provide a business friendly environment.
* Homelessness, \*minimum wage raised, rental help for bad credit.//Raising minimum wage would help working class be able to pay rent and bills. Not decide which one is more important. Tired of facing homelessness if I pay the bill instead of rent.
* \*Schools, taxes.//Why don’t we have music classes and art classes etc. in the schools for the kids. Most important.
* More work on the roads, \*better schooling, taxes.//Too many students in classes, not very many activities.

**Native American B**

* Unemployment issues, \*lower taxes to attract business, legal marijuana.//If taxes were lowered, this would attract companies to Portland. More companies equal more jobs.
* \*Crack down more on crime and gangs, less on murals and focus more on productive projects…, less building.//Tired of being afraid just to walk around in my neighborhood with my sister and my boys.
* Low housing, \*2nd chance homebuyers, clean water, safety.//I lost my home after graduating college. “Refinance.” Depression set in. Job market not good around age 40.
* \*Economic inequality, rising cost of education, inequity on race, gender, sexual orientation, energy/pollution, healthcare access, mental health, homelessness.//At the root of almost every problem Oregon and the US face, you find economic inequality. Healthcare access, homelessness, racial inequality, environmental injustice- these are all symptoms of a system pitting people against each other for low wages and bad jobs.
* Minimum wage, \*infrastructure (crumbling bridges, etc.), unemployment.//Minimum wage, it’s an important way to raise people up. I would like the minimum wage raised to $15 like WA.

**APPENDIX C: WE 2 (Latino A only)**

**Make a list of anything that comes to mind that you feel the government does well and would like it to be more involved.//Now, make a list of things that come to mind that you feel the government does poorly and would like it to be less involved.**

**Latino Session A**

* Transportation, park management, ODOT, water.//Health care, education, mental care, end of life care (hospice).
* Funding the markets, funding wars.//No funding for school.
* They try to fix and make every.//They don’t listen, they don’t care, they break the laws, there is no consequences to them, school distance, police cut backs.
* Creating new jobs, worried about countries that are in conflict.// No support to Latino community, reducing budget to school district, no fixing the issue regarding immigration reform, prohibiting driver licenses to undocumented.
* Provides health insurance for uninsured.//Does not put a cap on how much medical insurance/doctors/etc. can charge.
* Enforces building codes and makes sure people are safe, they have good agencies (like FDA).//Police (too many), road work (it’s always adding sidewalks to accommodate poor people who don’t drive), foreign policy (all Obama’s fault).
* Partisan politics, war.//Work across party lines, logic based decisions, allocate resources to important areas.
* Feeds the unskilled.//Following through.
* Providing better schools and higher standards to get through school, as in meeting the requirements that have to be made in order to graduate.//Helping schools get better budget funds on things they really need.

**APPENDIX D: WE 2 (WE3 Latino)**

**Make a list of values that come to mind that you think are important for all people in the community to share. These values may be more or less important to some people or at some times, but do your best to list the values that you feel we should generally all share.//Place a \* by up to three values that are most important to you.**

**Latino Session A**

* \*Community, \*family, children, \*equality, communication, employment, education, social trust.
* Be kind to each other.
* \*Family values, parks, BBQ, \*talking to our kid, \*teach our kid right and wrong, smile, laugh, happy, sick, \*slow down and look and see what’s around us.
* Respect ethnicities, \*respect cultural values, because diversity is important in this country, avoid stereotypes.
* \*Fairness, honesty, \*responsibility, \*compassion.
* Honesty, loyalty, \*selflessness, caring (for others), love for country, \* a sense of belonging (which would lead to wanting to take care of our lands), \*generosity.
* Equality, education, open-mindedness, \*compassion.
* Free will, within reason.

**Latino Session B**

* \*Respect for each other’s differences, integrity and pride for where you call home, honesty, \*more social grace/kindness.
* \*Kindness (respect).
* \*Respect, kindness, \*honesty, integrity, hard working.
* \*Respect, \*Understanding, love, equality, time, sharing resources and space.
* Respect! for the community you live in, recycling and not littering, \*respect especially for women, \*consciousness of the environment, acceptance of cultural differences, tolerance of other beliefs.
* \*Recreation centers, fitness centers, festivals, city concerts.
* \*Family, community.

**African American Session A**

* \*Honesty, \*self worth, \*heritage, your own life, helpfulness, life of others, for other people.
* \*Help out the homeless, respect people, clean up the city.
* \*Respect for others, \*respect for self, \*Educated, compassion.
* Respect, \*honesty, love, work hard.
* \*Respect selves and others, \*honesty, \*being helpful to others, and sharing experiences, strength and hope.
* Respect for others, \*do more for others than yourself, communication, come together as one, family.
* Not to lie, \*not to do violence to anyone or anything, \*not to steal, \*not to murder, \*not to act with falsehood.
* Respect (for self, for fellow man, for authority), Pride (in one’s self, in your community), sense of community.

**African American Session B**

* \*Respect, \*Kindness.
* \*Respect, opinions, \*space.
* \*Respect, honesty, \*loyalty, personal space, boundaries.
* \*Family first, respect my space/property, do your best to raise your kids, work for it.
* Values. Respect of others/race, sex, etc…fat, age. Courtesy/ please, thank you.
* \*Respect, hope, trust, love, compassion, forgiveness, \*respect for other people’s property.
* Honor, respect, \*community service, civic duty, \*sense of community.

**Asian Session A**

* Honesty, trustful, \*be respectful, \*open-minded, feel welcomed, freedom to be who we are.
* Permanent job, full-time, enough income.
* Reliable public transportation, public etiquette.
* Quality of life, \*safety, \*access to education (self-chosen/level), ability to work, obtain employment.
* Honesty, \*kindness, open-mindedness, generosity, \*respect, love.
* Honesty, \*tact, good judgment, \*being helpful to others.
* \*Ethics/morals, safety, \*quality of life, happiness within community.

**Asian Session B**

* \*Respect each other, \*equality, honesty, work hard.
* \*Respect for others/equality, safety, health, personal happiness. Bounty foods, local, fresh products.
* \*Better food system.
* \*Equity, inclusion, and diversity. Fairness, hard work, \*respect/tolerance, respect nature and environment.
* \*Cultural programs from different countries.

**Native American Session A**

* \*Safety, equity, integrity, trustworthy, hardworking, \*relaxed.
* \*Equality, respect, growth, education, \*art, business, environment.
* Positive attitude, \*love and compassion, non-judgmental.
* All life is equally important, equal rights, kindness.
* \*God, \*Country, family, community, self-worth, respect.
* Trust is one of the biggest issues to have in a community. Watching over \*kids\* in your community. That they are safe and away from harm. In my community we have a lot of drug problems.
* \*Minimum wage, schools seem to be important, drugs, \*renting and buying homes/apts.
* Communities should all share family activities.

**Native American Session B**

* \*Mutual respect, \*environmental quality.
* \*Family, \*respect of others, communication.
* \*Honesty, \*family cohesiveness, \*respect all.
* \*Human dignity, democracy, cooperation, \*mutual respect, tolerance, kindness, giving, accountability.
* \*Empathy, honesty, charity, \*a desire to learn/appreciation of education.

