Clear the Air: Moving towards a more supportive, welcoming, Tobacco-free Clark University

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Clear the Air:

Moving towards a more supportive, welcoming,

Tobacco-free Clark University
Clark University, School of Professional Studies

Spring 2018

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Executive Summary

The deleterious health effects of the consumption of tobacco products, especially for youth, have been documented thoroughly and are nearly universally recognized. Numerous federal, state, and local regulations, coupled with health education and tobacco cessation initiatives have been launched to address these effects. Although these pushes have done much to reduce the rates of preventable health conditions and death due to the usage of tobacco, there remains much work to be done at the local level to discourage and disrupt patterns of substance use and abuse. The mission of Clark Clear the Air is to propose various and creative ways in which Clark University can work to reduce the rates at which tobacco products are used in our community, including a tobacco-free policy on campus, while simultaneously fostering a welcoming and supportive space and a community-based approach to accountability with this policy.

Clark Clear the Air fundamentally believes that universities have a moral responsibility to ensure the health and wellness of each and every member of the community, and to work to divert the development of addictive habits of youth before they develop. Indeed, 83% of the respondents to our survey conducted in Spring 2018 agreed with this assertion and signaled that “universities have a responsibility to lessen the risk of tobacco addiction by adopting policies that discourage tobacco use” (See Appendix A). For that reason, and from reviewing the tobacco use policies and cessation resources that other universities have implemented, we have drafted a “A Blueprint for the Successful Development & Implementation of a Tobacco Free Policy by Fall 2020,” which lays out a suggested policy, resource development, and implementation plan, which can be found in Section VI of this paper.

Clark University stresses the importance of the educational process not being limited to the classroom and the library, but also incorporating the practice of enacting positive change, both
globally and locally. While our project, Clark *Clear the Air*, is on some level about working towards the implementation of a Clark tobacco-free policy, it is also working towards more fundamental goals. Not only do we propose a method by which to ensure the health of our community and environment but do so in a way that simultaneously fosters a more supportive and welcoming culture in our community. We are working towards developing a community where difficult conversations can be held about the wellbeing of each one of us in a mutually respectful and supportive way. The philosophy behind this approach is enshrined in the University’s mission: “Clark believes that intellectual growth must be accompanied by the development of values, the cultivation of responsible independence, and the appreciation of a range of perspectives.” Clark *Clear the Air*, from its inception, has worked to embody this mission, and continue to better our community in every way possible (Clark University Mission Statement, 2018).

The development of our Blueprint, and the multifaceted suggestions and phased approach to implementation detailed within it, is the product of a series of interviews with key stakeholders in the Clark community, as well as a student climate survey and best practices research. Not only do we believe that Clark becoming a tobacco-free campus by Fall 2020 is an achievable goal, but one that is pressing. As universities across the United States adopt such policies, including many here in Worcester, we believe Clark must take this bold step, and continue with its legacy of being an innovative university, adopting and adapting policies that further its mission while safeguarding and promoting the health and wellness of each and every student, staff, faculty member, and visitor to our campus.
I: Introduction

Tobacco usage, especially by youth, has been the target of a series of public health and governmental campaigns of the last few decades, resulting in a drastic, but not complete, reduction in youth tobacco usage. Given that 98% of smokers begin smoking before the age of 26, the university space is a crucial place that this battle against tobacco must occur (United States CDC, 2017). Indeed, many survey respondents acknowledge that colleges and universities have a unique and pivotal position in preventing cigarette use (US CDC, 2017). Tobacco use on college campuses is an issue for a plethora of reasons, the most paramount being its negative effects on an individual's health. On an individual level, smoking tobacco causes an increase in chances to develop various cancers and diseases, smoking harms nearly every organ of the body and cigarette smoking causes 87 percent of lung cancer deaths (Quit Smoking Medline Plus, 2017). Not only this, but over 480,000 Americans each year are killed by the diseases and complications caused by cigarette use (U.S. Surgeon General, 2017).

Cigarettes are the most widely used tobacco products, and they do not solely harm the individual using them. Secondhand smoke is smoke that has been exhaled, or breathed out, by the person smoking. Secondhand smoke cannot be offset by closing windows or separating individuals in a small compound who smoke from those who do not. It is also important to note that any type of exposure to secondhand smoke; even for a brief period, is detrimental to one's health, especially on a constant basis. In the United States, more than 41,000 deaths were caused due to exposure to secondhand smoke (US CDC, 2017). Secondhand smoke exposure caused more than 7,300 lung cancer deaths each year during 2005–2009 among adult nonsmokers in the United States (US CDC, 2017). The Center for disease control and prevention has taken considerable steps in
conducting research and has found solutions to the problem of preventing second hand smoke. The CDC has said that “...making your home and vehicles smoke free [is a step] to protect yourself and your family from secondhand smoke” (US CDC, 2017). Once again, second hand smoke harms every single person exposed to it. According to the CDC secondhand smoke and the harmful chemicals are known to cause sudden infant death Syndrome, respiratory infections, ear infections, and asthma attacks in infants and children (US CDC, 2017). They are also known causes of heart disease, stroke, and lung cancer in adult nonsmokers (US CDC, 2017).

It is also powerful to note that exposure to secondhand smoke correlates with race, income, and occupation. There have been developments in preventing secondhand smoke from entering the spaces of non-smokers, but still nearly half (46.8%) of Black non-smokers in the United States were exposed to secondhand smoke (US CDC, 2017). Along with this, from 2011–2012, more than two out of every five (43.2%) nonsmokers who lived below the poverty level were exposed to secondhand smoke (US CDC, 2017). This has led many researchers to believe that there have been fewer initiatives in certain communities to protect individuals from the dangers of secondhand smoke. These statistics should be concerning to universities, work places, and locations of gathering because of the amount of diversity, and movement within these spaces. Most people do not smoke cigarettes, but still are exposed to secondhand smoke and its negative health effects. The growing number of states and communities with laws that do not allow smoking in indoor areas of workplaces and public places, including restaurants, bars, and school buildings, are the reason for a decrease in the amount of second hand smoke. These steps, however, have not been comprehensive enough to completely nullify the effects of secondhand smoke on our communities. The protection from poisonous chemicals, and the ability to breathe clean air is a
right that should be enjoyed by all. This, however, is not the case in many communities across the United States; we believe that universities can make a difference in the fight against tobacco.

The purpose of this Capstone project, *Clear the Air*, is to propose a tobacco-free policy for all Clark University owned and operated spaces. From the beginning of this Capstone project, we recognized that it would be unrealistic, given the relatively short window of time (one semester; less than four months), to achieve the full implementation of a tobacco-free policy. The work of this project, therefore, is to begin to lay the foundation for a route which the University can follow to assess the stakeholders’ viewpoints towards the issue of smoking on campus, to impulse a cultural and policy shift around tobacco usage at Clark University, and create a framework around the eventual executive decision making regarding Clark University's tobacco-free status. *Clear the Air* is also dedicated towards the expansion of cessation resources for all in our community, and to work to raise awareness about those resource available to help those that smoke when they are ready to quit. As such, our major deliverable for this project is the *Clear the Air* Blueprint. This Blueprint outlines a suggested policy as well as a phased implementation plan that reflects the best practices research from other universities with tobacco-free policies, and the results from our survey, focus groups, and interviews.

Clark *Clear the Air*, however, is not only about a proposal for implementation of a ban on tobacco smoking on campus, it is also about the development of a more supportive, accepting, and welcoming culture here at Clark. As detailed in our Blueprint found in Section VI, our proposed accountability mechanisms--we avoid usage of the word “enforcement” for its negative and punitive connotations--are ones that will foster a community in which students, faculty, and staff feel comfortable in approaching one another with supportive intentions. Instead of pushing for a policy that criminalizes tobacco usage, we believe that the best approach is one that allows our
community to engage in serious, difficult conversations about topics such as substance use and substance use disorders; replacing shame around tobacco usage with support. While this may seem a herculean task, we truly and genuinely believe that our Clark community can achieve great success by living its mission as an education institution always working towards the advancement of the self, the community, and the world, and become the best that it can be.

This final version of the Clark Clear the Air project is divided in seven parts. The first, being this Introduction. The second section details the trends in the industry and outlines best practices from other university and higher education institutions that have pursued some form of a tobacco- or smoke-free policy. The third details the various methods that we employed for this project, including: surveys, focus groups, and interviews. The fourth section reviews the results of our methods; the fifth further discusses the major themes identified through those various methods employed. The sixth section includes the Blueprint for our proposed policy and the plan for implementation to be carried out to achieve a tobacco-free Clark by Fall 2020.
II. Trends in the Industry

To best proceed with outlining a series of comprehensive recommendations for the implementation of a new tobacco free policy at Clark, it is important to recognize that our university would not be the first. This, however, is quite beneficial for our sake, as we can turn our attention to other policies and implementation strategies, and research best practices for such an initiative. With this exercise, we can observe the successes and frustrations of other universities and advocates within them and select what approaches we believe would work best given the Clark environment. The following section reviews six schools who all have active tobacco free and/or smoke free policies. The six case studies that we selected are Worcester Polytechnic Institute, Emmanuel College, Simmons College, Bentley University, Harvard University, and Syracuse University. These universities were selected for being of similar size to Clark, in the Northeastern region of the United States, and located in urban areas. Each of these schools is currently smoke free on at least one of their campuses.

To begin our survey of other universities, a university located in Worcester is a logical place. Worcester Polytechnic Institute (WPI) currently has 6,642 enrolled graduate and undergraduate students. WPI’s Tobacco Policy was implemented at the beginning of the Fall 2014 semester. The policy is incredibly comprehensive and includes thorough definitions of their restrictions and the terminology employed. Furthermore, WPI has done much to tie their policy to the broader mission and cultural values of the community they intend to foster, including to the WPI Culture of Care.

The WPI policy defines a tobacco product as “any substance containing tobacco leaf, including but limited to, cigarettes, cigars, pipe tobacco, hookah tobacco, snuff, chewing tobacco,
dipping tobacco, bidis, blunts, clove cigarettes, or any other preparation of tobacco; and any product or formulation of matter containing biologically active amounts of nicotine that is manufactured, sold, offered for sale or otherwise distributed with the expectation that the product or matter will be introduced into the human body by inhalation; but does not include any cessation product specifically approved by the U.S. Food and Drug Administration for use in treating nicotine or tobacco dependence” (WPI, 2014). Furthermore, their definition of an e-cigarette as follows: “E-cigarettes include any electronic oral device, such as one composed of a heating element, battery, and/or electronic circuit, which provides a vapor of nicotine or any other substances, and the use or inhalation of which simulates smoking. The term shall include any such device, whether manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, or under any other product name or descriptor” (WPI 2014).

In conjunction with this Tobacco Policy, WPI also implemented a blanket No Smoking Policy. This policy outlines and prohibits the consumption, inhalation, exhalation, carrying or burning of any plant-based material, or the same of any type of oral device that emits a vapor. The WPI policy, therefore, is in place to address all forms of smoking, tobacco or otherwise. WPI released a statement saying that the new tobacco policy was part of a “broader institutional effort to create a campus culture of mutual respect, wellness, and sustainability.” The statement claimed that this was a student led effort to “stake a claim on their own health and wellbeing.” An interesting move by the campus was to remove cigarette receptacles and replace them with signs warning people of the new policy. The statement said over 150 signs exist on campus.

WPI also aptly tied the smoking ban to their previously-standing Culture of Care initiative. The Culture of Care policy reads as:

“WPI strongly believes that all community members have a responsibility and obligation to assist their peers, particularly when associated with alcohol or
drug use. To help integrate this mindset throughout the entire campus community, the Interfraternity Council has created the WPI Culture of Care Program. Inherent in this program are the following constructs:

- The Culture of Care Program emphasizes the creation of a safe and protective campus environment for all community members.
- Members of the WPI community are called upon to put the safety and welfare of all individuals over their own self-interest, without jeopardizing their own safety.
- Most members of the WPI community are not trained to make critical health and medical decisions.
- Students are encouraged to call Campus Police for assistance when they are aware of any situation involving or impacting the health and safety of any individual.

The purpose of this initiative is to foster an environment of trust, support and action for students who need assistance. For violations of the WPI Code of Conduct that involve alcohol, students who proactively seek assistance for others will generally not be adjudicated through the student conduct process. Any discussions associated with the student who calls for assistance will be educational in nature” (WPI, 2014).

WPI’s stress on connecting their tobacco-free policy to pre-stand values of their community is noteworthy for our project for multiple reasons. First, it is important because it is convincing for necessary institutional actors at Clark University to recognize how such a move towards a tobacco and/or smoke free policy can be comfortably embedded within pre-standing University values. Secondly, it demonstrates the potential for increased levels of the success of a policy if it is not solely presented as a prohibitive measure with quasi-judicial enforcement mechanisms in place, but rather as the development of a supportive, non-confrontational move towards a healthy, communitarian culture. What is less clear from WPI’s policy and on the sources available, and what would be more useful for our study, is the process that the university undertook to get to this place. For that reason, it is important to look to another area university.

Emmanuel College, in Boston, MA is similarly sized to Clark, though smaller, with 2,100 enrolled undergraduate and graduate students. It also serves as a good unit for a comparative study because of the high rate of first years that reside on-campus, which is over ninety percent, and
because of its urban setting. The Emmanuel College policy is a blanket ban on the usage of tobacco products on campus and College-owned property and facilities and was first implemented in August on 2014 (Emmanuel, 2017).

This two-page policy was the result of a twenty-page report issued in April 2014 by an Ad Hoc committee. This committee had been called for and created by Emmanuel College’s President consisting of faculty, administration, students, and alumni. The report and policy were then presented to the Board of Trustees, who in turn accepted the recommendation making Emmanuel College tobacco free. To create a policy, the Ad Hoc committee researched the effects of tobacco on health, statistics of tobacco use in the US, and completed a survey of faculty, staff, and students on tobacco use on campus. The committee also launched a website detailing their efforts and hosted a town hall for discussion on the possible change in policy. The committee’s final recommendations were for the campus to go completely tobacco free, and their report was published for the community to view. The approach that Emmanuel took, of creating a Committee with the direction and blessing of the College President, and the quick turnaround thereafter, presents a good model. Another good model for the organization and work necessary for the implementation of such a policy comes from Simmons College, and the work that came from the health-focused studies in the community.

Simmons College, located in the heart of Boston, MA, also has a model for a tobacco-free policy that proves useful for comparison. Simmons has both undergraduate and a large graduate component. There are currently just over 1,800 undergraduate students enrolled at this small, all women university. Simmons appears to be very proud of their tobacco free standing, as their tobacco free policy “Live. Breathe. Be.,” is boldly displayed on the “Why Simmons” tab of their website. Their policy is simple, but comprehensive. It reads: “Use of all smoking and tobacco
products is prohibited at both the academic and residence campuses of Simmons College.” This policy thus incorporates all smoking products, tobacco or otherwise. The College offers Cessation Programs and is aggressive in their distribution of educational materials about the damaging effects of smoking, be it second-hand or on the environment.

The enforcement mechanism at Simmons for this policy is communitarian in spirit, as they encourage all students, faculty, and staff to be sure to remind others using smoking and tobacco products on their campuses of the tobacco free policy, the reasons behind it, and to inform them of the resources available. The push for implementation was undertaken by the Simmons School of Nursing and Health Sciences (SN/HS). Students and administration of the SN/HS both engaged in this process, undertaking a campus-wide campaign for this policy, with the policy being implemented officially in May of 2014. Before this, however, there was the creation of a Tobacco Free Simmons Committee. This Committee worked to address the many concerns raised around the possibility of such a ban: “working with Public Safety and the Office of Student Life to address these concerns” (Simmons, 2014). This outreach and advocacy push including an event to display the services and resources available on campus for smoking cessation and for addressing the negative side effects of smoking and second-hand smoking, which also provided organizations a chance to hear feedback, and field questions and concerns alike from the community. Another method by which some universities incorporate community voices into anti-smoking policy creation is by creating and sharing widely campus climate surveys. One university that did just that, and successfully so, is Bentley University.

On June 1st, 2016, Bentley University joined 1,475 other colleges and universities in the United States to become a smoke free campus (Smoke-Free Bentley, 2017). Prior to making this change in policy, a task force made up of faculty, staff, and students were able to conduct research
on campus to see the current climate around cigarette use, and smoking policy. In result, they found out that 75 percent of students, and 66 percent of faculty and staff reported exposure to secondhand smoke outdoors on campus (Smoke-Free Bentley, 2017). Along with this, they found that 84 percent of faculty and staff and 75 percent of students were concerned about second hand smoke causing future health issues; impacting asthma sufferers. (Smoke-Free Bentley, 2017). Almost half of their faculty and staff who were tobacco users (43%) said that they supported adopting a smoke free policy, and 75% of nonsmokers said that they support a 100% smoke free policy change (Smoke-Free Bentley, 2017). These statistics were taken from a campus wide survey that received 1833 student responses (37% response rate), and 403 faculty and staff responses (33%) (Smoke-Free Bentley, 2017). This initiative’s ability to gather results from the student body greatly supported its eventual policy change, because it showed the sentiments towards cigarette smoking and second-hand smokes exposure on campus. Second hand smoke and the negative health effects that it can bring rightly concerned people on their campus. People are also aware of their right to clean air, especially in a space of higher education. Bentley University stated “...In addition to the clear health benefits, becoming a smoke-free campus also supports our commitment to the environment as it will reduce the amount of cigarette-related litter and tobacco waste on our campus.” (Smoke-Free Bentley, 2017).

