## Welcome

Please stand by. We will begin shortly.

## Where's the Justice? Tobacco Use and the Incarcerated

Wednesday, October 8, 2014 · 2pm ET (90 minutes)



#### Disclosure

Dr. Chad Morris, Brenda Howard, Ben Udochi, and Catherine Saucedo have disclosed no financial interest/arrangement or affiliation with any commercial companies who have provided products or services relating to their presentation or commercial support for this continuing medical education activity.

#### Moderator



#### **Catherine Saucedo**

- Deputy Director,
   Smoking Cessation Leadership
   Center, University of California,
   San Francisco
- csaucedo@medicine.ucsf.edu

#### Thank you to our funders







## Housekeeping

- All participants will be in listen only mode.
- Please make sure your speakers are on and adjust the volume accordingly.
- If you do not have speakers, please request the dial-in via the chat box.
- This webinar is being recorded and will be available on SCLC's website, along with the slides.
- Use the chat box to send questions at any time for the presenters.

## Today's Speaker





#### Chad D. Morris, PhD

- Associate Professor, Department of Psychiatry, University of Colorado Denver
- Director, Behavioral Health & Wellness Program, University of Colorado Anschutz Medical Campus

## Today's Speaker









#### Brenda Howard, MS, CADC, CCS

Public Health Section Chief,
 Tobacco Prevention and Cessation,
 Arkansas Department of Health

## Today's Speaker





#### Ben Udochi, CCS

 Assistant Director for Probation & Parole Treatment Services, Arkansas Community Correction

#### **Poll Question**

Are tobacco treatment services provided within the criminal justice system in your state?

- -Yes
- -No
- –I don't know



# Justice Involved Individuals The Current Picture

# Prevalence of Psychiatric Conditions in the Justice System

- 56% of individuals incarcerated in state prisons
- 45% of individuals incarcerated in Federal prisons
- 64% of those held in county jails



#### Recidivism

- Annually, 700,000 are discharged from state and federal prisons, and almost 12 million are discharged from local jails.
- Approximately 2 out of 3 people released from prison in the are re-arrested within 3 years.

Path to Poor
Health Status for
the JusticeInvolved
Population

#### **Social Determinants**

- Race/ethnicity
- Poverty
- Low educational attainment
- "Underserved" health status prior to incarceration

#### Conditions Related to Incarceration

- Poor access to care/resources
- Multi-system involvement
- Negative perceptions from health providers
- Stigma





#### **Higher Rates of Chronic and Infectious Diseases**

- Mental health/psychiatric disorders
- Substance abuse disorders
- Hypertension
- Asthma
- Cervical cancer (women)
- Hepatitis
- Infectious diseases (HIV, tuberculosis, STIs)



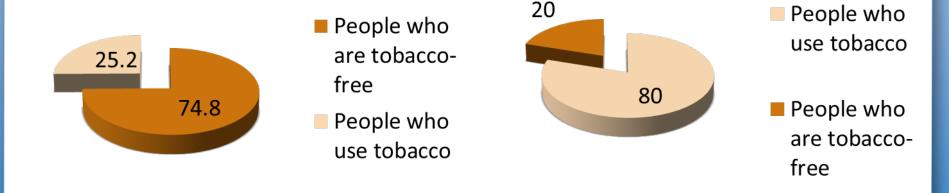


# Smoking among justice involved individuals is an ignored public health epidemic

#### Rates of Tobacco Use

**General Population** 

**Criminal Justice Population** 



In the United States, the smoking rate among the justice-involved population is approximately <u>3 times</u> higher than the general population



## Leading Causes of Death among Justice Involved Individuals

**Prisons** 

**Jails** 

Cancer\*

**Heart Disease\*** 

**Respiratory Disease\*** 

Liver Disease\*

Suicide\*

Suicide\*

**Heart Disease\*** 

Drug or Alcohol Intoxication

Cancer\*

**Liver Diseases\*** 

\*Conditions caused or exacerbated by tobacco use

#### State and Federal Tobacco Policy

- In 2004, the Federal Bureau of Prisons made all facilities under its control 100% smoke-free
- Many state corrections departments made the decision to go smoke-free and tobacco-free
- Implementation of smoking bans in prisons reduce smoking related mortality (Binswanger et al, 2014)
  - (particularly cardiovascular and pulmonary deaths)

