

Tobacco Use Reduction in People (TURP) Living With HIV/AIDS

Staff Survey, Client Survey, Client Focus Group Results

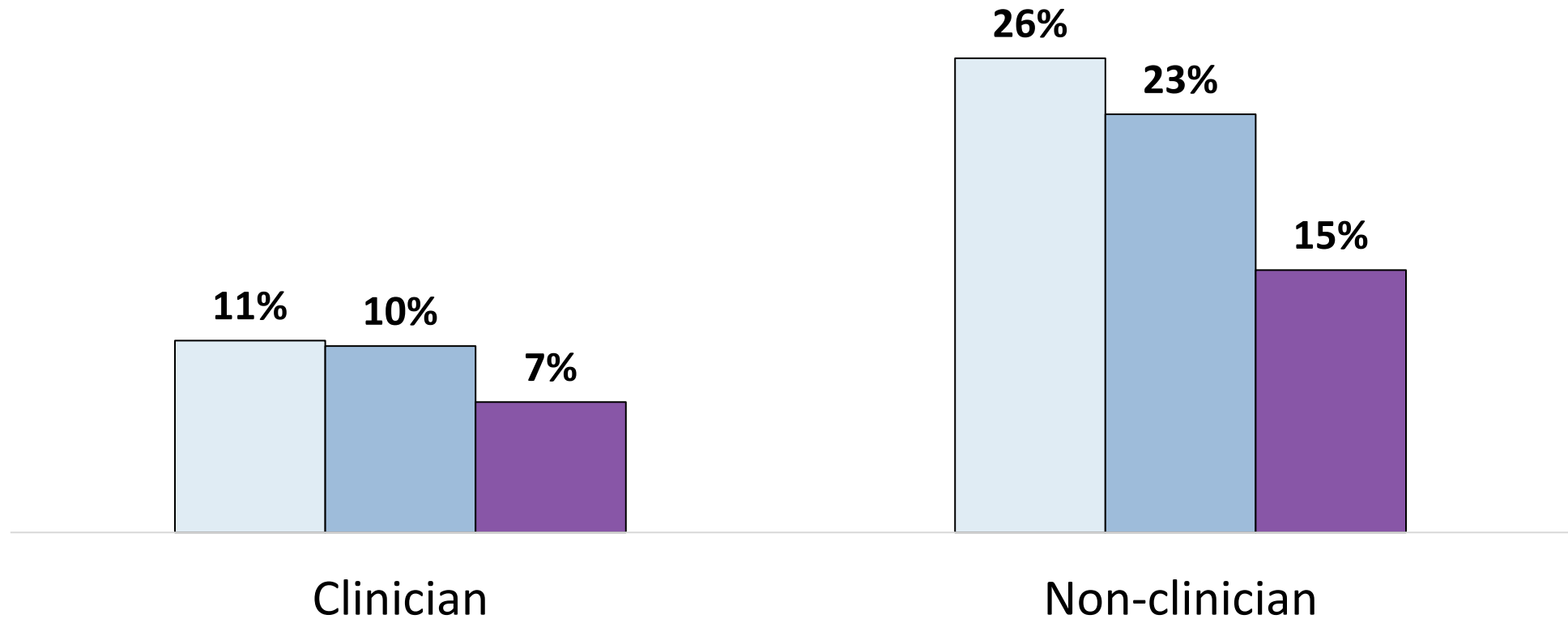
Presented by:
TURP Team



Staff Survey Results: 2015, 2017, & 2019

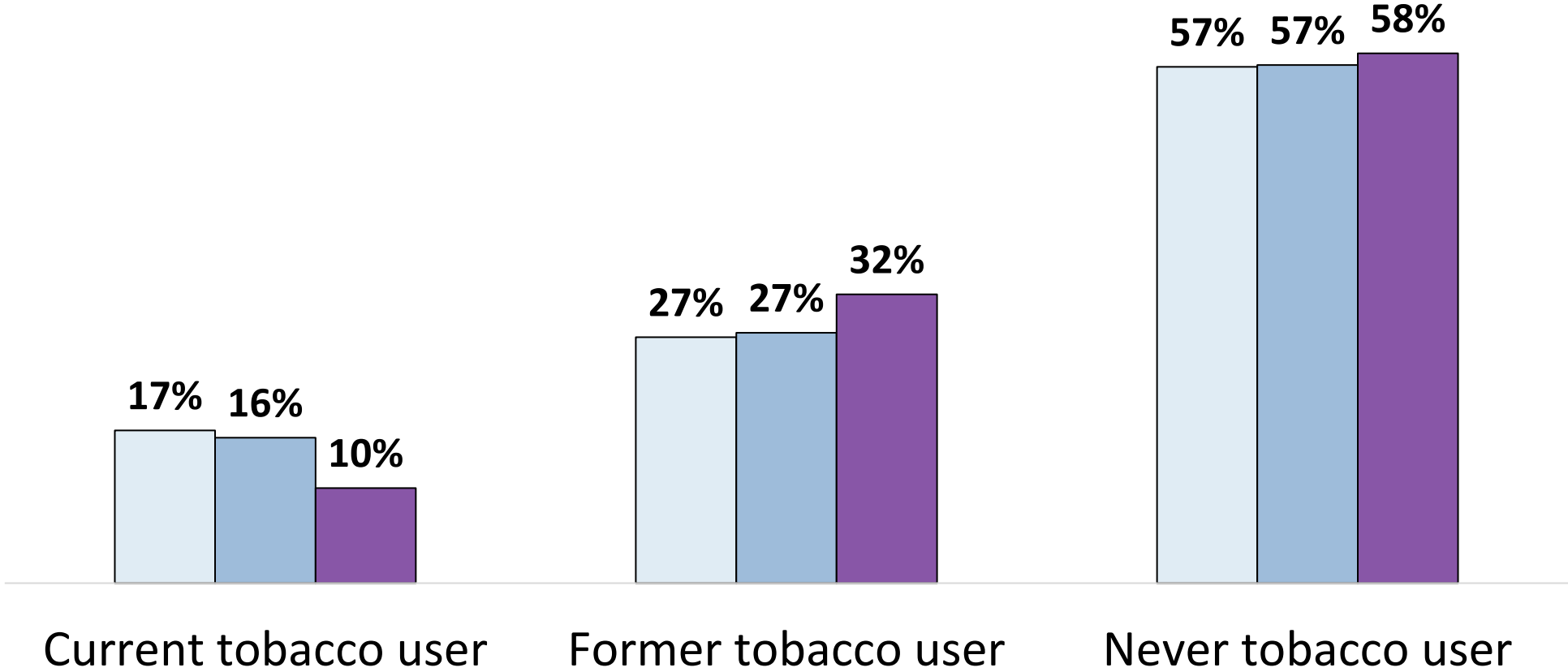
Current Smoking Prevalence Among Agency Staff by Profession