Bentley’s ability to go smoke free was successful because of the clear support from both the student and staff/faculty body. Their ability to see the clear and pressing issues of smoking enabled the University to act on behalf of concerned and at-risk students. In one of their statements on smoke free policies, Bentley’s task force writes:

“Smoke-free policies are ethically and socially responsible. This policy will create a healthier living and learning environment for our students, faculty, staff and visitors by limiting exposure to secondhand smoke. Several years ago the U.S. Department of Health and Human Services launched a Tobacco-Free College
Campus Initiative. Since 99% of smokers begin using prior to the age of 26, colleges and universities are a critical point of prevention. We have closely monitored the progress of this nationwide initiative and feel now is the time to support it.” (Smoke-Free Bentley, 2017)

Along with Bentley's realization that a policy change was necessary, the campus also realized that other support systems would be necessary to support their students with the policy change. With the launching of their new policy, Bentley University has also adopted “community education and events” surrounding the topic of smoking to help students understand the policy, meet with task force members, and talk about services (Smoke-Free Bentley April 2017). Along with this, Bentley has provided several cessation resources for their students, faculty, and staff members. Bentley’s commitment to ensuring access to adequate cessation and health resources for not just students, but all members of their community, is commendable and must be taken into consideration for any university pursuing such a policy. One university that extends resources to staff and faculty, but also targets stringent enforcement at this same population is Harvard University.

Harvard University is located in the heart of Cambridge, MA, nestled into their neighborhood, renowned worldwide for their academic prowess. On August 5th, 2014, Harvard University officially banned the use of all tobacco products in the Yard, the affectionate term for the main square on the campus of the University. Harvard’s campaign to push the main square toward a tobacco-free campus was a student and faculty-led campaign that started as far back as 2008. It was spearheaded by then-student Mackenzie Lowry ‘11, who co-founded of the Tobacco Control Policy Group at the Institute of Politics (Le, 2014). Lowry laid much of the groundwork for the initiative, which was culmination of years of effort and coordination. Initially, the plan was to gradually implement a tobacco-free policy across campus, starting with the Harvard Yard. While
the Committee on Student Life, comprised of administrators and Housemasters, encouraged the policy group to pursue a uniform ban for the entire university, Lowry argued that “as Occupy Harvard highlighted- Harvard Yard is very symbolic of Harvard University as a whole… It really represents the heart of Harvard” (Nguyen & Seo, 2012).

The policy group contested that a tobacco-free policy was only the next common-sense step for the university. The Office of Alcohol and Other Drug Services of Harvard University provides students aiming to quit tobacco use with “consultations, literature, referrals, and free quit kits” (Nguyen & Seo, 2012). Health Services waives the co-pay that staff would otherwise pay to visit a tobacco treatment specialist (Nguyen & Seo, 2012). To complement the group's new policy goal, Harvard Longwood Campus, which is home to both Harvard Medical School and Harvard School of Public Health, has been completely tobacco-free since 2009, and the Harvard Kennedy School of government and the School of Dental Medicine since 2012. The tobacco policy adopted for the Harvard Yard was approved and administered by the Director of Health Services and Dean of Student Life, the same administrators behind the policy adoption at Longwood Campus and the Kennedy School (Nguyen and Seo, 2012). It gave explicit authority to members of Harvard University Police Department, Securitas, and Yard Operations “to ask tobacco users to desist or leave the Yard” (Le, 2014). The policy also encourages “all Harvard community members to feel comfortable doing the same if they were to encounter smokers in the Yard” (Le, 2014). The Tobacco Control Policy Group claimed this policy as a victory for the University, as “we have so many visitors [to Harvard Yard] that it was actually a type of global health intervention at the micro-level” (Le, 2014).

Reactions to the new policy implementation were certainly mixed. The staff of the Harvard Crimson, the University’s student newspaper, ran a number of articles that articulated a position
against the ban on tobacco-use. They argued that the “rigid ban would have little marginal health impact on the health of the student body” due to the fact that there “are so few students who smoke regularly” (Crimson Staff, 2014). In consensus, the staff agreed that the “infringements on student’s liberty” overbore the students ability “to express freedom in their own homes” (Crimson Staff, 2014). The Staff also conducted a university-wide student survey that showed that over 85% of the Class of 2018 had never used tobacco products (Crimson Staff, 2014). Even with this notable dissent, the policy was received by most student organizations and university bureaucracies with welcoming arms. It was championed as a progressive step in Harvard’s commitment to the safety and wellbeing of their students, staff, and the surrounding community.

In 2015, Syracuse University went tobacco free, but support for this action was seen back in 2010 with support of 71 percent of their staff body and 58% of student support (Syracuse University, 2017). After this research was done, Syracuse University Campus Sustainability task force on campus smoking was created. This task force consisted of faculty, staff, and students. They came together to help ensure a healthy, productive, respectful environment in which to work, learn and live…” (Syracuse University, 2017). This task force created and coordinated support such as health and wellness programs and events geared towards tobacco cessation (Syracuse University, 2017). This programming was in response to the realization that tobacco use is an addiction, and support is needed. Along with programing and events, Syracuse has also initiated a “toolkit Campaign”. The “toolkits” are physical and digital texts that are designed to answer questions, guide conversations, and provide additional resources for communicating the policy to any individual on campus (Syracuse University, 2017).

These toolkits allow the possibility of conversation amongst students, faculty/staff and visiting individuals as well. Syracuse has developed a sense of “community responsibility” that
aids the policy in being efficient, and at the same time is responsive to student needs. Syracuse students are supported by University Police when enforcing this policy, although there is a system of consequences when it comes to this issue, University police is not seen as the immediate discipliner. (Syracuse University, 2017).

Syracuse ultimately used a “phasing system”, the first phase being “Education, Information, and cessation, and the second being tobacco free grounds starting July 1st, 2015 (Syracuse University, 2017). Syracuse has laid the foundation for an environment that promotes conversation.

The case studies outlined above have common themes that underlie the motivations and strategies that contribute towards their policy. Some of these strategies are great blueprints for action that can be implemented by Clark, while some will certainly not work on our campus. In the following paragraphs we attempt to summarize thoroughly and succinctly those approaches we believe to be appropriate and inappropriate given Clark’s make-up and environment.

Firstly, Emmanuel’s and Bentley’s tobacco policies were primarily products of motivations from the students and faculty. This bottom-up policy approach does magnitudes of service towards garnering crucial buy-in from the stakeholders that will be most affected by such a policy change. Clark should emulate this approach by basing our tobacco policy on the values held by the students, and work to foster energy and support there first. Such a move is important because it allows the entire university administration to recognize that the consumers of their product--education--are demanding change; an effective tool. Creating a coalition of students, staff, and faculty, and concentrating on promoting a similar message will ensure that such a policy has the utmost chance of achieving success.
Simmons and Bentley brilliantly promoted their cessation resources in the form of community events geared towards education. This strategy not only allowed them to make the stakeholders aware of the cessation resources available to them but showed the stakeholders the administrative commitment to health and wellbeing on campus. In short, they show that the community does care about the stakeholders, and that they will make an effort to educate and support their students, faculty, and staff. Bentley and Emmanuel also constructed their policy taking genuinely into consideration the opinions and perspectives of their community. This closely resembles the strategy we are conducting as the Clear the Air group. Through surveys, focus groups, and targeted interviewing, it is crucial that any advocacy group keeps their ears to the ground, their fingers on the pulse. If we can use such strategies, we will be well positioned to construct a policy that reflects the values of our stakeholders, and thus has their support.

Emmanuel made sure that their stakeholders had input towards the policy change by utilizing a town hall function. This allowed them to make the policy change participatory, and to receive student, faculty and staff input in a discursive setting. This allows stakeholder viewpoint to be articulated and represented thoroughly and effectively. If Clark wants to do a good job of implementing and developing our policy, we need a large-scale town hall style event like Emmanuel’s. This kind of event provides different benefits than a focus group because it allows top level policy implementers to really hear from the stakeholders themselves, not just a report or data collection of opinion. It allows stakeholders concerns to be addressed in person, and this can do wonders for buy-in, as long as the discourse is authentic in nature.

Both Harvard and WPI’s policies were successful, but their environment and strategies may not be reflective of the values put forth by Clark University. Both campus policies rely on their university police to enforce the articles contained therein. For our policy, we cannot hope to
achieve stakeholder buy-in if the underlying reaction to smoking on campus comes in the form of a watchdog. Our focus should be towards addiction education and support, not punitive measures. That kind of policy will only lead to dissatisfaction and dissent in our stakeholders.

These best practice approaches, as outlined cursorily above, are reflected heavily in our blueprint for implementation, as well as implicitly throughout the entirety of the remainder of this project. Furthermore, given that this research was conducted early on in the process of our project, many of these approaches guided us through our work these last four months.
III. Methods

The methods employed for the purpose of this project were multifaceted and numerous. We designed and executed a multi-pronged approach to this project, including: a dedicated effort to intensive best practices research around what other universities policies and implementation strategies looked like, to capture and synthesize “trends in the industry;” a campus climate survey and focus groups targeted specifically at the student population in order to measure the community’s opinions on smoking and cessation on campus, as well as to complement a community survey completed the previous year by one of our teammates, Edward Aroko; strategic identification and interviews with key stakeholders and influencers in our community and Clark administration about their stance, level of support, and interest in moving forward with a tobacco-free policy on campus; and finally, our efforts culminated in drafting a blueprint for a tobacco-free Clark policy, which includes various recommendations as well as a roadmap for successful implementation.

To be able to craft a policy recommendation and implementation plan for a tobacco-free Clark, we recognized that the voices and desires of members of the Clark community needed to guide our every step and be reflected in our final Blueprint. Furthermore, involving students, faculty, and staff alike in conversations around smoking on campus works to raise awareness and promote dialogue around this issue, hopefully working to garner support for a tobacco-free policy. The community input process for our project involved two main forms: an online survey and focus groups. Our survey was designed to be a similar survey to one conducted by one of our teammates, Edward Aroko, this past year in Spring 2017. There are significant differences between the two surveys, however, with the most important difference between the two being that the 2018 survey
targeted exclusively students, while the Spring 2017 survey also look for input from faculty and staff. This decision was made in order to facilitate higher engagement from students, given the high number of respondents that were staff and faculty compared to students in the first survey. The 36 question survey, which received approval from the Institutional Review Board on February 28th, was longitudinal and left open for more than a month; from March 1st to April 3rd, 2018, the survey yielded 316 respondents. The survey was crafted with questions widely varying to yield a wealth of information for our project, as well as for the coming policy push as laid out in our Blueprint. Questions covered demographics: gender, age, place of origin, and current type of residence. The survey also included questions about the respondent’s tobacco usage, as well as questions that would reveal the climate around smoking and secondhand smoke on campus. The survey also asked respondents to reflect upon their knowledge of the current Clark tobacco policy, and whether they were aware of any resources available for cessation at Clark. “Survey Results” of the following section, “Results,” is dedicated to the summary of these results. Analysis and interpretation of major themes can be found in the section, “Discussion”. Copies of both surveys are available in Appendices A and B.

Focus groups were conducted by the executors of the project group. Participants were recruited from peer groups, student organizations on campus, and volunteer pools. The focus groups ranged in size from six to eight participants. Compensation for participation usually included soft drinks and a variety of snacks. The focus group agenda was semi-structured, operating from a set list of questions, but examining more talkative issues when the given topic rose to light. The questions can be found in Appendix C After exhausting the questions and relevant topics of interest, the focus turned to a sharing of our survey results. The goal of this exercise was to give the focus group participants more insight to general student opinion, so that
they might be able to speak with more certainty to the collective opinion of the student body, to clarify their own opinions in the larger context of Clark University.

The final aspect of our research was conducting interviews with representatives from different organizations on campus. These groups were Clark University Counseling Services, University Police, Health Services, the Francis Hiatt School of Psychology, Dean of Health and Wellness, Head of Sustainability services, Grounds, Residential Life and Housing, and Student Life and Programming. The interviews were semi-structured, following a set list of questions, which can be found in Appendix D. Additional questions that pertained to the given area of expertise were asked as well, these questions aimed to get the most out of our interview subjects, so that we could amass the critical information that we needed to formulate a cohesive strategy regarding the issue of smoking on campus that examined the problem from a variety of angles. These expert opinions are able to inform our project in a way that student surveys and focus groups are not, namely, they carry objective, professional weight that is necessary for compiling an administrative strategy that can be implemented with the highest chance of success.
IV. Results

The following is a summary report of the results of our three methods of gathering data on various stakeholders’ opinions as they pertain to the issue of tobacco use on the Clark University campus. Analysis and interpretation of these results can be found in the section “Discussion.” Full survey data can be found in Appendix A.

Survey Results

Our survey aimed to form a representative sample of opinion of the student body. Of the 316 participants, 60% identified as female, 39% as male, and the remaining 1% being self-identified respondents, who identified as non-binary, genderfluid, or genderqueer. Our range of ages was 18 to 58, the mean being 22.6 years old. Our respondents were asked to identify as an in-state, out-of-state students, or international student; 32.3%, 53.5% and 14.8% of the respondents identified respectively. These results are consistent with the demographics of Clark, and from our perspective and for the purpose of our project, constitute a sufficiently accurate sample of the student body.

When asked how often the participants were exposed to secondhand smoke on campus, only 4.9% of respondents claimed to have never been exposed, while 2.5% claimed to always be exposed. Rarely (28.8%), Sometimes (45.6%) and Often (18.3%) made up the remaining responses. Interestingly, 48.8% of the sample found that it was a concern, while 51.2% did not find it to be so. That being said, 95% of the sample acknowledged that secondhand smoke has negative health effects. 58.6% of respondents claimed to have smoked tobacco (even one time). Of these, 57% said that they first tried tobacco between the ages of 18 and 21, while 32.9% said
that they started between 13 and 17. We asked all respondents how many days in the past 30 they had smoked a tobacco product and received the following results: 1-2 days (22.5%), 3-5 days (5%), 6-9 days (3.6%), 10-19 days (6.5%), 20-29 days (2.2%), all 30 days (12%), and not at all (49%). We found that 52.9% of respondents saw tobacco use as a health issue at Clark University. Interestingly, 64.6% of respondents saw tobacco use as an environmental issue.

The next question posed of the sample was the perceived level of smoking prevalence at various areas around campus. In order of most serious areas of smoking prevalence to least serious, respondents rated the following: Outside the Academic Commons, followed by various entrances to buildings, followed by the dorms, followed by the University Center/Bistro, followed by Graduate School Buildings, followed by the ASEC building, and finally, the Kneller Athletic Center.

One of the most striking findings in our survey came from our question asking whether or not the respondents had ever participated in a program run by Clark University to assist with smoking cessation. Not a single respondent had ever used resources from Clark University to assist in smoking cessation. Interestingly, 43% of people who claimed to currently use tobacco said that they want to stop smoking now or in the future. 53% of people who currently use tobacco said that they would use Nicotine Replacement Therapy if it were offered at no cost. We
found that 76% of people who currently use tobacco did not know whether or not Clark University offered groups, classes, or counselors to help with smoking cessation.

When asked if colleges had a responsibility to lessen the risk of tobacco use by adopting policy that discourages tobacco use, 83.5% of respondents either agreed or strongly agreed. When asked if colleges had a responsibility to adopt policies that ensure that people had smoke-free air to breathe, 95.4% of respondents agreed or strongly agreed. We found that 73% of respondents agreed or strongly agreed with the idea that colleges should regulate tobacco on campuses. When asked about specific policies, 76% of the sample support the tobacco policy as it is currently written, while 84% support a policy geared towards education and a timed phasing out of tobacco. A full dataset of the survey can be found in Appendix A

Survey Comments

The comments posted at the end of the survey by the participants were enlightening. This process allowed participants to share the untapped opinions and ideas we did not request during the survey in an open-ended form. Some of the comments were quite insightful, while others seemed to be inputted with the intent of comedic value, and thus proved little insightful. That being said, we were able to draw many conclusions from our survey comments.

First, many participants expressed support for a stricter policy. These students were dissatisfied with the lack of policy enforcement
on campus, and many others qualified the issue as it pertains to the 20ft limit outside of buildings.