**APPENDIX E: WE 3**

**Now, think about (elected officials and policy makers in government/community leaders), make a list of values that you think they should consider when making laws, rules, and regulations.//Place a star by up to three values that are most important to you.**

**Latino Session A (elected officials and policy makers in government)**

* Needs and wants of their constituents towards the bettering the people or state they represent.
* A better understand of the law, \*heavy understanding the courts.
* \*I feel that they should listen to the people, think about keeping everyone safe,\*make sure it’s the right decision for all the people not just for some.
* Respectful diversity, \*knowledge about minorities population, honest.
* Honesty, integrity, listen to the citizens.
* \*Selflessness (not just how to remain in office or keep getting $$), \*humble, honest, \*they ought to come about the people they represent for more than just their votes.
* Open-mind, compassion, equality, fairness.
* Freedom, longevity.
* Being involved with our community and ways to better it. Hear everyone’s opinion instead of just making straight forward decisions, being responsible. Not making straight forward decisions, valuing the community’s thoughts and opinions, thinking about the laws thoroughly and if they are reasonable.

**Latino Session B (community leaders)**

* Looking out for the underdogs, stay with local issues, promote the idea of “Love to all, no matter who you are, you’re important.” I wasn’t ready for this one!
* \*Wealth, type of community, \*beneficial.
* \*Honesty, diplomacy, ‘outside the box’ thinking, integrity.
* Transparency, \*responsibility, understanding, \*knowledgeable, humble, confident.
* Awareness of what populations historically occupy the different neighborhoods, bold, passionate, critical thinker, \*informed, \*favor education, prioritize family planning.
* \*Other people’s opinions, being open-minded about certain worries, what people need most in the community.
* \*The lower class.

**African American Session A (elected officials and policy makers in government)**

* Think about how everybody will be affected. Be honest. Work for everybody, not just people with money. We don’t need to be the Haves and the Have Nots.
* Do what they say they are going to do. Fix schools. Fix buildings up for homeless.
* \*Poverty, \*education, \*homelessness, population.
* To think about what it will help. To lower costs instead of raising minimum wage. Don’t cut programs like SNAP because it’s free money and they assume people don’t want to work.
* The American public.
* Gun laws, \*health care, \*school protection.
* Not to deceive, not to commit murder or order someone else to commit murder, not to steal, to respect natural resources and humanity.
* Elected officials should become more familiar with the communities that their decisions affect. They should be knowledgeable of the people’s needs.

**African American Session B (community leaders)**

* NA.
* \*Feedback, rights, our parenting.
* NA.
* Making decisions for the whole community and not their special interests. Families. Rights, sex, race, age.
* Community leaders, consideration for all involved, show standards, be an example of good humanity.
* \*Respect, trust, hope, honest, giving, \*care for others.
* \*Honesty, respect.

**Asian Session A (community leaders)**

* \*Honesty, trustworthiness, \*respect, care about everyone, open-minded.
* \*Based on family, thinks about family issues, positive personality.
* \*Honesty, leadership, \*listening skills (listening to the public).
* \*Decisions that support the faction of the community, not one (illegible) resources, population’s wish.
* \*Honesty, concern for the community as a whole, respect for all people in the community.
* \*Thinking of others before themselves, honesty, good judgment, \*justice, decisiveness, educated/knowledgeable.
* Open-mindedness, \*conscience, \*ethics/morals.

**Asian Session B (community leaders)**

* \*Have a clear vision, lead without fear, \*do not ‘design by consensus/committee,’ be respectful.
* Fairness, \*is it beneficial in the long run? \*Is it sustainable? Not harming the earth? Eco-friendly? Respecting people in the community as well as outsiders, economical.
* Considering the balance in different class of people, \*considering things that people really care about, not the government.
* \*Engagement- gather as many different voices to talk as possible. Make effort to include those with barriers to participating- language, culture, geographic.
* \*Public safety.

**Native American Session A (community leaders)**

* \*Selflessness, \*altruism.
* Progress, \*environment, business, \*art, \*equality, cooperation, globalism, respect.
* Non-atheist.
* Importance of equal rights no matter religion, race, income. Value all life, plants, animals, water, people. Children. Cost.
* Uphold the Constitution and Bill of Rights, be responsive to constituents, govern from the bottom up not top down.
* Trustworthiness, \*a sense of right and wrong, \*keeping drugs out of community, county with police and security, patrolled surveillance 24-7 for the well-being of its community.
* One is to buy or rent, what we go through to get that. Can’t rent.
* Talking to the community about resources. Listen to the people.

**Native American Session B (community leaders)**

* \*Economic disparity, \*racial sensitivity.
* \*The public, not just themselves. \*Listen to the community (not optimistic that this will even happen).
* \*Taking a poll of the people, wages/income, equality in all.
* Consensus, diversity and inclusion, \*equity, \*vision (versus status quo).
* \*Empathy, charity, the facts/the science (is that a value?).

**APPENDIX F: WE 4**

**Equality—Write the first words, images, and thoughts you have about the value of equality.//Now, consider the value of equality when it comes to health and wellness.**

**Latino Session A**

* I think of people who think as a community because without status.// I think how unbalanced it is. If you can afford insurance you should.
* Equal opportunity.// Go health care.
* Everyone should be treated equal.//Not equal? Trying to get information.
* Same opportunities to everyone, same treatment, same job opportunities.//Low income families will have the opportunity to reserve mental health support.
* Fairness, no discrimination.//Wealth can get better health care.
* Ideally equality is for everyone but in reality not everyone is equal.//Never! Some people don’t deserve equal treatment (hobos, drunks, crazies, etc.).
* Equality, fairness, balance, compromise, acceptance.//NA.
* Hand holding, ignoring “better”.//It’s not really you can try, but it can mean nothing.
* Equal, fair, opinion oriented.//Offering insurance but with certain guidelines.

**Latino Session B (Equality/Fairness)**

* The ability to accurately judge what is fair.//In all fairness, I can choose what I’d like to do with my life with non-others opinion of what they believe I should do, that is fair.
* Nothing is fair, you have to be all you can be to get anywhere.//The more you have the better both of the above will be for you.
* Everyone having the same thing.//The ObamaCare? Everyone getting to decide on insurance or not to be insured. I believe the intention was to make access ‘fair’ but is it really?
* Every human being reaching their potential.//Health and wellness with fairness means the resources of doctors and medical care is easily accessible to all human beings.
* Equal emphasis on spectrum of opinions, equal representation, voices heard, no favored financial holders (property owners).//Equal, ‘fair’ access to resources, to ability to choose your diet/outside recreation, ability to eat well.
* Equality, ethnicity.//Not being judged on what you own, not treated differently over money.
* Fairness, equal opportunity to everyone.//If you’re treated fair then you have the opportunity to achieve wellness and health.

