

TOBACCO EDUCATION CLEARINGHOUSE OF CALIFORNIA (TECC)

Funded by the California Department of Public Health (CDPH),
California Tobacco Control Program (CTCP)

Copyright Notification © 2015 CDPH.

PLEASE NOTE: This material is owned and copyrighted by the California Department of Public Health, California Tobacco Control Program (CTCP). It may not be edited or modified in any way. The graphics and images used are also protected by the copyright law and may not be copied for use in any manner.

You are welcome to download as many copies as you need for your own use. This material cannot be sold.

QUESTIONS? If you have any questions about this or any other materials offered through the Tobacco Education Clearinghouse of California (TECC), please contact us at teccorder@tecc.org.

Thank you for visiting our website at www.TobaccoFreeCatalog.org.



Ethical Funding

The Ethics of Tobacco, Alcohol,
& Pharmaceutical Funding

A Practical Guide for LGBT Organizations

ETHICAL FUNDING

The Ethics of Tobacco,
Alcohol, & Pharmaceutical Funding

A Practical Guide for LGBT Organizations

Written by Laurie Drabble, MSW, MPH
This version edited by Len Casey, Bob Gordon, Fred Guss,
Steven Rickards and Gloria Soliz of CLASH

© 1999 Coalition of Lavender Americans on Smoking and Health
& Progressive Research and Training for Action
Revised 2001

Funded by the California Department of Public Health.
Produced and distributed by the Tobacco Education Clearinghouse of California
TobaccoFreeCatalog.org



TABLE OF CONTENTS

Introduction	1
Milestones in the Tobacco Control Struggle	2
Why Develop Written Policy Guidelines?	4
Why Focus on Tobacco, Alcohol and Pharmaceutical Industry Funding?	6
Altruism or Advertising? Philanthropy as a Side-Road to the Land of Profit	6
Hidden Costs: Tobacco, Alcohol and Drug-Related Problems in LGBT Communities	10
This One’s for You: Target Marketing to LGBT Communities	11
Funding Considerations for LGBT Organizations	13
Overcoming Barriers to Developing an Organizational Policy	13
Steps to Developing a Written Policy	14
A Suggested Starting Place	15
Sample Policies and Guidelines	17
Tobacco, Alcohol and Pharmaceutical Company Funding and Sponsorship: A Model Policy	17
Special Events: A Model Policy	19
A Prime Example: Project Inform Donation Guidelines	22
Policy Examples from Other California Organizations	26
References	30
Resources	34

Acknowledgements

This booklet was produced by the Coalition of Lavender Americans on Smoking and Health (CLASH), Progressive Research and Training for Action (LGBT Technical Assistance and Training Project) and the California Lavender Smokefree Project. This document is designed to serve as a resource for Lesbian, Gay, Bisexual and Transgender (LGBT) and HIV/AIDS organizations. Recently, many LGBT organizations and HIV/AIDS agencies have expressed interest in obtaining sample organizational policies related to corporate donations and sponsorship, particularly from industries whose products are tied to health related concerns in these communities. This document was developed in response to these requests. It is our hope that providing useful background information and specific sample guidelines will facilitate adoption of written policies to guide and support the fundraising efforts of LGBT and HIV/AIDS organizations. We also anticipate that this material will be useful to other communities and organizations that are facing similar issues related to fundraising and target marketing.

We recognize that nonprofit and grassroots organizations face a wide range of funding dilemmas. Many in the LGBT community have struggled with the issue of accepting tobacco, alcohol, and, in some cases, pharmaceutical industry funds. In response to these broader concerns, we felt it was imperative to provide a resource that would be of use in evaluating policy options in relation to corporate donations from each of these industry sources.

Special thanks to Nancy Ferreyra, Michael Kerr and Keith Folger of Progressive Research and Training for Action (PRTA), Oakland, California, for providing resources to conduct some of the research for this document. Thanks also to the Board of CLASH for their assistance in developing this document: Len Casey, Bob Gordon, Naphtali Offen, Jim Smith, and Gloria Soliz. We are also grateful for the work and support of the California Lavender Smokefree Project, Fred Guss, George Marcelle, Marj Plumb, and Pam Rahn.

INTRODUCTION

Lesbian, Gay, Bisexual and Transgender (LGBT) and HIV/AIDS organizations have grown and multiplied over the last decade. From large social service agencies that receive public funding to smaller grassroots organizations, LGBT organizations address a wide range of health, social and advocacy needs in our diverse communities. In spite of the progress made to date, LGBT and HIV/AIDS organizations, often marginalized and under-funded, have frequently faced significant challenges in financing programs and special events. Increasingly, LGBT and HIV/AIDS organizations are struggling with the dilemma of developing funding policies that are congruent with their missions, particularly in relation to corporate donations from industries whose products impact individual and community health.

Emerging research suggests that tobacco use, drug use, and alcohol-related problems may be higher in lesbian and gay communities than that of the population as a whole (Skinner, 1994; Yankelovich, 1996; Harris Interactive, 2001). At the same time, alcohol, tobacco and pharmaceutical industries have increased marketing strategies that are targeted specifically to lesbian and gay communities. Agency leaders, community members, and substance abuse prevention advocates all have a stake in identifying reasonable guidelines for sponsorship of special events as well as contributions to nonprofit organizations. This document is intended to serve as a resource for discussion and development of such written guidelines for LGBT and HIV/AIDS organizations. To this end, this document provides background information about why target marketing by alcohol, tobacco and pharmaceutical industries is of concern to LGBT communities and organizations and how target marketing operates in LGBT communities. Examples are provided of specific policies that may be adopted or adapted by nonprofit and community based organizations to protect the integrity of their organizations, enhance their overall funding strategy, and support the health and well-being of individuals and the LGBT community as a whole.

MILESTONES IN THE TOBACCO CONTROL STRUGGLE

The Tobacco Industry Targets California's LGBT Communities

1991 Philip Morris targets gay men with a new cigarette brand, Benson and Hedges Special Kings. *Genre* magazine, a fashion and lifestyle magazine for gay men, runs a two-page spread. *Genre* publisher Don Tuthill proclaims, "We (LGBT people) can choose to smoke or not to smoke... We (*Genre* magazine) can't be everybody's keeper."

1994 Parliament runs LGBT-targeted campaign in *Out* magazine, the highest circulation LGBT publication in the US. Ad theme is "for a great smoke, take a few liberties." In subsequent years, tobacco ads become the norm in national publications *Out* and *The Advocate*, and then begin to show up in a variety of local publications such as *Gay and Lesbian Times* (San Diego) and *Frontiers Newsmagazine* (Los Angeles and San Francisco).

1995 R.J. Reynolds launches its retro Red Kamel brand after carefully studying "alternative lifestyles" of gay men in San Francisco's Castro neighborhood. A secret document titled "Project SCUM" is discovered six years later by Anne Landman, American Lung Association of Colorado. In May 2001, *SF Weekly* breaks the story which two weeks later produces an unprecedented letter of apology by Andrew J. Schindler CEO, R.J. Reynolds Tobacco Co., to "anyone offended." Schindler insists that despite the anti-gay and pro-tobacco targeting, R.J. Reynolds "respects all of its customers and greatly values their business."

1996 Brown & Williamson's Lucky Strike brand is a major sponsor of the Folsom Street Fair in San Francisco. Huge Lucky Strike logos are affixed to soundstages, and hip promotional items are passed out by the thousands to fairgoers.

1997 Benson & Hedges participates in San Diego Lesbian and Gay Pride festival with a highly visible booth in Balboa Park. Thousands of LGBT pride participants see the brand's visible banners while signing up for Benson & Hedges incentives and promotions.

2000 Philip Morris purchases advertorial in *Out* magazine, touting its \$14 million in donations to HIV/AIDS-related organizations as "our belief in helping others." This advertising feature, called "Companies That Care" is Philip Morris USA's attempt "to demonstrate its commitment to gay and lesbian Americans." Among the California food delivery organizations funded by Philip Morris are *Mama's Kitchen* (San Diego) and *Project Angel Food* (Los Angeles).

2001 Harris Interactive (a respected polling company) releases figures showing that 36% of adults aged 18 and over who self-identify as LGBT report that they smoke cigarettes. This 36% figure compares to a figure of just 25% for all adults. Advocates cite new figures such as these as further evidence that LGBT adults smoke more and therefore continue to be a precious target market for the tobacco industry.

LGBT Tobacco Control Advocates Fight Back!

1991 EMT Associates Inc. conducts the San Francisco Lesbian, Gay and Bisexual Substance Abuse Needs Assessment. Results of this groundbreaking survey show significantly higher rates of smoking in the LGBT community compared to the general population of San Francisco. LGBT tobacco advocates identify the absence of published research regarding LGBT smoking rates.