When people smoke within 20ft of the buildings, the smoke can get into the vents which allows it to get inside, buffeting everyone inside with carcinogens. Some participants boiled the issue down to health, some citing secondhand smoking as an environmental risk and how it creates an uninviting atmosphere for community members and their children. A few cited asthma that acts up around secondhand smoke. Many cited annoyances with secondhand smoke in general.

The most common issue raised in the comments section was the issue of improper disposal. Cigarette disposal units are placed in many strategic areas around campus, but, as one participant pointed out, they are even found littered around these units. From an analytic standpoint, this issue could be explained by a lack of concern in the Clark population at large, given that the availability of cigarette receptacles currently on campus makes this argument relatively untenable without taking that into consideration.

Another major issue that was repeatedly raised in these comments is the need for education and resources for community members. Suggestions varied from educational forums around smoking to signage being posted around campus around the negative health effects of tobacco consumption. In suggesting cessation resources and other health resources, survey respondents reinforced the above noted unawareness of what was currently available to those at Clark.
The issue of addiction and substance use was raised in many of the comments. The issue was framed to make the point that punitive measures are not the best way forward, as this shame approach would have serious ramifications and be ineffectual.

Focus Group Results

In order to supplement our surveys targeted at Clark students, we conducted three focus groups. Between the three focus groups, which were held on Sunday, April 8th, Monday, April 9th, and Tuesday, April 10th, 2018. Through this process, we were able to hear from a total of twenty-one students, and engage them in a group dialogue, reflecting on a series of questions and to each other’s comments.

Focus Group 1

Our first focus group underlined the difficulty that we would encounter trying to implement a full tobacco ban at Clark University. The group was supportive of the gradual, phased approach to campus cessation. The prevalence of the international population and opinion came to light in the discussion. One of Clark’s main draws is its global focus and international accommodation, Clark being a cultural hub. An international student in the focus group said that it was enough of a cultural disappointment not being able to drink, and that an additional ban on her tobacco consumption would have really impacted her initial experience on campus and opportunity for socializing and could influence the final college decision process.

When asked about education and support style enforcement, a student raised the point that friends telling each other to stop only annoys the smoker or causes them to modify the behavior to not do it around their close peers. The group also agreed that peer strangers attempting to
implement peer enforcement would only lead to indignation and confusion. It seemed to be that in this specific situation, it is not that Clark students are incapable of helping each other out, it’s that there is a possibility of non-reception from the smokers.

The group came to the consensus that Clark could do more for assisting students with tobacco cessation. Even a start would be the explicit offer for cessation support. Nicotine gum or patches would be useful as well, but the distribution structure for this strategy needs to be addressed. The issue of e-cigs came up, and the prevalence of vaping was highlighted at Clark, around the United States and globally. The group was of the opinion that a blanket ban on tobacco was not the answer, and that the goal of “clearing the air” was accomplishable with a ban on cigarettes alone. They argued that vapes or e-cigs have not been proven to cause second-hand smoke, and chew or dip do not affect air quality. Vapes or e-cigs can be used to assist with cessation, the group included.

The idea of smoking as a social function was highlighted when looking over survey results, and that RA’s and Orientation can try to dispel the positive social stigma around it. It was agreed that the current policy was incomplete without realistic areas for people to smoke twenty feet from buildings. When weather occurs, people will just stand in the doorways or under ledges to shield themselves from the elements. Without structure to do that twenty feet from the buildings, the policy does not support itself.

Focus Group 2

In our second focus group, we had a diverse group of eight individuals. Our participants initially commented on the frequency of students smoking around campus and commented that it was very prevalent. Students as a whole agreed that they frequently encounter student smokers on
a daily basis as they walk to class, the library, and in front of their dormitories. Exactly half of students stated that they were exposed to cigarette secondhand smoke while being inside their dorm rooms. Students shared that it is common for students to smoke within 5 feet of dorm entrances of Hughes, Dana, and Johnson-Sanford in order to be protected by the brick awning connected to the building.

All students reported that second hand smoke was a concern to them, as they found second hand smoke to be detrimental to their overall health, and ability to breathe clean air. When specifically asked about locations where smoking on campus seemed prevalent, students stated that outside the Academic Commons, the UC, most residence halls, Jefferson academic building, Jonas Clark, and outside Sackler Science building exit under the walking bridge.

Students shared that they believed that Clark would have to implement an incremental plan when trying to phase out tobacco on campus. When we expressed our plan to introduce a phased approach within a blueprint, students believed that Clark would benefit from this. Students believed that Clark University needed to take better steps in supporting students in their battles with tobacco addiction if they want to move towards a tobacco free campus. When asked how long this would take, most students believed that three years would be enough time for a University to implement a plan to confront issues of tobacco use and policies on campus.

When asked what type of things Clark could do to facilitate this change, all students agreed that their needed to be a larger emphasis on tobacco use within Week One’s orientation for first year students. Focus group members believed that the student body would be open to change that allowed for student input and overall revamp of resources for students when it came to tobacco use.
Focus Group 3

Our third focus group had an array of community voices, including diversity in class, gender, race, and activities at Clark. The group was overall supportive of a phased approach to a tobacco-free policy, in that it would be phased in over a couple of years. A big point made by the focus group was that this policy should be aimed at undergraduates, so as it is phased in, the future incoming classes will understand that this is the policy of Clark University.

The most poignant debate surrounded the issue of enforcement. Everyone in the focus group agreed that police intervention in any manner was overstepping boundaries. Many also expressed concern about a community-enforcement approach, namely Clark students approaching Clark students and informing them of a new smoke-free policy. Concern was expressed that a community-approach could perhaps be perceived as judgmental and marginalize the smokers of the community.

The consensus from the focus group on the best way to roll-out a policy such as this was to post signage everywhere. They were aware of the recycling cylinders scattered around campus and believed utilizing already existing structures would be an advantageous way to spread awareness of a new-policy. They also supported new signage that would clearly demonstrate the policy and supported placing them in the most common smoking areas; Academic Commons, Jonas Clark, and outside residential dormitories.

The group mainly agreed that a tobacco-ban on campus was too much of a blanket ban, and that approach would poke holes in our argument. They agreed that smoking was the main concern of tobacco-use on campus, and that targeting all tobacco use would only backfire on our goal of “clearing the air”. The focus group argued that vaping and other forms of tobacco use could
be tackled by cessation resources and programming, as opposed to banning its use on campus, such as would happen with smoke-tobacco.

The entire group agreed that Clark needed to provide more cessation materials and resources. All were appalled at the current level of updated resources available for Clark students to quit tobacco, should they choose to do so. The group also reached consensus in arguing that the best approach to “clearing the air” at Clark University would be the environmental argument. Everyone understands the health argument, they argued, and that it is less of an immediate issue. Tobacco, namely cigarettes, pose an environmental issue at Clark, whether it be butts littered on the ground, or forcing visitors to walk through a campus with smoke in the air and cigarettes on the ground.

Interview Results

Given that our survey and focus groups were targeted at the student body at Clark, we recognized the need to discuss Clear the Air and our project with various important stakeholders in the Clark administration. We conducted seven interviews, which are detailed in the discussion believe, seeking input and feedback on our proposed policy and path of implementation. A secondary intent of these interviews, which would prove incredibly helpful for the sustainability and execution of our work and project, was to garner stakeholder support and buy-in.

Interview 1: Stephen Goulet, Chief of University Police (UP)

Our interview with the Chief of University Police, Stephen Goulet, was conducted by Jackson Espe and Donovan Smith on April 3rd, 2018. This interview focused on the history of smoking at Clark, how past policies have changed, and the future of smoking at Clark with special
attention to the role of University Police (UP) in the current policy, and what role they might have, if any, in future policy on tobacco usage on campus. This interview proved to be one of our more wide-ranging ones, and provided a well spring of information on past practices and potential pitfalls from a key stakeholder’s perspective.

In terms of the current policy, we learned that although people are welcome to call UP for assistance if a person is not complying with the 20-foot policy, Chief Goulet does not remember a single instance of his officers being asked to do so. One issue that does occur several times a year which our group was not aware of was the small fires caused by improper disposal of cigarette butts outside of dorms. He attributed this to people flicking the butts into wood chips before walking inside during dry times of the year. Although this is not a major issue, it is noteworthy as another environmental hazard that cigarettes can create.

For past issues, Goulet pointed to the movement towards card access as opposed to key access in dorms as a potential model for community discussion around tobacco usage at Clark. He informed us that when this policy was being considered, the University held forums throughout the year open to Administration, Faculty, Staff, and Students. These forums provided a place for concerns to be discussed and addressed. Goulet and the interviewers also discussed utilizing this model in discussions of a tobacco policy change in the future.

Moving forward, Goulet immediately addressed one aspect of our plan he believed to be faulty, which was the role of University Police in the new policy. He believes that UP should have no role in enforcing any new policy on tobacco usage. As UP consists of uniformed officers, the concern is that sending someone in uniform to deal with a policy issue would unnecessarily escalate the situation, and since our main goal is to work from a model of education and support, this would not be beneficial to anyone. He pointed specifically to the difference between the law,
smoking is legal, and the policy. The dynamics of police officer interacting with a student smoking, which is legal, but against a policy, would “set us up to fail”. This new policy would represent a change in the mindset of community members, and the policy would therefore require support from both the broader community, and from administration. For the committee we plan to create next year to address these concerns, Goulet offered to join and work with them members. We believe he would be an excellent addition and provide valuable insight from an individual and institutional standpoint.

A final note from our interview with Goulet. During a discussion on whether he believed we were on the right track to avoid having any type of punishment for smoking he said, “We’re an educational entity here, why wouldn’t you go at it from an educational standpoint.” (22 minutes 40 seconds). This is an idea that we believe is another great reason of why we, as a University, should focus on education and support for tobacco users.

**Interview 2: Tim St. John, Assistant Dean for Campus Life**

The interview was conducted by Michael Spanos and Donovan Smith with Tim St. John, Assistant Dean for Campus Life on April 4th, 2018. This interview was conducted second, and covered ideas to improve our recommendations from the perspective of Student Life. The key takeaways from this interview focused on logistical roll out of the tobacco free initiative. It ranged from timeline, to resources, to orientation and other discussions of key stakeholders to consider. The major concerns addressed were the practicality of ban on tobacco products, what role enforcement has, and how to deal with addiction aspect of tobacco usage.

The most important result of this interview was finalization of the approach we had been discussing, St. John recommended that we utilize a tiered approach, which we later dubbed our
phased approach, where each year would come with some new aspects of our policy instead of all at once. We had already decided on a three-year timeline, with the new tobacco policy being officially implemented at the beginning of the Fall 2020 semester, but this helped to solidify how to describe the process. We discussed rolling out resources for support and education, community buy in, and advertising all as possible tiers, or phases, to use.

This discussion led us to talk about how we will distribute resources for tobacco cessation programs, beyond making these resources more prevalent at Counseling Services and Health Services. One idea floated was the possibility of encouraging programming during the year for students, these programs can be put on by different groups and could range from informational meetings to support meetings.

Moving forward we discussed trying to get a member of Tim St. John’s office to participate in our committee next year, Tim St. John said while he was interested, it might be difficult to schedule. Another person suggested was Kamaro Abubakar, who worked on a tobacco-free campus initiative at his previous institution. This is a wonderful sign of support for our initiative. Additionally, we asked how a tobacco cessation program could fit into orientation. St. John informed us that due to the time constraints of orientation, it’s unlikely that tobacco would get any serious amount of time to be discussed. However, it could be worked into the wellness forums that they will be instituting, and they would make sure to inform students of the policy on campus. Finally, a brief stakeholder overview added the idea of ensuring that when new policy was instituted, there was also a plan for how to address this issue in Admissions, possibly framing it as a student led initiative.
Interview 3: Kate Cassidy, Director of Resident Life and Housing (RLH)

We interviewed the director of Resident Life and Housing, Kate Cassidy on April 4th, to examine the issue of tobacco on campus from the angle of dormitory living. We found that enforcement of the tobacco policy around the dorms falls on the Resident Assistants (RA), they have a responsibility to call out students who smoke within 20 feet of the dorms. They are expected to document students who disobey the policy, but this can be done by the discretion of the acting RA. Should they decide to, they have the power to fine students $100 if they are in violation of the 20ft policy or smoke indoors. This can occur after a first violation and extends to e-cigarettes. If continued violations occur, additional $100 fines may be issued, and the administration can choose to relocate or remove the violator from campus housing. Cassidy expressed support for a phased approach to cessation policy, citing the ineffectiveness of “cold turkey quitting.”

RAs are equipped to disseminate cessation information through their programming duties, Cassidy said that some might “jump on that.” RAs work with wellness programs already, so cessation programming would be within their scope. Cassidy believes paper pamphlets are “on their way out”, and that QR code links would be easier to use, both for discretion and ease of access.

Interview 4: Professor Palm-Reed, Psychology Department

We interviewed Professor Palm-Reed of the Psychology department, whose many specialties include substance abuse disorders and addiction studies, on April 5th, 2018. She highlighted the importance of understanding the underlying causes of cigarette smoking on campus, the personal dynamics that cause an addiction to occur. People use cigarettes for different goals, such as mood regulation, focused attention or social interaction, and there may be alternative
ways to meet these kinds of needs. “Nicotine is kind of a funny drug, it does what you want it to,” she stated. The idea was raised that tobacco on campus is not perceived as a crisis problem, compared to other issues such as binge drinking, or suicide risk. Something that adds to this dynamic is the fact that the major risks that arise from cigarettes do not make themselves known for years after, which lessens the perceived impact. Another issue that allows tobacco ingestion behavior to continue after college is the fact that it does not conflate with a professional self-perception in the way that binge drinking, or excessive marijuana consumption do. Many students may cease these specific behaviors after college because they wish to be mature adults, but cigarette consumption does not necessarily contradict that idea.

Professor Palm-Reed suggested that a way forward would be to consider present values in the student body, and how those values connect to tobacco use. She also highlighted the fact that this needs to be a community driven shift, the student body must feel that they are participating in the changing policy, rather than feeling like it is being done to them. When it came to the issue of enforcement, Professor Palm-Reed agreed that involving University Police is not the way forward, and that even student led enforcement may not be the best strategy either, smokers won’t respond well to negative circumstances surrounding their smoking. A positive approach, “how can we help you” may be the best route. When asked about strategies for achieving buy-in from the faculty, Professor Palm-Reed believes that a salient observable student voice would impact faculty opinion, but this sector should be researched on its own to achieve faculty buy in. When shown some of our survey results, she suggested that a route towards achieving student buy-in would be to release our findings that show how strongly the students feel about the issue of tobacco on campus. This sharing of perceived norms influences behavior on campuses and could have a positive impact with our advertising and education initiative.
Interview 5: Dr. David Kessler-Former Commissioner of FDA

Dr. David Kessler was interviewed by Donovan Smith via phone on April 13th. Dr. Kessler is the former head of the United States Food and Drug Administration, leading the agency from 1990 to 1997. Under his leadership the FDA attempted to regulate cigarettes, and he has continued to work in Public Health since then. This conversation focused heavily on the addictive nature of nicotine, harmful side effects, and how a University Policy can be best be used to counteract the addictive nature of tobacco and other nicotine products. Dr. Kessler provided invaluable insight into this issue, and this discussion helped us re-evaluate the language we had been using in our work, helping us focus in on the issues we were concerned with. This ensured that our policy would be understood by everyone in the same way.

For the addictive nature of nicotine, Dr. Kessler referenced some figures on tobacco usage in the United States, discussing the rising usage of e-cigarettes and vapes in teenagers. One of the distinguishing characteristics of this interview was the focus on the physical effects of nicotine, from how it’s addictive nature, to the harmful side effects. Many of the negative health effects suffered by smokers come from the tar released by a cigarette, however, nicotine without tobacco is still harmful. Dr. Kessler explained, and we believe it is necessary for individuals to understand, that nicotine is an extremely effective drug, capable of calming individuals, helping them focus, and contains an element of sedation. Individuals who use nicotine, whether it be in a cigarette, vape, or another form of smokeless tobacco use it to change how they feel. Once an individual is addicted, they are often “cued” to smoke. A cue can be any one of a myriad of options, a time of day, a particular feeling, and activity, or a location where they have smoked before. A key of the public health approach to banning these products focuses on these cues. If take away the cues, it makes it easier for individuals to smoke. The example Dr. Kessler gave was of airplanes, by
banning smoking and making it clear individuals are not allowed to smoke, it helps remove the need by decreasing the cues. Knowing it is “impossible” to smoke, means individuals may not have the desire to do so.

Looking forward Dr. Kessler emphasized the biggest conundrum as how to balance a harm reduction strategy of using vapes as opposed to cigarettes, but he recommended that we “err on the side of not encouraging people to start”. Dr. Kessler’s two biggest takeaways were a need to focus on changing social norms and removing the cues. Dr. Kessler endorsed our policy of banning tobacco products, emphasizing support for individuals who are addicted, and changing social norms. We believe that his emphasis on how explicitly banning smoking on Clark’s campus would remove cues for individuals who are addicted to be an excellent one. This provides more help for those who want to try and quit tobacco, creating supportive environment for them to do so.

