

Supporting Implementation of Smoking Cessation Programs in Public Housing Primary Care

Learning Collaborative Session 2



September 15, 2021

Housekeeping



- All participants muted upon entry
- Cameras on (if possible)
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email and posted to Moodle within a week after session

National Center for Health in Public Housing

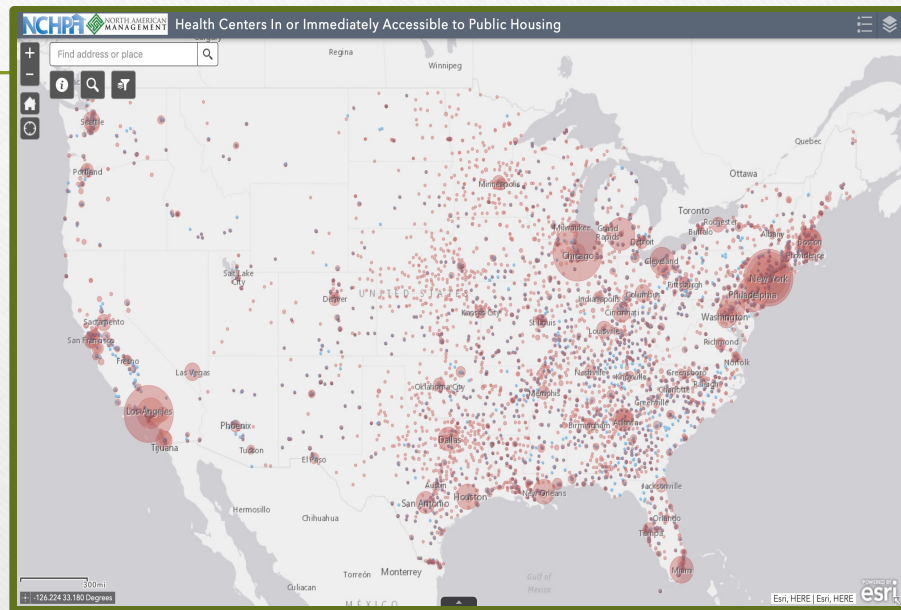
- The National Center for Health in Public Housing (NCHPH), a project of North American Management, is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Partner (NTTAP) for \$2,006,400, and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



Health Centers close to Public Housing

- 1,375 Federally Qualified Health Centers (FQHC) = 28.5 million patients
- 435 FQHCs In or Immediately Accessible to Public Housing = 5.1 million patients
- 107 Public Housing Primary Care (PHPC) = 866,851 patients

• Source: [2020 National Health Center Data](#)



Public Housing Demographics

Public Housing Demographics:



1.7 Million Residents



2.1 Persons Per Household



33% Female Headed Household w/Children



55% Less than High School Diploma



43% African-American



25% Hispanic



37% Children



52% White



35% Elderly



38% Disabled

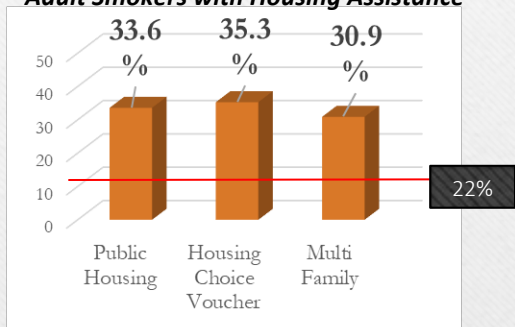


93% Low Income

A Health Picture of HUD-Assisted Adults, 2006-2012

Adults in HUD-assisted housing have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

Adult Smokers with Housing Assistance



Source: Helms VE, 2017

	HUD-Assisted	Low-income renters	All Adults
Fair/Poor Health	35.8%	24%	13.8%
Overweight/Obese	71%	60%	64%
Disability	61%	42.8%	35.4%
Diabetes	17.6%	8.8%	9.5%
COPD	13.6%	8.4%	6.3%
Asthma	16.3%	13.5%	8.7%

Access to Moodle

- LMS for all LC resources
- Visit [Moodle.nchphc.org](https://moodle.nchphc.org) select “Supporting Implementation of Smoking Cessation Programs...)
- Create account
- Detailed instructions on how to access materials included in our “Welcome Packet”.



Timeline and Commitment



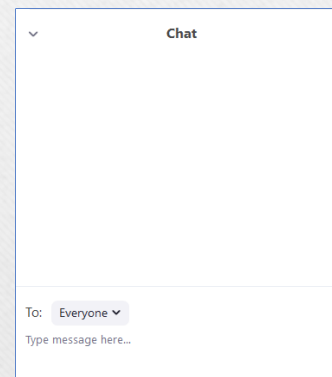
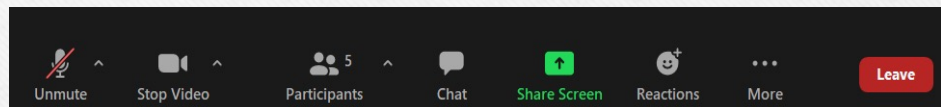
- Attend all four 60-minute live Zoom learning sessions.
- Engage in interactive dialogue during the live learning sessions.
- Complete post-evaluation surveys.

Icebreakers

In the Chat

- Name and role
- Health center name
- City and State

Answer the poll...



