



## CULTURE IN EVALUATION #2: RURAL

### TOBACCO CONTROL EVALUATION WITH RURAL POPULATIONS

#### Rural Residents as a Priority Population for Tobacco Control

Research has established that disparities exist among the rural population in terms of tobacco use prevalence, health status, economic consequences, and mortality, all resulting from tobacco use (Pokhrel et al., 2009; Stevens et al., 2010). A high risk of exposure to secondhand smoke and the lack of access to appropriate services and resources also predominate within rural communities (Pokhrel et al., 2009). This cultural competency tool thus focuses on the disproportionate effects of tobacco use among rural populations and offers some strategies for researching and conducting evaluations with this diverse population.

#### What Are Rural Populations?

Although “rural” is typically used to describe a unique geographic, social and cultural characteristic of people, there is no single definition of the concept. Most often the term is used in relation to an area’s population density. According to the US Census Bureau a rural area is defined as any area that is “not urban” with urban being defined as a settlement with 1,000 persons per square mile at the core and adjoining territories with at least 500 persons per square mile. Most counties in California have rural and urban areas, but a number of counties are predominantly rural (USDA, 2007).

The popular perception is that rural populations’ economies rely primarily on agriculture. However the largest income source of rural populations in the US is manufacturing, followed by agriculture, then retirement (St. Lawrence and Ndiaye, 1997). Overall the rural population has fewer income opportunities and is less wealthy than the urban population.

Rural populations are ethnically and linguistically diverse, and they belong to all social groups. Therefore, services and outreach to rural populations might require multiple strategies. For instance, migrant farm workers who speak little English will need a different approach than workers in the manufacturing industry.

#### Tobacco Use Prevalence

Cigarette use among those in rural populations is higher than their urban counterparts. According to the National Health Interview Survey (2006), the smoking rate of those in

rural areas was 25.1%, compared to the national average of 21% for those over the age of 18. Moreover, among adolescents, those in rural areas are significantly more likely to begin smoking than urban adolescents (Harrell et al., 1998).

Much like the national data, California's rural population smokes more than its urban population. While most urban areas have a smoking prevalence of less than 16%, the rate in rural areas is up to 22% (CHIS, 2007). According to the California Student Tobacco Survey (2008) high school students in California also had higher rates of smoking than those in urban areas (16.4% vs. 14.7%).

Perhaps the most striking disparity in tobacco use between rural and urban populations pertains to smokeless tobacco use. Rural settings have a significantly higher rate of smokeless tobacco use. Research shows that smokeless tobacco is most common in rural areas, and national surveys reveal that a huge gap exists between smokeless tobacco use among rural and urban residents (Pokhrel et al., 2009; Stevens et al., 2010). For instance, According to the National Survey on Drug Use and Health (2007), the use of smokeless tobacco is almost three times higher in rural areas compared to those who live in large and small metropolitan areas. Furthermore, the prevalence of smokeless tobacco is highest among young males aged 18 to 24 living in rural areas (Campbell-Grossman, et al., 2003; Boyle et al., 1999).

### The Targeting of Rural Residents by the Tobacco Industry

In years past the tobacco industry used frontier images to convey the image of a "real" man, who worked the land and smoked cigarettes. In fact, the Marlboro Man was well known and synonymous with such an image. Although these images were not necessarily targeting the rural population, they amplified and helped to maintain social and cultural norms within rural communities. Such belief systems no doubt relate to the significantly high rate of smokeless tobacco use currently seen in rural populations, where chewing tobacco is viewed as part of being young and male in rural areas (Campbell-Grossman et al., 2003) In this manner, the tobacco industry exploits the social and cultural aspects of smokeless tobacco, most easily demonstrated by the tobacco industry's past and current sponsorship of sporting events such as rodeos, bull riding and car racing (Pokhrel et al., 2009).

### Rural Populations' Health Status

Higher poverty levels in rural areas go hand-in-hand with higher smoking prevalence, and the health consequences of this fact are substantial. Although most rural areas in the US have seen population growth since 2000, unemployment rates are higher and access to health care is more limited for rural than for urban populations (USDA, 2006). It is this lack of health care, combined with the high rates of tobacco use among rural populations that translates into a significant social problem for those in rural areas. Rural residents additionally have less access to disease prevention services, making rural populations extremely vulnerable to tobacco related diseases (Doescher et al., 2006). Moreover, health messages, including tobacco prevention messages, reach the rural population less frequently and through fewer networks. The culmination of these

tobacco-related health issues is summarized in a rural USDA informational supplement (2006) describing the overall health of those in the rural communities:

Compared with metro residents, non-metro residents report poorer health and more physical limitations. The range of health care providers and services in non-metro communities is narrower than in metro areas, and non-metro residents may experience greater financial and geographic barriers to access.