**Interview 6: Jason Puopolo-Head of Grounds**

Our interview with Jason was informative, as he gave us practical insight to the sustainability angle of our project. When asked how he saw the grounds at large in the context of our efforts, he reported that the cigarette receptacles placed around campus by Eddie in the fall had decreased the prevalence of littered cigarette butts around campus by an estimated 50%. He noted this means there is a significant amount less of cigarette butts entering local waterways or animal food resources, increasing the environmental sustainability of the Clark campus and surrounding community. According to Jason, this has a direct, positive impact on the labor time and operations for the grounds staff, and highlights the fact that students are receptive to sustainability initiatives. Less cigarette butts scattered around campus means less labor time, and less fuel emissions needed to clean them up, increasing overall sustainability at Clark University.
Interview 7: Megan Kersting-Director of CPG

Jack Espe and Donovan Smith met with Megan Kersting, Director of Clark University’s Center for Counseling and Personal Growth on April 18th. As our interview came near the end of our project, we focused mainly on how CPG could fit into the framework we had developed, and concerns that CPG saw with said framework. Our interview covered strategies that counselors at CPG had been utilizing to deal with those who wish to stop using nicotine products, the current resources available to students, what changes could be made, and potential issues with the ban of tobacco products, and vapes.

Currently counselors at CPG focus on a tactic known as motivational interviewing when discussing nicotine usage with students. Motivational interviewing has been found to be effective in helping students quit and avoiding defensive responses. This discussion transitioned to how CPG personnel may be utilized next year in writing a policy and making recommendations that ensure students who do use tobacco products do not feel stigmatized and persecuted on campus. Through this conversation, we established that next year when a committee is formed, they should reach out to CPG to see if someone would either like to join or advise on a more informal basis on issues related to CPG. Regardless of which happens, CPG should be kept in the loop as they are an important resource for students.

For current resources, we discovered that there is a Psychiatrist who students can see at CPG if they make an appointment, and this psychiatrist can prescribe medication if they wish for help with quitting nicotine. This is offered in addition to the one to one counseling that is already offered by CPG, in addition, this one to one CPG is moving away from session limits next year and is also relocating to Woodland street which may help with accessibility for students. For
resources in the following years, we did discuss the possible formation of support groups, but it was stressed that these groups tend to be most effective when spearheaded by students. That is something to keep in mind in the coming years, that strong student support and student led efforts are always key when working on issues. Unfortunately, we were not able to address how faculty and staff on campus may be able to find resources to support them, and the possibility of support groups involving them as well. That is a concern that needs to be examined more closely in the coming years.

A key deficiency that we had noticed during our project, and that was raised by Kersting was the lack of centralized wellness resources at Clark. To this end, part of our proposal has been the creation of web page for Clark that would be a central database for students to access wellness resources at Clark. For our purposes, we would like to see centralized resources for the updated tobacco policy when it is released, but we recognize how tobacco usage fits into a wider wellness conversation. Something else that arose during this conversation was our community accountability. Kersting believed, that although we are on the right path with community accountability, and no punishments, there would still need to be someone in charge of this whole process, a dedicated wellness director.

Finally, in our discussion of whether the policy would be changed, we addressed several potential roadblocks. One of these roadblocks being the University’s current policy on Marijuana usage on campus, and how that may change in the future. We had chosen not to address that issue as it falls under a different set of problems than the ones we are addressing, but it is worth noting that people may feel that if they get tobacco products are banned on campus, any change of a different smoking product being allowed in the future, i.e. marijuana, would be lessened.
V. Discussion of Results

Results from our multifaceted approach to gathering input from the Clark community around the possibility of a tobacco-free policy varied widely and addressed conditions and possibilities related to every aspect of our proposal. Through the surveys, interviews, and focus groups that we conducted, all against the backdrop of our best practices research, we have identified four major themes that rest at the foundation of our proposal and implementation plan. The four themes are: community accountability rather than punitive, enforcement of the suggested policy; a gradual, phased approach to implementation; the development of resources for support and cessation; and the decision to craft our policy to address all tobacco usage and exclude marijuana consumption. This section discusses these four themes and explains why they are thus heavily reflected in our subsequent Blueprint.

One of the largest points of discussion, both internally and with those members of the community with whom we consulted, was the issue of enforcement of any tobacco-free policy. As Chief Goulet of University Policy (UP) signaled, as did focus groups participants, there is little interest, and indeed active opposition, to the idea of having this policy enforced by UP. The research supports this sentiment we have done on other university policies. Syracuse, for example, completely excludes campus Police from their compliance policy (Syracuse University, 2017). Going further even, in a brochure produced by Syracuse around their Tobacco-Free Campus policy, the University outlines scenarios in how best to approach those breaking the policy. In one of three “scripts,” a student approaches a fellow student as respectfully reminds them of the policy and provides them with the information around the tobacco cessation resources available on campus (Syracuse University, 2017). We believe that this approach is fundamental to our proposal.
It ensures that a tobacco-free initiative is not simply aimed at banning tobacco usage on campus, but addresses the true objective of any such movement; the health of our community as not just the clearing of the secondhand smoke in the air, but healthy in a more holistic sense, where a culture of open and communicated support of the wellbeing of all is shared by all.

There are universities, however, that do involve campus Police in the essential policy enforcer. WPI’s Culture of Care policy states that: “students are encouraged to call Campus Police for assistance when they are aware of any situation involving or impacting the health and safety of any individual” (WPI Culture of Care). While we recognize that this approach is possibly the easiest, given some students proclivity towards calling the Police when they see a situation that they do not feel comfortable addressing, we also believe that involving Police in a minor issue can only lead to escalation of situations and unnecessary punitive measures. Some students in our focus groups also expressed hesitancy around approaching fellow community members and fear of that confrontation. Two aspects of our Blueprint address this, however. The first being that it is not required of students to confront others, but only encouraged in those situations in which they feel comfortable. Secondly, such a peer-to-peer approach, such as the one employed by Syracuse and Simmons College, we believe would increase the probability of success as compared to the involvement of authority figures. In general, we are certain that this approach will help to facilitate a supportive, welcoming community, where the consumption of unhealthy tobacco products is not ignored and shamed but discussed openly and in a supporting fashion.

Having a model of community accountability that stresses a supportive approach, rather than UP enforcement, requires that there be resources for cessation available on campus for community members to not only encourage cessation but be able to offer tangible support to do so. In our review of the resources available at Clark, we were disappointed to find a brief mention
on the Clark Health & Wellness website, with no resources offered. Upon visiting the Center for Counseling and Personal Growth (CPG), and inquiring about what there is available, we were directed towards a single seemingly outdated brochure, signaling this to be the extent to the information available, this brochure is available in Appendix E. In our interview with CPG, however, we were informed that all students can receive smoke-cessation aid products, namely Chantix and Wellbutrin, through the Clark health insurance policy. In fact, CPG provides these products to all students at Clark, given that the students health insurance covers smoke-cessation aids. Other universities that have adopted anti-tobacco policies have adopted holistic approaches to curbing tobacco-use amongst their student population. Bentley created “community and education events” to promote the new policy, which included: meetings with tobacco task force members, awareness events and campaigns, and increased resources for cessation.

A theme that was consistently seen within our project was the question of what type of tobacco policy should be enacted at Clark University. This theme was present within our research, survey, focus groups, and interviews with stakeholders. Our group recommends a phased policy that provides support in tobacco cessation resources for Clark University students. It is evident that the university lacks resources, and it is important to show a commitment to supporting students within a policy change linked to student addiction and drug use. Secondly, this policy will include the complete ban of all tobacco products. This includes cigarettes, cigars, vaporizers, e-cigarettes, hookah, water pipes, and chewing tobacco. As of April 1st, of 2018, there are now at least 2,164 100% smoke free campus sites. Of these, 1,805 are also 100% tobacco-free, 1,741 also prohibit e-cigarette use, and 883 also prohibit hookah use (NoSmoke.org, 2018). Over the course of the last eight years, the number of tobacco free universities has quadrupled. Both statistics show the increase in university support towards tobacco free policy instead of smoke free policy. Within
our survey it was shown that over 85% of respondents believed that colleges had a duty to adopt policies to discourage tobacco use. Universities have been moving towards tobacco free policies because of the proven harm of secondhand smoke, but also for environmental, and overall community health concerns. Items like dip may not produce second hand smoke, or even hurt the environment, but it is a proven detriment to human health, and a majority of individuals start these habits either before or while in college. In our survey it was revealed that more than half of Clark students are concerned about cigarette butts on campus as an environmental issue, and more than 75% of Clark student believe second hand smoke to be a health risk. Within our interviews we heard testimonies from students who said that they are not satisfied with the current policies, as they infringe on other people’s rights, are not followed, and vary depending on your location. The recommended policy we have written provides uniformity in Clark Universities tobacco policy, but equally as important, the support in resources that so many other universities are and have been providing their students to stop using tobacco.

Another theme addressed in our discussions with stakeholders and focus groups was that of a phased approach to our blueprint and any policy change at Clark. This idea of a phased approach was loosely formed at the beginning of our project, when deciding the goal date for implementation, we thought that Fall semester 2020 seemed attainable, giving enough time to for the University to get community input, and create the best policy and overall strategy. However, it was not until our interview with Tim St. John that we officially put a name on it. During our discussion he mentioned that he thought it was important to use a “tiered approach”, to ensure that there is community buy in and all steps are taken in the right order. Over the course of this discussion we realized that we needed to put this tiered, or as we have come to call it, phased approach front in center. This is a key part of our plan, it is the lynchpin for success. With a proper
plan and timeline, all stakeholders will know exactly what step of the process comes next and why it is important.

This phased approach has gone through several iterations until it reached the final version. Creating a final version that made the most sense was the subject of much debate, as we wanted to create a timeline that set a pace which was diligent, and deliberate, without pushing the issue down the road. Ultimately, we decided, as seen in our blueprint, on three main phases, each with a subsidiary goal.

**Phase 1: Formation of Committee and Resource Initiation**
- Formation of Committee, initial meetings, decide on official policy proposal Fall 2018
- Education, Resources, and Support Fall 2018

**Phase 2: Recommendation and Approval**
- Semester long survey and forums on the issue, with final proposal written, submitted, and voted on by the end of Spring 2019

**Phase 3: Advertising and Updating resources**
- Fall 2019-Spring 2020: Update cessation resources for students and staff
- Spring 2020: Informing the community of the updated policy that will begin next year, including incoming students and alumni.
- Over the summer, information on the policy will be disseminated to all students via email, including a link to the website which includes our capstone project, the committee’s report, and relevant resources

**Phase 4: Implementation: Fall 2020**
- Beginning this semester, the policy will be implemented. Orientation will include a brief section on tobacco usage during their wellness discussions including where resources are accessible
- Posting of signs that clearly state no smoking or tobacco use and moving cigarette receptacles off campus

This phased approach is adaptable as the committee better understands how the Clark Community feels about tobacco and nicotine usage on campus, and we believe that, if feasible they could decide to change the policy for Fall Semester 2019. But, we decided that a more deliberate approach would be better, as our goal is to create effective and lasting change. Some of our
interviews have provided good input on this approach. One such conversation that struck us was with Dr. Kessler, who state that at base level, what we are attempting to do is change social norms. Changing social norms is difficult at best, which is another reason that we establish this three-year timeline for implementing a new policy.

Each phase here was chosen because it is an important part of the process. Phase 1 is intended to get the committee together and talking about the issues. Our entire capstone is dedicated to getting the committee up and running. This project provides them with the relevant research, plan, and ideas for how to address this issue. Once the committee is formalized, they will ultimately decide the best way to interact with the community, which leads to Phase 2. However, as you will notice, Phase 1 has two parts. The second part of phase 1 is the rollout of resources on tobacco cessation. Regardless of how, or if the policy does change, there needs to be more education, resources, and support for students. That is why these two parts happen concurrently.

Phase 2 is when the community becomes involved in the process. A campus wide survey should be released to all faculty, staff, and students to gain their input on the proposal. There should also be several community forums held so that members of the Clark community may express their support, or concern for changing the policy. Additionally, this should be a space for members to share how the resources provided can be improved. At the end of this period, the committee should submit the final recommendation to the Administration for approval. This will ideally happen by the end of the 2018-2019 Academic year.

Phase 3 will take place from fall 2019 until the policy is implemented in the fall of 2020. Once approval for the new policy is recommended, there are two more important steps before implementation, which is Phase 4. The first of these steps is to update the resources available to community members utilizing feedback received over the last year. Wellness in the Clark
Community is something that must be continually reevaluated to adjust to current issues and find the most effective strategies. The second part is that this policy must be advertised within the Clark Community, to prospective and incoming students, and alumni as well. We recommend Clark make a website dedicated to Wellness at Clark University, and include this policy in it. There should be links to national resources, and resources on campus. A wellness page is an important step for Clark and having a dedicated place within in this page for tobacco usage is important. This page should also include our research and paper, along with any further survey data, and the final report and recommendation from the committee. An email to all would alert them to the upcoming change, and the release of this information makes the process transparent, as well as creating a common space for students to access.

Finally, Phase 4 is implementation. The policy should begin prior to Orientation in 2020. It will include putting up signs all over campus which clearly state no smoking, informing new students at orientation and again alerting all students that this is the new policy. They would also relocate cigarette receptacles to the edges of campus. The implementation will also include giving students access to resources on discussing tobacco usage. This goal of Fall 2020 is attainable, and we believe that our phased approach will be a successful one.
VI. Blueprint

On the subsequent page begins the Clark Clear the Air Blueprint. As discussed in this paper’s Executive Summary and Introduction, the Blueprint is the main Capstone deliverable. This Blueprint was developed in recognition of the need to be realistic in our approach to what could be accomplished in working towards a tobacco free policy and the supporting resources, education, and campus climate shift over the course of a semester, from mid-January to the end of April. In taking into consideration the comments and input gathered from our community outreach, as well as from our observations of other universities long paths towards being tobacco free, we have developed this Blueprint as a phased implementation strategy, with the goal being that Clark go tobacco free beginning Fall 2020. In order to guide the work, this Blueprint names members of our community with whom we have had strategic conversations, and who have expressed interest and commitment in joining a Steering Committee to execute this work. Thus, this Blueprint is not simply an aspirational document that will result in little, collecting dust somewhere on a shelf in the office of the School of Professional Studies (SPS), but rather a living document based in best practice research with real suggestions, a plausible timeline for implementation, and with persons identified to execute the work.

In the Spring of 2018, the Clark University School of Professional Studies capstone group, Clear the Air, created this blueprint to aid the following committee in facilitating tobacco cessation support and policy at Clark University. In the Spring of 2018, more than 95% of the student body reported that “Colleges have a responsibility to adopt policies that ensure people have smoke-free air to breathe. Additionally, 94% of Clark University students reported being exposed to secondhand smoke while walking through campus. This blueprint was created by thoroughly
analyzing the different components of Clarks unique campus culture through two campus wide surveys, three focus groups, and interviews with faculty who specialize a field relevant to the issue of tobacco smoking at Clark.
Clark University Clear the Air: 

A Blueprint for the Successful Development & Implementation of a 

Tobacco Free Policy by Fall 2020

Vision Statement:

We believe that it is the responsibility of the administration to provide a healthy campus for all members of the Clark University community, including faculty, staff, students, and neighbors to our campus. We envision Clark University as a space where all respect and actively foster a supportive, welcoming, and healthy campus. We envision a campus where students, faculty, staff, and visitors alike will support the health and wellbeing of their fellow community members. We strongly believe that Clark can work to further support one another with the process of cessation and with confronting substance use disorders, and a community where the resources, culture, and policies in place facilitate these difficult processes. By eschewing disciplinary enforcement for a community-based accountability approach, the goal of Clear the Air is not simply to fight for a tobacco-free campus, but to create a more supportive, welcoming, and healthy Clark community.

SUGGESTED POLICY

Policy Statement:

Use of all tobacco products, including e-cigarettes and any non-smoking product, is prohibited on all Clark University own and operated buildings, on land owned by Clark University, or in vehicles on Clark University Property.

Procedure:
This policy applies to all persons, including all students, faculty, staff, volunteers, vendors, and visitors. This policy applies to all locations, campuses, buildings, vehicles, and outdoor areas owner and/or operated by Clark University.

“Tobacco products: cigarettes, cigars, pipe tobacco, hookah, smokeless tobacco, snuff, chewing tobacco, smokeless pouches, dissolvable tobacco products like orbs (dissolvable tobacco pellets), sticks, and strips or any other forms of ignitable or smokeless tobacco” (Emmanuel College).