Panelist(s)



- **Frank Vitale**

National Director,
Pharmacy Partnership
for Tobacco Cessation

Clinical Assistant
Professor, Purdue
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RELAPSE

PREVENTION AND TREATMENT

Frank Vitale, M.A.

National Director,

Pharmacy Partnership for Tobacco Cessation

Objectives

Upon successful completion of this activity

participants should be able to:

- Review effective strategies to prevent relapse
- Examine behavioral techniques to help individuals regain abstinence after a relapse
- Discuss medication modification recommendations for various relapse scenarios

Slip

Definition

Occasional smoking: one or two cigarettes in a specific situation; isolated, non-daily

Patient Need

Specific coping strategies

What can I do to deal with a similar situation
in the future *without* smoking?

Your Role

- Deal with Negative Emotions
 - Guilt
 - Feeling like a failure
 - “I’m weak!”
- Create targeted coping

The Process

- Reframe quit attempt as a success
- Address negative emotions
- Identify trigger situation
- Create targeted coping strategies
- Review medication use

Alyssa tells you that she had a cigarette yesterday after having a few shots of tequila with some of her customers. What do you tell her?

- “One cigarette’s no big deal. Don’t worry about it!”
- “Every one has a slip here and there before quitting permanently. It’s only natural.”
- “Let’s look at exactly what you were thinking when you decided to have that cigarette so it doesn’t happen again.”

Answer

“Let’s look at exactly what you were thinking when you decided to have that cigarette so it doesn’t happen again.”

Create Target Coping

What else could Alyssa do if she has an urge again in a similar situation?

- Remind herself that just because you think about something doesn't mean you have to do it!
- Say "So what!"
- Leave the bar for a minute and take some deep breaths
- Tell her support person at work that she is having an urge

Answer

- You want *Alyssa* to understand that she has choices about how to respond to any urge.
 - “Only” versus “Alternatives”
- All of these answers are acceptable.
 - Strategize about what will work for her

- Alyssa has been using the 21mg patch as part of her quit plan. How should she modify her use based on the slip?
-

- Stop using the patch. Simultaneous smoking and patch use is dangerous.
- Take the patch off if she decides to smoke again.
- She should do nothing. Smoking one (or a few) cigarette while on the patch will have no negative health effects.

Answer

She should do nothing. Smoking one (or a few) cigarette while on the patch will have no negative health effects.

Relapse

Definition

Return to routine smoking after a quit attempt, smoking one or more cigarettes on a daily basis

What Usually Triggers Relapse

- The Three D's:
 - Death
 - Disease
 - Disaster

“I don’t give a damn!”

Prevention

- Anticipate:

Know, ahead of time, what situations might be problematic based on past experience.

- Plan:

Create a plan to deal with this situation beforehand

- Rehearse:

Practice this plan either in real time or through visualization as much as needed

Prevention (cont.)

- Good Stress Management Skills:
 - Exercise
 - Meditation
 - Deep Breathing
 - Cognitive coping
 - Support system
 - Anger management

Teach Cognitive Coping

- Visualizations
 - Role play strategies
- Think of yourself as a non-smoker
- “Just because you think about something....”

Teach Behavioral Coping

- Leave the scene
- Talk to someone
- Deep Breathing

Patient Needs

Recommit to Quitting

Your Role

- Identify trigger of first cigarette
- Examine the sequence of events leading to relapse
- Suggest specific coping strategies
- Frame quitting as a learning process:
 - “What did you learn about yourself ?”
- Terminate medication use if no new quit day
- Renegotiate a quit date

Alyssa tells you that, after she had that one cigarette, she became so upset that she gave up and started smoking again. How would you respond?

- Praise her for her success
- Sympathize with her about how hard it is to quit
- Tell her to wait until she is really committed to try again
- Ask her to explain exactly what happened
- Strategize with her about what else she could have done
- Determine if she is ready to quit again

Answer

- Praise her for her success
- Sympathize with her about how hard it is to quit
- Tell her to wait until she is really committed to try again
- Ask her to explain exactly what happened
- Strategize with her about what else she could have done
- Determine if she is ready to quit again

As we know, Alyssa has been using the 21mg patch as part of her quit plan. How should she modify her use based on her relapse?

- Stop using the patch. Simultaneous smoking and patch use is dangerous.
- Take the patch off if she decides to smoke again.
- She should do nothing. Smoking a few cigarette while on the patch will have no negative health effects.
- You need more information

Answer

- You need more information:
 - Is she smoking on a daily basis?
 - How much is she smoking each day?
 - Does she intend to quit again? When?
 - Was she receiving withdrawal relief with the patch?
 - Should she try a different medication?

Next Steps

- If she is ready to quit again:
 - Set new quit day
 - Reexamine medication
 - Is change of dose or medication needed?
 - Review coping
- If she is not ready:
 - Ask, “How can I help you get ready?”
 - Follow up in two weeks

In Conclusion

- Whether a slip or relapse:
 - Emphasize that quitting is a learning process
 - Refocus the patient on success
 - Strategize about solutions
 - “There is always something else you can do or think in every situations other than smoke.”
 - Be supportive
 - Be patient!

For More Information:

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Upcoming session:

**LC Session 3: Quitting for Individuals with Behavioral
Health/Substance Abuse Issues**

Date: September 22nd, 2020

Time: 1:00 – 2:00 pm EDT

Q&A

If you would like to ask the presenter a question, please submit it through the questions box on your control panel or use the “raise hand” icon and your line will be unmuted.

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