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Quitlines in Prisons: A Tailored Approach for the Incarcerated

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U.S. Prison Population



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- On any given day, approximately 2 million People are behind bars
- 5% of the total population will spend time in prison in their lifetimes
- The vast majority of prisoners are men

U.S. Prison Population



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- The majority of prisoners (about 65%) are Black or Latino
- Most (about 70%) of prisoners come from low income, inner city neighborhoods, and have less than a high school education

Tobacco Use Prevalence



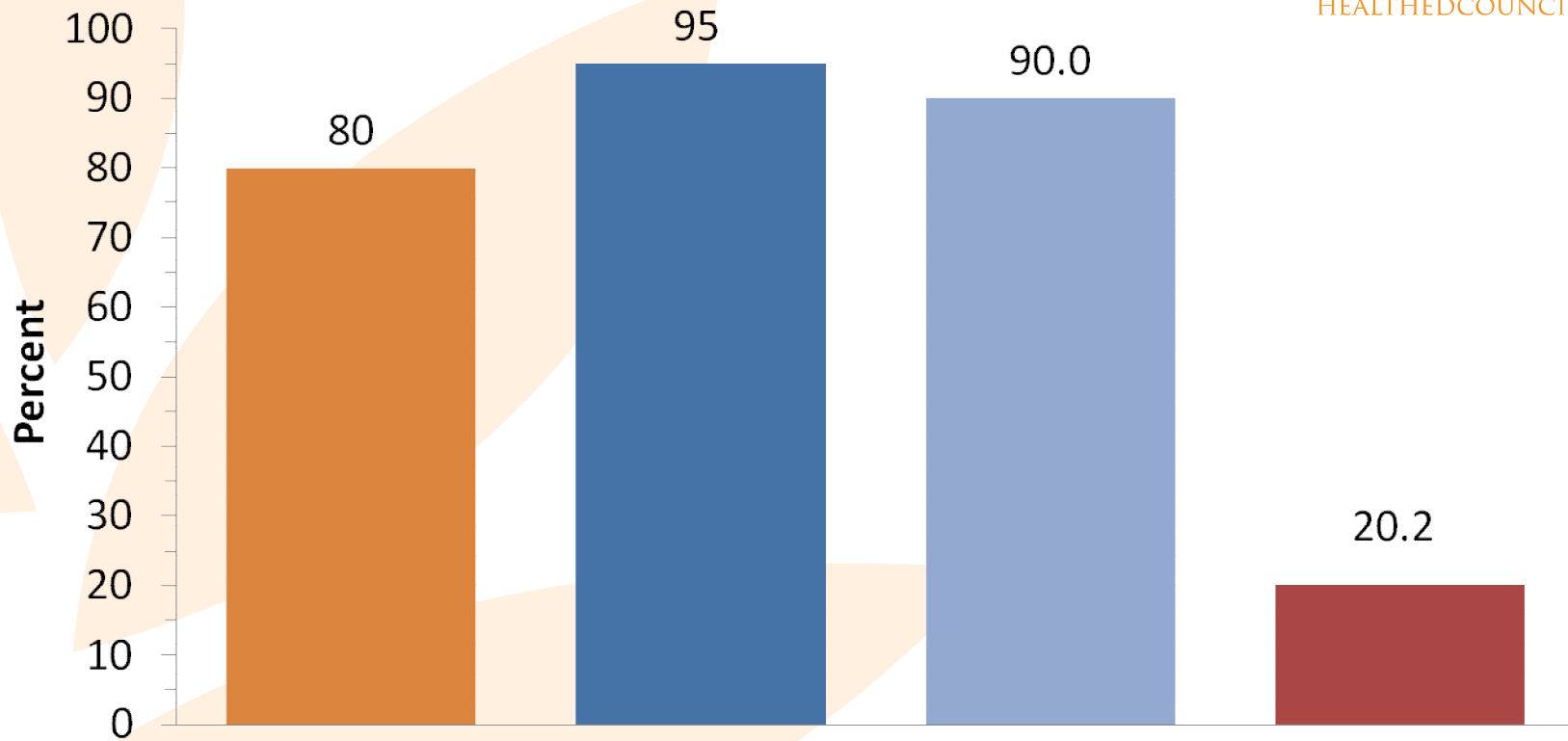
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- Most inmates (75% of women and 90% of men) are tobacco users, were tobacco users prior to their incarceration, continue to use in prison and smoke one or more packs of cigarettes per day
- Attitudes of correctional administrators has been historically accepting of tobacco use