1991 San Francisco Department of Public Health begins ongoing funding of The Last Drag, free quit-smoking classes for lesbian, gay, bisexual, transgender and HIV positive smokers. Gloria Soliz, a founding member of the newly formed Coalition of Lavender Americans on Smoking and Health, begins her long service to the community with classes taught at Lyon-Martin Women's Health Services.

1994 Kevin Goebel's article, "Lesbians and Gays Face Tobacco Targeting" is published by Tobacco Control. Goebel alerts the international tobacco control community to the fact that the gay community is being targeted. One specific citation is a series of Virginia Slims ads, one of which shows one woman trailing another with the caption, "If you always follow the straight and narrow, you'll never know what's around the corner."

1996 Coalition of Lavender Americans on Smoking and Health organizes first statewide conference, "Alive With Pleasure!" with funding from the CDC. The first-ever conference focuses on the prevention of Tobacco and Alcohol Problems in the LGBT communities and is keynoted by Carole Migden.

1997 The New York Times reports on the California Lavender Smokefree Project in Stuart Elliott's Advertising column. The Times describes the effort as "what may be the first significant (anti-

tobacco) campaign addressed to gay men and lesbians." The 5-year tobacco tax-funded project features outreach and sponsorships of California pride events, film festivals and even a lesbian softball team. "Kick Butt" matchbooks that provide cessation resources are distributed to LGBT bars to counter the ever present Camel matchbooks, and hip, informative brochures with an LGBT twist are created to counter tobacco industry targeting of California youth.

1998 Coalition of Lavender Americans on Smoking and Health commissions the creation of a guidebook entitled "Ethical Funding for Lesbian, Gay, Bisexual, Transgender & HIV/AIDS Community-Based Organizations: Practical Guidelines When Considering Tobacco, Alcohol and Pharmaceutical Funding." Guidebook is later reprinted by Progressive Research and Training for Action and submitted to the Tobacco Education Clearinghouse of California.

1999 California Lavender Smokefree Project volunteers meet with LGBT community institutions to urge adoption of no-tobacco sponsorship and contribution policies. Later, an 18-month ad campaign in the gay press salutes organizations taking a stand against tobacco such as the gay & lesbian film festivals in San Francisco and Sacramento, LGBT pride festivals in San Francisco and Long Beach, and publications like XY magazine, Lesbian News, San Francisco Bay Times and San Diego Update. The ad campaign theme is "Our Pride Is Not For Sale."

2000 Queer Tobacco Intervention Project, funded by the Tobacco-Related Disease Research Program, brings together researchers, community-based organizations and health advocates in the Bay Area. Queer TIP evaluates data from The Last Drag cessation program (www.lastdrag.org) and pioneers interventions with LBT women, LGBT youth and transgendered smokers.

WHY DEVELOP WRITTEN POLICY GUIDELINES?

An informal survey of LGBT and HIV/AIDS organizations found that although many agencies stated that they had policies regarding acceptance of donations from alcohol, tobacco or pharmaceutical industries, few of these organizations had these policies in writing. Progressive Research for Training and Action (PRTA) found that most of the 15 LGBT and HIV/AIDS organizations contacted had no written policies along these lines. Three organizations stated that they had informal policies and only two had policies addressing alcohol, tobacco and/or pharmaceutical funding in writing. Many of these organizations expressed interest in adopting written policies, but did not have the time or resources to collect samples as a “first step.”

Formal organizations, like nonprofit agencies and many grassroots organizations, rely on written policies to guide choices that benefit the organization and advance its mission. Given the increased target marketing to LGBT and HIV/AIDS organizations by tobacco, alcohol and pharmaceutical industries, it is important to develop an overall policy to guide agency practice.

The issue of accepting funding from industries that have a health impact on the community or that have a negative history with LGBT communities remains controversial. For example, in 1997 the *San Francisco Bay Times* ran a series of articles documenting community criticisms and debates related to acceptance of funding from Coors brewery because of its history in funding homophobic causes (Mirken, 1997; Mirken, 1997a; Mirken, 1997b).

Although the capacity to obtain “mainstream” support and funding represents a success of the LGBT movement, a number of advocates express concern about the implications of increased target marketing, particularly in relation to health issues (Goebel, 1994; Price, 1988; Sentinel, 1992).

It is useful to address potential controversies in a larger policy context, determining what is best for the organization and long term interests of the community, rather than debating the merits of specific potential donations on a case-by-case basis.

The written statements and policies of a community-based organization describe the destination that the organization envisions for its community, chart the course for getting there, and outline the means for creating change among individuals and/or the larger environment along the way.

Nonprofit and grassroots organizations committed to advancing the health of diverse LGBT communities should consider adopting policies related to corporate funding and promotions. These agency-wide policies can serve to:

- 1) affirm the high value the organization places on the lives and health of LGBT people,
- 2) ensure that the organization is independent from outside influences in the pursuit of their mission, and
- 3) avoid potential or perceived conflict of interest.

Reasons for adopting a written funding policy for your organization

- To make a clear statement about the philosophy of your organization.
- To evaluate potential donations and sponsorship in the context of a larger organizational fundraising plan.
- To ensure your funding strategy supports your larger mission.
- To facilitate an open, productive discussion about the issue of accepting funds from corporations that profit from products that contribute to health problems in LGBT communities (e.g., tobacco, alcohol, and sometimes pharmaceuticals) or profit from the needs of people with HIV/AIDS (in the case of pharmaceutical industries) among members of your Board of Directors or other decision-making body.
- To create an incentive to identify a wide range of potential corporate and individual donors.
- To encourage compatible donor corporations to adopt LGBT-friendly policies (e.g., prohibitions against discrimination based on sexual orientation or HIV status, diversity training that is inclusive of sexual orientation issues, domestic partner benefits, etc.).
- To provide clear guidelines for program implementation and/or practices of staff or volunteers.
- To document and institutionalize your decisions, which avoids wasted time and confusion re-visiting these issues with each new board/staff/volunteer or with the passage of time.

WHY FOCUS ON TOBACCO, ALCOHOL AND PHARMACEUTICAL INDUSTRY FUNDING?

Corporate donations from tobacco and alcohol industries deserve consideration distinct from other potential corporate donors for several reasons. First, these companies benefit from products that are associated with health problems in LGBT communities and among people with HIV/AIDS. Second, research suggests that tobacco use, alcohol-related problems, and other drug use in lesbian, gay, bisexual and transgender (LGBT) communities may be higher than that of the population as a whole. Finally, it appears that LGBT communities and HIV/AIDS organizations have increasingly been targeted for specialized marketing by the alcohol and tobacco industries.

ALTRUISM OR ADVERTISING? PHILANTHROPY AS A SIDE-ROAD TO THE LAND OF PROFIT

Tobacco and Alcohol Advertising and Promotion

Alcohol and tobacco are among the most highly promoted products in the United States with advertising and promotion costs of approximately \$8.4 billion for the tobacco industry (FTC, 1999) and \$2 billion for the alcohol industry (APHA, 1993). At the same time, analysis of different factors related to morbidity and mortality in the United States indicate that two of the primary contributors are tobacco (approximately 400,000 deaths annually) and alcohol (100,000 deaths annually) (McGinnis & Foege, 1993).

The tobacco industry has developed a wide range of products and marketing campaigns to target youth, communities of color, and women to replace the 1,200 smokers who die and the 3,500 smokers that quit each day (CDC, 1993). The alcohol industry, using similar tactics, has also increased marketing to women, communities of color, youth, and LGBT communities. The new wave of marketing extends beyond traditional use of television, print, billboard and point-of-sale advertising. There has been a recent trend toward more cost effective methods of reaching consumers including corporate sponsorship of cultural events, entertainment, and promotion of specific product names on clothing or promotions for contests (Moore, Williams, & Qualls, 1996). These kinds of strategies are less expensive than use of the media and particularly easy to adapt to specific target markets (Moore et al., 1996). They also appear to be effective. The editor of an alcohol industry publication acknowledges that distribution of alcohol logo merchandise (such as beer mugs and special bottle caps) may be associated with underage drinking just as tobacco promotional items are linked to youth smoking (Kanes Beverage Week, 1998).