#### Desire to Quit

- Most individuals who are incarcerated and use tobacco have the desire to quit
- For those in community corrections, more than half of smokers indicated interest in receiving help if it were available



#### Post-Release Challenges

- Navigating health systems
- Immediate needs met (e.g., food, shelter)
- Lack of health insurance benefits
- Access to primary care
  - Including prevention and wellness services



#### From Policy to Practice

Forced abstinence is not enough – Stopping is not the same as quitting

97% of individuals released from correctional facilities relapse on tobacco after 6 months

#### **Criminogenic Risk Factors**

**Antisocial Attitudes** 

History of Antisocial Behavior/ Low Self Control

**Antisocial Peers** 

Criminal Personality Makeup

**Dysfunctional Family Relations** 

Substance Abuse

Education/ Employment

Leisure/ Recreation



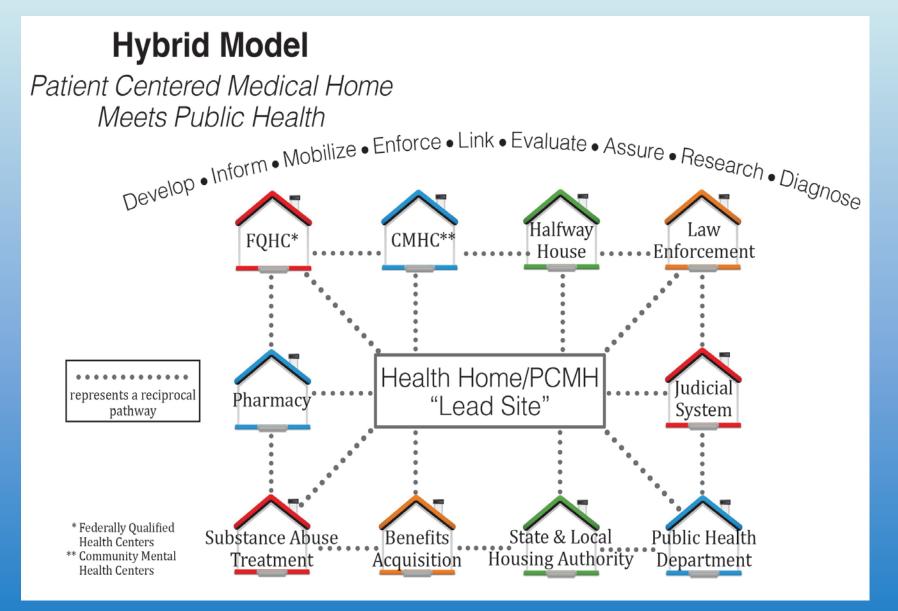
<sup>\*</sup> Potentially impacted by tobacco use

#### A Continuity-of-Care Model

#### Patient-centered medical home

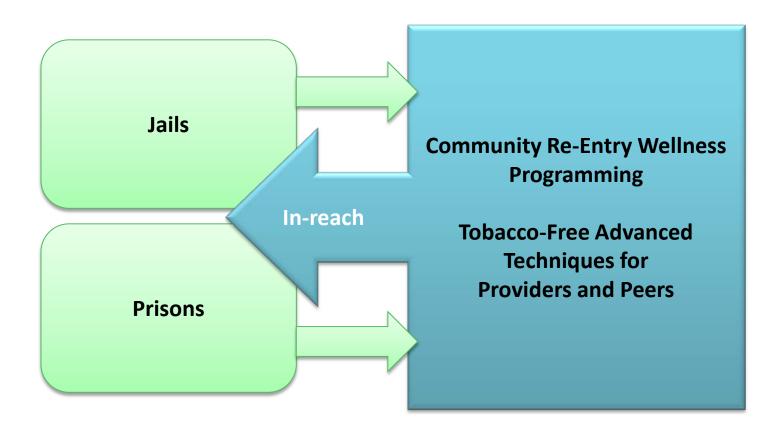
- Intended to serve as a hub for client care
- Relationship, client and family-oriented care
- Comprehensive physical and mental health care
- Ongoing care coordination between healthcare providers and community agencies
- Increased access for chronic high-risk patients
- Promotes clear, formalized agreements to streamline care coordination
- Formation of care teams to increase efficiency and decrease costs and duplication of services
- Strong community linkages and commitment to participate in shared clinical decision-making