**African American Session A**

* I don’t think our country, as a whole, is equal. Like I said before, it’s the Have and Have Nots.//If you have money, you get what you need. If you don’t, hope you can heal yourself.
* DK//They can do better with health and clean up.
* Look at humans the same.//There is no equality in health care.
* Being treated the same or getting the same as everyone else. Mirror image.//I need/want dental work, but can’t afford it. For some medical issues you need a referral, takes too long to get to see a doctor, can’t afford co-pays.
* Equality. Unity. Equal opportunities.//NA.
* Same as others. Treat me the same.//Eating goods.
* Equality to me is karmic reckoning, understanding that what comes around goes around. It is Divine Law. Every reaction causes action.//Health and wellness is obtained when we act honestly and respectfully.
* Lack of it. Inadequacy. Frustration, Façade/False.//Those with regular health benefits sometimes get better treatment. The health of those with lower incomes.

**African American Session B**

* Equality = equal rights.//NA.
* Everybody is on the same level, treated the same.//NA.
* Equal rights, everyone gets treated equally.//NA.
* I have a fair shot every day. I wake up to earn and create the life I want!//NA.
* Equal opportunity.//NA.
* Right for everyone freedom as a equal.//NA.
* Justice for all, bounty for all.//NA.

**Asian Session A**

* Facebook posts about equal rights, bullies in schooling.//Everyone should be treated equally, no one shouldn’t get help because of something they can’t help.
* Balance, efficiency, everyone should have it.//Effort, earn without hardness.
* Justice, race/gender/age equality in community.//Can’t think of anything.
* Often/ mostly not possible.//Must strive despite lack of, can’t because of individual variables of health issues for different groups, can’t assume all are the same.
* Equal pay for men and women, race and minority equality in the court system.//Equality in health and wellness means that I don’t have to worry about limits to my healthcare.
* Not letting discrimination of any kind to stop progress or no hating.//Not letting personal gain get in the way of getting help.
* Equality is important, especially in so far as self-image. Inequality makes you feel less as a person.//Same sort of thing, if we feel equal, we feel more whole. Wholeness = wellness.

**Asian Session B**

* Not there yet, race, gender, age.//NA.
* Must be judged by the content- Martin Luther King. Documentation shouldn’t have a line of saying no discrimination by color, religion, bla bla…//NA.
* Gender, caring.//NA.
* Equal rights/benefits/access, fair, just, even distribution.//NA.
* Perspective of quality?//NA.

**Native American Session A**

* Equal protection under the law. Being able to rent a home or job rights.//NA.
* Love, race, economic standing, religion, opposing viewpoints.//NA.
* Jobs.//NA.
* Everyone has the same rights, same pay, same respect given to them.//NA.
* All people are equal in the eyes of God.//NA.
* Fairness to all, non-judgmental.//NA.
* Equal values in living.//NA.
* To have equal rights.

**Native American Session B**

* Money, leisure.//NA.
* Has to start at community level. Government will never accept equality.//NA.
* Few people have. Rich get richer.//NA.
* A hope, but not a reality. A buzzword, a claim easy to make and nearly impossible to live up to.//NA.
* The real answer to our problems, the most important.//NA.

**APPENDIX G: WE 5**

**Efficiency—Write the first words, images, and thoughts you have about the value of efficiency.//Now, consider the value of efficiency when it comes to health and wellness.**

**Latino Session A**

* Making the most of something with whatever you have.//Pediatrics, billing you.
* Blink.// More hospitals, better help.
* I really never thought about it.//Need more information about, don’t know what it cover. I know for me I need to pay out of pocket for some stuff.
* Respond faster, promptly, give a service efficiency.//Provide mental health efficiency service (cultural appropriate) to people that speak other languages.
* NA.//NA.
* It’s really important, government is not efficient at all. Democracy is the least efficient type of government.//Mental health problems happen 24/7, not just on weekdays and Saturdays during regular business hours. Lots of my insane residents have to wait ‘til Monday.
* Organization, accountability.//Sound mind, less stress.
* Worker bees, machines can do our jobs better.//No more fun.
* NA.//Pediatrics.

**Latino Session B**

* Having the proper skills, knowledge, and tools to perform a simple or difficult task.//Efficient energy saving electrical equipment, efficient hired help.
* Fast, clean, on top of it.//I believe there is slim to none, when it comes to health and wellness.
* Enough to take care of something we have.//Being thorough about health history and making sure that I have enough insurance to cover me without additional cost.
* Doing the least amount of work for the best product. Not overworking.//Health and wellness with efficiency is important for our mental health. Working retail comes to mind, in which there is barely a reward for all of our time.
* Means systems work well for their intended purpose, productive, useful.//I think of gardens that produce good fruit/veg that are tended to, and properly maintained without wasteful chemicals or unneeded surplus.
* Not spending money stupidly.//Not being wasteful with resources, spend money that the country has wisely.
* Ability to do something fastest and best way.//If you do something efficient you have more time to do what you want and leads to your health and wellness.

**African American Session A**

* Our recycle program, Water treatment//Non-existent, we need better health care.
* See a lot of lives being wasted. People wasting food. Wasted buildings.//DK.
* Our government, wasting a lot.//organic for poisons, government killing, (illegible).
* When things are running efficiently they flow like turning water, ie smoothly. Runs like a well oiled machine.//Routinely getting checkups. Doctors calling to remind you helps.
* NA.//I believe in taking care of myself.
* NA.//NA.
* Can’t think of anything at the moment.//I would like efficient doctors and nurses whom always seek the truth and act truthfully.
* Feeding those in need. There have been strides to make changes insuring the children are fed.//Efficiency in health and wellness is improving.

**African American Session B**

* Nothing comes to mind.//NA.
* Having enough to live, not going without.//NA.
* Car mileage.//NA.
* Always improve! I think that should be a recurring goal.//NA.
* Able to support (what) the necessities.//NA.
* Getting things done right and the right way the first time.//NA.
* Tasks done in a timely fashion, little waste, simply executed plans.//NA.

**Asian Session A**

* Transportation (how long it will take me to get there), what really matters.//Everyone trying to go to the doctors but not having the money, mentally unstable.
* Enough, save, long lasting.//Organize products, less value.
* Energy/electricity usage, water usage, easy public transport.//Better natural environment to exist altogether, less stressful factors.
* Efficiency does not often exist in govt., reduces cost, increases cost.//More access and likelihood of using services.
* Time saved, money saved, less environmental waste.//I don’t know.
* Working together and not letting politics or discrimination halt productivity.//NA.
* Cannot live much of a life if we are in-efficient in general.//Same thing as above, seems especially to apply to health as inefficient life is a disorganized life, just the same as our health will be.

**Asian Session B**

* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.

**Native American Session A**

* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.

**Native American Session B**

* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.