Sponsorship of cultural events and donations to nonprofit organizations that have substantial visibility and credibility in their communities represent two of the fastest growing “non-traditional” tobacco and alcohol industry marketing strategies. A number of prevention advocates question whether these promotions are philanthropy or profit motivated. For example, Miller Beer is the official sponsor of the International Gay Rodeo Association and of many gay pride celebrations, and in return, receives high-visibility through print event ads, banners at event stages, and other forms of public acknowledgment (Rahn, 1994). In many cases, the level of funding in communities was linked to the level of consumption (Maxwell & Jacobson, 1989)

The public positions adopted by alcohol and tobacco industries often contradict their political and business practices. DiFranza & Godshall (1996) examined public statements by tobacco manufacturers supporting the prohibition of sales to minors and compared them to US tobacco industry comments to the US Department of Health and Human Services regarding proposed federal regulations and pro-tobacco state legislation related to tobacco sales to minors. Evidence from this examination suggests that, while publicly supporting a socially responsible position, the tobacco industry has undermined both national and state efforts to strengthen and enforce laws prohibiting sales to minors. Both the alcohol and tobacco industries respond to critiques of their practices in two ways: through public relations efforts to portray the industries as opposed to use of products by youth and sales to minors and through attempts to shift the responsibility from the merchants to the youth (Mosher, 1995). The mixed messages from alcohol and tobacco industries are presumed by health advocates to be related to financial incentives for marketing to minors that are often publicly denied by the alcohol and tobacco industries. Some statistics point to such incentives. People who begin drinking before the age of 15 appear to be four times as likely to develop alcohol dependence than those that begin drinking at age 21 (Grant & Dawson, 1998). Eighty to 90 percent of smokers begin before the age of 20 (APHA, 1993).

*Tobacco companies
have historically
manufactured
a product that is harmful
to the individuals
that use it and they
have lied about
its addictive qualities.*

Tobacco Remains Serious Threat to Gays

By Deb Price

Reprinted from the Detroit News,
Monday, November 23, 1998

"Got a light?" Those are the first words that many gay men and lesbians dare to speak to another gay person. Especially in a gay culture too long dominated by smoky bars, a cigarette can seem like a handy prop—a sexy conversation starter, a menthol-flavored confidence booster.

The tobacco industry's hooks are deeply embedded in the gay community. Gay people, struggling not to feel like outcasts, are especially vulnerable to cigarette makers' pitches: Smoke and you'll be tough, cool, sophisticated, desirable. Smoke and you'll fit in.

Preying on insecure teens and young adults, tobacco companies lure first-time buyers by offering tantalizing new self-images, craftily designed to satisfy an emotional craving. "What's going on with gay boys is that for \$1.50 they can become the Marlboro Man. (Many cigarette ads) are selling masculinity," says San Francisco epidemiologist Ron Stall, who studies gay men's health. "For a lot of young gay men, that's an attractive hook."

The hook for me—as a high school girl frightened of anyone discovering I was gay—was a don't-mess-with-me brand. I bought the image and took home a habit that I couldn't shake for seven years. I count myself lucky, though, knowing that many that try just

as hard to escape tobacco never do.

Now the merchants of death are reaching out to the gay community as never before—buying glossy ads in national gay publications, sponsoring gay events. We should not accept their blood money. The tobacco industry is as much an enemy of a healthy gay community as its favorite senator, Jesse Helms.

Gay smoking rates are truly alarming—36 percent of gay Americans over 18 smoke, compared with the U.S. average of 30 percent, reports Yankelovich Partners, a research firm. Gay youth are leading the huge surge in teen smoking. Fifty-nine percent of self-identified gay and bisexual high school students smoke, compared with 35 percent of their peers, a 1995 survey of Massachusetts public schools found.

We gay adults have a responsibility to start treating tobacco as a serious threat to our community. It's not some minor concern to be ignored while we focus on AIDS and breast cancer.

Smoking compounds HIV health problems, research shows. And as an editorial in the Journal of the Gay and Lesbian Medical Association points out, smoking is "as potentially lethal" as heroin. Lung cancer alone claimed 12,000 gay lives last year, if 8 percent of its victims were gay—probably a low estimate.

Our community's urgent need to liberate itself from tobacco struck me recently when I saw that a gay youth

conference was packed with chain smokers. Likewise, the lobby at a fundraiser for lesbians with cancer was thick with smoke. The solution, of course, isn't to nag or blame smokers. Instead, we must make lowering our smoking rate a real community project.

Friends can form a cheerleading squad for a pal who's trying to quit. Or two smokers can quit together, suggests Bob Gordon of San Francisco. "Tell each other you're going to be even more wonderful when you can climb the stairs without wheezing," says Gordon. His gay anti-smoking group helped distribute 70,000 "Kick Butt" matchbooks with upbeat messages like, "When YOU quit smoking, after only eight hours, oxygen levels return to normal."

Marj Plumb, another San Franciscan, wrote the successful proposal for the first government-funded gay stop-smoking course between drags on a cigarette. In many attempts to "quit for good," she's learned, "The first couple of days are simply physical withdrawal. Do things that reduce symptoms—exercise, eat healthy food. The emotional withdrawal is harder for me. So, for the first couple of months you need to stay away from smokers. It's that simple and that hard."

Tobacco is a leftover prop from the gay community's self-hating days. We can't change that past, but we can keep our future from going up in smoke.

Health Products and Profit: Prescription Drugs

Advertising and promotion by pharmaceutical manufacturers, in many cases, may serve to increase awareness of health problems and inform health care providers about the most effective medications for preventing and curing illness (Mossinghoff, 1992). At the same time, many health advocates and consumer groups are concerned about balancing the benefits of pharmaceutical company products with distributing advertising/promotional messages that may be biased or incomplete (Silverman, Lydecker, & Lee, 1992). A 1996 article in *American Demographics* suggests that gay community leaders and political advocacy groups “have, more often than not, demonized pharmaceutical companies, the FDA, and other ‘establishment’ entities they view as either ineffective or actively hostile to the gay community” and describes a number of strategies that pharmaceutical industries can employ in competing to “emerge a victor” in reaching a community that represents “an increasingly long-term, and therefore lucrative market segment to the pharmaceutical industry” (Kahan & Mulyran, 1996). These strategies are ultimately about marketing and money as much as medicine.

Although most marketing strategies are ethical, some tactics have raised concerns over the years including use of video news releases, pseudo-scientific educational sessions, and intensive individualized sales and incentives to physicians (Bleidt, 1992). The potential of government restrictions in 1990 served as a stimulus for the pharmaceutical industry and medical profession to develop clear guidelines in a number of areas including the commercial support of medical continuing education courses and the acceptance of gifts and sample products by individual practitioners (AAPA, 1993; Bleidt, 1992). However, creative marketing to health care providers, and increasingly direct marketing to consumers, continues (Basara, 1992; Bleidt, 1992; Montagne, 1992) as will the challenge to health organizations to ensure that information targeting their communities promotes the public good and is not solely promoting industry profit.

The pharmaceutical industry has invested substantial resources into marketing specific products in lesbian and gay communities. Although existing professional guidelines may ensure ethical relationships between individual practitioners and the pharmaceutical industry, it is also important that responsible nonprofit and health advocacy agencies develop clear organizational guidelines about practices related to accepting funding and endorsing promotions from pharmaceutical industries.

HIDDEN COSTS: TOBACCO, ALCOHOL AND DRUG-RELATED PROBLEMS IN LGBT COMMUNITIES

The purpose of all advertising and promotion is to increase consumption, recruit new users, and promote specific brand use, although tobacco and alcohol industries claim that they only seek to encourage change in brand use (Kilbourne, 1991).

This has negative implications for LGBT communities, particularly in terms of health problems. For example, studies suggest that both alcohol (DHHS, 1997) and tobacco (Burns et al., 1996; Conley et al., 1996) may compromise the immune system of HIV positive individuals (e.g., smoking is associated with increased risk for bacterial pneumonia and oral candidiasis) and alcohol use is often associated with high risk sexual behaviors (DHHS, 1997). Tobacco, alcohol and other drug use in LGBT communities are already higher than that of the population as a whole.

Tobacco use in LGBT communities

Prevalence of tobacco use appears to be substantially higher among lesbians and gay men in comparison to the population as a whole.

- Skinner (1994) found that 35.4 percent of gay men and 38.1 percent of lesbians smoked cigarettes in the past month compared to 27.1 percent of men and 22 percent of women in a general sample from the 1990 National Household Survey on Drug Abuse.
- A national lesbian health care survey found that 30 percent of the sample smoked cigarettes daily, another 11 percent were occasional smokers, and that African-American lesbians had especially high rates of regular tobacco use at 49 percent (Bradford, Ryan, & Rothblum, 1994).
- The Yankelovich Monitor, a national study of consumers, suggests a greater incidence of smoking among lesbians and gay men (36 percent) in comparison to the general population (30 percent) and rates of smoking in LGBT youth (44 percent) that exceed that of other youth (31 percent) (Yankelovich, 1996).