Patient-centered medical neighborhood



http://www.bhwellness.org/resources/fact-sheets-reports/

## A Continuity of Care Model for Tobacco Cessation





#### **National Innovation**

#### DIMENSIONS: Tobacco Free Program

- An evidence-based tobacco cessation program that promotes positive health behavior change
- Initially developed for the behavioral health population in 2006
- The program supports tobacco cessation through motivational engagement strategies, group process, community referrals, and educational activities

#### A Peer-to-Peer Model

Peer Advocate/ Mentor – An individual with a criminal justice history who has received specialized training and supervision to work with others who have a similar history

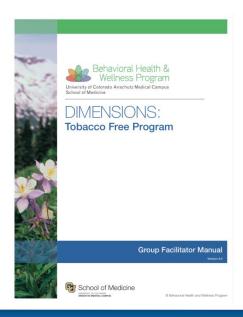
This model has shown preliminary success with criminal justice populations

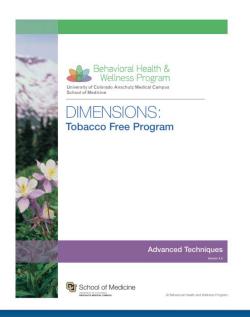
# Role of the Tobacco Free Program Facilitators

- Raise awareness through center in-services, lunch and learns, and trainings
- Conduct individual motivational interventions
- Facilitate Tobacco Free groups
- Make referrals to other healthcare providers and community cessation services
- Create a positive social network

# Tobacco Free Program Training Materials

- Tobacco Free Advanced Techniques Manual
- Tobacco Free Group Facilitator Manual
- Electronic copies of materials

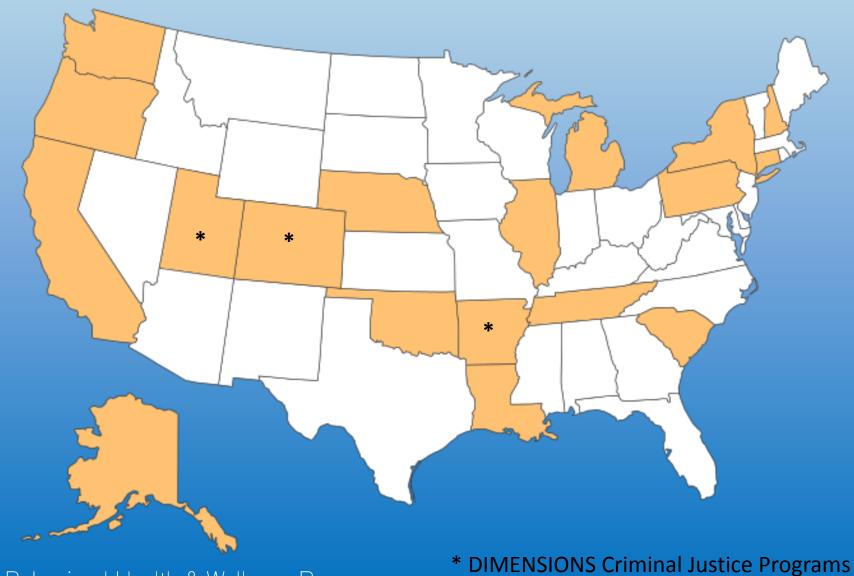




#### **Tobacco Free Group**

- Session A: Creating a Plan
- Session B: Healthy Behaviors
- Session C: The Truth about Tobacco
- Session D: Changing Behaviors
- Session E: Coping with Cravings
- Session F: Maintaining Change