**APPENDIX H: WE 6**

**Security—Write the first words, images, and thoughts you have about the value of security.//Now, consider the value of security when it comes to health and wellness.**

**Latino Session A**

* Home, safe with family, not worrying about tomorrow.//My records are secure? I don’t really know on this one, feel secure in treatment.
* NA.// Have good doctor, good hospital.
* Not enough of it.//More info should be put out there, what they cover before you find out if it out of pocket.
* Feel secure (family, community, etc.).//Same time people live with fear against police because they don’t have any identification.
* Stability, a secure job, yolk.//Able to get treatment/ health insurance if you have a terminal illness or chronic illness.
* Owning a gun, protection for oneself and family.//Current practices endanger people (like me) that cross paths with mentally sick people. I ought to be able to carry and shoot for self-defense.
* Peace of mind, safety.//Calm, less stress.
* Flashlights for the dogless.//There is no security, cancer is real, have fun ‘till it comes.
* Feeling safe, secure, not feeling afraid, stability, savings, valuables.//Being able to feel secure and having/knowing you are safe.

**Latino Session B**

* Security is great for growing children and raising a family.//Everyone needs to feel secure, that they belong and are loved and wanted. A secure and safe home to go to with schedules and predictability is important for the youth to grow confident and feel secure and sure of themselves.
* Scared, unsure.//No matter what I can always go to the doctor for my health.
* My home and loved ones.//If I have the need for medical help I can go get it taken care of, no questions asked. Now that I have insurance, it’s all about deductibles etc. Before I could always go to hospital and not worry.
* Feeling safe in our communities and within our resources.// Health and wellness in relation to security is ensuring the environment we experience is void of hazardous materials, emotionally and physically. Making sure the air we breathe is clean and clear.
* I can protect private property, I can rely on my community and neighbors to respect public resources, I don’t have to worry about being robbed or violence.//Dependability, there is secure resources to provide healthful sustenance to my community, I don’t have to worry about GMO’s, or multi-national corp. owning all food.
* Community, house safety, police, neighborhood watch.//Good police force, clean neighborhood, good community.

**African American Session A**

* Being safe to walk down the street at night.//To know you can go to the hospital when sick or hurt and know you will be helped.
* Make sure people in there are comfortable. Checking on people if sick.//NA.
* Safety.//There is none, poison foods.
* Housing. Have money when needed. Don’t have to cut corners or decide what bill to pay instead of food.//If I have what I need (money/food) then I can be safe and be healthy.
* I believe that it’s important to feel safe and secure. Just knowing I have income I feel secure.//Stay away from certain people that mean you no good.
* Family, staying together, looking out for each other.//NA.
* Faith in God.//I believe that good health is obtained when a person adheres to natural diets, such as vegetarianism.
* Security and stability go hand in hand.//When you have a lack of security (financial, housing, personal) it effects your health and well-being. This can lead to all sorts of ailments, stemming from lack of security.

**African American Session B**

* Protection.//NA.
* Feeling safe, comfortable, everything’s okay.//NA.
* Peace of mind.//NA.
* There is none, only what I do daily to give us a chance. Pray, work, luck.//NA.
* Secure from worry, stress about days ahead/future.//NA.
* Being safe.//NA.
* Strong military, focused and informed public, 2nd amendment rights.//NA.

**Asian Session A**

* Fat night guards, people with guns, dogs, gun safety.//I’m not sure, nothing really comes to mind.
* Safe, bounded area, free violence.//Check before distribute to public, limited to sue.
* Crime free/restricted, comfort, depressing.//Bacteria free.
* Maslow hierarchy, fear vs. happiness, “American dream,” retirement.//Security in receiving access and treatments, preventative, daily living.
* Job security, community safety, health care.//Having access to affordable healthcare, give me security in that getting sick doesn’t have to mean living in debt.
* Safe living. Not having to worry about being hurt in your house or neighborhood.//Having no doubts about getting the help you need in times of emergency.
* NA.//When we feel secure in our life, I think I am healthy.

**Asian Session B**

* Needs, cyber insecurity, sexual harassment, child safety/protection, guns/crime.//NA.
* Can have access to healthcare. You shouldn’t be confused by “that’s only for socialist country.” Who can live safely. No need guns.//NA.
* Privacy of individuals, transparency of public services ex. Government.//NA.
* Safety, well-being. Safe neighborhoods, schools, community spaces, public events. Less locks.//NA.
* Sense of safety and protection.//NA.

**Native American Session A**

* Safety, feeling secure when walking the streets and nationally as well.//NA.
* Mom, family, friends, community, not the government.//NA.
* Freedom.//NA.
* Home, job, food, family.
* Constitutional inevitability to protect oneself and one’s property.//NA.
* Feel safe in my own home and surrounding community. No stress, no worries.//NA.
* That I will have a place to live. Can’t kick you out of home when owned.//NA.
* Security to know the community is safe. To know that when something is said we should know it will happen.

**Native American Session B**

* Money, safety, ample resources.//NA.
* No freedoms, no security.//NA.
* Money, homeowner, stable family life.//NA.
* Intolerance, jails, oppressive laws, imposed morality, misplaced judgment, culture of fear, paranoia.//NA.
* Home, and also a false promise of total security.//NA.

**APPENDIX I: WE 7**

**Freedom—Write the first words, images, and thoughts you have about the values of freedom.//Now, consider the value of freedom when it comes to health and wellness.**

**Latino Session A**

* It’s something we’re losing in the name of security, but when you give up one for the other, you have neither.//Not too much, as I stated earlier. It’s mandatory, not a lot of freedom in that.
* Freedom to walk down street, freedom to pick doctor, freedom to say what I want to say.// NA
* Be able to be proud.//Stuck, angry, confused.
* Liberty to travel, drive, liberty to choose what we want.//We have the freedom about what to eat but invade with messages about fast food. Where people are suffering the consequences for this choices.
* Able to make decisions and choose what’s best for your life without any consequences.//Able to pick your own doctor, able to elect to not buy health insurance.
* Liberty, opposite of oppression, freedom of the press, freedom to do what I want as long as I don’t endanger anyone.//Mentally sick people should not be free. Free crazies roaming around pose a danger to all since we never know when they’ll go crazy.
* Mental stability.//Choice for treatment.
* People will be disappointed when they find your freedom is different than theirs.//Should we fix you if you had fun?
* Opinion, feeling like you are heard, help.//Being able to go to a clinic and being treated.

**Latino Session B**

* The ability to choose to do something or not, to be a part or not.//I can choose to eat well and physically take care, I can choose to not. I can choose to be a part of the volunteering community, or not. I can go anywhere I’d like, whenever, or not.
* Freedom = use to be America (USA).//NA.
* Make my own choices about where I live, what I eat, where I work.//To make my choices to be healthy or not. Eating habits, smoking, choosing to not seek medical help, smoking (listed twice).
* Financial freedom to do what we’d like daily.//Health and wellness with freedom have a lot in common. With freedom to reach our potential as human beings, we can experience ourselves and the life around us in unlimited moments, although our time here on earth is limited.
* Ability to act in your own interest, with respect to your neighbors, autonomy.//Ability to choose your diet, reliable, clean produce, variety of foods. Clean parks or other resources to exercise, for recreation. Public resources and information on health and wellness.
* Rights, being able to be yourself.//Money, insurance, jobs, community.
* Happiness.//Same thing, happiness being healthy and wellness.