## Gaining Access and Building Relationships

In conducting research and evaluations, gaining access is critical. Research and evaluation in the rural community is no different. Fortunately, scholars suggest that rural areas offer unique opportunities to implement interventions and evaluations because of the robust informal social networks that tend to tie rural communities together (Pokhrel et al., 2009).

While rural communities offer unique opportunities to implement tobacco control, gaining access and conducting research and evaluations can be tricky. For instance, methods used in urban contexts are not necessarily effective in rural communities (St. Lawrence and Ndiaye, 1997). Furthermore, there is no “one size fits all approach” that will work in all rural communities (Hamilton et al., 2008) in terms of gaining access or carrying out research and evaluation. Thus, researchers note how vital it is to first gain knowledge of the social, cultural and political norms associated with each individual community.

Once the norms and characteristics of the community are better understood, cooperative and collaborative relationships between researchers and the local community members need to be created and fostered. In this manner, it is essential to recruit community members who can become “champions” for your cause and involve the local residents early in the project’s planning. Ideally, the community members will have established networks and friendships within the community, and they will assist you in navigating the research/intervention process (St. Lawrence and Ndiaye, 1997). Other things to consider in gaining access, building relationships and fostering a collaborative relationship with the local community include the following:

- ✦ Get to know local opinion leaders by connecting with local organizations, especially youth serving groups (church groups, clubs, service organizations, the local Boys & Girls Club, Boy and Girl Scouts, etc.).
- ✦ Personal relationships are generally valued highly.
- ✦ Learn about local issues by reading the local newspaper.
- ✦ Make site visits to the towns, observe, and visit the sites that are part of the intervention, such as outdoor areas, multiunit housing complexes, etc.
- ✦ Check statistics such as the US Census data to understand the local population composition and find out who lives where.
- ✦ Find out when local events are held and connect with event organizers.
- ✦ Beware that aligning yourself with one group might alienate another group.

Learn about the political playing field and stay on “neutral ground” as much as possible.

- ✦ Stress the importance of benefit to stakeholders to get buy-in. Give incentives, for instance including questions on a survey that are of interest to stakeholders in exchange for permission to do the survey.

## Research and Evaluation with the Rural Community

As stated in the previous section, understanding the local cultural, social and political norms is a vital part of the process. Thus, prior to conducting an intervention and evaluation, consider holding focus groups of current rural smokers. Moreover, key informant interviews of smokers, as well as community “insiders” and decision-makers may provide valuable insight into the process that lies ahead.

There is a strong possibility that cooperation in tobacco control evaluation will initially be rejected because it might be interpreted as a means of the urban-driven mainstream culture to further control rural residents. It is also why researchers assert that building trust is a crucial component of research efforts in rural settings (Pokhrel et al., 2009; St. Lawrence and Ndiaye, 1997). This is one of the reasons why it is so important to seek out insiders prior to jumping into the research and evaluation efforts.

As is the case with the targeting of any priority population, promoting the proposed research and evaluation in an educational manner is a critical step. In doing so, it is important to routinely monitor the promotion strategies to ensure consistency and allow for changes. The promotion of research and evaluation should also have the “feel” of community organizing rather than “outsiders coming in.” Other specific strategies include:

- 1) Placing advertisements in local newspapers and periodicals. Use your community insiders and “champions” to tell you which papers are read by or target local residents.
- 2) Scheduling regular “flying” and literature drops at the local community center or area grocery store (if they allow it).
- 3) Promoting through rural health or social service agencies. Many towns have one of these county organizations providing services to local community members.
- 4) Promoting at community events. Possible venues include all type of community events and local fairs.

We have put together a list of best practices and helpful tips in conducting research and evaluation in rural settings based on scholarly research. The following provides some of the useful information to consider when working with rural residents:

- ✦ Time and transportation demands are greater in rural areas that are more sparsely populated. This might affect sampling decisions. Rather than randomly sample from the entire area, clusters might be preferable to make data collection more feasible (see sampling tips and tools sheet on the TCEC website).