# DIMENSIONS: Tobacco Free and Well Body Programs



#### Laying the Foundation

- Partnered with the Colorado Governor's Office & Department of Corrections
  - —Benefits acquisition program (SSI/SSDI)
- Denver Jail System
  - Strategic review of high utilizers
  - New competitive Request for Application

## Re-Entry Trainings

DIMENSIONS Tobacco-Free and Well-Body Programs for Justice Involved Individuals

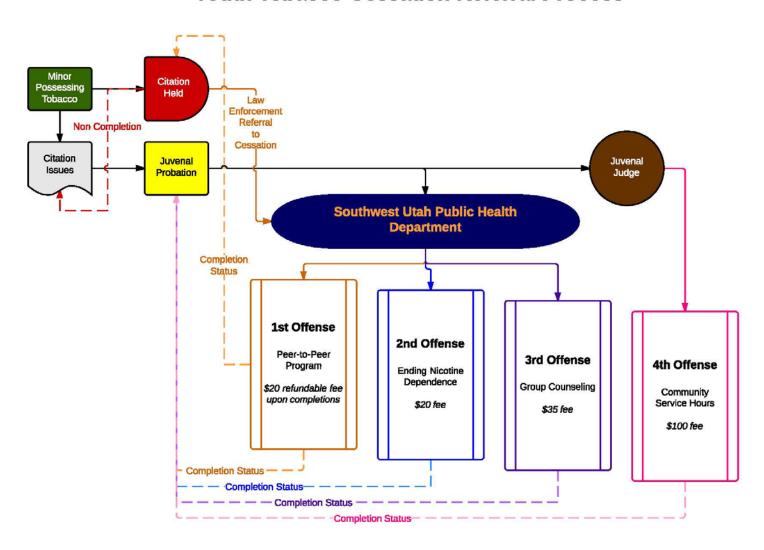
- 40 peers at Red Rocks Community College-Gateway Program
  - "reducing recidivism through education"
- 20 peers and providers at the Community Re-Entry Project
  - 6 local re-entry agencies

### Utah Youth Focus Groups

- 60% said friends were a main reason for initial use.
- 40% said curiosity was one of the main reasons for initial use.
  - To "fit in" and "be cool"
  - 80% said it was hard to quit if someone lights up around them

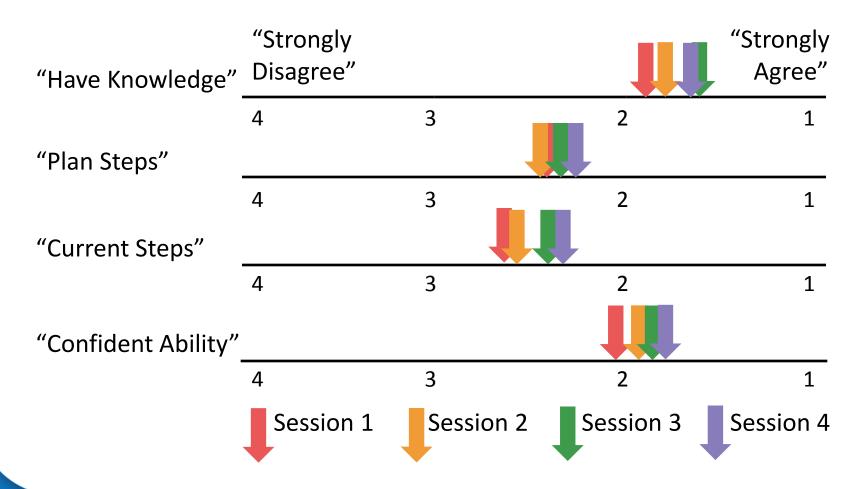
"Peer pressure is real, not because friends actually try to get you to smoke, but simply because of the social pressure of wanting to fit in with"