**African American Session A**

* Being able to work where you want and live where you want.//Not being persecuted for just being alive.
* Making sure people are treated the same as others.//DK.
* Allowed by government to move humans.//If you’re lucky enough to have health care.
* Free to take the job I want cause I want to do it, not because I have to (to have money to pay bills).//Job I can choose because I like it then it makes me happier which creates less stress.
* Sometimes I feel like there’s no freedom in this world.//I concerned me of the homeless, abandoned, and abused.
* Doing what you want. Having no restraint.//NA.
* The ability to make choices for oneself without imposing restraints on others.//People should be free to choose how they maintain their health. I’m very unsure here if freedom applies.
* It’s a nice idea, but not true. The job or mission is to make the people think they are “free” or have “freedom” or “rights” and that their opinions make a difference when they really don’t.//If the people’s welfare actually made a difference, healthcare and its provisions, would not be in such shambles.

**African American Session B**

* Free to do what you want in your own home and church. Free to believe what you want.//NA.
* Can do what you please. Don’t have to be tied down.//NA.
* No more slavery, USA.//NA.
* Birth certificate, bill of sale. I must work, I must pay taxes, I can’t leave without my papers. = 12 years a slave 4 life!//NA.
* Free to have chooses.//NA.
* Open to do as you feel.//NA.
* The.//NA.

**Asian Session A**

* Eagle, cop cars, doing what you want/ what makes you happy.//Fat people in McD’s, soda pop law in I think NY, sick wellness, costly.
* Freedom, to get my goal, free violence.//Educate people to be, print, community.
* Opinion, sharing, religion.//Good environment to jog, safe environment, respectful.
* America, happiness, debate/conflict, watchful/monitor to keep.//$, privilege, non-diverse options.
* Safety, self-expression, religion.//As a woman, health, wellness and freedom mean being able to make my own choices about my healthcare. I feel that women are viewed as a sub species of humans.
* Making a better living for you and your family.//Having the options to get good insurance/benefits for you and your family without having to pay an exorbitant amount.
* How lucky we are to live in this country. Religious and non-religious groups need to stop trying to make their points.//Feel that a person will be innately in better health when they feel their lives and freedom are up to them.

**Asian Session B**

* To clean air/water/environment, to speak up, to trust.//NA.
* It’s never be the same as “you can do whatever you want.” That’s just chaos. Real freedom is with discipline, to control oneself and respect others as well.//NA
* Real American dreams not by promotions, certainty within government structure, health insurance/related subject.//NA.
* Liberty, individuality, exercise of rights and responsibility, safe. Food/shelter/education/healthcare security.//NA.
* A sense of understanding of your independence.//NA.

**Native American Session A**

* Choice, the ability to make your own decision respectfully and not under pressure to please society.//NA.
* Thought, expression, communication, the press, 1st Amendment.//NA.
* Respect.//NA.
* Make my own choices, speak my mind, it’s a lie.//NA.
* Individual rights, liberties. Life, liberty, pursuit of happiness.//NA.
* Soldiers, no worries, not afraid.//NA.
* Freedom- of our own side of story without any say, word one, about why I can’t or will not pay fines didn’t do. Schools, classes. Lottery, going to schools.
* To make your own choices, right to speak your mind. Right to be who you want to be.

**Native American Session B**

* Cost, rhetoric, falseness.//NA.
* Will never again happen. Not economically gainful.//NA.
* Outstanding, love of this country.//NA.
* Inequality, racism, theft, violation, coercion.//NA.
* Liberty, choice.//NA.

**APPENDIX J: WE 8**

**What percentage of Oregonians do you think smoke tobacco? Your best guess is OK.//What percentage of (race) in Oregon smoke tobacco? Again, your best guess is OK.**

**Latino Session A**

* 45%//45%
* 65%//45%
* 80%//40%
* 60%//20%
* 70%//40%
* 15%//3%
* 35%//45%
* 50%//70%
* 80%//45%

**Latino Session B**

* 60%//30% (I’ve seen a lot of Latinos not smoking).
* 70%//25%
* 45%//30%
* 85%//80%
* 65%//40%
* 62%//28%
* 40%//10%

**African American Session A**

* 50%//75%
* 83%//84%
* 40%//50%
* 15-25%//5%
* 90%//75%
* 75%//50%
* 39%//13%
* 25%//40%

**African American Session B**

* 40%//20%
* 90%//70%
* 65%//80%
* 40%//70%
* 60%//45%
* 18%//15%
* 37%//50%

**Asian Session A**

* 40%//32%
* 30%//10%
* 45%//30%
* 25%//30%
* 45%//50%
* 40%//12%
* 15%//40%

**Asian Session B**

* 15%//20%
* 20%//25%
* 55%//20%
* 37%//40%
* 70%//30%

**Native American Session A**

* 40%//65%
* 68%//60%
* 50%//70%
* 35%//45%
* 20%//50-60%
* 75%//25%
* 20%//40%
* 20%//60%

**Native American Session B**

* 7%//30%
* 45%//60%
* 60%//50%
* 17%//20%
* 33%//66%

**APPENDIX K: WE 9**

**Indicate whether you strongly agree, agree, disagree, or strongly disagree with the following statements.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **LATINO** | **Strongly Agree** | **Smwt****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Don’t know** | **NA** |
| The tobacco companies are like any other business. They are selling a legal product to willing customers. | 3 | 7 | 4 | 2 |  |  |
| Tobacco companies are no more honest or dishonest than other businesses. | 3 | 5 | 5 | 3 |  |  |
| Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same. | 4 | 6 | 4 | 2 |  |  |
| Tobacco companies are run by rich, white men, and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions. | 2 | 6 | 3 | 2 | 3 |  |
| Everyone knows the risks of smoking. | 3 | 10 |  | 3 |  |  |
| Tobacco companies have a history of lying, and it is proper that government limits where and how they advertise. | 8 | 3 | 2 |  | 3 |  |
| **AFRICAN AMERICAN** | **Strongly Agree** | **Smwt****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Don’t know** | **NA** |
| The tobacco companies are like any other business. They are selling a legal product to willing customers. | 10 | 2 |  | 3 |  |  |
| Tobacco companies are no more honest or dishonest than other businesses. | 2 | 7 |  | 4 | 2 |  |
| Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same. | 8 | 4 | 1 | 2 |  |  |
| Tobacco companies are run by rich, white men, and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions. | 5 | 1 | 1 | 5 | 3 |  |
| Everyone knows the risks of smoking. | 9 | 3 |  | 3 |  |  |
| Tobacco companies have a history of lying and it is proper that government limits where and how they advertise. | 7 | 4 | 1 |  | 2 | 1 |
| **ASIAN**  | **Strongly Agree** | **Smwt****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Don’t know** | **NA** |
| The tobacco companies are like any other business. They are selling a legal product to willing customers. | 1 | 5 | 4 | 2 |  |  |
| Tobacco companies are no more honest or dishonest that other businesses. | 1 | 5 | 1 | 3 | 2 |  |
| Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same. | 6 | 5 | 1 |  |  |  |
| Tobacco companies are run by rich, white men and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions. | 2 | 6 | 1 | 1 | 2 |  |
| Everyone knows the risks of smoking. | 6 | 3 | 1 | 1 | 1 |  |
| Tobacco companies have a history of lying and it is proper that government limits where and how they advertise. | 6 | 4 |  |  | 2 |  |
| **NATIVE AMERICAN**  | **Strongly Agree** | **Smwt****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Don’t know** | **NA** |
| The tobacco companies are like any other business. They are selling a legal product to willing customers. | 5 | 2 | 1 | 4 |  | 1 |
| Tobacco companies are no more honest or dishonest that other businesses. | 3 | 2 | 2 | 6 |  |  |
| Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same. | 8 |  | 1 | 4 |  |  |
| Tobacco companies are run by rich, white men and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions. | 3 | 4 | 1 | 4 | 1 |  |
| Everyone knows the risks of smoking. | 4 | 4 | 1 | 3 | 1 |  |
| Tobacco companies have a history of lying and it is proper that government limits where and how they advertise. | 3 | 6 | 1 | 2 | 1 |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TOTAL**  | **Strongly Agree** | **Smwt****Agree** | **Smwt****Disagree** | **Strongly Disagree** | **Don’t know** | **NA** |
| **The tobacco companies are like any other business. They are selling a legal product to willing customers.** | **19** | **16** | **9** | **11** | **0** | **1** |
| **Tobacco companies are no more honest or dishonest that other businesses.** | **9** | **19** | **8** | **16** | **4** | **0** |
| **Tobacco companies don’t care who their customers are. They just want to sell their product and treat all their potential customers the same.** | **26** | **15** | **7** | **8** | **0** | **0** |
| **Tobacco companies are run by rich, white men and they don’t care about people who aren’t like them. That’s why they target low-income and minority communities with their advertisements and promotions.** | **12** | **17** | **6** | **12** | **9** | **0** |
| **Everyone knows the risks of smoking.** | **22** | **20** | **2** | **10** | **2** | **0** |
| **Tobacco companies have a history of lying and it is proper that government limits where and how they advertise.** | **24** | **17** | **4** | **2** | **8** | **0** |