2015 2017 2019

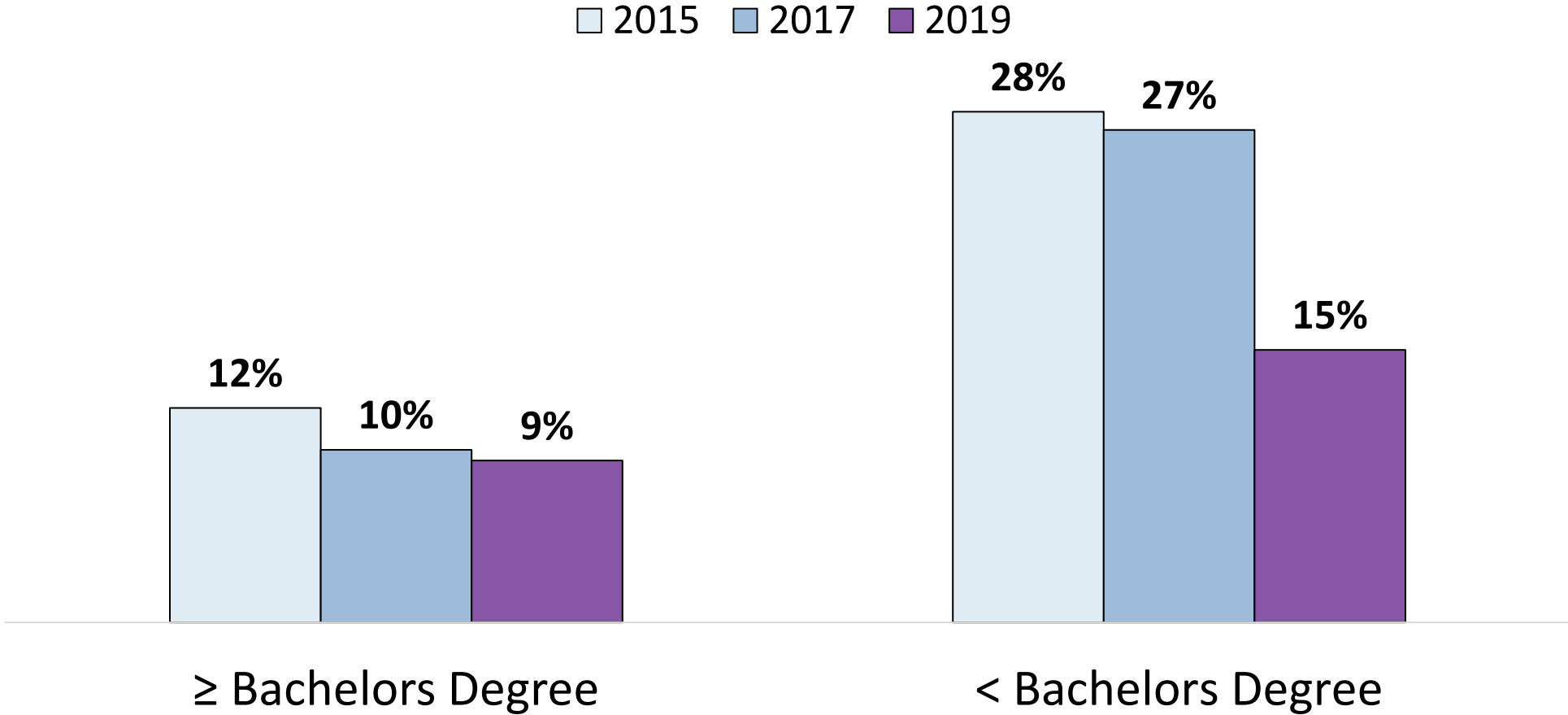


Agency Staff Smoking Status

2015 2017 2019

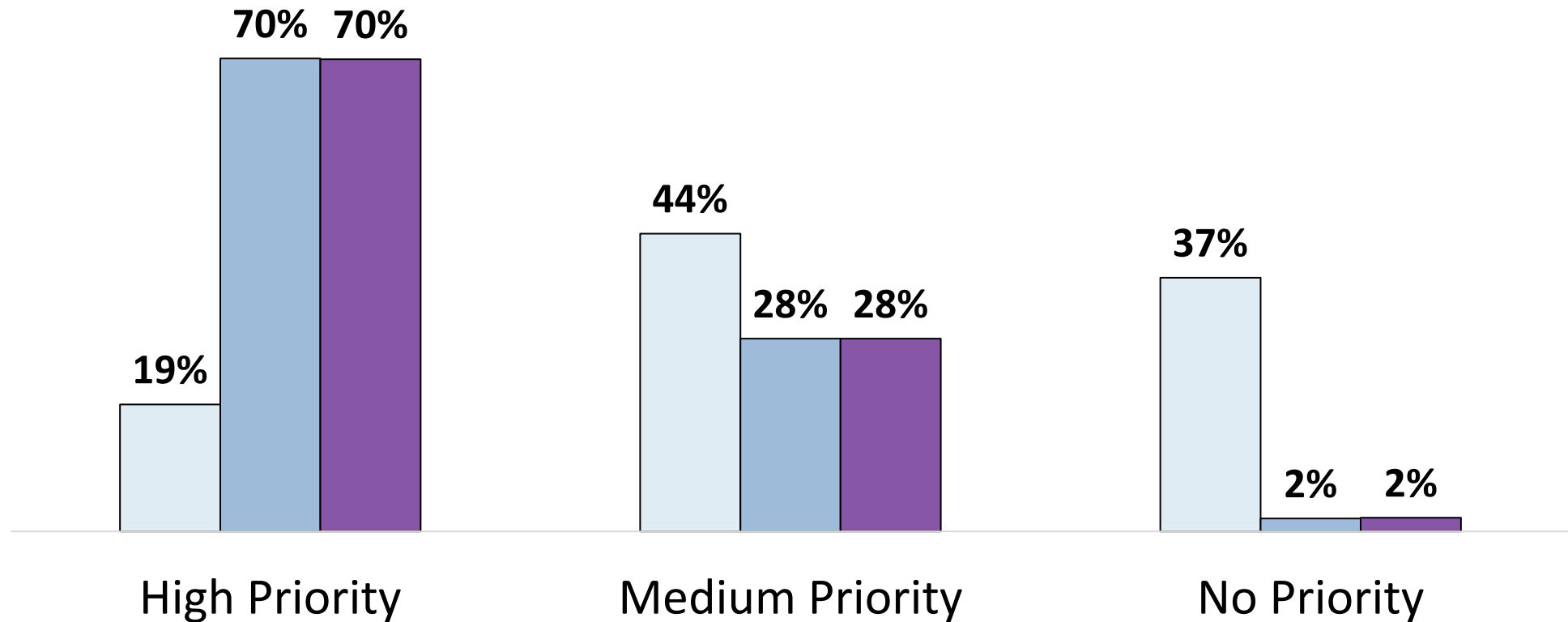


Current Smoking Prevalence Among Agency Staff by Educational Background



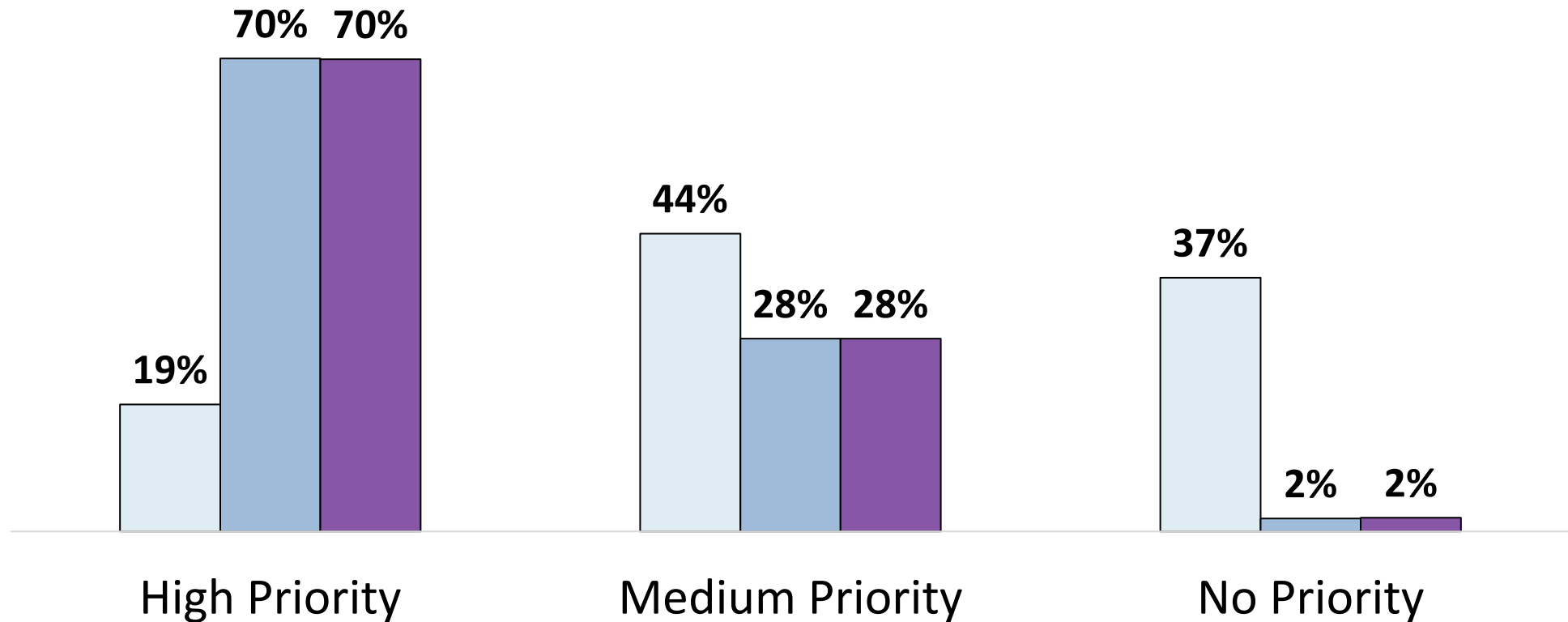
Level of Priority Among Agency Staff for Tobacco Use Reduction Services