Alcohol problems in LGBT communities

- Recent studies on alcohol consumption and alcohol-related problems in lesbian and gay communities found that, although the general rates of heavy drinking are similar between lesbian/gay and general populations, there are significantly fewer abstainers among lesbians and gay men compared to the general population (McKirnan & Peterson, 1989; Skinner & Otis, 1992; Skinner, 1994).
- Despite the fact that rates of heavy drinking did not differ across samples, the homosexual sample showed higher rates of alcohol-related problems. The greater overall problem rate may be related to the fact that the lesbian and gay sample evidenced less decrease in alcohol and drug use with age and greater consumption rates among female respondents than in the general population (McKirnan & Peterson, 1989).

- Substance abuse among lesbian and gay youth may also be disproportionately high (Remafedi, 1987; Rotheram-Borus et al., 1994). For example, a recent study of high school youth found that gay, lesbian, and bisexual youth were more likely to use tobacco, alcohol and other drugs (e.g., cocaine, marijuana and inhalants) than students not identifying as gay, lesbian or bisexual (Garofalo et al., 1998).

Drug use in LGBT communities

- Overall consumption of other drugs (e.g., cocaine and marijuana) appears to be at least twice as high in lesbian and gay populations (McKirman & Peterson, 1989).
- Non-medical use of psychotherapeutics may also be higher among lesbians and gay men. Skinner (1994) found rates of stimulant use of 4.6 percent among gay men and 1.1 percent among lesbians as well as tranquilizer use rates of 1.9 percent among gay men and 1.6 percent among lesbians. In contrast, the National Household Survey on Drug Abuse in 1995 found stimulant abuse rates of .4 percent among men and .3 percent among women as well as tranquilizer use of .5 percent among men and .3 percent among women (SAMHSA, 1995).

THIS ONE'S FOR YOU: TARGET MARKETING TO LESBIAN, GAY, BISEXUAL AND TRANSGENDER COMMUNITIES

A number of articles in alcohol industry and advertising industry publications document the increase in target marketing to LGBT communities. An article on the evolution of advertising of mainstream products, particularly advertising campaigns by Philip Morris (tobacco manufacturer) and three alcohol importers, provides a quote from a business manager who specializes in markets: "If you are in a business that has declining volume and share, you have to identify new franchises... for a liquor company not to be targeting someone like that is ludicrous" (Levin, 1993). *Advertising Age* describes the increase in companies targeting LGBT communities and the strategies employed in targeting LGBT communities which include running mainstream ads in the gay media, creating gay-themed ads for the gay media and, in some instances, running gay-themed ads in mainstream media (Wilke, 1997a).

Penaloza (1996) points out that: "there is a profound sense of social validation and legitimization that is experienced by individual gays and lesbians and gay/lesbian communities as the result of increased accommodation as a market.... Less positive effects include distorted representations of gays and lesbians both within and outside these communities, such as an inflated socioeconomic status attributed to gays and lesbians that not only misrepresents the conditions and experiences of a number of

"Selective targeting can be benign or even beneficial, but only if the product is. If the product is unwholesome, even addictive and lethal, segmentation's efficiency delivers more death and disease, not more benefits, and provides a disservice, not a service."

—Pollay, Lee and Carter-Whitney (1992)

gays and lesbians, but has also been used by radical right religious organizations in their efforts to repeal gay/lesbian protection legislation.” Balancing market opportunities with movement goals requires a critical consideration by our communities of the larger cultural, economic and health impact of target marketing.

Perspectives on Target Marketing: Analysis of Targeting to African American Communities

Scott, Denniston and Magruder (1992) suggest that claims by the alcohol industry that they only seek to maintain brand loyalty and induce drinkers to switch brands is “suspect when one examines the industry practice of targeted advertising, especially since African-American adolescents and adults are underrepresented among the alcohol industry’s market share.” The authors go on to describe elements of aggressive marketing campaigns to African American communities including development and promotion of malt liquor products, extensive advertising in African-American magazines, highly visible contributions to African-American humanitarian causes, and hiring of African-American advertising representatives and agencies to serve as spokespersons for the industry. High rates of alcohol-related health problems in African-American communities make consideration of the consequences of this marketing pressing and lends itself to the argument by critics that “alcohol advertising is economic exploitation at best and genocide in the worst scenario” (Scott et al., 1992). Communities have begun to mobilize to counter many of the marketing strategies that are perceived to be harmful to the community (Scott et al., 1992).

Ultimately, objections to target marketing are less about the process of advertising than about the harmful impact of particular products, such as alcohol and tobacco, on specific communities. Mayberry and Price (1993) articulate some of the specific concerns and questions that communities face as a result of target marketing practices:

“What messages are we sending when the tobacco industry sponsors such popular events as the Kool Jazx Festival or the Ebony Fashion Fair? When the tobacco industry contributes heavily to the United Negro College Fund, is it paying for the right of open market to our communities for future generations? What are the implications and expectations of gifts to the Congressional Black Caucus? What does it mean for “leaders” to serve as corporate board members of tobacco companies? These manipulations are not unique to the black community. There are numerous arguments for such strong relations including financial survival of institutions. However, one must be forever conscious of the illness toll from such a preventable cause. Any tobacco-use prevention effort to be successful must include strategies to counter the tobacco industry’s advertising and promotion activities.”

FUNDING CONSIDERATIONS FOR LGBT ORGANIZATIONS

The policies and practices of nonprofit and grassroots organizations are important components of the larger environment surrounding the health and well being of our communities. The degree to which community-based organizations are used as vehicles for promotion of products that have a direct health impact is a particularly important part of our collective environment. Target marketing to LGBT communities by alcohol, tobacco and pharmaceutical industries represent a growing challenge to community based organizations, particularly given a context where these organizations are frequently under-funded and disregarded by other potential funding sources.

OVERCOMING BARRIERS TO DEVELOPING AN ORGANIZATIONAL POLICY

There are a number of common barriers faced by organizations that elect to develop written corporate donations and sponsorship policies. A few tips related to addressing these barriers are outlined below.

Remember, there's life after adopting a funding policy

The first moment of panic in these discussions about potential written policies usually center on the issue of survival without tobacco, alcohol or pharmaceutical funding (even if such funding has not been received by the organization). That is why it is particularly important to consider the overall funding plan for your organization. A thoughtful development plan for successful organizational funding may well exclude some funding sources without harm to the organization. A number of cities and community-based organizations have developed policies related to refusing, limiting, or developing independence from tobacco or alcohol sponsorship. For example, the City of Santa Ana, California sponsored a successful alcohol-free Cinco de Mayo (Cal Council, 1993), the City of Irvine, California passed resolutions to prohibit accepting alcohol or tobacco sponsorship or promotion at youth-oriented or sports events at city facilities (*Injury Prevention*, 1991), and the Gathering of Nations, the largest celebration of Native American culture in North America, switched from Coors sponsorship to Borden Inc., who sells dairy products (Marin Institute, 1992).

Openly address the underlying purpose of charitable donations from alcohol, tobacco and pharmaceutical industries

Since corporate donors seek credibility, visibility or access to potential customers through your organization, internal acknowledgement of the marketing function of such donations can help lay the groundwork for developing written policies. Although alcohol and tobacco industries will likely minimize their marketing intentions, expectations related to promoting their company or products should be anticipated and proactively addressed. The purpose of promotions is to deliver the audience to the advertisers (Kilbourne, 1991). If your organization is reluctant to eliminate all tobacco, alcohol or pharmaceutical funding, be prepared to discuss how corporate influence within your agency can be limited. (See attached sample policies for ideas, p. 17.)

Recognize the overt and subtle ways that donations could impact your organization

Even with the best of intentions, it appears that alcohol and tobacco funding often have an influence on agency policy and practice. A national survey of nonprofit organizations found that agencies accepting alcohol funding were less likely to endorse alcohol policy measures, and that three of the organizations demonstrating strong advocacy for alcohol policy initiatives took these positions only after electing to refuse alcohol industry funding (Mosher & Frank, 1994). Another study found that magazines that carry tobacco ads are 38 percent less likely to address smoking risks than those without tobacco ads, and that coverage of cigarette risks tends to decrease as tobacco revenue increases (Warner, Goldenhar, & McLaughlin, 1992). Program directors at one major LGBT center that receives substantial alcohol industry funding were informally cautioned by their Development Director to avoid negative statements or portrayals related to alcohol for fear of offending an important source of financial support. Developing a clear statement of philosophy and practice related to funding and conflict of interest is an important tool for avoiding unintended influence.