**APPENDIX L: WE 10**

**Have you recently seen any anti-smoking television advertisements?//If yes, describe.**

**Latino Session A**

* Yes.// People trying to show the public cigarettes contain arson.
* Yes.// NA.
* No, not sure.//I’m not sure.
* Yes.//Pictures before smoking, during smoking, and dealing for smoking.
* No.//NA.
* Yes.//Old Indian guy telling his sad story, people with metal voice boxes on their throats also telling their stories.
* Yes.//Child was smoking cig on sidewalk and hidden camera, people’s reaction was filmed.
* NA.//NA.
* Yes.//People who died or very sick from it.

**Latino Session B**

* Yes.//Smoking cost more money “teens” young adults, girl paying for smokes by peeling off her youthful skin, boy ripping his tooth out.
* Yes.//Wheel chair guy, lady talking with something on her neck.
* Yes.//Liking smoking to a bully for a teen in school.
* Yes.//The small dude with the muscles slowly handing out cigarettes, the teen?
* Yes.//Truth.com, I’ve seen ads on the internet (hulu/YouTube) where younger adults were doing public awareness experiments, confronting health issues.
* Yes.//Dog and cat pee, second hand smoke.
* Yes.//Someone that was dying from smoking.

**African American Session A**

* Yes.//The lady with the hole in her throat.
* Yes.//The camel one.
* Yes.//Lady with shunt in lung.
* Yes.//Lady in hospital, son takes care of her. Guy who lost both legs. Lady who needs a voice box.
* Yes.//The one that gets me is the lady paying for her cigs and the cashier tells her it isn’t enough, so the lady pulled some skin off her face.
* Yes.//Marlboro and Joe Camel.
* Yes.//A sick woman with a hole in her throat, smoking through it. Scary.
* Yes.//The one where the young person pays with their skin and another where they pay with their teeth for cigarettes.

**African American Session B**

* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.

**Asian Session A**

* Yes.//A voice saying tobacco company wants you to look cool, grown up and it had models, and cowboys and at the end it had a sick person saying it’s the reality.
* Yes.//Marlboro.
* No.//NA.
* Yes.//The woman with no vocal chords and tube in her neck. The Marlboro man got cancer. The child in the hospital.
* Yes.//In Thailand all cigarette packs have a picture of a disease caused by tobacco products.
* Yes.//Old lady in hospital bed wheezing, talking about don’t smoke. Old lady in wheelchair smoking through her throat.
* Yes.//Nauseating, describing how tobacco takes away smooth skin, and another where the guy pulls out his teeth w/pliers! (to show how it causes tooth loss).

**Asian Session B**

* No.//E-Cig.
* No.//Didn’t see any, we don’t watch TV.
* Yes.//An advertisement where it shows smokers who have lost part of their body or have a hole in their neck.
* NA.//NA.
* Yes.//A gentleman was trying to buy tobacco and he paid for it with his tooth over the counter.

**Native American Session A**

* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.
* NA.//NA.

**Native American Session B**

* Yes.//The anti-smoking ad where a girl peels skin of her face.
* Yes.//Lots of guilt and fear involved.
* No.//NA.
* Yes.//Guy ripping out his tooth in a convenience store.
* No.//But I don’t watch TV.

**APPENDIX M: WE 11**

**Show ads.//Record your reactions.**

**Latino Session A**

 **Hallway**

* It got the point across, but it felt like it was patronizing.
* Sad, hopeless, mad.
* It’s sad thinking about it. Make it more lady look to own.
* Even if you don’t smoke, you suffer the consequences, by losing someone, that smoke, or paying for the smoking tobacco. 2.5 billion a year, family.
* Selfish behavior resulted in a child with a sick mother.
* Expensive habit, non-smokers pay in taxes spent on helping. To me it’s not a “feel bad” thing but just a bad business to spend money helping people that smoke.
* Puts a face on the tragedy of losing someone. $2.4 billion, can be put to use elsewhere in budget.
* Pulling on the wrong heartstrings.
* Sad, depressing, expensive, takes away meaning of life and what and who you live for.

**Throw Away**

* I thought it was ok but is the one with the human element doesn’t work other rent.
* Better way of dispose of cig bud.
* I don’t throw my cig butt. It was dumb.
* Contamination (toxic), dangerous for the environment.
* Litters the street/ocean, sick animals.
* Cigarette butts are a huge problem a look bad. Most people don’t throw them in trash cans but on floor. Low income people are likely to smoke so their neighbors are more dirty.
* Shines light on how a seemingly tiny effect actually is bigger than they think.
* Enforce current laws.
* Harmful, toxic, disgusting, affects others.

**Mercado**

* I thought it was interesting and illuminates the question “why do we pay to harm ourselves?” in one interpretation.
* NA.
* I really couldn’t at first understand what he was talking about but I feel something like that would be good but then again you need to be looking for it.
* Great, decision no selling tobacco in his store. Worried about his community, about how people is dying because of tobacco. People, place, and profit.
* I like the part he says that they are killing themselves and are paying for it. It makes no sense.
* I like he doesn’t support tobacco by not selling them. He cares about people more than additional profit he might make by selling them.
* Very sincere, conversational, well intentioned advice. Not preachy.
* I like it and him. What’s the profit margin on cigarettes?
* I like that he stated his opinion and didn’t support the fact that people pay to kill themselves.