2015 2017 2019



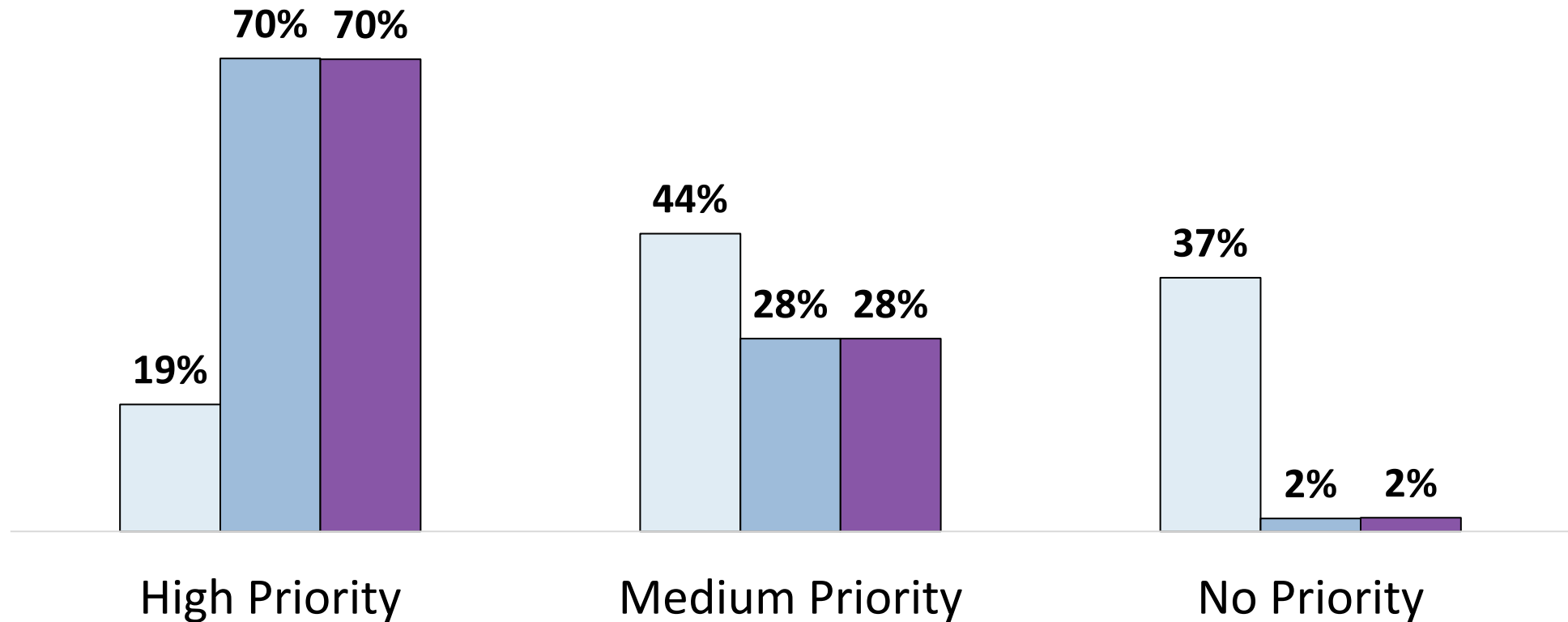
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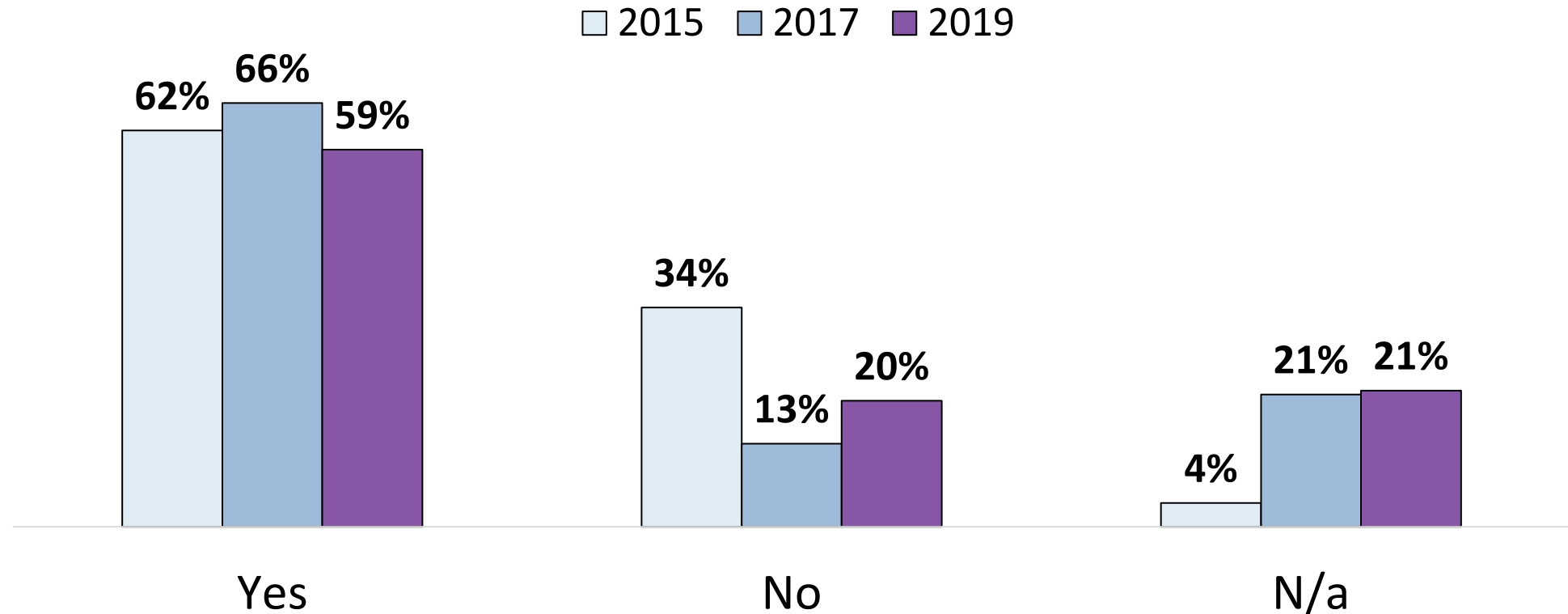