#### **Youth Tobacco Cessation Referral Process**



#### Arkansas: Change in "Readiness to Quit"

(N = 144 individuals surveyed across 4 group sessions)

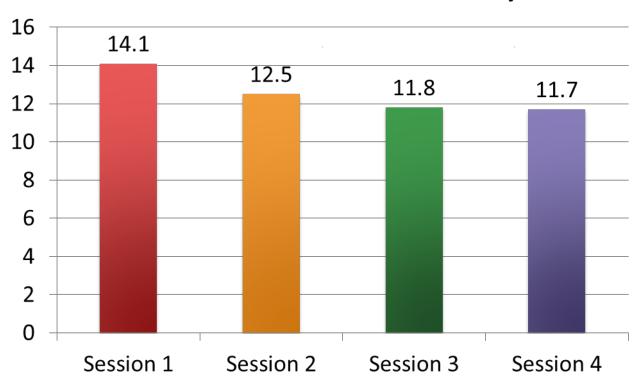




## Arkansas: Change in Tobacco Uses Per Day

(N = 144 individuals surveyed across 4 group sessions)

#### **Number of Tobacco Uses Per Day**





# Corrections in Arkansas: Integrating Tobacco Cessation

# Brenda Howard, MS, CADC, CCS Cessation Section Chief Tobacco Prevention and Cessation Program







# Timeline for Addressing Tobacco within Treatment Settings in Arkansas

Developing relationships with state and community organizations	2010 - 2014 Training	2010- 2014
	Provide Peer-to-Peer Training to consumers Provide Certified Tobacco Treatment Training Provide Dimensions: Tobacco Free Program Training	Treatment
		Develop programs to include tobacco treatment to consumers
		Promote referrals to the Arkansas Tobacco Quitline
		Promote use of standardized curriculum to deliver tobacco education and treatment groups