Tobacco Use prevalence



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Tobacco Use Policies



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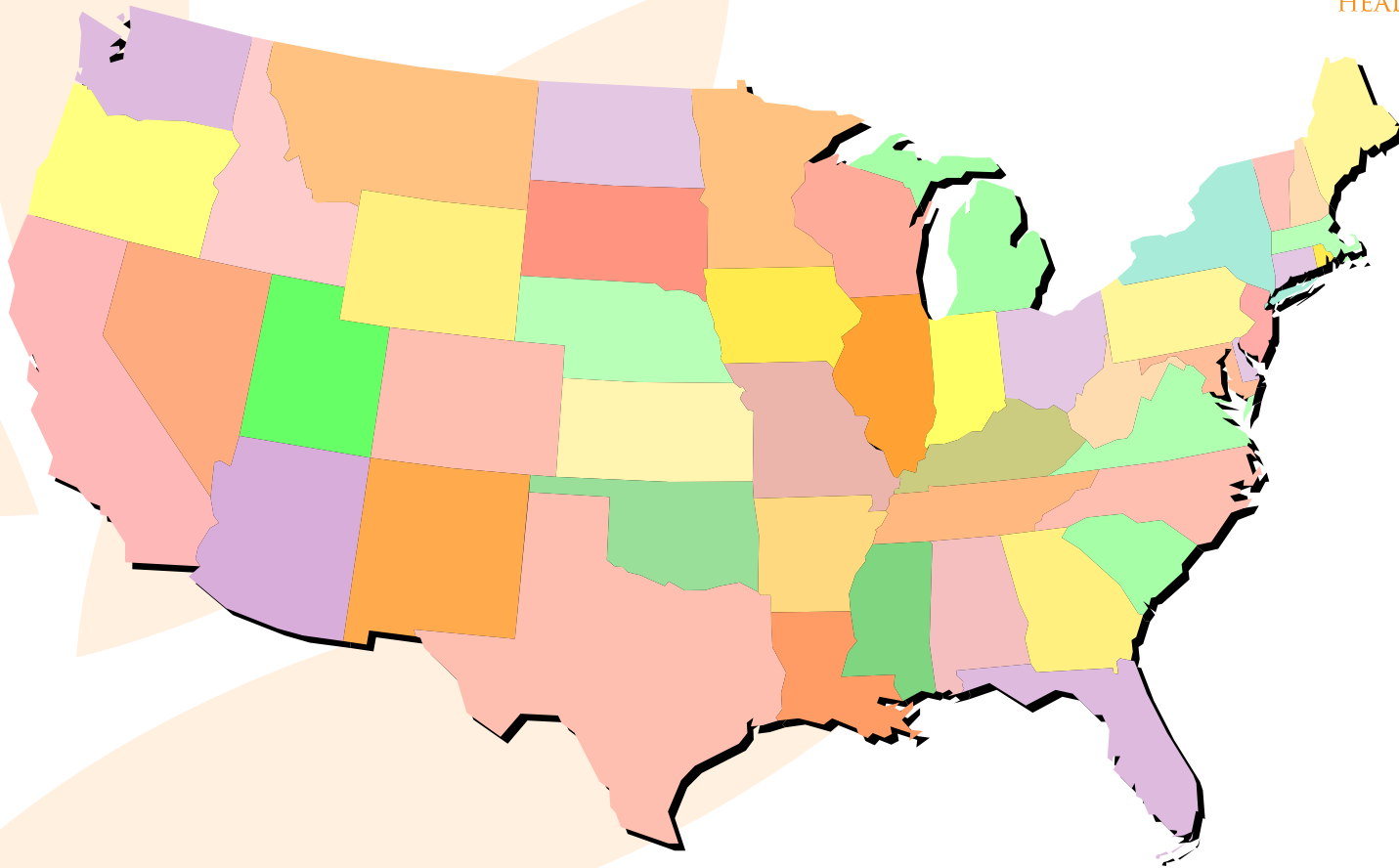
- In 2003, few state prison systems banned tobacco use
- In 2005, 8 state systems implemented tobacco non-use policies
- 2010, _____state systems have implemented a tobacco non-use policy

Is your state prison system tobacco free?