Level of Priority Among Agency Staff for Tobacco Use Reduction Services

2015 2017 2019

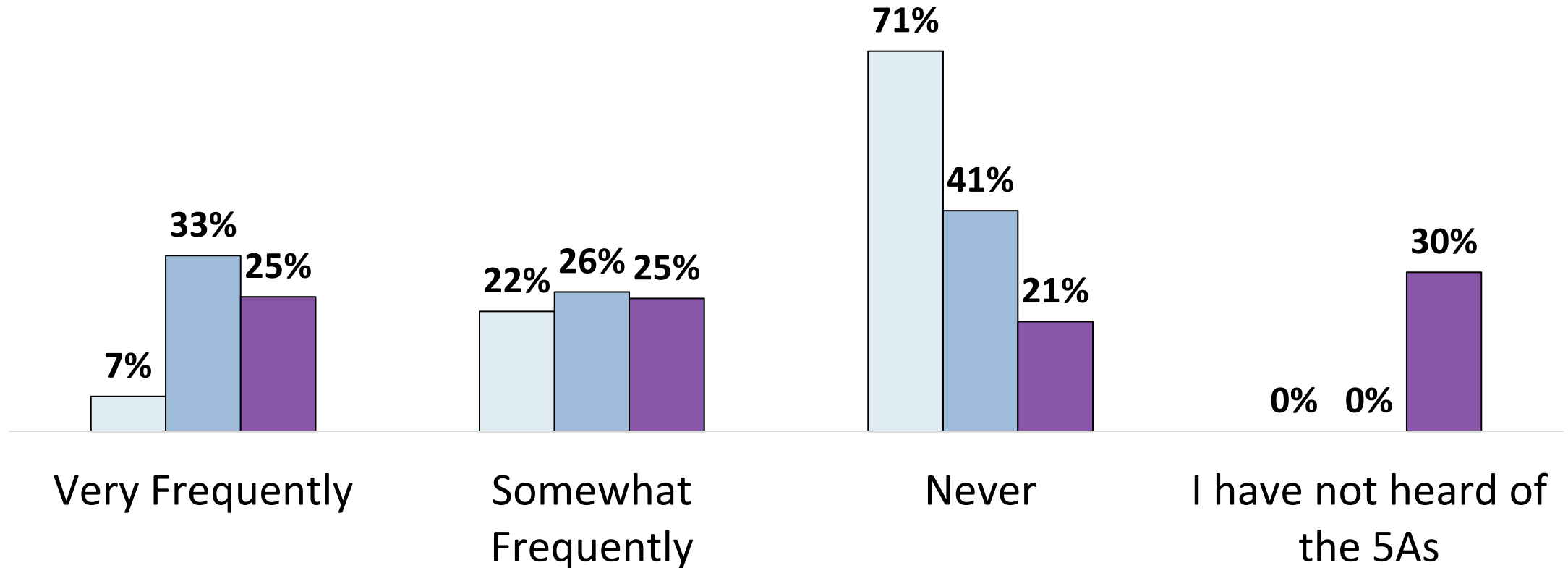


Percentage of Agency Staff Who Feel They Have the Skills to Address Tobacco Use Treatment with Their Clients



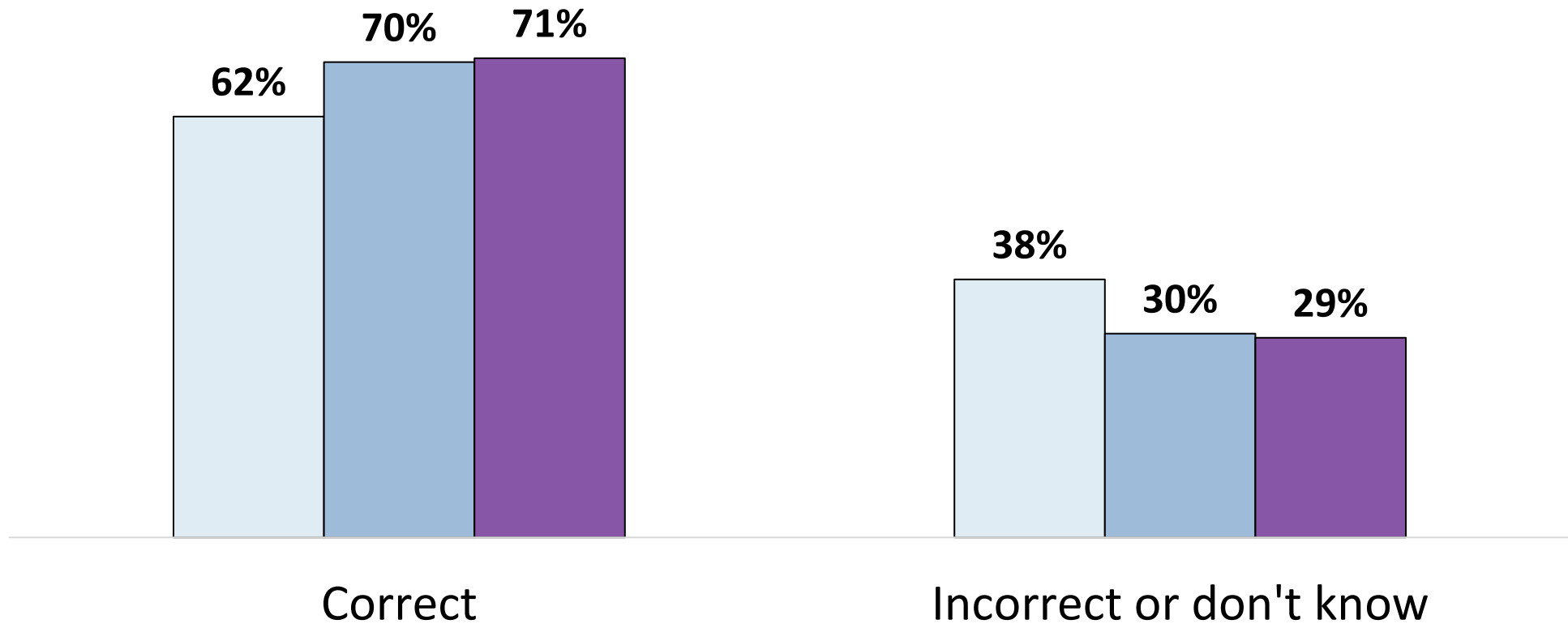
How Frequently Agency Staff Use the 5A's with Their Clients