STEPS TO DEVELOPING A WRITTEN POLICY

1. Plan a discussion with your organization's Board of Directors, Steering Committee or other policy-making body (depending on your structure) about the issue of corporate donations. Ground this discussion in the context of your overall funding plan and organizational mission.
2. Discuss the concerns about funding, issues about community health, and potential conflict of interest, real or perceived, with your mission.
3. Outline the disadvantages of accepting tobacco, alcohol and/or pharmaceutical funding. Have examples of alternative funding resources.
4. Review policy options from other organizations. (See samples provided, p. 17.)

5. Select elements of a written policy statement that match the purpose of your organization and your long-term vision for your community.
6. If your organization is reluctant to eliminate all tobacco, alcohol or pharmaceutical corporate funding, be prepared to discuss how corporate influence within your agency can be limited, i.e., ensuring that educational program content is independent of the marketing interests of pharmaceutical company donors, or limiting promotions allowable by alcohol industry funders of a special event.

A SUGGESTED STARTING PLACE

Given the alarming rates of tobacco and alcohol use in LGBT communities and the harmful impact of tobacco and alcohol on people with HIV/AIDS, we highly recommend prohibiting acceptance of funding from these industries.

Community centers and social organizations that have traditionally depended on tobacco and alcohol industry sponsorship should: 1) work to diversify funding and expand their corporate donation base, as many LGBT organizations have already done; 2) eliminate tobacco industry donations; and 3) limit or eliminate alcohol industry promotions (e.g., limit the size and placement of ads on printed materials as well as the placement of banners or other promotional materials at events, require responsible beverage service at events, etc.). See sample language from the Gay and Lesbian Community Center of Ventura County and from the Gay and Lesbian Medical Association regarding alcohol policy on the following page.

Given the role of the pharmaceutical industry as both an ally and a profit-making institution, we recommend that LGBT organizations, particularly organizations addressing health issues that are most likely to be of interest to pharmaceutical industries, develop policies to ensure independence of programming and access to unbiased information for their constituents. (See sample policy guidelines from Project Inform, p. 22.)

The rest of this document provides detailed sample policies and policy guidelines that may be used as prototypes or as resources for organizations developing their own policies about corporate sponsorship from tobacco, alcohol and pharmaceutical industries.

Sample Language:

"The Gay and Lesbian Medical Association will not accept direct funding from alcohol or tobacco manufacturers or distributors."

SAMPLE LANGUAGE

S.F. Pride (SFP)

“SFP shall neither solicit nor accept sponsorship from the cigarette tobacco industry and/or cigarette tobacco products. Additionally, SFP shall not accept funds from events sponsored by cigarette tobacco companies.”

Gay Lesbian Medical Association (GLMA)

“There shall be no distributing or displaying of fliers, posters, signs, banners, dispensers, programs, activities or apparel bearing the name or logo of an alcohol or tobacco product manufacturer at any GLMA sponsored event or in any GLMA communication medium.”

Ventura Gay Lesbian Community Centers

“Only 30 percent of the event’s sponsorship funding can come from the alcohol industry. Alcohol advertising shall be limited to alcohol sales booths themselves.

In relation to off-site events:

- All servers of alcohol have to be trained in responsible beverage service.
- Everyone under 30 years of age will have ID checked.
- For large events such as dances, festivals and fundraisers, persons 21 and older must wear non-transferable wristbands.
- Support for designated drivers will be offered. Special wrist bands for designated drivers will be distributed and free non-alcoholic beverages will be available for designated drivers.
- Sales of alcohol will be stopped 1 hour before the event closes.
- No one will be permitted to bring alcohol into an event.
- All volunteers working at events should refrain from using alcohol.
- All rules and information to support responsible beverage service should be posted.”

SAMPLE POLICIES AND GUIDELINES

TOBACCO, ALCOHOL AND PHARMACEUTICAL COMPANY FUNDING AND SPONSORSHIP: A MODEL POLICY

Corporate Support Conflict of Interest Policy

As an organization committed to advancing the health of diverse lesbian, gay, bisexual and transgender communities, *Our Organization* has adopted policies related to corporate funding and promotions. These organizational policies are intended to:

- 1) affirm the high value *Our Organization* places on the lives and health of lesbian, gay, bisexual and transgender people,
- 2) ensure that *Our Organization* is independent from outside influences in the pursuit of our mission,
- 3) avoid potential or perceived conflict of interest, and
- 4) ensure that *Our Organization* will accept no support, financial or in kind contribution, from corporations with known anti-lesbian, gay, bisexual and transgender activities.

Tobacco and Alcohol Company Funding

Our Organization will not accept direct funding from alcohol or tobacco manufacturers or distributors, or from any of their subsidiaries or parent companies (e.g., check Philip Morris, Kraft, Nabisco and Miller Web sites for product lists).

Tobacco and Alcohol Company Event Sponsorship

Our Organization will not sponsor, co-sponsor, or be a beneficiary of any event that accepts primary or secondary sponsorship from alcohol or tobacco manufacturers or distributors.

There shall be no distribution or sale of tobacco products or tobacco company subsidiary products at *Our Organization* events. There shall be no distributing or displaying of fliers, posters, signs, banners, dispensers, programs, activities or apparel bearing the name or logo of a tobacco or alcohol product manufacturer at any event sponsored by *Our Organization* or in any communication medium used by *Our Organization*.

Pharmaceutical Industry & Other Commercial Support for General Operating or Program Expenses

Funds from the pharmaceutical industry and other commercial support, with the exception of that support described in the preceding sections, will be accepted for educational and program purposes only, and the terms, conditions, and purposes of such grants will be documented by a signed agreement. A signed agreement between the corporate supporter and *Our Organization* will state in writing that the financial support will not in any way impact the content of *Our Organization's* publications or programs, and that health issues and policies, including those related to the specific corporation or industry, will be addressed by *Our Organization* without intervention by the corporate supporter.

Our Organization, or any committee or group working under the auspices of *Our Organization*, is solely responsible for the content, quality, scientific integrity, identification of needs, determination of educational objectives, and materials related to any program or social event sponsored by a commercial source. The program shall be free of commercial influence in planning and content.

Commercial support can be acknowledged in printed materials; however, *Our Organization* shall NOT endorse or promote a specific product, agency or corporate brand.

SPECIAL EVENTS: A MODEL POLICY

Our Organization was founded on the philosophy of enhancing the safety, health and well being of the LGBT members of our community. *Our Organization*, as an entity, desires to provide a safe space where community members are able to receive social services and gather together in a supportive environment. To this end, we have adopted the following policies regarding the public events sponsored by *Our Organization*:

Tobacco Products

- Smoking is not permitted on the event site or near any of its entrance ways.
- There shall be no distribution or sale of tobacco products or tobacco company subsidiary products (e.g., check Philip Morris, Kraft, Nabisco and Miller Web sites for product lists) at events sponsored by *Our Organization*.
- There shall be no distributing or displaying of fliers, posters, signs, banners, dispensers, programs, activities or apparel bearing the name or logo of a tobacco company.
- Whenever practical and appropriate, materials communicating the health effects of tobacco and resources for cessation programs will be made available at the event.
- Violators of any of the above policies will be asked to leave, or escorted off the event site. If the violator is an employee or volunteer of *Our Organization*, the management and the Board of Directors will be notified and necessary disciplinary actions will be implemented.

Alcohol and Other Drugs

- No one will be permitted to bring alcohol into an event.
- No illegal drugs are permitted at the site of any event sponsored by *Our Organization*.
- There shall be no distributing or displaying of fliers, posters, signs, banners, dispensers, programs, activities or apparel bearing the name or logo of an alcohol company.
- Alcohol and other drugs are not allowed on the premises of *Our Organization*. The only exception will be alcoholic beverages that are being stored to be used as part of a special function after hours. All alcohol stored on the premises must be kept locked in a secure cabinet when not being served at the intended function.
- Whenever practical and appropriate, materials communicating the health effects of alcohol and other drugs and related resource materials will be made available at the event.
- Violators of any of the above policies will be asked to leave, or escorted off the event site. If the violator is an employee or volunteer of *Our Organization*, the management and the Board of Directors will be notified and necessary disciplinary actions will be implemented.