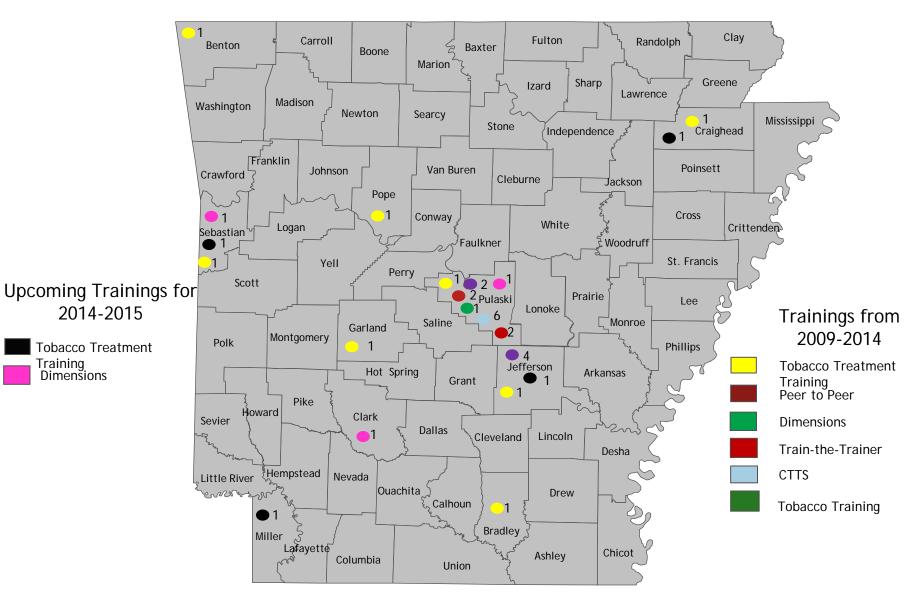


### Layered Strategies to Promote Cessation in Targeted Populations





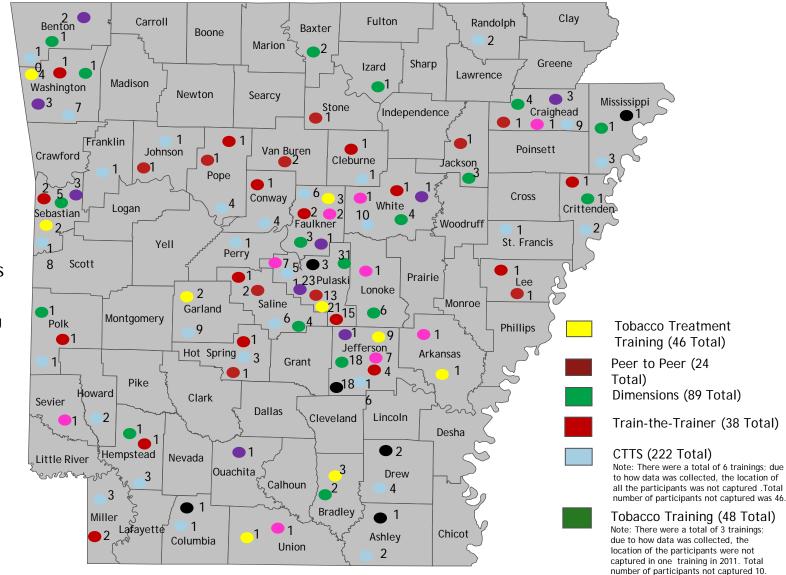
#### **Trainings By Location**







## Tobacco Trainees by Location 2009-2014



FY15 Trainings

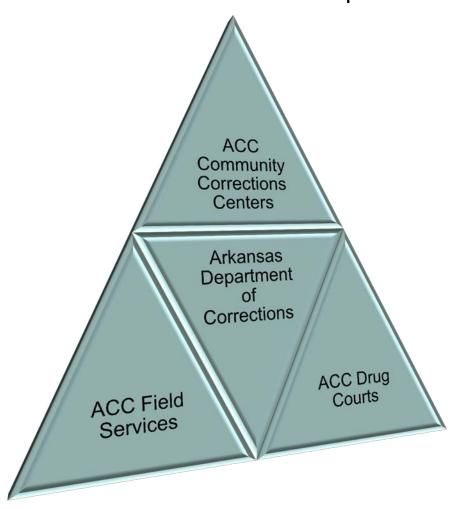
Tobacco Treatment Training (26 Total) Dimensions Training (21 Total)