2015 2017 2019



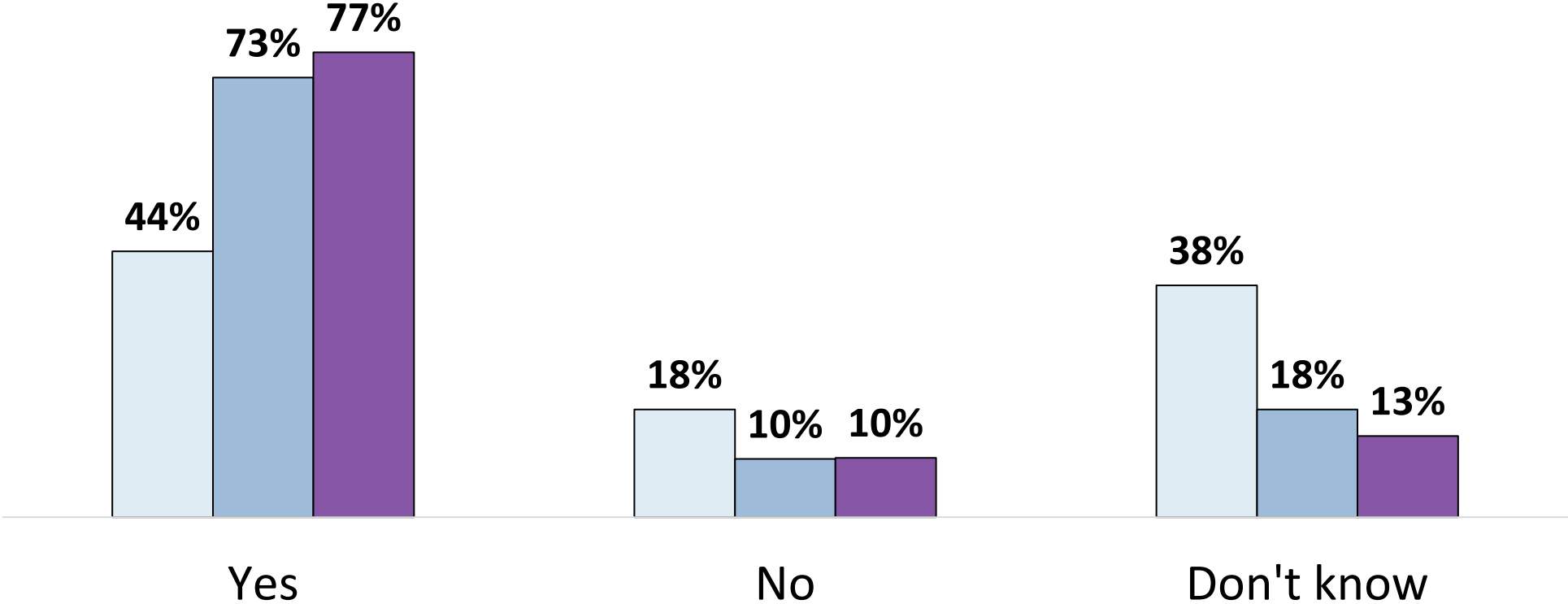
Assessment of Agency Staff Knowledge (percentage of correct answers)

2015 2017 2019



Percentage of Agency Staff That Feel Clients are Receiving Good Advice

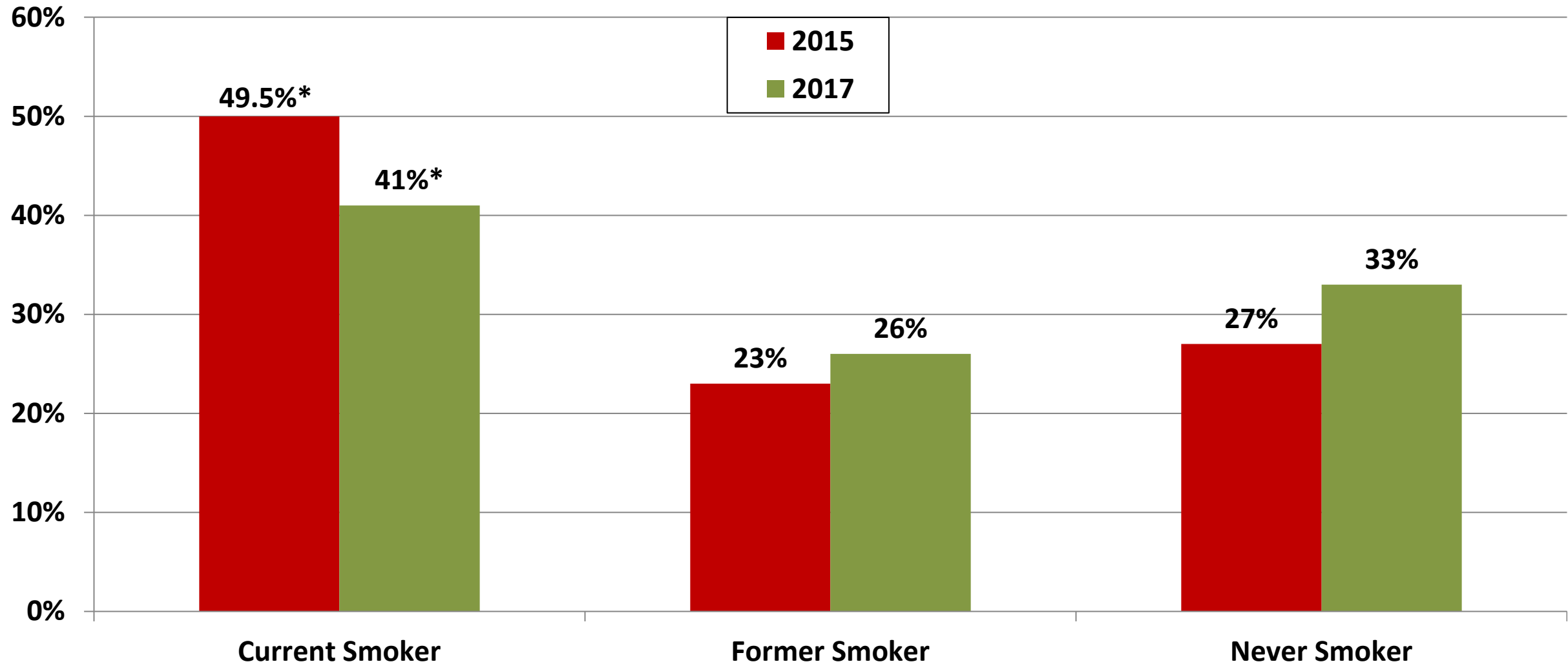
2015 2017 2019



Client Survey Results: 2015 & 2017

HIV Client Assessment Survey

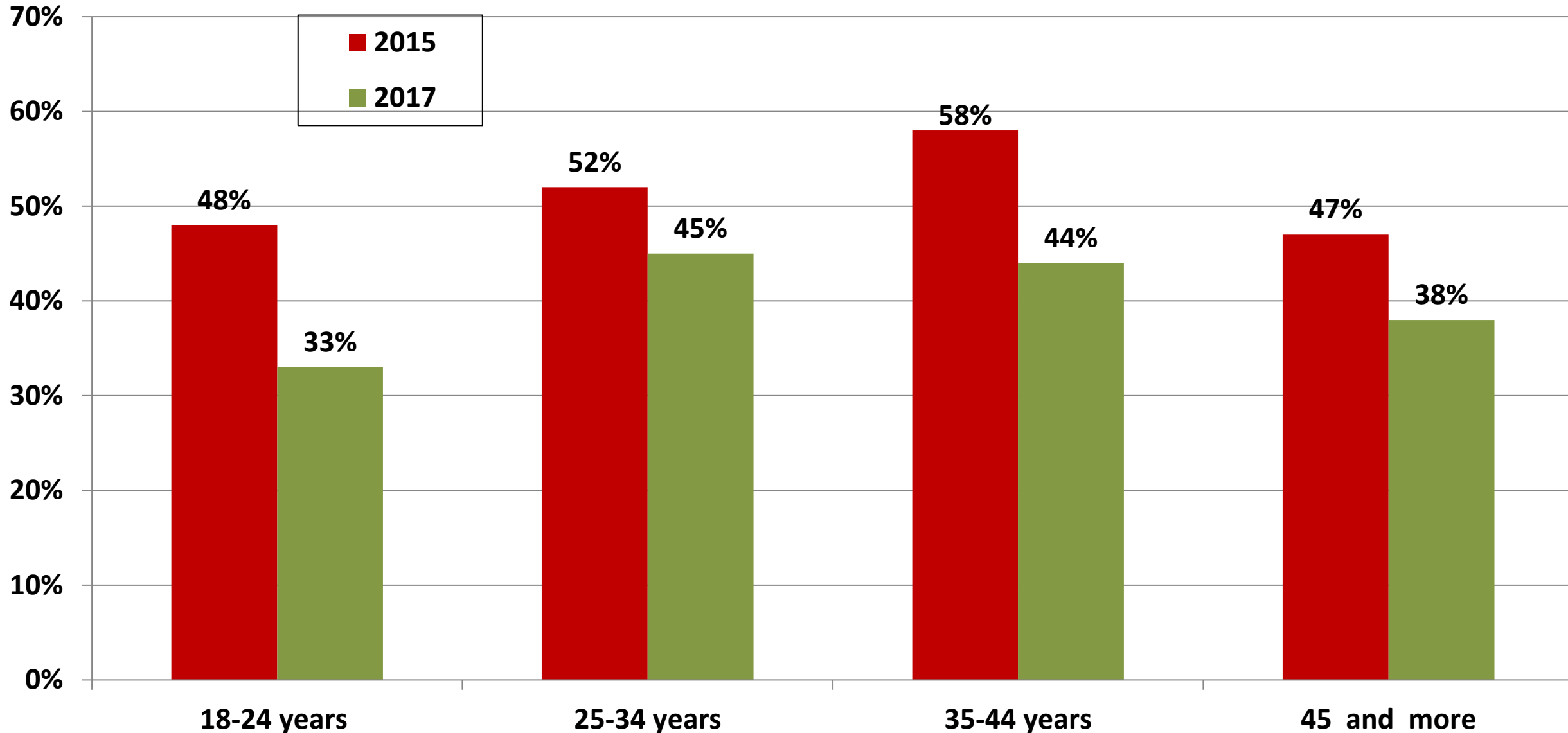
Smoking Status Percentages Among the PLWH in
2017 compared with 2015