Events Where Alcohol Is Served

- Alcohol sales at events sponsored by *Our Organization* shall be limited to beer and wine. No other alcohol products shall be sold at events.
- All vendors of alcoholic beverages shall have the proper license permitting them to sell alcoholic beverages at public events. The sale of alcohol shall comply with all appropriate City, County and State restrictions/provisions of the law that pertain to the sale and dispensing of beer and wine.
- Any vendor found to be selling alcoholic beverages without the proper liquor license or failing to comply with restriction/provisions regarding the sale and distribution of alcoholic beverages shall be remanded to the proper authorities.
- The serving of alcohol will be done by a person(s), age 21 or older, who is (are) trained in Responsible Beverage Service (RBS):
 1. All servers shall be trained to identify and handle intoxicated guests.
 2. All servers must be trained to identify counterfeit IDs.
 3. A limit of two alcoholic drinks may be served to any one person at any one time.
 4. Alcoholic beverages will be served in clear glasses and glasses that are distinctly different from those used for the non-alcoholic beverages in order to provide monitoring control.
 5. All servers of alcoholic beverages are to be trained to pour 12 oz. servings of beer and 5 oz. servings of wine.
- Servers and volunteers working at events/fundraisers will not drink alcoholic beverages.
- No minor is to be served alcoholic beverages.
- All IDs will be checked.
- For large events such as dances, festivals and fundraisers, persons 21 and older must wear nontransferable wristbands.
- Designated Drivers will be supported by providing:
 1. Special wrist bands for designated drivers.
 2. Free non-alcoholic beverages for designated drivers.
- No one under 21 years of age will be allowed at a booth that serves or sells alcohol.
- The serving of alcohol will be stopped one hour before the event closes.

Festivals, Beach Parties, Picnics, and Barbecues

- When alcoholic beverages are to be sold, no one shall bring alcoholic beverages into the event; all backpacks, purses, bags, containers, and ice chests, etc., will be searched.
- When there is an event with 75 or more persons in attendance and where alcohol is to be served, security personnel must be provided.
- When an event area is not enclosed by a fence or barrier, a “Beer Garden” or a fenced area will be provided for the consumption of alcoholic beverages. No one shall be allowed to leave the enclosed area with an alcoholic beverage.

The following must be clearly posted at all entrances to the event and in event brochures:

Tobacco:

- No Smoking

Where alcohol is allowed:

- This Event Promotes Responsible Beverage Service
- No Alcoholic Beverages are to be Brought into Event
- Drinking Age Clearly Posted
- Limit of 2 Drinks Per Person at a Time
- We Reserve the Right to Refuse Anyone Who Appears Intoxicated
- Be a Designated Driver (ask an event volunteer)
- We Can Provide a Safe Ride Home

A PRIME EXAMPLE: PROJECT INFORM DONATION GUIDELINES

Project Inform, established in 1985 as a national, non profit, community-based HIV/AIDS treatment information and advocacy organization, serves HIV-infected individuals, their caregivers and their healthcare and service providers through its national, toll-free treatment hotline, the *PI Perspective* and other information publications, educational Town Meetings, on-line services and research, and drug access advocacy programs.

Project Inform acknowledges that there is a wide range of opinion regarding policies governing donations, especially those donations coming from corporations perceived to benefit from the AIDS epidemic. Regardless of an organization's position on this issue, it is important to be forthcoming and direct about donor relations and policies. Project Inform encourages and supports full disclosure of these policies and relations from all HIV/AIDS organizations.

As a non-profit organization, Project Inform is able to fulfill its mission and provide services, free of charge, as a result of its fundraising and outreach efforts. As a community-based organization, the majority of Project Inform's support comes directly from over 20,000 of its constituents. Project Inform currently receives no government funding, and in 1996 devoted 83% of its budget directly to its programs.

As a part of its overall funding program, Project Inform believes it is ethically sound to encourage corporations (including those profiting directly from AIDS) to devote some of their profits and charitable contributions to support activities that will, directly or indirectly, benefit people with HIV and AIDS. At the same time, it is central to Project Inform's mission that it remain a totally independent, impassioned and reliable source of HIV/AIDS treatment information, an effective and respected advocate for treatment and for treatment access, and an effective, fiscally sound, well run non-profit organization. Project Inform exists to serve all those infected and affected by HIV disease. While the following policies will serve as an overall guide to whether or not a particular donation fits Project Inform's criteria, it reserves the right to refuse any donation if it is determined that negative perceptions could cause harm to the organization's reputation, thus adversely affecting its ability to carry out its mission.

To assure its independence and maximize its effectiveness, Project Inform's Board of Directors has determined that the following principles shall govern acceptance of donations from all donors, including corporate and foundation donors, and the organization's subsequent relationship to these donors:

- All donations to Project Inform are used in the fight against AIDS. Project Inform guarantees that any donation results in the maximum possible benefit to its constituents and the community with the minimum possible administrative costs.
- Project Inform maintains, at all times, an independent position on issues affecting the welfare of people with HIV and AIDS. The potential effect

of such positions on the commercial interests of a donor or prospective donor shall not be a factor in Project Inform's decision making process.

- Unless prior notice is given to the donor, and agreed to, any restricted donation shall be used for its agreed upon purposes.
- Project Inform shall solicit or accept support only for projects and activities that have been previously reviewed and approved by its Board of Directors, or which are clearly consistent with the goals and objectives of the organization and are within its established mission statement.
- Project Inform generally does not accept restricted donations from pharmaceutical companies except when:
 - a project meets a special, time-sensitive need of Project Inform or its constituents; and
 - Project Inform retains complete control over all aspects of the project; and
 - disclosure is made of our reason for making the exception.
- All restricted donations will be subject to a written agreement.
- Project Inform reserves the right to announce publicly all donations from commercial sources, although it shall respect the rights of individual donors who seek privacy. To help ensure the accuracy of public information, Project Inform shall, when appropriate, offer a donor the opportunity to review drafts of any Project Inform press releases, which relate specifically to the donation. In turn, Project Inform will also ask for the opportunity to review drafts of similar materials or promotional pieces produced by the donors.
- When specified in written agreements, the results of programs or projects funded by grants shall be reported to the donor.
- To discourage the process or impression of donor influence or related perceptions of conflict of interest, negotiations regarding possible donations should not be conducted by Project Inform program staff, but referred as soon as practical to administrative or development staff.
- As a matter of policy, the organization does not disclose its constituent mailing list for external use, nor is the list rented, lent or shared, except for very limited one-time use in collaboration with other non-profits to benefit constituents.
- Project Inform shall disclose all donations of \$50 or more on a yearly basis in the form of an annual report which is mailed to all constituents and is also available on request at the organization's office.
- Members of the Project Inform Board of Directors will disclose to the organization any significant holdings in or direct relationship with companies involved in HIV/AIDS treatments. That information will be available on request at the Project Inform office.

Guidelines for Project Inform sponsored educational events:

Project Inform educational events, most often in the form of Town Meetings in cities across the United States, bring an awareness of treatment and treatment access options to HIV-infected individuals, their caregivers and their healthcare and service providers.

Given the important role these events can play in developing treatment strategy, it is essential that Project Inform staff and volunteers guarantee:

- The content of presentations is based on scientifically accurate, up-to-date information, presented in a balanced, objective manner and not modified or influenced by corporate or other donors.
- That there be full disclosure of any direct corporate support of the meeting on any related flyer or advertisement, and by announcement at the event.
- That there be disclosure of guest presenter's financial relationship to any company that produces any drugs or therapies discussed at the meeting by the presenter.

Guidelines for co-sponsorship of, participation in, or presentation at conferences, meetings, or other educational activities initiated by others:

As HIV/AIDS treatment and public policy advocates and information resources, Project Inform and its staff are often asked to co-sponsor, participate in, or present at conferences, meetings or other educational activities initiated by others. Project Inform should strive to guarantee that the concerns of HIV positive people be well represented. For these activities:

- Project Inform will accept reimbursement for reasonable travel, lodging and meal expenses.
- All Project Inform speaker honoraria will be directed to Project Inform.

Guidelines for participation in hearings:

In its role as a treatment advocate, Project Inform staff and volunteers are often called upon to provide testimony at public hearings. In these situations:

- No direct donation from a corporation with a vested interest in the process of the hearings will be used to ensure attendance at the hearing by Project Inform staff or volunteers.
- In the event that the subject discussed in the hearing is one where there is a financial connection between Project Inform and a corporation, full disclosure of that fact will be made by Project Inform staff or volunteers.

Guidelines for attendance at conferences, meetings, etc.:

Attendance at conferences and meetings is often essential for Project Inform staff and volunteers to perform their duties for its constituents. In some cases, attendance at these events are made possible through corporate donations. In the case of attendance at such events:

- Attendance at the event should generally be pre-planned or part of an existing work plan.
- The primary function of attendance at a meeting or event should be to benefit Project Inform's constituents in the form of information, advocacy, etc.

Guidelines for acceptance of gifts to individual staff or volunteers from donors:

- Any gifts accepted by Project Inform staff or volunteers should not be of substantial value.
- Cash gifts should not be accepted.
- In certain instances, government committees or sponsors of events are not able to write checks of honoraria, per diem, etc., to Project Inform and must write a check to an individual. In these instances the staff representative will sign checks over to the organization.
- No gifts should be accepted if there are real or perceived conflicts of interest.