**Latino Session B**

**Hallway**

* Seen this one, I’m sure it happens all the time. I wish people would get over the fact that quitting sucks, but they are too selfish.
* Sad, I should quit cause I’m gonna die from it. Feel bad for Emily.
* Sadness. Appeals to smokers to think about who they can leave behind.
* Harsh, surreal?, intense, tear-jerker, gritty.
* The tone (especially music and dramatic voiceover) has emotional weight…perhaps too much? It’s effective (probably) for its purpose. Poignant info (quick and easy to understand).
* Don’t smoke cause it’s bad and you spend a lot of money on it.
* Shouldn’t of smoked.

**Throw Away**

* We forgot to bring this subject up, but it was on the back of my mind. MOST butts do not bio disintegrate, I’ve heard cotton one do.
* ? Don’t throw butts on ground, put in ash tray.
* Have seen. This ad appeals to me to show you what the butt can affect.
* Very creative and interesting, informative on a global level. Whole different angle of the issue that I think not everyone is used to seeing.
* Wow, I actually really appreciate the environmental aspect! Info I wasn’t aware of previously!? A ‘lil cheesy…the voiceover (again)…, I think a shot with a swarm of cig butts would be more realistic!
* Don’t throw your bud just anywhere, that’s why there’s ash trays.
* Fine people more for throwing butts.

**African American Session A**

**Hallway**

* That is messed up. Bad luck. Feel sorry for the little girl.
* It’s not really sad because people die every day, but it gets the point across.
* It’s true. Sad for family.
* Why? If it causes cancer is it illegal? What about second hand smoke? Sometimes the commercials just make me want to smoke, seriously.
* I can sympathize and understand what they’re saying.
* Wow. The truth. Make you think twice before smoking.
* Not very sad but annoyed. ANNOYED
* The statistics were staggering. I felt sympathy for the little girl.

**Throw Away**

* This one doesn’t bother me.
* I didn’t like that one because that dog could be sick and then you have to pay for that.
* Seen before. I like clean water. Cigarettes are bad for our environment.
* So we should smoke filterless? Why do they keep making them with these consequences? Can’t they make them not so bad? More ashtrays?
* It makes me think about how I would dispose of my cigs.
* Not good for the Earth, water, animals, trees.
* No reaction.
* That was gross and nasty and I had never thought about how nasty, “throw away cigarette buts effect the environment, even after they were improperly discarded.

**George**

* NA.
* NA.
* Respect for human. Exception to rule.
* He did a good thing to make himself feel better, but was he still selling alcohol or sugar or caffeine, and candy? All are addictive. All have negative health consequences.
* NA.
* Strong memories.
* Great!
* NA.

**Butch**

* NA.
* They’re trying to do something different and stop young people from smoking.
* NA.
* He is right in teaching them not to smoke. I believe if they don’t start they won’t have to quit.
* NA.
* NA.
* Very good. Respectable positive commercial.
* NA.

**African American Session B**

**Conquered**

* I don’t agree with people smoking cigarettes. Not really affective- I didn’t understand it.
* The video was bad. The people who make cigarettes lie, make money and are taking people’s lives.
* The commercial was very truthful.
* Great commercial. I will think of that when I see those 3 words. Images were strong!
* I heard, but didn’t understand it.
* Great, that should be shown more.
* Shame, foolish.

**Brown Eyes**

* I’m glad they are making videos about results of what happens to people when they smoke. Very effective. The words should stay on the screen longer.
* Sad, African American men are 50% higher than white men.
* Black men are more.
* My wife cried when we saw this one the first time because her grandfather died of lung cancer. Makes me think of my little girl’s mom, she smokes heavy, is heavy, and drinks.
* She misses her dad, remembering someone who dies from cancer is not easy.
* Didn’t get it, not effective, makes it seem if yous Black your more at risk.
* Empathy.

**George**

* Just be an example (live a life free form tobacco).
* That’s good he quit selling tobacco in his store. They need to ban cigs and make it illegal.
* He has a dilemma between selling cigarettes and medicine. Cigarettes was out of the picture for him.
* I like that he put his business behind his belief a lot of people feel a certain way but won’t take risk support it.
* I like George’s way of thinking. No contradiction.
* Great video.
* Inspiring, gives me feeling of hope.

**Health Media Club**

* NA.
* Cigarette company’s target kids to smoke, always looking for ways to pull kids in.
* Drugs.
* Even I’m confused about E cigarettes effects and I like how they talk about getting the younger people involved.
* I’m glad to see that the youth’s are noticing this ads and there having some negative affects as much as positives or vice versa.
* I think school’s need to start making more of these clubs to help youth from smoking.
* Honest, depressing.

**Asian Session A**

**Hallway**

* Sad, I had an aunt die of lung cancer so I know how it feels to lose someone due to smoking.
* Smoke free OR, don’t get infect to family, good advertisement to family.
* Family loss due to tobacco use. For a little girl, heart breaking to experience significant other to suffer.
* Seen it, emotional, kids and young may not relate.
* Actions have consequences, smoking is known to lower lifespan.
* Didn’t show older person’s face, on purpose? Skewed a lot of emphasis on little girl.
	+ Probably true, a little bit of a tear-jerker.

**Throw Away**

* Cigs are just gross and harm everything. Also makes me think about littering and how many butts I see everywhere.
* Excellent advertisement. Everybody/level could understand easily.
* Tobacco buds negatively affecting the nature and the community makes me feel uncomfortable.
* Yeah! Need to do more! Give solutions. Smokers may not relate, won’t stop.
* Personal responsibility. There was an ash tray, why wouldn’t you use it.
* Where did water come from inside of that sewer? Should’ve been dry. Even if did- time lapsed into beach? Not bad ad about awareness for pollution.
* Right on! People who smoke need to be more aware and responsible about their cig. butts.

**George**

* I think what he did was amazing but I don’t know if I see it happening a lot anymore. I like how it talked about the history of use and where it is today.
* I agree with George, Pharmacy shouldn’t sell tobacco stuff.
* He seems very honest unlike those who try to make profits out of others from causing bad health.
* Pioneer, brave, reflective, opening may turn people off to the message, preachy maybe.
* It’s impressive that he made that choice. He’s doing a part in keeping his community healthy.
* Moral dilemma, how can you sell drugs that try to save people while selling cigarettes that kill.
* Good for him! A human with a conscience, ethics and morals!! When he saw (I assume) the reports saying that cigs were a nicotine delivery system and that it was all bullshit, he balked and stopped selling.

**Butch**

* For a store like that it is rare for that. Maybe if we made cigs less available but I know some places you are told what to sell.
* I strongly agree with Butch. Don’t sell tobacco stuffs to generation to generation.
* Same as the above statement, that I think by having more of the businesses to limit selling tobacco.
* The average ‘Joe’ will appeal to youth.
* It’s nice to see a person make a choice for the good of their community.
* Helping out the community by not selling tobacco.
* I didn’t see much of this one due to above.