* Difference is statistically significant at $P < 0.05$

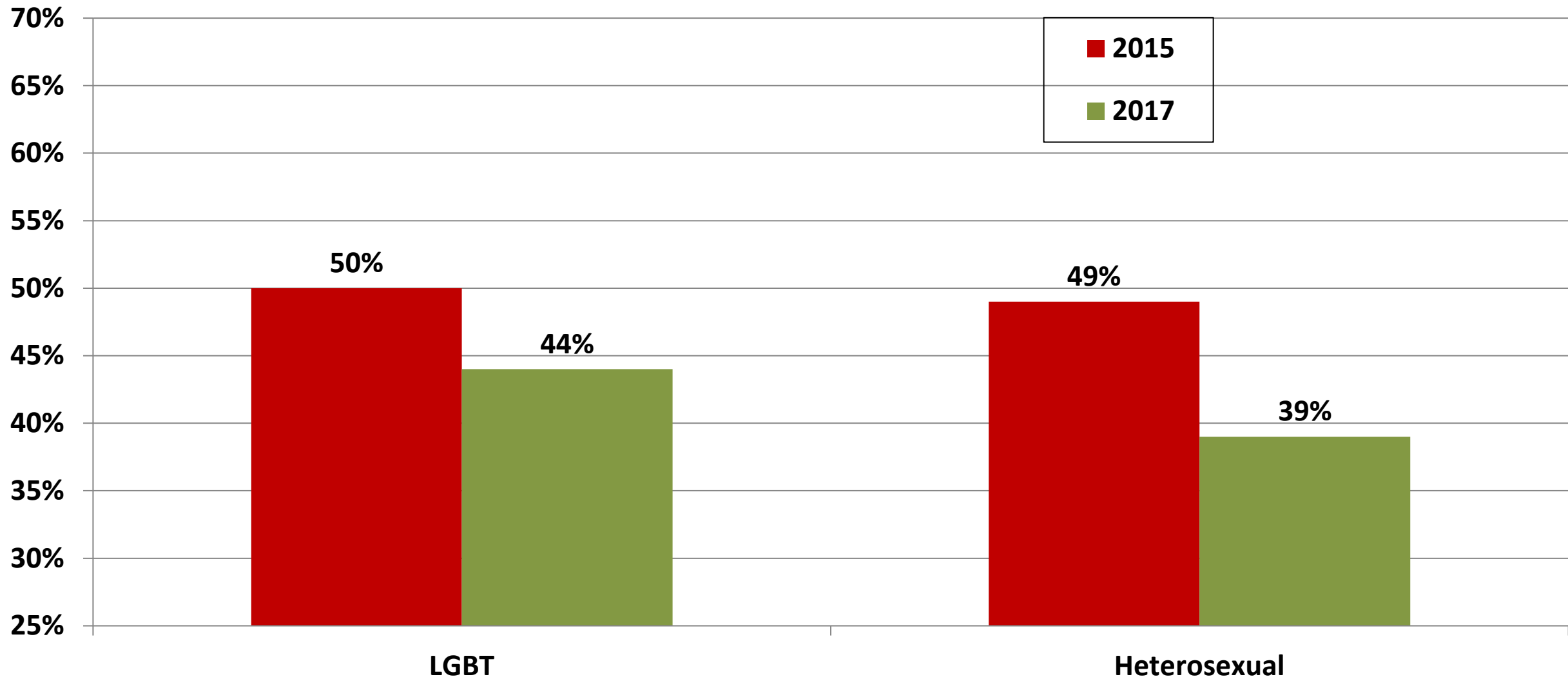
HIV Client Assessment Survey

Percentages of Current Smoking within each Age Group Among PLWH in 2017 Compared to 2015