**Enforcement/compliance:**

It is the responsibility of all members of the Clark University community to comply with this tobacco-free policy, and to promote compliance with the policy within the Clark University community by reminding all students, faculty, staff, vendors, and visitors of this policy at Clark University. Clark University has an excellent tradition of student advocacy and respect. It is due to the presence of these values that the Clark Community is in the position to respectfully inform community members of this policy.

There are no repercussions for violating this community standard. One of the resources available to students should be a community tobacco education meeting, this meeting is solely to inform people of why the policy exists, discuss how it works, and if the individual wishes to investigate quitting tobacco, direct them to those resources. It is important to note here the reasons for a lack of punishment. Because of the addictive nature of nicotine, we seek to inform and support rather than punish. We believe that this approach will be more effective in the long run, especially in the initial stages of the roll out in the policy. In the future the community may wish to change their enforcement of the policy.
Resources:

As part of the new policy we would like to introduce more thorough resources for the purpose of assisting students, faculty and staff through the effort of tobacco use cessation. These resources exist for the faculty and staff to some extent through their health benefits packages, but the resources are difficult to access. Students have access to cessation programs through the campus health insurance provided by BlueCross/BlueShield, but they are generally not known of or promoted outside of the Health Services office. We wish to elevate the exposure of these programs on campus, which include but are not limited to: QuitNet, Break Away from the Pack Email Campaign, AHealthyMe! Self-Care Center for Smoking & Tobacco, and Try-To-Stop. In addition, students are able to see a psychiatrist through the Center for Counseling and Personal Growth for medication (such as Chantix or Wellbutrin), and meet one-on-one with counselors.

Resource dissemination and assistance will be run by Clark Health Services and the Center for Counseling and Personal Growth. Clark Health Services will be able to provide medical advice on quitting, and Counseling services can work one on one with students, or support groups. As tobacco free fits into the larger conversation around wellness at Clark, we believe that the creation of web page for Clark that would be a central database for students to access wellness resources at Clark. For our purposes, we would like to see centralized resources for the updated tobacco policy when it is released, such as what the policy and there should be multiple ways to access this website, from health services, counseling services, dean of students, and campus policies. This website should explain the Universities policies and resources, providing a singular location where the community can go to have their questions answered, and better understand their options for quitting. This website should include sections on the different kind of resources available to students, faculty, and staff on campus, and links to outside resources available to all. There should
also be statistics on results from the surveys, and quotes that show the level of community involvement.

**Clark Clear the Air Steering Committee**

The committee will take this policy and work towards implementing it at the beginning of the 2020-2021 school year. The committee should consist of Representatives from CPG, Health Services, University Police, RLH, Sustainability, Administration, Undergraduate, and Graduate Faculty and Students. Director of Sustainability Jenny Isler, Chief of Police Stephen Goulet, Professor Joe O’Brien, Professor Kathleen Palm-Reed, have all verbally expressed interest, as have several undergraduate students, and representatives from the Center for Counseling and Personal Growth, and the Campus Life office.

**Timeline:**

**Phase 1:** Formation of Committee and Resource Initiation
- Formation of Committee, initial meetings, decide on official policy proposal Fall 2018
- Education, Resources, and Support Fall 2018

**Phase 2:** Recommendation and Approval
- Semester long survey and forums on the issue, with final proposal written, submitted, and voted on by the end of Spring 2019 (See Appendix F for example of statement to be sent out with survey, or use vision statement above)

**Phase 3:** Advertising and Updating resources
- Fall 2019-Spring 2020: Update cessation resources for students and staff
- Spring 2020: Informing the community of the updated policy that will begin next year, including incoming students and alumni.
- Over the summer, information on the policy will be disseminated to all students via email, including a link to the website which includes our capstone project, the committee’s report, and relevant resources

**Phase 4:** Implementation: Fall 2020
- Beginning this semester, the policy will be implemented. Orientation will include a brief section on tobacco usage during their wellness discussions including where resources are accessible
- Posting of signs that clearly state no smoking or tobacco use and moving cigarette receptacles off campus
VII. Conclusion

From the beginning of the four-month time period that this capstone project, Clark *Clear the Air*, was undertaken, until its conclusion, we discovered that the development and implementation of a tobacco-free policy is more achievable than we originally would have anticipated. Firstly, from our best practices research, we discovered that many other colleges and universities have made this bold step, including many in Worcester, such as: Worcester Polytechnic Institute (WPI), Worcester State, Becker College, Massachusetts College of Pharmacy and Health Sciences (MCPHS), and Anna Maria College. Thus, Clark is one of only a few colleges in Worcester that have not shifted to some form of tobacco- or smoke-free policies on their campus. Leveraging this knowledge, as well as the extensive body of research material that speak to the young average when smokers first become addicted, Clark can and should be convinced that they have a moral obligation to intervene in any way possible to disrupt the proliferation of substance use disorders on our campus. Secondly, as discussed in our Results section, the results of our survey and focus groups signal that the student climate is conducive to a policy shift towards bringing Clark tobacco-free. In these two forums, students were especially inclined to support such a policy shift if it were to be done gradually. Thus, and thirdly, this phased approach allows the policy to be refined via stakeholder and student input, guided by the Steering Committee, working towards a Fall 2020 implementation date. It also will allow for adequate time to properly educate the community around the new policy and put in place the cessation resources necessary. Lastly, from our best practices research, stakeholder interview with Chief Goulet, focus groups and survey respondents, granting enforcement powers and responsibilities to UP is not an option. Rather, a community accountability method, one by which community members are encouraged, when they
feel comfortable, to engage fellow community members in dialogue about the tobacco-free policy, the cessation resources available, and the deleterious health effects of tobacco use.
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Appendix A: Clear the Air 2018 Survey Data

Default Report

*Clear the Air Survey*

April 21st 2018, 9:30 am MDT

**Q1 - What is your gender?**

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>38.14%</td>
<td>119</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>60.26%</td>
<td>188</td>
</tr>
<tr>
<td>3</td>
<td>Choose not to identify</td>
<td>0.32%</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>I wish to self-identify</td>
<td>1.28%</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>312</strong></td>
</tr>
</tbody>
</table>
Q3 - Self-Identification

Self-Identification

Genderqueer

Nonbinary/queer/genderfluid

Q4 - What is your age?

<table>
<thead>
<tr>
<th>#</th>
<th>Field</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Std Deviation</th>
<th>Variance</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Age</td>
<td>18.00</td>
<td>58.00</td>
<td>22.59</td>
<td>5.46</td>
<td>29.85</td>
<td>267</td>
</tr>
</tbody>
</table>

Q5 - Check all boxes you identify with:

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In-state student</td>
<td>32.17%</td>
<td>92</td>
</tr>
<tr>
<td>2</td>
<td>Out-of-state student</td>
<td>53.85%</td>
<td>154</td>
</tr>
<tr>
<td>3</td>
<td>International Student</td>
<td>13.99%</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>286</td>
</tr>
</tbody>
</table>
Q6 - Do you reside in: (choose correct response)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>On-campus dorm/housing</td>
<td>43.90%</td>
<td>126</td>
</tr>
<tr>
<td>2</td>
<td>Off campus university housing</td>
<td>3.48%</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>Off campus private housing</td>
<td>51.92%</td>
<td>149</td>
</tr>
<tr>
<td>4</td>
<td>Other</td>
<td>0.70%</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>287</td>
</tr>
</tbody>
</table>

Q7 - Are you a member of: (choose as many as apply)
# CLEAR THE AIR

## Q8 - When I walk through campus, I am exposed to secondhand smoke:

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Club</td>
<td>48.47%</td>
<td>158</td>
</tr>
<tr>
<td>2</td>
<td>Student Government</td>
<td>3.99%</td>
<td>13</td>
</tr>
<tr>
<td>3</td>
<td>Varsity Sports</td>
<td>19.94%</td>
<td>65</td>
</tr>
<tr>
<td>4</td>
<td>Academic Society</td>
<td>11.04%</td>
<td>36</td>
</tr>
<tr>
<td>5</td>
<td>Other college organization</td>
<td>16.56%</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>326</td>
</tr>
</tbody>
</table>

## Q9 - Does secondhand smoke on campus concern you?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
<td>4.84%</td>
<td>14</td>
</tr>
<tr>
<td>2</td>
<td>Rarely</td>
<td>28.37%</td>
<td>82</td>
</tr>
<tr>
<td>3</td>
<td>Sometimes</td>
<td>45.33%</td>
<td>131</td>
</tr>
<tr>
<td>4</td>
<td>Often</td>
<td>19.03%</td>
<td>55</td>
</tr>
<tr>
<td>5</td>
<td>Always</td>
<td>2.42%</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>289</td>
</tr>
</tbody>
</table>
Q10 - Does secondhand smoke have negative health effects?

<table>
<thead>
<tr>
<th></th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, a concern</td>
<td>48.44%</td>
<td>140</td>
</tr>
<tr>
<td>2</td>
<td>No, not a concern</td>
<td>51.56%</td>
<td>149</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>289</td>
</tr>
</tbody>
</table>
Q11 - Have you ever smoked any tobacco product, even one time (e.g., cigarette, cigar, hookah, pipe, including vaporizer, etc.)?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>58.48%</td>
<td>169</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>41.52%</td>
<td>120</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>289</td>
</tr>
</tbody>
</table>

Q34 - Why did you or do you smoke tobacco products?

- Why did you or do you smoke tobacco products?
- Social events
- Just tried it out
- The Chinese culture enables us to
- When I'm stressed, I wish Clark had stuff they could give me to help stop
- At hookah bar
- Idk
- Out of curiosity
I do not currently. Last year, I smoked one cigarette to see how the experience was. My father used to be a pack-a-day smoker, so I already know I am not a fan and will not smoke tobacco products. I tried that one cigarette, did not enjoy it, and then didn't even finish it before extinguishing it and throwing it away.

I like it

Smoked a juul a couple of times but don't like it

To look cooler for the ladies

Cigarettes

Bc it's good as shit

Vape Nation yall

its fun

MY friends were doing it

I was drunk

Relaxation

my parents did

Cigars a few times.

Socially

I wanted to try my friends cigarette and took one puff.

For kicks

I smoke hookah because it is a social activity where I am from

I was drunk one time, and stressed another

Started smoking in high school, quit in third year.

Because I am addicted, and because I enjoy it.

For the high/enjoyment

peer pressure

Peer pressure initially, then got hooked for a few years before quitting altogether

I was angsty and sixteen and I wasn't able to use marijuana at that time in my life.

I thought I was a badass high schooler who didn't parentz

For fun/ because my friends were
I just tried it a few times when I was with friends

Cigs, hookah, and vapes to try it

I have very few times and they were for social reasons.

Yes

Tobacco is a stress reliever

I did it recreationally with friends a couple of times.

I've had tobacco products in hookah during social situations. However, I've never smoked a cig because I've wanted to avoid tobacco and do not really smoke hookah anymore for that same reason.

Wanted to try it as a young person - peer pressure. As an adult, it was something I did in social settings with friends

To impress a boy

To b cool

Friends offer it

Don't know

Sometimes I roll my weed with tobacco, also when I'm on adderal I crave tobacco, and sometimes I'll have a cig if I'm drunk

Cigar

social purposes

When I feel stressed so I smoke cigarettes, this could help relax.

Tried once when I was a kid because of curiosity. No tobacco for me ever since then.

Interest

Cigarettes, cigar

It's fun.

I have smoked 2-3 times cigarettes for experience.

The smell of hookah was not as bad as the smell of tobacco

I did because it was something that I was exposed to a lot, and I enjoyed it.

Cigar at a party

I smoked hookah one time at a bar in Worcester just to try it.

In a spliff, wanted to smoke weed
Stress management.

Stupid addiction has me right where it wants me

Because I was an impressionable youth

I like the vibe of hookah lounges.

Social reasons

Hookah and 1 cigarette

To stay awake during social events.

As an experience, but never for their designed purpose (i.e., to relax, etc.)

I thought I’d be cool

To try a cigar. It was just alright.

I was drunk

Stress relief

Occasionally

I decided that I would like to try it

So when I got to campus, I became friendly with a few South Asian fellows. They would always be smoking their cigarettes and I was like #YOLO but after Winter Break I reflected on my life and was like nahhhhh.

Head rush, keep me awake, calm me down

As an additive to marijuana.

It gives a head high

to try it as a teenager

because the friend group I was in at the time pushed people to smoke and drink.

Recreation

Just to try, wasn’t my thing.

To take the edge off occasionally and socialize when drunk

enjoyment

Hookah- once

I used to smoke, to socialize at parties and at work in my country of origin.

I started smoking because of my anxiety and depression. I stop sometimes but inevitably I pick it up again because now my body craves the nicotine.
My sophomore year I smoked sheesha using a hookah. I don’t smoke anymore.

I smoked hookah once because I thought it would be a fun thing to do with friends.

To try it.

For the culture.

Stress, habit

I tried a hookah one time but never again.

Curiosity

For the buzz

I used to smoke socially but it made me feel like crap.

I don’t smoke cigs but I like to mix a little bit in with my weed.

Socially with hookah

I guess it was for no reason

I no longer smoke. I tried a cigarette one time over ten years ago.

I like the flavor of hookah

Cigaretts

Social drinking

I didn’t mind smoking hookah when I was younger, but I have asthma so it wasn’t good for me - so I do not smoke it at all anymore.

I do not smoke tobacco products. I did it once when I was young because I did not understand what it was

I became addicted a long time ago but recently quit.

Just wanted to try it out

Just to try it a vaporizer once to see what it tasted like.

I was interested in what it was like

felt good in the moment

With friends

It was a vape, I was curious and it was offered to me. Only really did it twice.

Peer pressure and buzz.

hookah in my freshman year
Social interaction and stress relief

A long time ago

Because I like it

That’s an odd question. I enjoy them.

To try it and very rarely for fun

Because my friends were doing it

At a bar in Worcester. It was only once or twice, so I don’t really know how to answer your question about frequency.

Did it as a way to relax

I have a cigar once or twice a year with my family.

Social gatherings, to relax me, to get a break from a party, to connect with someone, because it feels good

Enjoyable

I vape occasionally because I like the feeling and the flavors. I do not like the negative health effects and smell of smoking.

I was drunk

Wanted to try it out, other people were doing it, seemed fun

I tried. Didn’t like it. Stopped.

Q12 - How old were you when you smoked a tobacco product for the first time (including vaporizers)?
<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8 years old or younger</td>
<td>2.68%</td>
<td>4</td>
</tr>
<tr>
<td>2</td>
<td>9-12 years old</td>
<td>4.03%</td>
<td>6</td>
</tr>
<tr>
<td>3</td>
<td>13-17 years old</td>
<td>32.89%</td>
<td>49</td>
</tr>
<tr>
<td>4</td>
<td>18-21 years old</td>
<td>57.05%</td>
<td>85</td>
</tr>
<tr>
<td>5</td>
<td>22 years old or older</td>
<td>3.36%</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>149</td>
</tr>
</tbody>
</table>

Q13 - During the past 30 days, on how many days did you smoke a tobacco product?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1 to 2 days</td>
<td>22.46%</td>
<td>31</td>
</tr>
<tr>
<td>2</td>
<td>3 to 5 days</td>
<td>5.07%</td>
<td>7</td>
</tr>
<tr>
<td>#</td>
<td>Question</td>
<td>None</td>
<td>Minor</td>
</tr>
<tr>
<td>----</td>
<td>--------------------------------</td>
<td>------------</td>
<td>-----------</td>
</tr>
<tr>
<td>1</td>
<td>Dormitories</td>
<td>21.89%</td>
<td>50.21%</td>
</tr>
<tr>
<td>2</td>
<td>University Center/Bistro</td>
<td>39.17%</td>
<td>50.00%</td>
</tr>
<tr>
<td>3</td>
<td>Kneller Athletic Center</td>
<td>63.98%</td>
<td>28.81%</td>
</tr>
<tr>
<td>4</td>
<td>Outside the Academic Commons (AC)</td>
<td>11.52%</td>
<td>36.21%</td>
</tr>
<tr>
<td>5</td>
<td>ASEC</td>
<td>57.69%</td>
<td>37.18%</td>
</tr>
<tr>
<td>6</td>
<td>Entrances/Exits to/from buildings</td>
<td>9.84%</td>
<td>41.80%</td>
</tr>
<tr>
<td>7</td>
<td>Outside Campus</td>
<td>17.80%</td>
<td>42.80%</td>
</tr>
<tr>
<td>8</td>
<td>Off-Campus Housing</td>
<td>21.55%</td>
<td>45.26%</td>
</tr>
<tr>
<td>9</td>
<td>Parties/Student Hangouts</td>
<td>12.39%</td>
<td>34.19%</td>
</tr>
<tr>
<td>10</td>
<td>On-Campus Events (Concerts, Athletic Events)</td>
<td>52.81%</td>
<td>39.39%</td>
</tr>
<tr>
<td>11</td>
<td>Graduate School Buildings</td>
<td>47.26%</td>
<td>38.40%</td>
</tr>
</tbody>
</table>
Q15 - When you’ve gone to the campus health center for service, were you asked if you used tobacco?
Q17 - Have you ever participated in a program run by Clark to help you quit using tobacco?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>38.74%</td>
<td>98</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>19.76%</td>
<td>50</td>
</tr>
<tr>
<td>3</td>
<td>I've never gone to the campus health center for service</td>
<td>41.50%</td>
<td>105</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>253</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>37.01%</td>
<td>94</td>
</tr>
<tr>
<td>3</td>
<td>I don't use any tobacco products</td>
<td>62.99%</td>
<td>160</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>254</td>
</tr>
</tbody>
</table>
Q16 - Are you aware of any university-provided services that might help you quit?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>19.78%</td>
<td>18</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>80.22%</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>91</td>
</tr>
</tbody>
</table>

Q18 - Do you want to stop smoking now or in the future?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>43.18%</td>
<td>38</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>56.82%</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>88</td>
</tr>
</tbody>
</table>
Q19 - Would you use NRT (Nicotine Replacement Therapy), such as nicotine gum, patches or inhalers to help you quit if they were offered at no cost to you?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>52.22%</td>
<td>47</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>47.78%</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>90</td>
</tr>
</tbody>
</table>

Q20 - Does Clark have special groups, classes or counselors to help students who want to quit using tobacco?
# CLEAR THE AIR

## Q21 - Colleges have a responsibility to lessen the risk of tobacco addiction by adopting policies that discourage tobacco use

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>16.30%</td>
<td>15</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>7.61%</td>
<td>7</td>
</tr>
<tr>
<td>3</td>
<td>I Don't Know</td>
<td>76.09%</td>
<td>70</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>92</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly Agree</td>
<td>31.15%</td>
<td>76</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>52.46%</td>
<td>128</td>
</tr>
<tr>
<td>3</td>
<td>Disagree</td>
<td>13.52%</td>
<td>33</td>
</tr>
<tr>
<td>4</td>
<td>Strongly disagree</td>
<td>2.87%</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>244</td>
</tr>
</tbody>
</table>
Q22 - Colleges have a responsibility to adopt policies that ensure people have smoke-free air to breathe.

