



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP130032

Project Title:
Taking Texas Tobacco Free: Expanding the Integral Care Campus and
Community Model into a Statewide Cancer Prevention Program

Award Mechanism:
Evidence-Based Prevention Programs and Services

Principal Investigator:
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Entity:
Rice University

Lay Summary:

Tobacco use is causally associated with 17 types of cancer, and is linked to 90% of lung cancer deaths. Increasing tobacco cessation is critically important to the advancement of cancer prevention in Texas, especially among subgroups of the population with higher than average tobacco use rates, including persons with mental illness and their care providers at community mental health clinics. Evidenced-based prevention services known to reduce tobacco use within mental health settings include tobacco-free campus policies; regular screening for tobacco use among mentally ill consumers; and the provision of brief cessation counseling and Nicotine Replacement Therapy (NRT) to tobacco-using consumers and clinic employees. These elements were included in a comprehensive, multicomponent Tobacco-free Workplace Program successfully implemented at Austin Travis County Integral Care (ATCIC), 1 of the 39 Local Mental Health Treatment Authorities (LMHAs) that provide mental health services to all communities in Texas. The ATCIC Tobacco-free Workplace Program also included a community outreach and training component, an evaluation component, and a post-funding sustainability plan. The ATCIC initiative resulted in a fully-implemented tobacco-free campus policy, significant reductions in tobacco use prevalence and rates among employees, significant increases in screening and treatment service provision to consumers, and multiple outreach sessions with local community partners that were instrumental in leading them to also go tobacco-free.

Impending state policy initiatives have created a unique and historic opportunity to integrate such evidence-based tobacco interventions into other LMHA settings. Specifically, the Texas Department of State Health Services (DSHS) plans to mandate that all LMHA clinics within Texas become tobacco-free campuses by December 2015 to remain eligible for state funding. However, with little additional guidance or resources offered by the DSHS, many clinics will encounter significant barriers to the implementation, enforcement, support, and maintenance of effective tobacco-free-campus policies. This could impact their ability to adhere to this mandate, and ultimately disrupt vital services to mentally ill individuals in our state and/or lead to workforce reductions. Moreover, the mandate will require only a tobacco-free campus policy and not necessarily evidenced-based tobacco use screening and treatment components for employees and consumers. As such, in the absence of information, assistance, and support, many LMHAs may be unable to capitalize on this DSHS mandate in order to

implement a more comprehensive evidence-based Tobacco-Free Workplace Program that includes education, screening, treatment, and outreach components in addition to the tobacco-free campus policy. Therefore, a tremendous opportunity to affect tobacco-related cancer morbidity and mortality among Texans will be lost. The adaptation and dissemination of the ATCIC program to other LMHAs, however, would significantly increase the reach and effectiveness of the DSHS initiative, and would have a tremendously greater impact on cancer prevention in Texas.

This proposal represents a new, collaborative partnership between MD Anderson Cancer Center and the ATCIC to adapt and disseminate this comprehensive, multicomponent Tobacco-Free Workplace Program to selected LMHAs across the state. Our long-term goal is to prevent cancer by helping tobacco-using Texans with mental illness, as well as those associated with their care, become tobacco free. This proposal will achieve that goal by disseminating ATCIC's successful program to other LMHAs via training/education, consultation, policy assistance, treatment resources, and/or practical guidance, as needed, to both implement and sustain the changes that will result in the prevention of cancers among consumers, employees, and the larger communities in which they live. We will target 19 LMHAs, and estimate that we will reach 261,823 Texans and directly serve 74,583 tobacco-using Texans across the state (the latter at a cost of \$20.10 per person) with education, screening, and intervention/s using a community of solution approach that leverages LMHA and local resources to achieve program objectives. The MD Anderson and ATCIC teams bring state-of-the-science expertise on tobacco use and cessation, practical experience in evidence-based tobacco-free campus policy implementation, vital community outreach and training knowledge, and program evaluation expertise together on this proposal to provide clinically- and administratively-focused tools to LMHA leadership to facilitate the tobacco-free transition at all levels (clinic, employee, consumer, and community), and assure its sustainability for the foreseeable future. Therefore, this proposal is highly significant for its potential reach across the state of Texas and its ability to meaningfully prevent cancer via tobacco cessation.