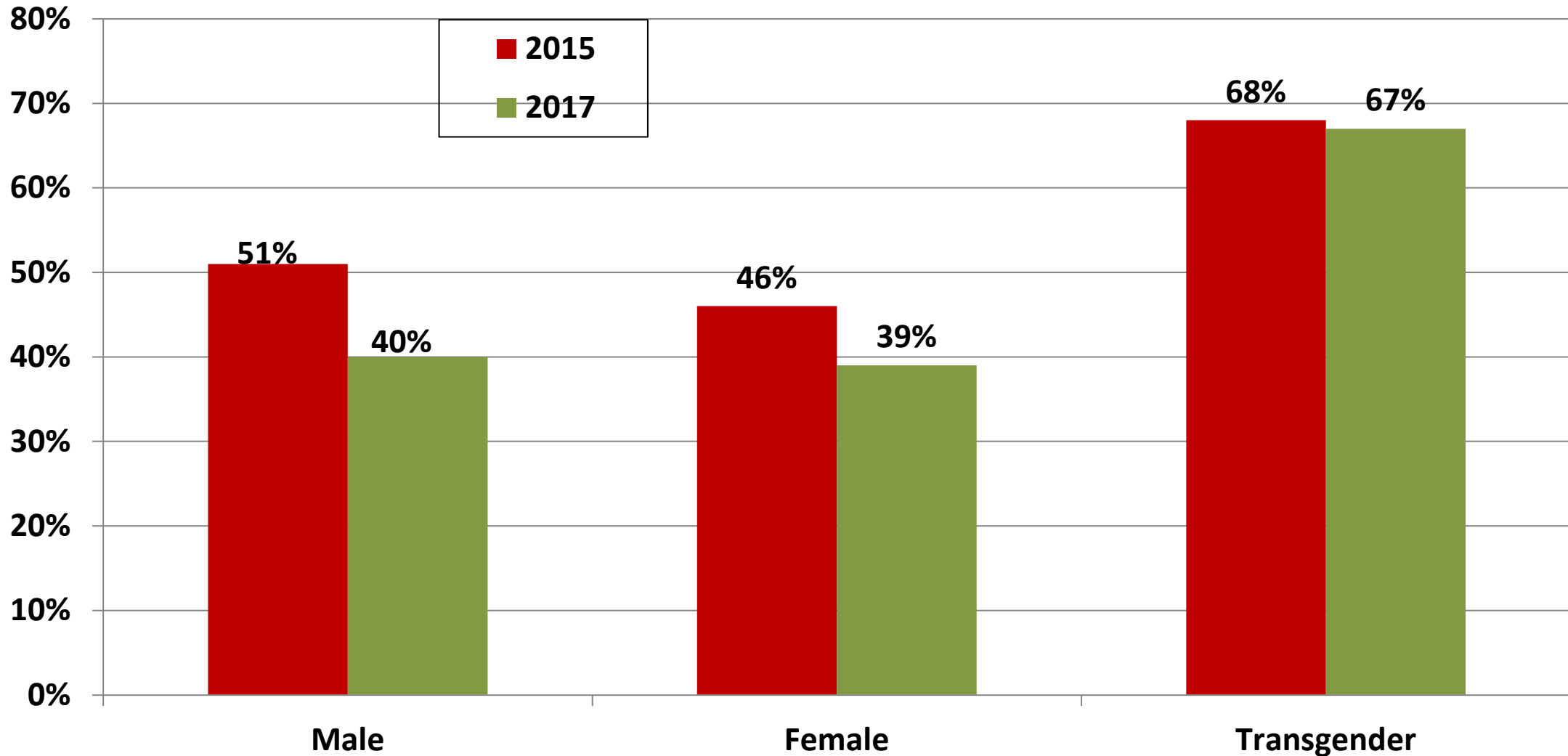
HIV Client Assessment Survey

Percentages of Current Smoking within each Sexual Orientation Group Among PLWH
in 2017 Compared to 2015



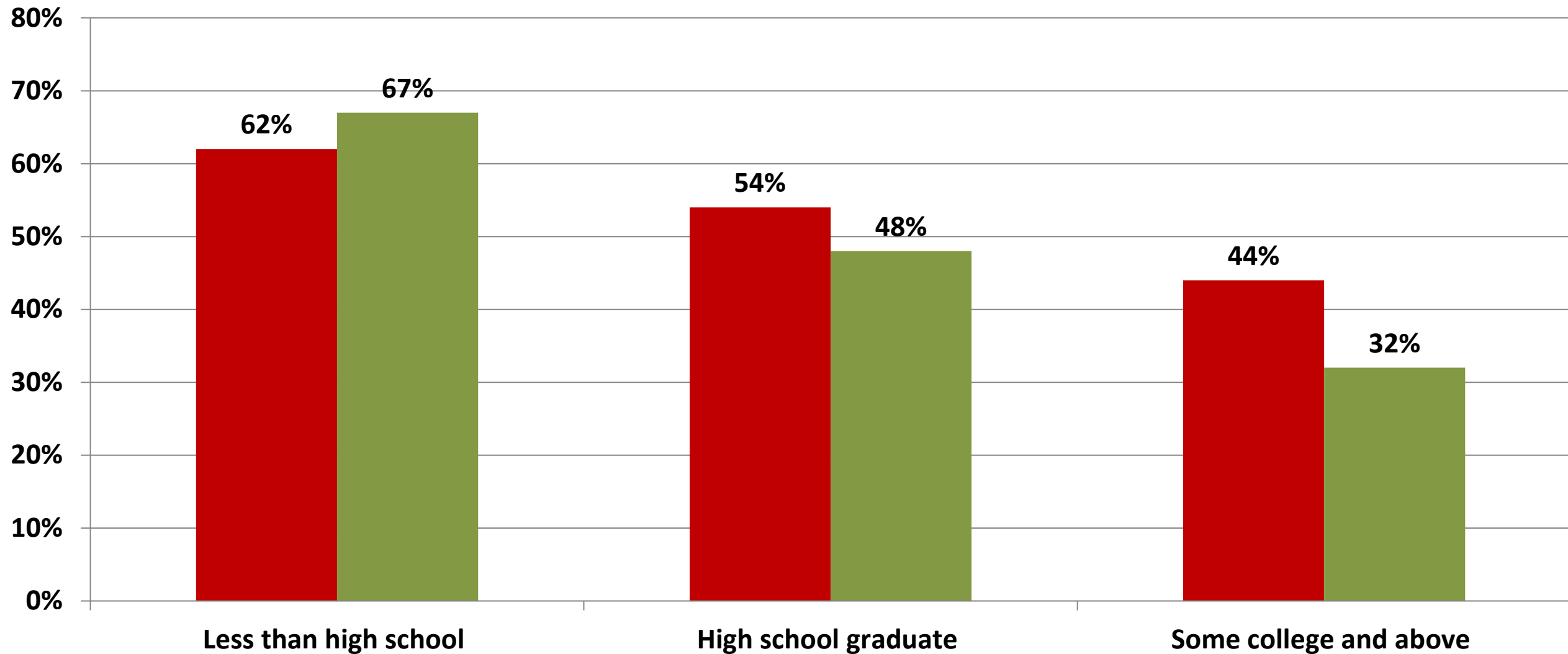
HIV Client Assessment Survey

Percentages of Current Smoking within each Gender Identity Group Among PLWH in 2017 Compared to 2015



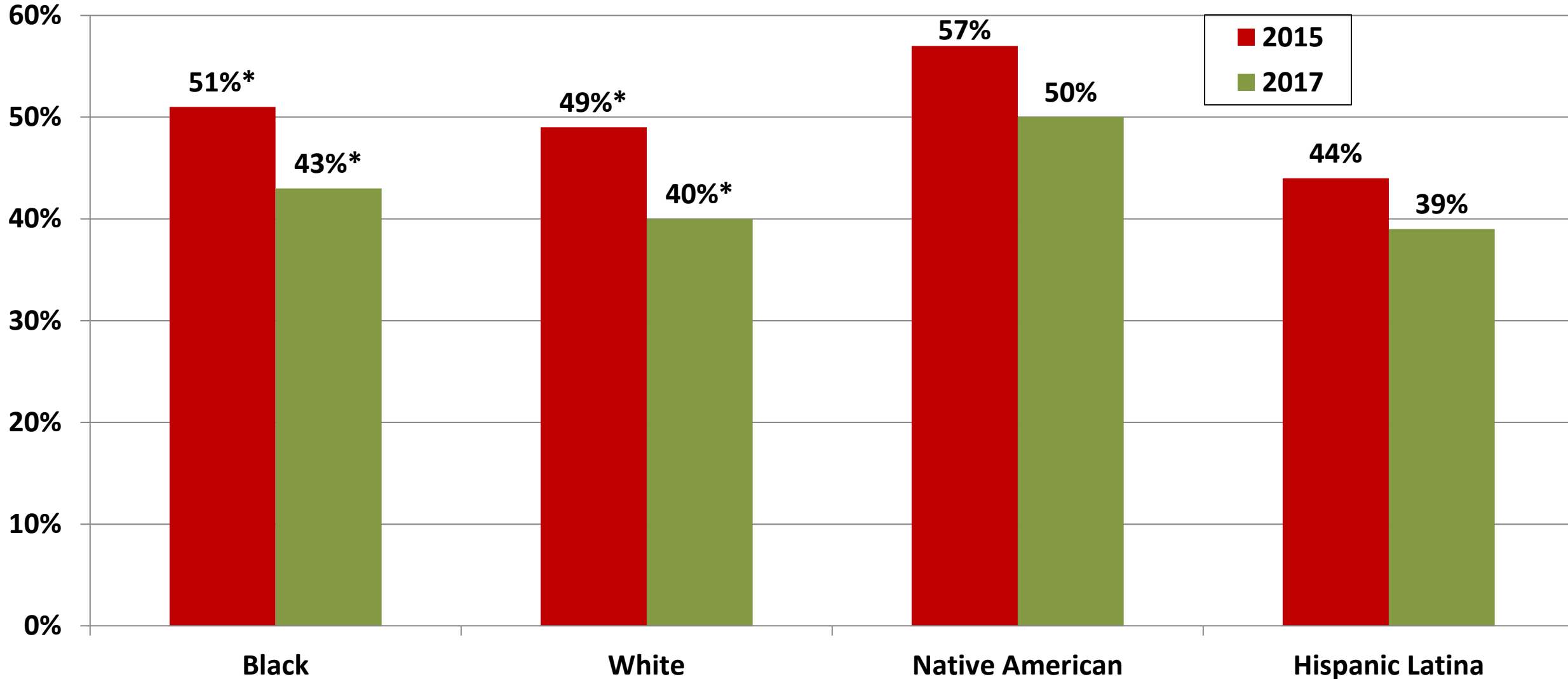
HIV Client Assessment Survey

Percentages of Current Smoking within each Educational Level Group Among PLWH
in 2017 Compared to 2015