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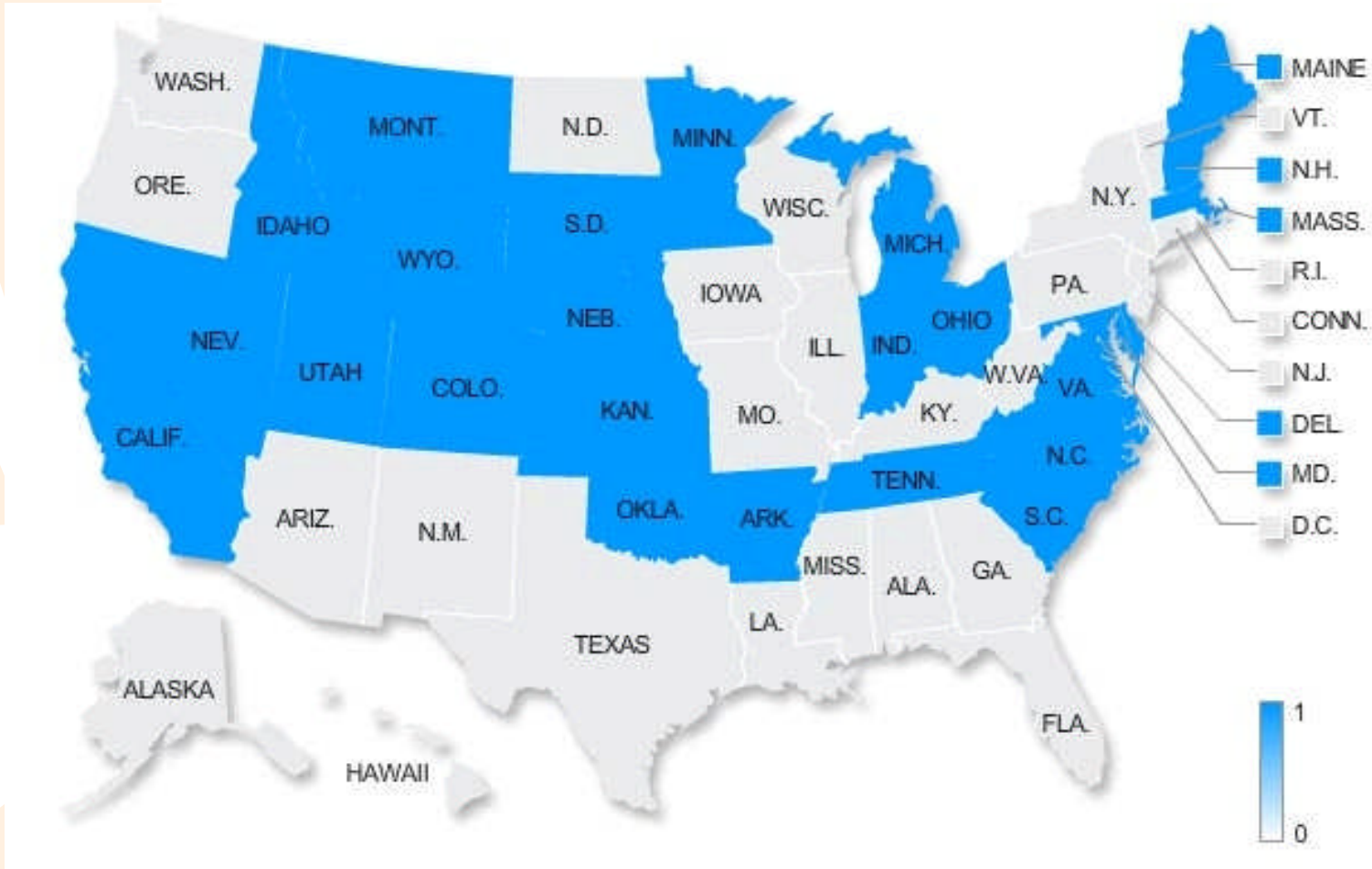


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States with tobacco-free prison grounds



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Prison Policies



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- Other states have bans – but usually with exceptions
- Staff smoking areas
- Tobacco use banned only for inmates
- Tobacco use banned only indoors

Cessation for Inmates



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- Boredom
- Stress
- Lack of Access to Nicotine Replacement Therapy
- Tobacco used as currency
- They don't consider themselves as having quit
- Cessation important part of discharge planning

Quitline Services in Prisons



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2009 Conference Call Discussion:

Representatives

Virginia, New York, Hawaii, Louisiana,
Wisconsin, West Virginia



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- So...why make quitline services available to those in prisons? Why might this be a good idea?
- So...why NOT quitlines for this population? What might make this difficult?

Potential Barriers



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- Institutional barriers
 - If smoke-free already, no need for cessation
- Operational/Technical barriers
 - Inmates not able to make 800# calls
 - Not able to receive scheduled calls
- Financial barriers
 - Who pays??? Corrections?? Tobacco??

A lot of great cessation programs happening...



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but very few programs connected with state quitlines.

So what about New York???

- Opened lines to all NYS correctional facilities in October 2009
- Coaching and 2-week starter kit of NRT
 - Patch sent to inmate c/o DOC health services director
 - Initiates health-services based cessation (bi-weekly health care provider appointments and up to an additional 4 weeks of patches)
- To-date: 2091 inmates served

Lessons learned already!



- Tobacco-free grounds policy should be in place (preferable)
- Need to establish separate phone lines for collect calls (no 800 numbers allowed)
- NRT can be mailed to the medical facility of the prison
- Support of medical/health services staff very important
- Key individuals should be involved from the beginning: pharmacy, social work, security
- Targeted promotion and appropriate mailed materials imperative

Call Outcomes:



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- Conduct an assessment of existing quitline protocols for use with inmates
- Compile mentor resources
- Conduct a second conference call to move forward with basic recommendations for establishing quitline services

Thanks so much!



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Please contact us with questions or if you are interested in joining the workgroup.

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