**Asian Session B**

**Hallway**

* Like, powerful.
* Tobacco cost enormously: the life.
* It brought great of an impact, for family.
* Powerful reality of cost of tobacco. Emotional, personal connection.
* Sad that it takes life.

**Throw Away**

* OK, not as effective. The camera angle is a bit confusing (too close).
* Never thought of this ending. Cigarette butts in the ocean, affecting water/sea creatures. Horrific, irresponsible.
* Make me concern about the environment as well. Show extended point of views about smoking.
* Great at community additional effects of tobacco. Very compelling. Environmental connection to tobacco use.
* Dispose of products the right way.

**Native American Session A**

**Hallway**

* Sad to lose family member. Advertisement techniques.
* Play on emotions- sad, family, caring. Why $2.4 billion, how do we spend that much in smokers? What is smoke free Oregon?
* Consequence.
* Our food and pollution from cars, etc. also costs us dearly, but it’s heartbreaking. Hope it deters smokers.
* Scare tactics, power of the purse, shock offends me.
* Sad little girl lost her mother to smoking. It was not just her choice. She laid fate to her daughter.
* Are you targeting trying to quit- SAD!
* Sad knowing someone you love could be gone.

**Throw Away**

* Environmental ad technique.
* Great point of view. Really shows full environmental effects of smoking. Animals and environment didn’t choose to smoke.
* Ashtray.
* This affects me more- innocent lives that have no desire to smoke effected horribly by human consumption/addictions- the cigarette companies should definitely make more environmental safe- filterless.
* Grasping at straws, economic thugery.
* Tobacco not only harms our health it harms wildlife and the water and air we breathe. Very toxic.
* Animals have no choice- don’t make it for them.
* Scared to know what it’s doing to the environment not being able to do anything about it.

**George**

* Moral issues. Businesses want money as well.
* Go George. Smokers will claim freedom to smoke is their right, he sued his freedom not to sell a harmful product. I applaud him.
* Concern.
* Nice idea, but death from pharmaceuticals is huge and good nutritious food in grocery stores?? Not really all the prepared chemical packs of food are not nutritious.
* Holier than thou, self-righteous.
* His own personal reasoning for not selling tobacco. He’s a pharmacist so he’s in the business of healing people. Therefore he felt a moral dilemma.
* Is this a group about “Stop Smoking?” or a research on advertising?
* He gave his own opinion on why he doesn’t sell. Made a point of selling tobacco in pharmacy.

**Health Media Club**

* Girls fighting a war they’re unsure of all the details and varying perspectives.
* Love that kids are taking it upon themselves to promote education of health issues in their community. They see things first hand and are trying to make a difference.
* Targeting innocence.
* I like any positive action on young people’s part to combat addiction and media manipulation. I have seen for myself once you’re informed you start seeing the truth everywhere. Good for them.
* More hype and half-truths.
* Sad to know they target kids!! Glad the teens see right through the advertisement veil. Know they don’t want to smoke like they see in the commercials.
* I see younger generations, seeing them/hearing them targeted.
* Half true, children should not have to have the product in their face but there is nothing you can do.

**Native American Session B**

**Hallway**

* 2.4 billion is such a big number, not quantifiable. I am not Emily, so how does it cost me?
* Fear, guilt.
* These are all things that we’ve seen and heard through advert.
* Image of smoking a cigarette seems glamorous unintentionally. Quantifying the money seems to reinforce the culture that values money over people. More about mom, less about money.

Was that a woman? It looked like the Indian from One Flew over the Cuckoo’s Nest. Good message though, imagery of girl alone is strong.

**Throw Away**

* I’ve seen this. Great camera work. Was that dog harmed?
* Littering commercial.
* Once again I’ve recall an ad like this before.
* I’ve seen this ad and it’s a good angle for Oregonians. But. Again. The human element seems like an afterthought. The dog gets more screen time than a person.
* Should’ve shown a bird eating the butt or a beach littered with hundreds of butts.

**George**

* Makes me want to shop at Tillamook pharmacy. Why does he look like a smoker?
* More guilt. Certain products should only be sold in certain places.
* Become aware of the danger cause by smoking.
* A good story. Effective. Gives perspective on the long fight, and the progress, and the small steps that amount to big change. He’s non-threatening and in a place to relate to OR business owners.
* First made me think of the pharmacists who won’t sell birth control, etc.- brought me back on his side when he said he didn’t want to tell people what to do.

**Health Media Club**

* E-cigarettes are harmful? Band of kids don’t know enough about life to tell me what’s wrong with e-cigarettes.
* E-cigs won’t show effects for years, flavored cigs. At the end, again how much Oregon spends, all about the mighty dollar.
* Well said, good advertisement. Good self-awareness. Might make a difference.
* Poor choice of messenger for my demographic, I don’t relate to young white girls. The facts that come up in cut scenes are hard to prove, my skeptical mind says ‘bullshit’ to most.
* Charming and effective. Gets a lot of facts across but with very relatable, cute girls who speak some hard truths.

**APPENDIX N: WE 12**

**The Oregon Health Authority guides health policy and programs to improve the lifelong health of all Oregonians. What final advice do you have to OHA about communicating to all Oregonians about the health risks of tobacco?**

**Latino Session A**

* I don’t think you can make people more aware than they are. But if you’re going to do it in an informative way that talks directly to them. And not sound like a part time Christian telling them they are going to hell.
* Cancer, poor health problems, sickness, long term problems,
* Give more information to the people. Also more medical that can help quit smoking. More information about quit smoking, where to go if they don’t have the money.
* To promote more business about not selling tobacco by reimburse them, with a gratitude for not selling tobacco. Marketing must be targeted for those people who smoke and for those people who don’t smoke.
* Show real people with real stories/movies. Get teenagers grossed out by cigarettes and conscious about how the use of tobacco can affect their life in the future.
* Make tobacco companies selling in OR pay for anti-smoking ads (if they already don’t). Figure out clips that show people that aren’t all just white or Native American/Mexican looking (i.e. Asian and Black).
* Putting the data to use in a personal way, tailored to that specific person like the apps that keep track of money saved and health benefits of quitting. Also, with young kids pushing the hypothetical of “Is it cool? Really?”
* Numbers. I don’t care about the emotional aspects of it, remind me how much it costs.
* Don’t pay someone money to kill yourself, damage yourself or that will harm you in the long run. Find better ways to cope with your stress that are not harmful as in exercise more activity related.

**Latino Session B**

* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.

**African American Session A**

* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.

**African American Session B**

* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.

**Asian Session A**

* NA.
* NA.
* NA.
* NA.
* NA.

**Asian Session B**

* NA.
* NA.
* NA.
* NA.
* NA.

**Native American Session A**

* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.
* NA.

**Native American Session B**

* NA.
* NA.
* NA.
* NA.
* NA.
1. Quotations were selected to represent the range of opinions regarding a topic, and not to quantitatively represent the expressed attitudes. [↑](#footnote-ref-1)