- ✦ Reciprocity is an important value: if individuals and groups see that they are benefiting from your research they will be more likely to participate. Find out how you can be helpful to them and they will help you.
- ✦ “Rural residents are often reluctant to answer questions from strangers” (St. Lawrence and Ndiaye, 1997). It is therefore advisable to train locals to do the data collection.
- ✦ Communication works differently in small rural counties than in urban areas. Find out what communication method works best. This could mean that more face-to-face communication is required and that e-mail communication does not work well.
- ✦ Merchants in rural areas often do not sell to kids they don’t know – using outsider decoys might skew results of youth purchase surveys.
- ✦ Research indicates that rural populations are less motivated to participate in research through advertisement than through discussion with personal acquaintances (St. Lawrence and Ndiaye, 1997).
- ✦ Meetings and trainings should be conducted on “neutral ground” such as schools.
- ✦ Local community insiders should be recruited to help facilitate meetings and presentations.
- ✦ Avoid stereotyping – remember that rural populations are diverse.
- ✦ Have your survey instruments translated into the appropriate languages for work with non-native English speakers.
- ✦ Check the tip sheets for evaluation with low SES and ethnic groups on the TCEC website <http://programeval.ecdavis.edu> when working with specific groups such as migrant farm workers.
- ✦ Pilot test your instruments to make sure that they work for your specific target group.
- ✦ Provide evaluation results to participating individuals and groups.

## References and Resources

California Department of Health Services. 2003. Tobacco Control Section. Regional Smoking Prevalence. <http://www.dhs.ca.gov/tobacco>

California Health Interview Survey. 2007. Created by [www.chis.ucla.edu](http://www.chis.ucla.edu) March, 2010.

California Student Tobacco Survey. 2008. Prepared by California Department of Public Health, California Tobacco Control Program, March, 2010.

Campbell-Grossman, Christie., Hudson, Diane Brage., and Fleck, Margaret Ofc. 2003. “Chewing Tobacco Use: Perceptions and Knowledge in Rural Adolescent Youths.” *Issues in Contemporary Pediatric Nursing*. 26:13-21.

Doescher, Mark P., Jackson, J. Elizabeth., Jerant, Anthony., and Hart, L. Gary. 2006. “Prevalence and Trends in Smoking: A National Rural Study.” *The Journal of Rural Health*. 22:112-118.

Hamilton, Lawrence C., Hamilton, Leslie R., Duncan, Cynthia M., and Colocousis, Chris R. “Place Matters: Challenges and Opportunities in Four Rural Americas.” *Carsey Institute, Reports on Rural America*, Volume 1, Number 4:1-33.

Pokhrel, Kabi., Slobig, Zachary., Thornton, Amber Hardy., Hamasaka, Laura., Wilson, Katherine., Wood, Michael., Frey, Benjamin et al., 2009. "Tobacco Control in Rural America." *American Legacy Foundation: Washington D.C.*

St. Lawrence, Janet S. and Serigne M. Ndiaye. 1997. "Prevention Research in Rural Communities: Overview and Concluding Comments." *American Journal of Community Psychology*, Vol. 25, No. 4, 1997. 545-562.

Stevens, Stacy, Colwell, Brian, and Hutchison, Linnae L. 2010. "Tobacco Use in Rural Areas." *Rural Healthy People 2010*. Texas A&M University System Health Science Center.

USDA Economic Research Service. 2006. Rural America at a Glance. Economic Information Bulletin Number 18, August 2006.

USDA Economic Research Service. 2007. Measuring Rurality: What is Rural?  
[www.ers.usda.gov/Briefing/Rurality/WhatIsRural](http://www.ers.usda.gov/Briefing/Rurality/WhatIsRural)

USDHHS. 2007. National Survey on Drug Use & Health: National Results. *Substance Abuse & Mental Health Services Administration, Office of Applied Studies*.  
<http://www.oas.samhsa.gov/nsduh/2k6nsduh/appc.htm>.

USDHHS, CDC. 2006. Summary Health Statistics for US Adults: National Health Interview Survey. *National Center for Health Statistics*. [http://www.cdc.gov/nchs/data/series/sr\\_10/sr10\\_235pdf](http://www.cdc.gov/nchs/data/series/sr_10/sr10_235pdf).

Citation Suggestion:

Treiber, Jeanette and Satterlund, Travis D. 2010. Culture in Evaluation #2: Rural. Tobacco Control Evaluation with Rural Populations. Center for Evaluation and Research, U.C. Davis.  
<http://programeval.ucdavis.edu>