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly Agree</td>
<td>52.05%</td>
<td>127</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>43.44%</td>
<td>106</td>
</tr>
<tr>
<td>3</td>
<td>Disagree</td>
<td>3.69%</td>
<td>9</td>
</tr>
<tr>
<td>4</td>
<td>Strongly disagree</td>
<td>0.82%</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>244</td>
</tr>
</tbody>
</table>
Q23 - Colleges should regulate tobacco use on campus

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly Agree</td>
<td>28.81%</td>
<td>70</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>45.27%</td>
<td>110</td>
</tr>
<tr>
<td>3</td>
<td>Disagree</td>
<td>20.58%</td>
<td>50</td>
</tr>
<tr>
<td>4</td>
<td>Strongly disagree</td>
<td>5.35%</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>243</td>
</tr>
</tbody>
</table>

Q24 - To what extent do people comply with the policy?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely</td>
<td></td>
</tr>
<tr>
<td>Mostly</td>
<td></td>
</tr>
<tr>
<td>Somewhat</td>
<td></td>
</tr>
<tr>
<td>Not at all</td>
<td></td>
</tr>
</tbody>
</table>
### Q25 - To what extent is the policy enforced

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Completely</td>
<td>4.10%</td>
<td>10</td>
</tr>
<tr>
<td>2</td>
<td>Mostly</td>
<td>22.54%</td>
<td>55</td>
</tr>
<tr>
<td>3</td>
<td>Somewhat</td>
<td>42.62%</td>
<td>104</td>
</tr>
<tr>
<td>4</td>
<td>Not at all</td>
<td>30.74%</td>
<td>75</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>244</strong></td>
</tr>
</tbody>
</table>

![Bar chart showing the distribution of responses to Q25]

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Completely</td>
<td>4.53%</td>
<td>11</td>
</tr>
<tr>
<td>2</td>
<td>Mostly</td>
<td>10.29%</td>
<td>25</td>
</tr>
<tr>
<td>3</td>
<td>Somewhat</td>
<td>33.74%</td>
<td>82</td>
</tr>
<tr>
<td>4</td>
<td>Not at all</td>
<td>51.44%</td>
<td>125</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>243</strong></td>
</tr>
</tbody>
</table>
Q26 - Do you support the tobacco-campus policy as it is currently written?

Yes: 76.03% Yes, 23.97% No

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>76.03%</td>
<td>184</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>23.97%</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>242</td>
</tr>
</tbody>
</table>

Q27 - Would you support a policy geared towards education and a timed phasing out of tobacco?

Yes: 100% Yes, 0% No

<table>
<thead>
<tr>
<th></th>
<th>Answer</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>242</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
</tbody>
</table>

Q28 - At Clark University, are cigarettes properly disposed of by their users?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>84.15%</td>
<td>154</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>15.85%</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>183</td>
</tr>
</tbody>
</table>

Q29 - Do you find tobacco use on campus to be a health issue for Clark?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>43.57%</td>
<td>105</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>56.43%</td>
<td>136</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>241</td>
</tr>
<tr>
<td>#</td>
<td>Answer</td>
<td>%</td>
<td>Count</td>
</tr>
<tr>
<td>----</td>
<td>--------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td>52.87%</td>
<td>129</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>47.13%</td>
<td>115</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>244</td>
</tr>
</tbody>
</table>

Q30 - Do you find tobacco use on campus to be an environmental issue for Clark?

![Bar chart showing the results](chart.png)

Q36 - Please use this space to provide us with any additional information or thoughts you have.

Please use this space to provide us with any additional information or thoughts you have.

I not really have support in China, and when I come here no support to stop either

I wish teachers would support students in pushing for some better policy!

stop trying to police everyone
I hate cigarette butts everywhere I go
I do apologize if this is not completely accurate as I really do not see tobacco that much around the campus and came from a town with little tobacco use. My perception though is with the advent of vaping it is becoming more of an issue again.
The policy should be made more strict, and should be unforced - I see students smoking IN the dorms and they don't get in trouble
I have bad asthma so having smoke around is dangerous for me.
People should do a better job of disposing their cigarette butts
I believe nearly students at clark, as well as most people of this age range are fully aware of the health risks of tobacco. Most smokers here do so with full knowledge and education of the risks. The ways to quite offered are adequate.
Ultimately, tobacco use should be an issue of personal choice for those who choose to smoke but I support policies that designate areas specifically where smokers can go if they choose to.
while i support help for those with addictions, it is very important to consider especially the perspective of international students who grew up and come from a culture in which tobacco usage is normalised. As an addict, it’s important to me that I would not get penalised for smoking when it was never a concious desicion to me, even though i do heavily rely on tobacco products for stress-management
Just to clarify, secondhand smoke inside is quite hazardous. However, outside it doesn't
Cigs are gross and it's predominantly international students that don't follow the policy of on campus smoking. The school needs to step up and actually enforce the smoking policy because people who don't smoke cigs shouldn't have to suffer from smelling that garbage.
I would not want the school to control what people choose to do. However, I agree that smoking is a health and environmental concern for the whole school, not just the people who are smoking. Therefore I feel it is fair to create a smoke free campus. Smokers can choose to smoke on their own property. The school is for everyone and should be kept clean. Also, the school should continue to provide support and education for smokers who wish to quit.
The new cigarette disposals are sometimes not in ideal locations as many people do not follow the 20 feet from the building rule. Much of the smoking problem at Clark is not necessarily tobacco based - hookahs/marijuana use are most likely at least 50% of all smoking at Clark.
I don't mind people smoking, I think they have the right to do it. They should remain 20 fat from the building as curtesy but if it’s raining I think it’s a bit much to expect them to sit in the rain. Also with e-cigs most people just do it in their room and the second hand smoke is debatably damaging. If a tobacco band was put into place and then the population moved entirely toward the e-cig market (and if the second hand smoke isn’t harmful) then Clark’s band would seem over bearing. Peace, one love
The tobacco use at Clark is extremely distracting and thoroughly against a lot of what Clark stands for. There are cigarette butts EVERYWHERE and I am constantly inhaling other students’ second hand smoke, which is detrimental to my asthma. I can smell it during class in the classrooms even if the windows are closed. Tobacco use is not conducive to a strong learning environment.
Virtually all Clark students know about the health risks of tobacco. Current users seem very sensitive to keeping their smoke away from others. The only issue I have is that people leave
cigarette butts everywhere, though it's hard to say whether these are left by Clarkies or by others who live nearby.

Assuming issue = primary concern & area for immediate action

concerning at Carlson Hall people do not honor the 20 ft rule. When people smoke out side of academic commons smoke gets in through vents and stinks!

I think that people need to dispose of cigarette butts properly because they are all over the place, but I don't think that Clark has the right to dictate the (legal) behavior of students on campus, and if they tried there would be serious pushback. Maybe having smoking areas around campus where smokers must smoke would lessen the exposure of secondhand cigarette smoke instead of saying that Clark needs to become a smoke free campus??

I think that it is a problem especially for students coming from countries where smoking is more socially acceptable

The biggest concern I have is that many students like to smoke right outside the AC (on the same side as the gym). They stand right next to the vent that takes in air from outside. I have been in the library before, on the 3rd floor, specifically, and smelled tobacco due to students smoking near the vent.

There needs to be a recycling bin for butts at Blackstone. There should be areas designated for smokers.

All people need to do is throw out their cig butts but they don't so start cracking down on those few culprits

No one throws away the butts

Those cigarette disposal things were installed, I think by net impact, and I frequently see butts littering the ground around them. I appreciate the idea, but people who smoke are apparently unwilling to utilize them and it's not an effective implementation. I fully support having a tobacco free campus, I think it may be the only way to address both the environmental and health concerns satisfactorily.

I have noticed a surprising portion of tobacco use coming through the smoking of spliffs

I gotta poop

Honestly my biggest concern is clean air on the green. More often than not it's one of the only green spaces in the neighborhood for many local children that come and play soccer. Exposing them to second and third hand smoke is irresponsible and unacceptable. It's also normalizing tobacco use to them.

I think there is a large culture of smoking cigarretts and a HUGE culture of vaping, no one really thinks that vaping is bad and will do it pretty much anywhere. I am a freshman so this mainly pertains to the freshman class as I have seen it.

I smoke hooka and cigarettes every now and then and would be unhappy to see them banned entirely from campus. as an adult, I understand the health risks and so does just about ever other student on campus. I agree that indoor smoking and smoking close to buildings is undesirable, but ordering students to give up tobacco entirely would be overbearing and infantilizing.

I think that people are going to smoke tobacco if they want to. I think the university has a responsibility to protect those who do not wish to be exposed to smoke, as dealt with in its policy. Smoking cessation tools and support is good to have available and to make students aware of these resources but not forced upon them. I cannot stress enough how important it is to address the cigarette littering problem; a policy against littering tobacco products should be considered to discourage this behavior. I wish this survey had a "don't know" response
for rating tobacco use at the location as well as neutral answers for other items in the questionnaire.

Quit smoking, comrades

There are cigarette butts everywhere and it’s nasty

I try to be conscious of my surroundings and affecting people's air. The biggest qualm/concern I have add a tobacco user is the litter

Although there are health concerns that accompany smoking in shared outdoor spaces, I hesitate to agree with a policy that gradually phases out tobacco because smoking has a different connotation for many international students who attend Clark.

Some of these answers are more nuanced than a yes or a no.

Cigarettes are definitely killing tons of students, staff and faculty slowly on this campus, though I doubt that second hand smoke is significantly negatively effecting people in a serious way. I think that there are far more important issues that research and advocacy should be focusing on. Students, faculty, and staff, of color are not supported equitably on this campus and face racism on many levels. Very little serious attention is paid to sexual assault on our campus. Research and policy change should be centered on promoting more just policy to reverse the effects of harmful racist and sexist institutional policy that we at Clark perpetuate. Thank you.

I think a more strict policy would be beneficial in reducing the numbers of students who start smoking cigarettes in college (which I’ve heard is high). I think this is problematic and any way to reduce these numbers would be good. However, if this was strictly enforced it would worry me that students who are already addicted to cigarettes would need to go off campus in order to smoke. I'm not a smoker, but I know some, and my opinion is that these people either need assistance in quitting if they are willing to put in the effort. Or, If not, making them walk off campus to smoke seems extremely inconvenient. From my experience most people who smoke want to quit, but it's really hard to. And most people constantly remind them that they need to quit, whilst they're still addicted and need their daily cigarettes. What would the exact policies be? How far off campus would they need to go? And would this be so strictly adhered to so that smokers would feel scared to smoke on campus? This might sound a little silly, but I think it's worth thinking about! Thanks for all your hard work! I think it's an important issue!

I find it concerning that the established rules regarding smoking around buildings are not enforced. It is disappointing.

Near the Goddard monument people leave butts.

I understand that Massachusetts as a state makes smoking legal but considering the health implications of smoking on campus and the category of college kids actively participating in it, it becomes worrisome that the supposed merits of smoking is way insignificant to its repercussion on student's mental health.

There are cigarette butts littering the outside of the ac, dorms, academic buildings, on the green. It is bad for the environment to be littering. The newly installed recycling bins for cigarette are interesting, but have not fixed the problem. It has also led to more people standing on pathways smoking.

There is a lot of smoking near sackler

People do not follow the rules and are always smoking outside the dorm buildings. The campus is small — just make people go off-campus to smoke. I grew up with an abusive father who smoked all the time, so for me I experience slight PTSD every time I smell it from
people blowing it in my face while walking to class. Moreover, every time it rains, the cigarette buds end up EVERYWHERE by Dodd and JSC halls and stay between the cement cracks.

all the internationals throw the cigarettes on the ground outside of JSC/ Dodd ignoring the new disposal sites. it is very frustrating to see and i want some to be enforcing that policy of disposal.

Many of these questions are oddly worded and unclear.

The little cigarette disposal boxes are good, but they’re not located where people smoke. One outside the AC towards the gym, for instance, would do wonders.

There should be more signs posted about smoking 20 ft away from buildings and this really needs to be enforced. Especially in cold weather people will smoke right at doors. Even if they are not right at entrances or windows, smoke still comes into public indoor spaces through heater vents, such as in the AC or in residence hall rooms.

A few years ago, my mother died of cancer caused exclusively by smoking. Me telling her the risks and urging her to stop wasn't enough. If she had been surrounded by institutions that educated and discouraged smoking, institutions that made it difficult and where it was socially unacceptable, maybe she would still be here today. People don't understand how much at risk they are. And if they do, they are removed from the gravity of the pain caused by cancer and other smoking-related illness. I strongly feel that if anyone could see how much agony my mother was in while she went through chemo and radiation, they would change their minds. All it takes is some empathy, some realization that yes -- this can happen to you. Even if you don't see an effect until you’re older. If educating people doesn't work, maybe scaring them will.

There should be markers indicating how far away is 20 ft from the doors with ash trays in that area instead of right next to the doors. Also, in my experience I have found that therapy and addressing underlying issues of stress etc that lead to smoking are more effective than punishing smoking.

People can’t toss their Butts easily.

Don’t ban vaping, smoking is nasty though and the environmental effects of cigarette butts is bad. I don’t think it’s a university’s job to command their students’ health decisions if they are minimizing harm to the environment so banning vaping entirely would be against my values.

Current regulations at Clark seem to be good.

It's lit

Q36 - Topics

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
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<td>100.00%</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>19</td>
</tr>
</tbody>
</table>
Appendix B: Edward’s Aroko Tobacco 2017 Survey Data

Default Report

Clear the Aire Survey (Year 1)
April 21st 2018, 9:42 am MDT

Q1.2 - 1.) What is your gender?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>35.76%</td>
<td>113</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>64.24%</td>
<td>203</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>316</td>
</tr>
</tbody>
</table>

![Bar chart showing gender distribution with 35.76% for Male and 64.24% for Female]
Q1.3 - 2.) What is your age?