Total Number of trainees: 511



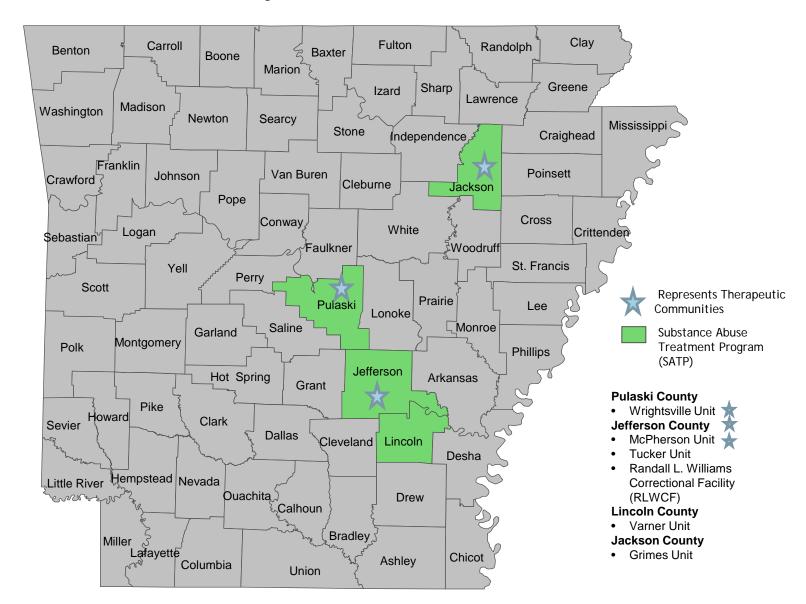


# Progress in Addressing Tobacco in Justice Involved Populations





#### **Arkansas Department of Corrections**

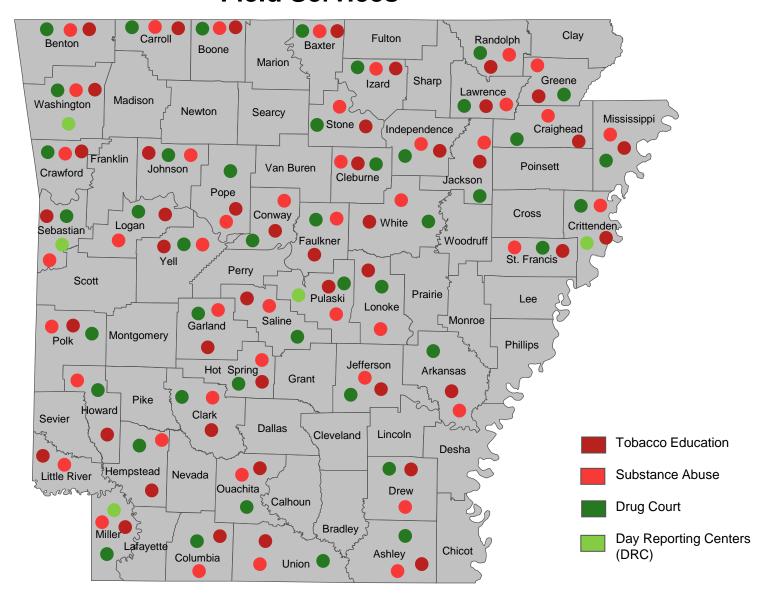








# **Arkansas Community Corrections Field Services**

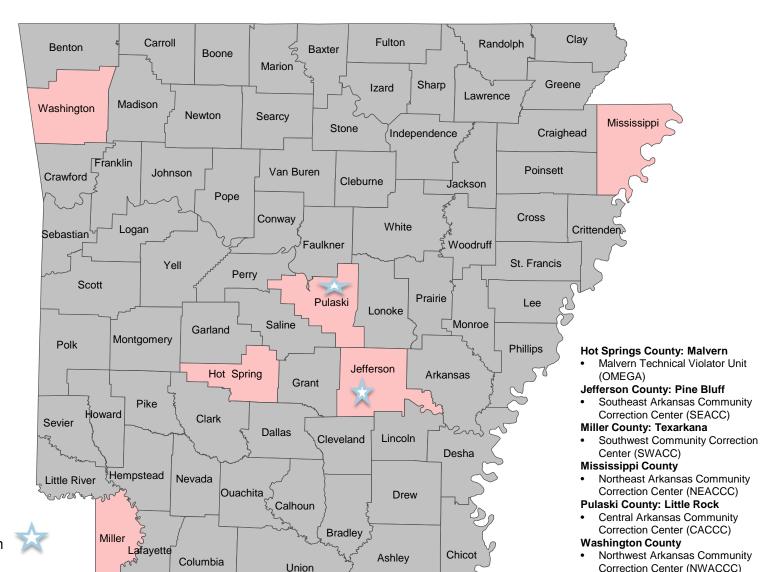








#### **Arkansas Community Corrections Centers**



Provide some tobacco cessation or education





## **State Partners**

- Arkansas Community Corrections
- Department of Human Services Division of Behavioral Health Services
- Harding University School of Pharmacy
- University of Arkansas Medical Sciences
- University of Arkansas at Little Rock Institute of Government
- Arkansas State University
- Arkansas Department of Corrections
- Veteran Administration
- United States Air Force Base
- Community Mental Health Centers of Arkansas
- MidSOUTH Addictions Training Network
- MidSOUTH Center for Prevention and Treatment
- Arkansas Substance Abuse Certification Board
- Mid-South Summer School
- Behavioral Health Institute
- Community Mental Health Centers Consumer Advocacy Council