Project Inform shall review its funding program on a regular basis. The Board of Directors encourages participation in this process through constructive comment and discussion by Project Inform staff, volunteers, constituents and other organizations and agencies.

These policies were reviewed and approved by the Project Inform Board of Directors at its regular meeting held on September 15, 1997 in San Francisco, California.

POLICY EXAMPLES FROM OTHER CALIFORNIA ORGANIZATIONS

A number of City, County, State and nonprofit organizations have adopted policies related to corporate sponsorship that could easily be adapted or adopted for use by LGBT and HIV/AIDS organizations.

California Department of Public Health, California Tobacco Control Program

The California Tobacco Control Program of the California Department of Public Health requires grantees to assert the following in a signed Certification of Non-Acceptance of Tobacco Funds. Grantees such as the Gay and Lesbian Center of Orange County have signed this certification:

“The applicant named above hereby certifies that it will not accept funding from nor have an affiliation or contractual relationship with a tobacco company, any of its subsidiaries or parent company during the term of the grant from the California Department of Public Health, California Tobacco Control Program.”

Universities and Colleges must certify the following:

“The Principal Investigator of the university or college named above hereby certifies that he/she has not received funding from nor had an affiliation or contractual relationship with a tobacco company, any of its subsidiaries or parent company within the last five (5) years prior to the start date of the grant period. In addition, the Principal Investigator of the university or college named above hereby certifies that he/she will not accept funding from nor have an affiliation or contractual relationship with a tobacco company, any of its subsidiaries or parent company during the term of the grant from the California Department of Public Health, California Tobacco Control Program.”

City of Berkeley, California

The City of Berkeley passed a resolution related to tobacco and alcohol sponsorship based on a recommendation by the Civic Arts Commission of the City of Berkeley. The resolution states:

“The City of Berkeley shall not sponsor or co-sponsor any event that accepts as primary or secondary sponsors manufacturers, distributors or retailers whose principal business is alcohol beverages or tobacco products. There shall be no distributing or displaying of fliers, posters, signs, banners, dispensers, programs, activities or apparel bearing the name or logo of an alcohol or tobacco product manufacturer.”

Asian Pacific Islander Tobacco Education Network

The APITEN policy for receiving corporate donations begins with a statement of the organizational vision (a statewide partnership for the wellness of the Asian Pacific Islander communities) and mission (to organize individuals and agencies for tobacco-free Asian and Pacific Islander communities) and states:

“The Asian & Pacific Islander Tobacco Education Network (APITEN) believes that it is the responsibility of everyone to promote wellness in the Asian and Pacific Islander communities. While we encourage contributions from the corporate sector, APITEN limits receipt of corporate gifts in the following areas:

- 1) Because of our mission of promoting wellness and tobacco-free communities, APITEN does not accept contributions from tobacco or alcohol companies.
- 2) It is APITEN policy not to accept contributions from companies who require:
 - high visibility acknowledgement or display of their logo; or
 - conditions to their contribution that contradict the mission and vision of APITEN. ”

County of Riverside, California

The County of Riverside, California has a policy that states: “no sponsorship of any County event will be accepted from a tobacco company, or shall any County event allow tobacco advertising, the sale or give-away of items identified with a tobacco brand, and/or samples of cigarettes or smokeless tobacco.”

▼ OUR PRIDE IS NOT FOR SALE

TOBACCO COMPANIES NEED TO RECRUIT 4,000 smokers each day to replace the ones who quit or die. That's why they want us — each year they spend more money in our community getting more of us to smoke.

We salute the community institutions which have had the courage to refuse tobacco contributions and sponsorship. We're all breathing a lot easier because of your efforts.

- THE SAN FRANCISCO LESBIAN/GAY/BISEXUAL/TRANSGENDER COMMUNITY CENTER PROJECT
- THE L.A. GAY AND LESBIAN CENTER
- THE BAY TIMES OF SAN FRANCISCO
- STEPPING STONE SAN DIEGO, INC
- S.F. FRONTRUNNERS
- KARIBU CENTER FOR SOCIAL SUPPORT AND EDUCATION (SAN DIEGO)
- LESBIAN NEWS
- AMERICAN HEART ASSOCIATION
- AMERICAN LUNG ASSOCIATION OF CALIFORNIA
- AMERICAN CANCER SOCIETY, GAY AND LESBIAN AFFILIATE, SAN DIEGO UNIT
- XY MAGAZINE
- PLANETOUT (WWW.PLANETOUT.COM)
- GAY AND LESBIAN MEDICAL ASSOCIATION
- SAN FRANCISCO PRIDE CELEBRATION COMMITTEE

For more information on our project, or for stop-smoking classes, call THE CALIFORNIA LAVENDER SMOKEFREE PROJECT at **(213) 993-7665**

CALIFORNIA LAVENDER  SMOKEFREE PROJECT

This ad is an example of how the California Lavender Smokefree Project first raised the issue of ethical funding in the California LGBT community. This ad salutes the community institutions which have had the courage to refuse tobacco contributions and/or sponsorship.

REFERENCES

- Albright, C. L., Altman, D. G., Slater, M. D., & Maccoby, N. (1998). Cigarette advertisements in magazines. *Health Education Quarterly*, 15(2), 255-233.
- American Academy of Physician Assistants (AAPA). (1993). PA's and the pharmaceutical industry. *Journal of the American Academy of Physician Assistants*, 6, 291-294.
- American Public Health Association (APHA). (1993). Advertising and promotion of alcohol and tobacco products to youth: Policy statement 9213(PP). *American Journal of Public Health*, 83(3), 468-472.
- Badgett, M. V. L. (1998). *Income inflation: The myth of affluence among gay, lesbian, and bisexual Americans*. New York: National Gay and Lesbian Task Force, Policy Institute.
- Beer Marketer's Insights. (1995). Coors and other companies tap into gay market. *Beer Marketer's Insights*, 46(27), 3.
- Basara, L. R. (1992). Direct-to-consumer advertising: Today's outlook and tomorrow's outlook. *Journal of Drug Issues*, 22(2), 195-203.
- Bleidt, B. (1992). Recent issues and concerns about pharmaceutical industry promotional efforts. *Journal of Drug Issues*, 22(2), 407-415.
- Burns, D.N., Hillman, D., Neaton, J.D., Sherer, R., Mitchell, T., Capps, L., Vallier, W. G., Thurnherr, M. D. & Gordin, F. M. (1996). Cigarette smoking, bacterial pneumonia, and other clinical outcomes of HIV-1 infection. *Journal of AIDS and Human Retrovirology*, 13(4), 374-383.
- Cal Council. (1993). A first for Santa Ana Celebrating Cinco de Mayo Alcohol-Free. *Cal Council Report*, VII, 4.
- Center for Disease Control (CDC). (1993). It's time to stop being a passive victim.
- Conley, L. J., Bush, T. J., Buchbinder, S. P., Penley, K. A., Judson, F. N. & Holmberg, S. D. (1996). The association between cigarette smoking and selected HIV-related medical conditions. *Annals of Epidemiology*, 6, 420-430.
- Davis, R. M. (1987). Current trends in cigarette advertising and marketing. *The New England Journal of Medicine*, 12, 725-732.
- Department of Health and Human Services (DHHS). (1997). Ninth special report to the U.S. Congress on alcohol and health (NIH Publication No. 97-4017). Rockville, MD: National Institute on Alcohol Abuse and Alcoholism.
- DiFranza, J. R., & Godshall, W. T. (1996). Tobacco industry efforts hindering enforcement of the ban on tobacco sales to minors: Actions speak louder than words. *Tobacco Control*, 5(2), 127-131.
- Federal Trade Commission (FTC). (1999). Reported U.S. cigarette promotional expenditures.
- Garofalo, R., Wolf, R. C., Kessel, S., Palfrey, J. & DuRant, R. (1998). The association between health risk behaviors and sexual orientation among a school-based sample of adolescents. *Pediatrics*, 101(5), 895-902.