21

22

0

Q1.4 - 3.) What is your current standing here at Clark

- First Year
- Sophomore
- Junior
- Senior
- Graduate Student
- Faculty
- Staff
<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>First Year</td>
<td>4.08%</td>
<td>13</td>
</tr>
<tr>
<td>2</td>
<td>Sophomore</td>
<td>12.23%</td>
<td>39</td>
</tr>
<tr>
<td>3</td>
<td>Junior</td>
<td>9.40%</td>
<td>30</td>
</tr>
<tr>
<td>4</td>
<td>Senior</td>
<td>17.87%</td>
<td>57</td>
</tr>
<tr>
<td>5</td>
<td>Graduate Student</td>
<td>13.79%</td>
<td>44</td>
</tr>
<tr>
<td>6</td>
<td>Faculty</td>
<td>10.03%</td>
<td>32</td>
</tr>
<tr>
<td>7</td>
<td>Staff</td>
<td>32.60%</td>
<td>104</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>319</td>
</tr>
</tbody>
</table>

Q1.5 - 4.) Do you reside: (please choose best response)

- On Campus Dormitories: 21.73% (68)
- Off Campus Clark owned: 1.60% (5)
- Off Campus or private housing: 76.68% (240)

Q1.6 - 5.) Are you a member of: (choose as many that apply)
### Q1.7 - 6.)When I walk through campus, I am exposed to secondhand smoke:

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>On campus Club</td>
<td>38.13%</td>
<td>98</td>
</tr>
<tr>
<td>2</td>
<td>Student Government</td>
<td>3.11%</td>
<td>8</td>
</tr>
<tr>
<td>3</td>
<td>Sports Team</td>
<td>21.79%</td>
<td>56</td>
</tr>
<tr>
<td>4</td>
<td>Academic Society</td>
<td>12.45%</td>
<td>32</td>
</tr>
<tr>
<td>5</td>
<td>Other college organization</td>
<td>24.51%</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>257</strong></td>
</tr>
</tbody>
</table>

![Bar chart showing exposure by activity](chart.png)
<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
<td>12.06%</td>
<td>38</td>
</tr>
<tr>
<td>2</td>
<td>Sometimes</td>
<td>69.52%</td>
<td>219</td>
</tr>
<tr>
<td>3</td>
<td>Often</td>
<td>15.56%</td>
<td>49</td>
</tr>
<tr>
<td>4</td>
<td>Always</td>
<td>2.86%</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>315</td>
</tr>
</tbody>
</table>
Q1.8 - 7.) Is secondhand smoke on campus a concern/annoyance for you?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, a concern/annoyance</td>
<td>50.00%</td>
<td>158</td>
</tr>
<tr>
<td>2</td>
<td>No, not a concern/annoyance</td>
<td>41.77%</td>
<td>132</td>
</tr>
<tr>
<td>3</td>
<td>No opinion</td>
<td>8.23%</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>316</td>
</tr>
</tbody>
</table>

Q1.9 - 8.) Secondhand smoke has negative health effects.
Q1.10 - 9.) Have you ever tried any tobacco product, even one time (e.g., cigarette, cigar, hookah, pipe, smokeless, etc.)?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>98.37%</td>
<td>302</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>1.63%</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>307</td>
</tr>
</tbody>
</table>

Q1.11 - 10.) How old were you when you smoked a whole cigarette for the first time?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes (Go to next question)</td>
<td>66.77%</td>
<td>211</td>
</tr>
<tr>
<td>2</td>
<td>No (Skip to question 13)</td>
<td>33.23%</td>
<td>105</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>316</td>
</tr>
<tr>
<td>#</td>
<td>Answer</td>
<td>%</td>
<td>Count</td>
</tr>
<tr>
<td>--------</td>
<td>-------------------</td>
<td>------</td>
<td>-------</td>
</tr>
<tr>
<td>1</td>
<td>8 years old or younger</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>9-12 years old</td>
<td>7.69%</td>
<td>14</td>
</tr>
<tr>
<td>3</td>
<td>13-17 years old</td>
<td>39.56%</td>
<td>72</td>
</tr>
<tr>
<td>4</td>
<td>18-21 years old</td>
<td>47.25%</td>
<td>86</td>
</tr>
<tr>
<td>5</td>
<td>22 years or older</td>
<td>5.49%</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>182</strong></td>
</tr>
</tbody>
</table>

Q1.12 - 11.) During the past 30 days, on how many days did you smoke cigarettes? (If 0 days skip to question # 13)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1-2 Days</td>
<td>29.63%</td>
<td>16</td>
</tr>
<tr>
<td>2</td>
<td>3-5 Days</td>
<td>12.96%</td>
<td>7</td>
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<tr>
<td>3</td>
<td>6-9 Days</td>
<td>7.41%</td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>10-19 Days</td>
<td>7.41%</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>20-29 Days</td>
<td>7.41%</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>All 30 Days</td>
<td>35.19%</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>54</strong></td>
</tr>
</tbody>
</table>
Q1.13 - 12.) During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than 1 cigarette per day</td>
<td>40.35%</td>
<td>23</td>
</tr>
<tr>
<td>2</td>
<td>2 to 5 cigarettes per day</td>
<td>38.60%</td>
<td>22</td>
</tr>
<tr>
<td>3</td>
<td>6 to 10 cigarettes per day</td>
<td>14.04%</td>
<td>8</td>
</tr>
<tr>
<td>4</td>
<td>11 to 20 cigarettes per day</td>
<td>5.26%</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>More than 20 cigarettes per day</td>
<td>1.75%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>57</td>
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</table>
Q13#1 - Please use the scale to assess the extent of smoking at the following locations: - 13. Please use the scale to assess the extent of smoking at the following locations:

<table>
<thead>
<tr>
<th>#</th>
<th>Question</th>
<th>No problem</th>
<th>Minor</th>
<th>Serious</th>
<th>Severe</th>
<th>No opinion</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Dorms</td>
<td>19.20%</td>
<td>53</td>
<td>17.75%</td>
<td>49</td>
<td>14.49%</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6.52%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>42.03%</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6%</td>
<td>276</td>
</tr>
<tr>
<td>2</td>
<td>Classroom Buildings</td>
<td>40.73%</td>
<td>11</td>
<td>24.73%</td>
<td>68</td>
<td>8.73%</td>
<td>2</td>
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<td></td>
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<td></td>
<td>5.09%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>20.73%</td>
<td>57</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5%</td>
<td>275</td>
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</table>
Q1.15 - 14.) When you went to the campus health center for service, were you asked if you used tobacco?

<table>
<thead>
<tr>
<th>#</th>
<th>Cafeteria</th>
<th>Outside the Academic Commons (AC)</th>
<th>Entrances/exits to/from buildings</th>
<th>Outside on the campus</th>
<th>Near off Campus Housing</th>
<th>Parties, Student Hangouts</th>
<th>On Campus Events</th>
<th>Graduate School buildings</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>47.06%</td>
<td>18.84%</td>
<td>15.30%</td>
<td>22.22%</td>
<td>27.27%</td>
<td>14.49%</td>
<td>41.82%</td>
<td>31.14%</td>
</tr>
<tr>
<td>4</td>
<td>3.31%</td>
<td>21.74%</td>
<td>25.27%</td>
<td>44.80%</td>
<td>8.36%</td>
<td>20.29%</td>
<td>15.58%</td>
<td>13.92%</td>
</tr>
<tr>
<td>5</td>
<td>9.51%</td>
<td>10.87%</td>
<td>14.23%</td>
<td>16.85%</td>
<td>3.27%</td>
<td>4.06%</td>
<td>5.09%</td>
<td>8.79%</td>
</tr>
<tr>
<td>6</td>
<td>15.51%</td>
<td>11.23%</td>
<td>4.27%</td>
<td>6.81%</td>
<td>9.32%</td>
<td>40.00%</td>
<td>3.27%</td>
<td>4.40%</td>
</tr>
<tr>
<td>7</td>
<td>26.84%</td>
<td>31.27%</td>
<td>31.27%</td>
<td>9.00%</td>
<td>9.06%</td>
<td>40.58%</td>
<td>31.27%</td>
<td>41.76%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>23.16%</td>
<td>66</td>
</tr>
<tr>
<td>No</td>
<td>12.28%</td>
<td>35</td>
</tr>
</tbody>
</table>
Q1.17 - 16.) Were you referred to any service that might help you quit?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>11.84%</td>
<td>9</td>
</tr>
<tr>
<td>2</td>
<td>Maybe</td>
<td>2.63%</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>No</td>
<td>85.53%</td>
<td>65</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>76</td>
</tr>
</tbody>
</table>

Q1.18 - 17.) Have you ever participated in a program run by Clark to help you quit using tobacco?
Q1.19 - 18.) Do you want to stop smoking (now or in the future)?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>100.00%</td>
<td>89</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100%</td>
<td>89</td>
</tr>
</tbody>
</table>

Q1.20 - 19.) Would you use NRT (Nicotine Replacement Therapy), such as nicotine gum, patches or inhalers to help you quit if they were offered at no cost to you?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>56.25%</td>
<td>36</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>43.75%</td>
<td>28</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100%</td>
<td>64</td>
</tr>
</tbody>
</table>
### Q1.21 - 20.) Does Clark have special groups, classes or counselors to help students who want to quit using tobacco?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>41.79%</td>
<td>28</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>58.21%</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>67</td>
</tr>
</tbody>
</table>

### Q1.22 - 21.) Colleges have a responsibility to lessen the risk of tobacco addiction by adopting policies that discourage tobacco use.
<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly Agree</td>
<td>27.23%</td>
<td>52</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>28.80%</td>
<td>55</td>
</tr>
<tr>
<td>3</td>
<td>Somewhat agree</td>
<td>14.66%</td>
<td>28</td>
</tr>
<tr>
<td>4</td>
<td>Neither agree nor disagree</td>
<td>12.57%</td>
<td>24</td>
</tr>
<tr>
<td>5</td>
<td>Somewhat disagree</td>
<td>4.19%</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>Disagree</td>
<td>5.24%</td>
<td>10</td>
</tr>
<tr>
<td>7</td>
<td>Strongly disagree</td>
<td>7.33%</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>191</td>
</tr>
</tbody>
</table>
Q1.23 - 22.) Colleges have a responsibility to adopt policies that ensure people have smoke-free air to breathe.

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly Agree</td>
<td>47.64%</td>
<td>91</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>25.65%</td>
<td>49</td>
</tr>
<tr>
<td>4</td>
<td>Somewhat agree</td>
<td>10.99%</td>
<td>21</td>
</tr>
<tr>
<td>5</td>
<td>Neither agree nor disagree</td>
<td>5.76%</td>
<td>11</td>
</tr>
<tr>
<td>6</td>
<td>Somewhat disagree</td>
<td>3.14%</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Disagree</td>
<td>2.09%</td>
<td>4</td>
</tr>
<tr>
<td>8</td>
<td>Strongly disagree</td>
<td>4.71%</td>
<td>9</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100%</td>
<td>191</td>
</tr>
</tbody>
</table>
Q1.24 - 23.) Colleges should regulate tobacco use on campus.

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strongly agree</td>
<td>27.32%</td>
<td>53</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
<td>25.26%</td>
<td>49</td>
</tr>
<tr>
<td>3</td>
<td>Somewhat agree</td>
<td>16.49%</td>
<td>32</td>
</tr>
<tr>
<td>4</td>
<td>Neither agree nor disagree</td>
<td>6.70%</td>
<td>13</td>
</tr>
<tr>
<td>5</td>
<td>Somewhat disagree</td>
<td>3.61%</td>
<td>7</td>
</tr>
<tr>
<td>6</td>
<td>Disagree</td>
<td>8.76%</td>
<td>17</td>
</tr>
<tr>
<td>7</td>
<td>Strongly disagree</td>
<td>11.86%</td>
<td>23</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100%</td>
<td>194</td>
</tr>
</tbody>
</table>
Q1.25 - 24.) Which type of college tobacco-use policy do you believe would be best for the college community? (choose only one)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The current policy</td>
<td>16.41%</td>
<td>42</td>
</tr>
<tr>
<td>2</td>
<td>Allows smoking outdoors on campus in all locations</td>
<td>9.38%</td>
<td>24</td>
</tr>
<tr>
<td>3</td>
<td>Allows smoking outdoors at specific locations only</td>
<td>51.56%</td>
<td>132</td>
</tr>
<tr>
<td>4</td>
<td>Prohibits smoking anywhere on campus at all times</td>
<td>14.06%</td>
<td>36</td>
</tr>
<tr>
<td>5</td>
<td>Prohibits all tobacco use anywhere on campus at all times</td>
<td>8.59%</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>256</td>
</tr>
</tbody>
</table>

Q1.26 - 25.) What is the current written policy on tobacco use at this college?
Q1.27 - 26.) To what extent do people comply with the policy?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Prohibits only smoking inside buildings</td>
<td>4.07%</td>
<td>11</td>
</tr>
<tr>
<td>2</td>
<td>Prohibits only smoking outdoors 20 feet away from buildings, w disposal encouraged</td>
<td>70.00%</td>
<td>189</td>
</tr>
<tr>
<td>3</td>
<td>There is no written tobacco use policy</td>
<td>0.74%</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>I do not know</td>
<td>25.19%</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>270</strong></td>
</tr>
</tbody>
</table>

**# CLEAR THE AIR**
# | Answer          | %     | Count |
---|-----------------|-------|-------|
1  | Totally         | 3.02% | 7     |
2  | Mostly          | 28.88%| 67    |
3  | Somewhat        | 43.97%| 102   |
4  | Not at all      | 24.14%| 56    |
      | **Total**       | **100%**| **232** |

**Q1.28 - 27.** To what extent is the policy enforced?

![Bar chart showing the distribution of responses to Q1.28 - 27.](chart.png)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
</table>
1   | Totally      | 1.77% | 4     |
2   | Mostly       | 15.49%| 35    |
3   | Somewhat     | 29.20%| 66    |
4   | Not at all   | 53.54%| 121   |
      | **Total**    | **100%**| **226** |
Q1.29 - 28.) Do you support the Tobacco Free Campus Policy as it is currently written?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>61.97%</td>
<td>132</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>38.03%</td>
<td>81</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>213</td>
</tr>
</tbody>
</table>

Q1.30 - 29.) Would you support a policy geared towards education, and aimed at a timed phasing out of tobacco use?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>64.40%</td>
<td>161</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>16.80%</td>
<td>42</td>
</tr>
<tr>
<td>3</td>
<td>I do not Know</td>
<td>18.80%</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>250</td>
</tr>
</tbody>
</table>
Q1.31 - 30.) At Clark, are cigarettes responsibly disposed of by their users?

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>14.29%</td>
<td>36</td>
</tr>
<tr>
<td>Maybe</td>
<td>44.84%</td>
<td>113</td>
</tr>
<tr>
<td>No</td>
<td>40.87%</td>
<td>103</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>252</td>
</tr>
</tbody>
</table>

Q1.32 - 31.) Do you find tobacco use on campus to be a health issue for the community at large?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>14.29%</td>
<td>36</td>
</tr>
<tr>
<td>2</td>
<td>Maybe</td>
<td>44.84%</td>
<td>113</td>
</tr>
<tr>
<td>3</td>
<td>No</td>
<td>40.87%</td>
<td>103</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>252</td>
<td></td>
</tr>
</tbody>
</table>
Q1.33 - 32.) Do you find tobacco use on campus to be an environmental issue for the community at large?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>52.19%</td>
<td>131</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>47.81%</td>
<td>120</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>251</td>
</tr>
</tbody>
</table>

Q2 - Topics

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>100%</td>
<td>0</td>
</tr>
</tbody>
</table>
Appendix C: Focus group questions

1. How often do you see other students smoking around campus.
2. Are there any smokers in the room that would feel comfortable identifying themselves?
3. What are some components about wellness at Clark that you feel are important?
4. Is second hand smoke on campus a concern for you? For your friends? Do you talk about it?
5. Are there locations on campus that smoking seems prevalent?
6. What steps do you think it would take to move Clark towards a smoke free campus?
7. How long do you think it would take?
8. What do you think are the best ways to facilitate this change?
9. What kind of pushback do you think this kind of initiative would face?
10. Do you think that they student body in general would be open to this kind of change?