## **National Partners**

- Centers for Disease Control and Prevention Office of Smoking and Health
- University of Massachusetts, School of Medicine and Research
- Behavioral Health and Wellness Program, University of Colorado, Anschutz Medical School
- Center for Tobacco Research and Intervention, University of Wisconsin School of Medicine and Public Health
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Smoking Cessation Leadership Center



# **Next Steps**

Promote Systems Change Communities to Promote Cessation Services

Continued Collaboration Opportunities

to Assess Impact

**Collect Data** 

Collaboration





#### **Contact Information**

Brenda Howard
Arkansas Department of Health
Tobacco Prevention and Cessation Program
4815 West Markham
Little Rock, Arkansas 72205
501-661-2467
Brenda.k.howard@arkansas.gov

# Tobacco Use Treatment Program



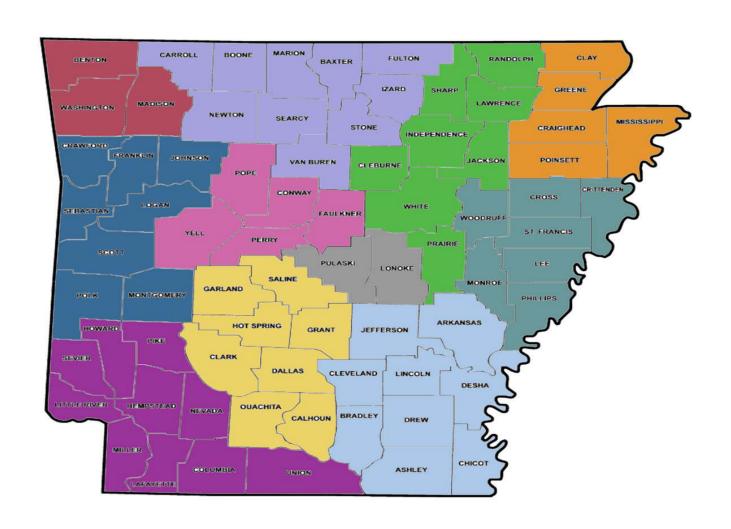
**Probation & Parole Treatment Services** 

## **Probation & Parole Treatment Services**

<ul> <li>Treatment Services Overview</li> </ul>
Coverage Area
Population Served (Probationers & Parolees)
Treatment Staff (64 Credentialed; 40 Reg. CIT)
<ul> <li>Tobacco Use Treatment Program        Format        Curriculum: Dimensions-Tobacco Free Program</li> </ul>

Continuing Care Program

# ACC Area Map



# September 2014 Report

• 3,562 Clients Received Tobacco Education

27 Clients Completed Dimensions Program

243 Active in the Dimensions Program

40 Quit-line Referrals made in September

## **Contact Information**

Ben Udochi P & P Treatment Services **Arkansas Community Correction** 2001 Pershing Circle, Suite 300 NLR, AR 72114 501 852-9034 ben.udochi@arkansas.gov

# **Questions and Answers**



 Submit questions via the chat box

# Contact SCLC for technical assistance



CME/CEUs of up to 1.5 credits are available to all attendees for a fee of \$35 per certificate. Instructions will be emailed after the webinar.

### Visit us online

http://smokingcessationleadership.ucsf.edu

### Call us toll-free

1-877-509-3786



# Closing remarks

- Please help us by completing the post-webinar survey.
- Save the date! Our next webinar will be on Friday, November 21<sup>st</sup> at 1pm ET.
   Registration is coming soon!
- Thank you for your continued efforts to combat tobacco.

### **CME/CEU Statement**

#### **Accreditation:**

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**Physician Assistants:** The National Commission on Certification of Physician Assistants (NCCPA) states that the *AMA PRA Category 1 Credits*<sup>TM</sup> are acceptable for continuing medical education requirements for recertification.

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