- Goebel, K. (1994). Lesbians and gays face tobacco targeting. *Tobacco Control*, 3, 65-67.
- Gordon, R. for Coalition of Lavender Americans on Smoking and Health (2001). *Milestones in the Tobacco Control Struggle Within California's Lesbian, Gay, Bisexual & Transgender Communities*.
- Grant, B. R., & Dawson, D. A. (1998). Age at onset of alcohol use and its association with DSM-IV alcohol abuse and dependence: Results of the national longitudinal alcohol epidemiological survey. *Journal of Substance Abuse*, 9, 103-110.
- Hacker, G., Collins, R., & Jacobson, M. (1987). *Marketing booze to blacks*. Washington, DC: Center for Science in the Public Interest.
- Harris Interactive (2001, May 14) Lesbians and gays more likely to smoke than other adults—even though they know the risks and try to stop. *Harris Interactive Health Care News*, Volume 1, Issue 16.
- Holder, H. (1992). What is a community and what are implications for prevention trials for reducing alcohol problems? In H. D. Holder & J. M. Howard (Eds.), *Community prevention trials for alcohol problems: Methodological issues* (pp. 15-33). Westport, CT: Praeger Publishers.
- Injury Prevention. (1991, Fall). Working to counteract the seduction of “industry ‘give-aways.’” *Injury Prevention Network Newsletter*, 11.
- Kahan, H. & Mulryan. (1996, December). Mending fences: Selling AIDS drugs to the gay community. *American Demographics*, 18(2), 42-45.
- Kanes Beverage Week. (1998). Shalala urges end to alcohol sponsorship of college sports: Tobacco studies a worry. *Kane's Beverage Week*, 59(8).
- Kilbourne, J. (1991). The spirit of the czar: Selling addictions to women. In P. Roth (Ed.), *Alcohol and drugs are women's issues: A review of the issues*. (Vol. 1, pp. 10-22). New York, NY: Women's Action Alliance and Scarecrow Press.
- Krupka, L. R., & Vener, A. M. (1992). Gender differences in drug (prescription, non-prescription, alcohol and tobacco) advertising: Trends and implications. *Journal of Drug Issues*, 22(2), 339-360.
- Levin, G. (1993). Mainstream's domino effect: Liquor, fragrance, clothing advertisers ease into gay magazines. *Advertising Age*, 64(3), 30-32.
- Marin Institute. (1992, Winter). Booze makers buy into racial/ethnic communities. *The Marin Institute for the Prevention of Alcohol and Other Drug Problems Newsletter*.
- Maxwell, B., & Jacobson, M. (1989). *Marketing disease to Hispanics: The selling of alcohol, tobacco, and junk foods*. Washington DC: Center for Science in the Public Interest.
- Mayberry, R. M., & Price, P. A. (1993). Targeting blacks in cigarette billboard advertising: Results from down south. *Health Values*, 17(1), 28-35.
- McGinnis, M. J., & Foege, W. H. (1993). Actual causes of death in the United States. *JAMA*, 270, 2207-2212.
- McKirnan, D. J., & Peterson, P. L. (1989). Alcohol and drug use among homosexual men and women: Epidemiology and population characteristics. *Addiction Behaviors*, 14(5), 545-553.
- Mirken, B. (1997, June 12). Coors controversy explodes up and down California: SF Community Center under fire for accepting Coors donation to capital campaign. *San Francisco Bay Times*, pp. 2-3, 5-6.

- Mirken, B. (1997a, December 11). L.A. gays reaffirm Coors boycott. *San Francisco Bay Times*.
- Mirken, B. (1997b, July 24). SF Community Center delays decision on Coors funding as anti-Coors protests haunt L.A. Film Fest. *San Francisco Bay Times*, pp. 3-4.
- Montagne, M. (1992). Drug advertising and promotion: An introduction. *Journal of Drug Issues*, 22(2), 195-203.
- Moore, D., Williams, J., & Qualls, W. (1996). Target marketing of tobacco and alcohol-related products to ethnic minority groups in the United States. *Ethnicity & Disease*, 6, 83-98.
- Mosher, J. (1995). The merchants, not the customers: Resisting the alcohol and tobacco industries' strategy to blame young people for illegal alcohol and tobacco sales. *Journal of Public Health Policy*, 16(4), 412-432.
- Mosher, J., & Frank, E. (1994, November). Reaching consensus: *Assessing support for national alcohol policies*. Paper presented at the 122nd Annual Meeting of the American Public Health Association, Washington D.C.
- Mossinghoff, G. (1992). Pharmaceutical manufacturers and self-regulation of drug advertising and promotion. *The Journal of Drug Issues*, 22(2), 235-243.
- Nieman, R., Fleming, J., & Coker, R. (1993). The effect of smoking on the development of AIDS in HIV-positive individuals. *AIDS*, 7, 705-710.
- Penaloza, L. (1996). We're here, we're queer, and we're going shopping! A critical perspective on the accommodation of gays and lesbians in the marketplace. *Journal of Homosexuality*, 31(1/2), 9-41.
- Pierce, J. P., & Gilpin, E. A. (1995). A historical analysis of tobacco marketing and the uptake of smoking by youth in the United State: 1890-1977. *Health Psychology*, 14(6), 500-508.
- Pollay, R. W., Lee, J. S., & Carter-Whitney, D. (1992). Separate, but not equal: Racial segmentation in cigarette advertising. *Journal of Advertising*, 21(1), 45-57.
- Price, D. (1998, November 23). Tobacco remains serious threat to gays. *Detroit News*.
- Rahn, P. (1994). Alcohol marketing to the gay community. *Prevention Pipeline* 7(6), 30-31.
- Remafedi, G. (1987). Adolescent homosexuality: Psychosocial and medical implications. *Pediatrics*, 79(3), 331-337.
- Rotheram-Borus, M. J., Rosario, M., Meyer Bahlburg, H., Koopmen, C., Dopkins, S. C., & Davies, M. (1994). Sexual and substance use acts of gay and bisexual male adolescents in New York City. *Journal of Sex Research* 31(1), 47-57.
- SAMHSA. (1995). *National household survey on drug abuse: Main findings 1995*. (DHHS Publication No. SMA 97-3127). Rockville, MD: Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.
- Scott, B., Denniston, R., & Magruder, K. (1992). Alcohol advertising in the African-American community. *Journal of Drug Issues*, 22(2), 455-469.
- Sentinel. (1992, August 20). Philip Morris targeting cigarettes to gays. *San Francisco Sentinel*.
- Silverman, M., Lydecker, M., & Lee, P. R. (1992). *Bad medicine: The prescription drug industry in the third world*. Stanford, CA: Stanford University Press.

Skinner, W., & Otis, M. (1992, August). *Drug and alcohol use among lesbian and gay people: Findings, research design, insights, and policy issues from the Trinity Project*. Paper presented at the Research Symposium on Alcohol and Other Drug Problem Prevention Among Lesbians and Gay Men, Los Angeles, CA.

Skinner, W.F. (1994). The prevalence and demographic predictors of illicit and licit drug use among lesbians and gay men. *American Journal of Public Health*, 84(8), 1307-1310.

Stewart, D. W., & Rice, R. (1995). Nontraditional media and promotions in the marketing of alcoholic beverages. In S. E. Martin (Ed.), *The effects of the mass media on the use and abuse of alcohol* (Research Monograph 28 ed., Vol. NIH Publication No 95-3743, pp. 209-238). Rockville, MD: National Institute on Alcohol Abuse and Alcoholism.

Wallack, L., Dorfman, L., Jernigan, D., & Themba, M. (1993). *Media advocacy and public health*. Newbury Park, CA: Sage Publications.

Warner, K. E., Goldenhar, L. M., & McLaughlin, C. G. (1992). Cigarette advertising and magazine coverage of the hazards of smoking. *New England Journal of Medicine*, 326(5), 305-309.

Wilke, M. (1996, September 9). Gay press sets pace with 19.6% ad increase. *Advertising Age*, 67, 57.

Wilke, M. (1997a, August 4). Big advertisers join move to embrace gay market. *Advertising Age*, 68(31), 1.

Wilke, M. (1997b, August 4). Reliable research data difficult to gather, analyze. *Advertising Age*, 68(31), 11.

Wolff, M., & Clay, M. (1997). Strength through inclusion. *Market Watch*, 15(5), 53-57.

Yankelovich Monitor (1996). Gay and lesbian consumer data.

RESOURCES

CLASH

(Coalition of Lavender Americans on Smoking and Health)
1800 Market Street, Suite #4
San Francisco, California 94102
415-339-7867

PROGRESSIVE RESEARCH AND TRAINING FOR ACTION

1127 Webster St. Suite 3
Oakland, CA 94607
510-550-2928
www.prtaonline.org
Email: info@prtaonline.org

THE LAST DRAG

415-339-7867
<http://www.lastdrag.org>
Email: info@lastdrag.org

CALIFORNIA SMOKERS' HELPLINE

800-NO-BUTTS (1-800-662-8887)
TDD/TTY: 800-933-4833

NETWORK OF TOBACCO CESSATION QUITLINES

1-800-QUITNOW (1-800-784-8669)
TTY: 800-332-8615

Add your local information here