Appendix D: Interview questions

1. What are your thoughts about smoking on campus?
2. Clark’s current policy on smoking is No smoking within 20 feet of a building, no smoking within 25 feet of ASEC, and no smoking at the Dolan. Do you support Clark’s current policies on smoking?
3. Is it enforced?
4. Is smoking a concern for you? Do you think it’s a concern for your co-workers?
5. What are you concerns about a cessation program?
6. How would you proceed in a cessation program?
7. What are your thoughts on enforcement of smoking policies? Who would be the enforcer?
8. Do you think access to smoking cessation programs and resources would be useful at Clark?
9. Based on your knowledge of the student body, faculty and staff, what do you think would be the most effective way to transition to a tobacco-free campus?
10. What kind of pushback do you think this kind of initiative would face?
11. How does UP fit into the enforcement of smoking rules on campus? Do they want an active role?
12. How can the health center provide more resources?
13. When looking at wellness and student life, how does smoking fit in?
14. Would orientation be equipped to informing students of this new policy?
15. Our suggested policy is…, do you feel this would be effective
Appendix E: Brochure

National and Local Resources
Center for Disease Control-Visit the Website at cdc.gov/tobacco/campaign/tips or call 1-800-QUIT-NOW
Smokefree.gov
UMass Medical School-Central Massachusetts Tobacco-Free Community Partnership

Challenge Convention
Change Our World
Clark University
950 Main Street
Worcester, Massachusetts
01610

Clark University
Clear the Air
A Tobacco-Free Campus Initiative
School of Professional Studies
Capstone-Spring 2018

Stats from Survey
95% of Clark students believe colleges have a responsibility to provide smoke-free air
-2018 Clear the Air Survey
65% of students believe that tobacco use is an environmental issue for Clark
-2018 Clear the Air Survey

What is the Policy
• Use of all tobacco products is prohibited on all Clark University owned/operated buildings, on-land owned by Clark University, or in vehicles on Clark University Property
• Includes e-cigarettes and any non-smoking product

Community Accountability
• Members of the Clark Community are encouraged to respectfully inform others of the policy
• Recognizing that there is an addictive aspect, community members should only inform those violating of this policy, and other them more information can be found online or in the UC

Campus Resources
• Community Tobacco Meeting: A support group for any who wish to participate, and a place where community members can be open and honest
• Health Services: Health Services can help direct you to medical resources, and work with you to understand next steps. Contact: 508-793-7467
• Counseling Services: For one-to-one support, students can contact Counseling Services and set up an appointment. Contact: 508-793-7678
• Questions about the policy? Contact the Dean of Students office at 508-793-7423

Why is this the Policy
• It is the responsibility of Clark University to create a healthy and environmentally conscious community on campus
• While Clark seeks to provide a healthy campus for all members, we also recognize the addictive nature of Nicotine and wish to support individuals
• This policy was initiated in the Fall of 2020, after several years of research, and community input on all aspects of the policy
Appendix F: Statement of Intent for Future Action

Clark University is considering an update to its tobacco policy. The University is committed to providing its students, faculty and staff with an environment that promotes community health and sustainability. However, the University is also committed to supporting the community viewpoint and opinion regarding this potentially divisive issue. We understand that addiction lies at the heart of this issue, and that it would not be pertinent to enact a policy that imposes on the potentially non-voluntary behavior of our students, faculty and staff.

This is why we are opening this discussion to the stakeholders of the community in a collective decision-making process. A survey will go out later this year, and forums/town halls will be held in tandem. Through this strategy, we hope to amass the collective campus opinion regarding this issue, and to make a policy decision that takes into account the opinions of the campus stakeholders.
Appendix G: Survey Flyer

SURVEY ON TOBACCO USE

The purpose is to understand the current trends in tobacco use amongst the Clark Community to further understand and implement a viable policy. Participation in this study will involve you filling out a brief online survey. We will not be recording names or linking identities with surveys. We will be using the Qualtrics survey engine which gives unique identification numbers to anonymously identify your survey responses. Because some of the questions are about your personal use of an addictive substance, you may encounter stress. It should be understood that participation in this study is completely voluntary. You may choose to withdraw from the study at any point, and may choose not to answer any part of the questionnaire that you do not want to answer. The entire study should take about 10-15 minutes. Contact Jack Espe at jespe@clarku.edu, or Stephanie Medden at smedden@clarku.edu.
School of Professional Studies

Project Charter:
Clear the Air
Project Overview
1.1 Introduction
This is the culmination of a multi-year effort to research the effects of smoking at Clark University.
We will be completing a multi pronged approach to research, followed by a recommendation for a blueprint for Clark to implement a plan ban smoking at Clark. We will build on previous research on Best Practices at other Campuses. We will also send a survey to the Clark Community, students, faculty, staff, and administration. This survey will be longitudinal, comparing the results to the same survey sent out last year. We will conduct three student focus groups on smoking cessation. The final aspect of our research will be conducting interviews with representatives from different organizations on campus, and one outside expert interview. These groups will be Clark University Counseling Services, University Police, Health Services, Dean of Health and Wellness, Head of Sustainability services, Physical Plant, Residential Life and Housing, and Student Life and Programming. Finally, we will analyze our data to come up with an effective plan for how Clark can implement this plan. For our final presentation we will invite the President, Provost, Dean of the Graduate and Undergraduate College, and Board of Trustees, as well as our stakeholder groups. We will present our plan for implementation, and distribute them to each group, as well as presenting our research.
1.2 Major Stakeholders
- Lynn Levey, Title IX Coordinator Asst. Dean, Wellness Programs
- Clark University, Administration
  - President Angel
  - Provost
  - Dean of Graduate and Undergraduate College
- RLH, Resident-Life Housing
- Department of Grounds
- Health Center
- Pre-Health Society
- Clark Sustainability
1.3 Document Purpose
The purpose of this document is to outline the framework for how we will create a plan for Clark to implement a ban on smoking at Clark University. The project will consist of research and recommendations. The research will have survey, best practices, and interview components. The recommendations will be for how Clark can implement the ban, and culminate in a presentation where all stakeholders are invited.
We will be working under the assumptions that the University will support our initiative if we provide enough compelling evidence, and that we will be able to get responses from surveys. A central constraint is that we have no funding to complete our project. Finally, a risk is that Clark chooses not to support our project after we complete it.
Our project communication structure has one member, Edward Aroko, as our project lead who will be in charge of communications with our main stakeholder and project advisor in
order to streamline communications. Outside of this, we will all take the lead on different aspects of the project and cooperate on major decisions. Each group member is empowered to make decisions if needed. Each group member will be responsible for an equal amount of work, and roles will be divided up once all sections are approved.

2 Project End State and Scope

2.1 Required End State

At the end of this project, we will present a policy implementation blueprint to Clark University. This blueprint will lay out what needs to be done to bring Clark University to the status of a tobacco free campus over the period of three years. Included in this blueprint will be a qualitative analysis of the general student viewpoint on the issue of tobacco on campus, aggregated and drawn from focus groups and survey results. Faculty opinions, concerns and recommendations will be gathered and analyzed through a series of expert interviews. Ideally an implementation team will be identified.

2.2 Project Scope

<table>
<thead>
<tr>
<th>Work Area</th>
<th>In Scope</th>
<th>Out of Scope</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>Surveys</td>
<td>Financials</td>
</tr>
<tr>
<td>Research</td>
<td>Focus Groups</td>
<td>Student Interviews</td>
</tr>
<tr>
<td>Research</td>
<td>Expert interviews</td>
<td>Collaboration with other Univ.</td>
</tr>
<tr>
<td>Presentation</td>
<td>Blueprint for Policy Implementation</td>
<td>Tobacco Free Initiatives</td>
</tr>
<tr>
<td>Other</td>
<td>Marketing recommendations</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Stakeholder conversations</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Smoke Free Initiatives</td>
<td></td>
</tr>
</tbody>
</table>

2.2.1 Change Management

When a need to alter the Project Charter arises, all five members of the group will come together in person to discuss changes. We will need unanimous consent to alter the project charter. The process is below

- Change is suggested during weekly group meetings
- Change is discussed and voted on
- Change is formalized in charter
- Charter is brought to Stephanie Medden and Lynn Levey
- If both approve, then change is made part of Project Charter

3 Assumptions

- We are currently working under the assumption that there exists a gap between the University’s policy and the Clark community’s stance on tobacco smoking on campus.
- We, based on our review of the extensive research that exists demonstrating the nexus between tobacco smoke, secondhand smoke, and negative health outcomes, are working under the assumption that more restrictive smoking policies on our campus is in the best interest for the health of our community.
• We are assuming that the University administration would lend its support to a more stringent smoking policy, if we are able to craft a convincing argument and cultivate support and put pressure on the administration.

• We are working under the assumption that there will not be a vocal uprising from students or staff that would oppose such a policy shift, but rather institutional and individual actors within Clark institutions that will become barriers to our success.

4 Constraints

Time
• Time serves as our greatest constraint, as is true for all of humanity, in two ways. The limited amount of time left between the beginning of this project, and the drafting of this charter, and the final Capstone presentation, is a major time constraint. Secondly, the amount of time each week that, given other academic, personal, and professional responsibilities of this group’s members, we are able to commit to this Capstone project.

Money
• One possible constraint is the fact that we do not have any resources to support the drafting or implementation of our blueprint.

Survey Responses
• Without the monetary incentives, as discussed above, getting student, staff, and faculty input, in the form of our survey may be difficult. We must be purposeful and aggressive in our outreach to a vast swath of demographics; students, staff, and faculty.

Interviews
• Ability to recruit experts to interview and share knowledge with group

IRB Approval
• Approval is a cumbersome and meticulous process that can surely provide some roadblocks during this project.

5 Risks

Negative Risks
• The project creates negative repercussions for SPS
• The Clark Community is not supportive of a smoking cessation project
• The Clark Administration does not want to implement the project

Positive Risks
• Our project is implemented, and smoking is banned on Clark Campus starting in 2020
• Our project comes in first and we each get 100$

6 Communication Strategy

• Our project manager will be the touchpoint for setting up meetings with stakeholders. This will be done via email and telephone, as the most professional manner of doing business.

• Within our group we will primarily communicate over Messenger, with document sharing via Google Drive. We will commit to meeting in person at least once a week to execute tasks, organize our short term plans, and review our progress.

7 Project Structure
8 Steering Committee and Stakeholder Commitments

8.1 Steering Committee (if applicable)

- This is an option we are considering, based upon the structure and reach of our project. We also believe that a steering committee would be useful, as moving forward it would create an institutional apparatus to implement the blueprint beyond the conclusion of the work of this project. Committee members could include:
  - Lynn Levey - Title IX Coordinator
  - Jenny Isler - Director of Sustainability
  - Joe O’Brien
  - Chief Goulet

9 Roles & Responsibilities/RASCI Chart

<table>
<thead>
<tr>
<th>Roles / Responsibilities</th>
<th>Eddie</th>
<th>Simon</th>
<th>Jack</th>
<th>Michael</th>
<th>Donovan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project charter including end state and scope</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Project management and control</td>
<td>X</td>
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<tr>
<td>Project communication</td>
<td>X</td>
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<tr>
<td>Project planning</td>
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<tr>
<td>Resource allocation</td>
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<td>X</td>
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<tr>
<td>Problem identification and analysis</td>
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<td>X</td>
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<tr>
<td>Problem resolution</td>
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<td>X</td>
</tr>
</tbody>
</table>
This section of the project charter should detailed measurements that will indicate that the project is a success. The following table provides examples of measures of success that teams can decide are appropriate for their projects.

<table>
<thead>
<tr>
<th>Project Outcomes</th>
<th>Measure of Success</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishment of informal Steering Committee and/or Task Force</td>
<td>Level of institutionalization and sustainability moving forward</td>
</tr>
<tr>
<td>Blueprint</td>
<td>Completion and compliance</td>
</tr>
<tr>
<td>Stakeholder buy-in</td>
<td>Commitment for continued implementation</td>
</tr>
<tr>
<td>Anti-smoking education and cessation assistance</td>
<td>Implementation at Health Services</td>
</tr>
</tbody>
</table>
Appendix I: Final Presentation Slides

Overview

- Vision Statement
- Research Question
- Background
- Goals/Purpose
- Research: Case Studies, Survey, Focus Groups, Interview
- Major themes and issues
- Recommendations
- Professional Development
Clark Universities Current policy

Smoking Policy

Clark University is a smoke-free workplace. Effective June 1, 1992, Clark University became a smoke-free workplace. No smoking of any type is permitted inside any nonresidential campus building—even within offices. Smoking outdoors is permitted only if done at least 20 feet from an entrance or exit. Smokers are asked to use proper receptacles in disposing of their smoking materials and not to litter campus grounds.

View Official Policy in PDF

Our Vision

Have smoke free air to breathe

Support one another in goals of health and sustainability

Understand the nature of addiction

Are aware of and have access to tobacco cessation resources

A campus where members of the community:
Research Questions

What are other colleges and universities doing to address tobacco usage?

What has worked best, and what would work best at Clark?

How does the Clark community feel about a tobacco-free campus?

Background

- Student Sustainability Fund Project
  - Jenny Isler, Lynn Levey, Jason Puopolo
  - Cigarette Receptacles

- Clark University Internship Spring 2017
  - Campus wide survey
  - Policies of other Universities
Literature Review - Models

WPI

- Tobacco-free in 2014
- Comprehensive
- Culture of Care

EMMANUEL COLLEGE

- Tobacco-free in 2014
- Student-based
- Surveys, town hall, website

HARVARD UNIVERSITY

- Tobacco-free in 2014
- Tobacco Control Policy Group
- Resources for students and Staff
- Publicity

SYRACUSE UNIVERSITY

- Tobacco-free in 2015
- Sustainability Task Force
- Addiction-oriented
- Resources/Products
- Programming
- Phased Approach
Methods

Gather and organize opinions and concerns of the major stakeholders

Quantitative Student Survey

Qualitative Student Focus Groups

Expert Interviews w/ Faculty

Survey Results

316 Participants

58% of participants had used a tobacco product. Reasons?

Social Environment

Cultural Background

Stress

Focus
Survey Results

At what age did you first try a tobacco product?

- 8 years old or younger: 0%
- 9-12 years old: 0%
- 13-17 years old: 33%
- 18-21 years old: 57%
- 22 years old or older: 0%

Survey Results

Do you find tobacco use on campus to be an environmental issue for Clark University?

- Yes: 65%
- No: 35%
**Survey Results**

Colleges have a responsibility to lessen the risk of tobacco addiction by adopting policies that discourage tobacco use.

- **52%** Strongly Agree
- **31%** Agree
- **14%** Disagree
- **14%** Strongly Disagree

**Survey Results**

Colleges have a responsibility to adopt policies that ensure people have smoke-free air to breathe.

- **52%** Strongly Agree
- **43%** Agree
- **14%** Disagree
- **14%** Strongly Disagree
Survey Results

To what extent do people comply with the current tobacco policy?

- Not at all: 31%
- Somewhat: 43%
- Mostly: 23%
- Completely: 2%

Survey Results

To what extent is the current tobacco policy enforced?

- Not at all: 51%
- Somewhat: 34%
- Mostly: 10%
- Completely: 5%
Survey Results

Do you support the tobacco policy as it is currently written?
- Yes: 76%
- No: 24%

Would you support a policy geared towards education and a timed phasing out of tobacco?
- Yes: 84%
- No: 16%

Survey Results

Colleges should regulate tobacco use on campus.
- Strongly Agree: 45%
- Agree: 29%
- Disagree: 21%
- Strongly Disagree: 5%
Focus Groups

Students from every class year | International and Domestic Composition

Smokers and Non-smokers | On and Off Campus Residents

Focus Group Highlights

Orientation could be effective | Current policy is ineffective | Lots of smoking on campus

Students understand that smoking is an environmental issue | Not enough cessation support

Students are exposed to smoke while inside their dorm rooms
Focus Group Highlights

- **Potential strategies explored**
  - Clark would have to implement incrementally
  - Emphasis on tobacco use within **week one orientation**
  - Revamp of **resources** for students

- **Emphasis on same ideas**
  - Police intervention was **overstepping boundaries**
  - Utilizing already existing cigarette receptacles to **spread awareness**
  - Explicit offer for **cessation support** such as info sessions, nicotine gum or patches

---

**Interview Results**

- **Stephen Goulet**
  - Chief of University Police

- **Tim St. John**
  - Assistant Dean for Campus Life

- **Kate Cassidy**
  - Director of Residential Life and Housing

- **Professor Kathleen Palm-Reed**
  - Psychology Department

- **Megan Kersting**
  - Director of Center for Counseling and Personal Growth

- **Dr. David Kessler**
  - Former Commissioner of the FDA

- **Jason Puopolo**
  - Head of Grounds
Interview Highlights

- Common concerns expressed, and addressed
  - Student Attitudes
  - **No Enforcement**
  - Potential strategies explored
  - New Ideas Given
  - Emphasis on same ideas
  - **Support and education** are key
  - Forcing a policy never works, especially at Clark
  - Committee

Themes

The New Policy and Why

Resources

Accountability

A Phased Approach
What’s the Policy and Why?

Policy: "Use of all tobacco products, including e-cigarettes and any non-smoking product, is prohibited in all Clark University owned and operated buildings, on land owned by Clark University, or in vehicles on Clark University Property."

Resources

Education
- Brochures are inadequate, outdated, and minimal
- Awareness

Cessation
- Products
- Opportunities
Accountability

Support  Non-Punitive

Community

Participation  Education

Blueprint

- Vision
  - Administrative Responsibility
  - Community Accountability
  - Welcoming and Healthy Clark University Campus

- Policy Statement
  - All tobacco products
  - All members/visitors to all Clark-owned locations

- Enforcement/Compliance
  - Community approach
  - Non-punitive
Phased Approach

- **Phase 1**: Formation of Committee, Resource Initiation
- **Phase 2**: Forums and Surveys for Stakeholder Input, Recommendations and Final Decision
- **Phase 3**: Updated Resources, Public Education
- **Phase 4**: Implementation

Conclusion

**Our Work**

**Moving Forward**

**Clark Community**
Implications for Professional Development

- Qualitative and Quantitative Analysis
- IRB Compliance and Human Subject Research
- Team Work and Project Management
- Policy Analysis and Development
- Stakeholder Meetings
- Accountability to Team and Client

THANK YOU!

Clear the Air