HIV Client Assessment Survey

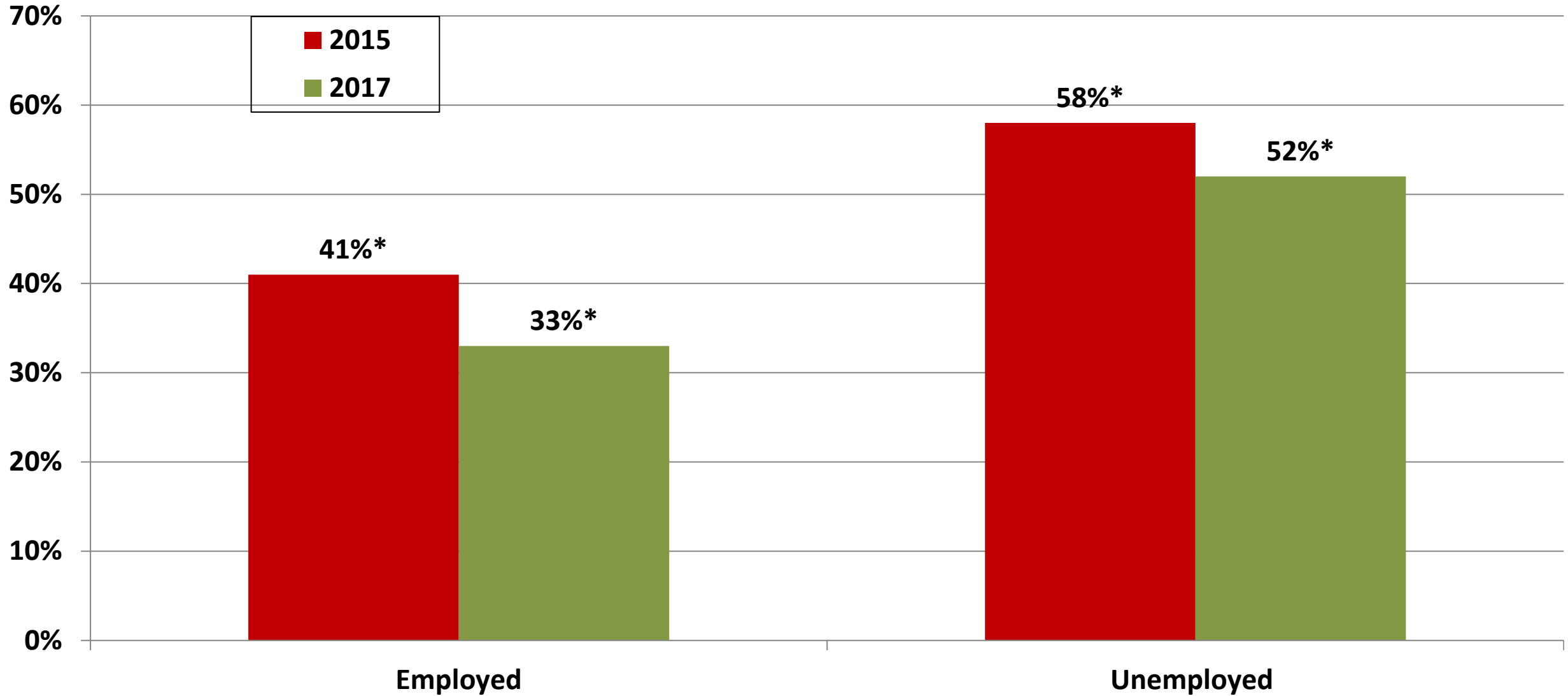
Percentages of Current Smoking within each Racial Group Among PLWH in 2017 Compared to 2015



* Difference is statistically significant at $P < 0.05$

HIV Client Assessment Survey

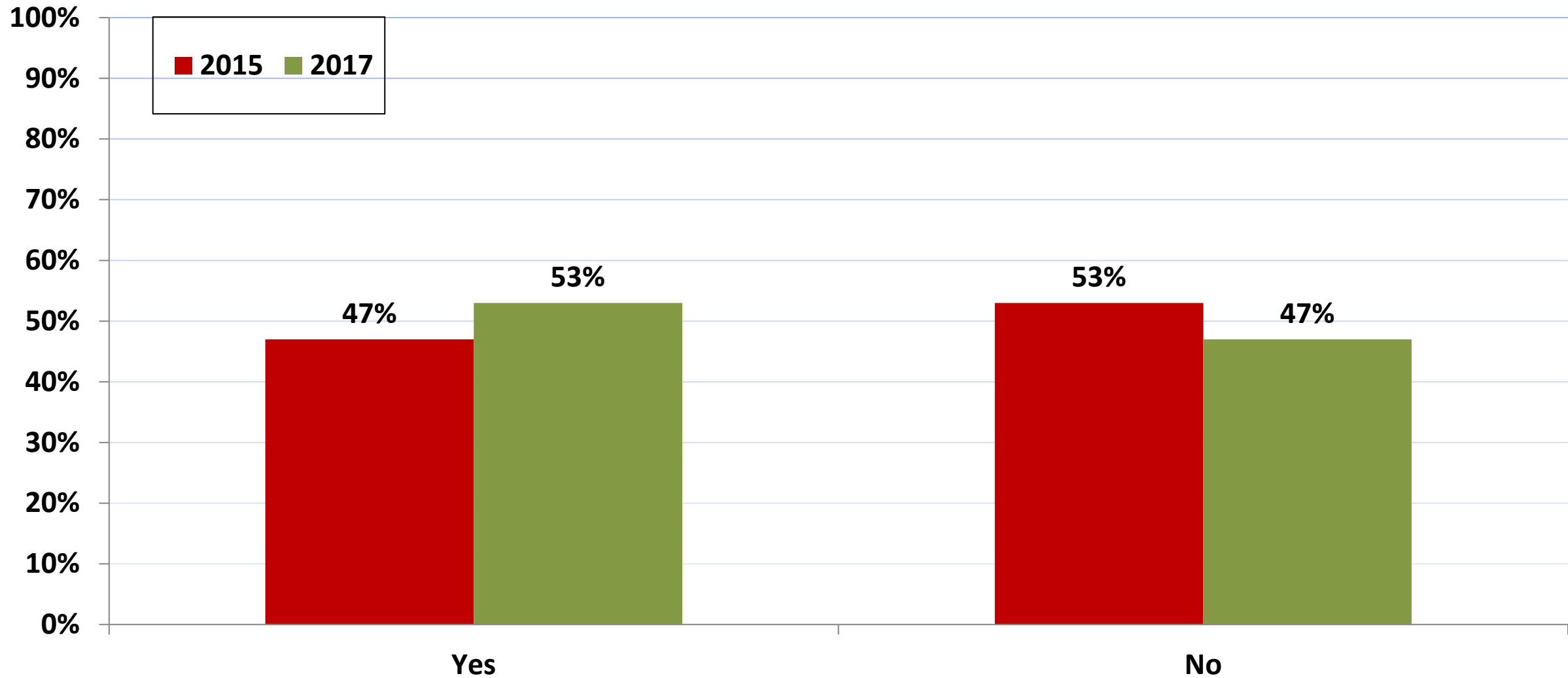
Percentages of Current Smoking within each Employment Category Among PLWH
in 2017 Compared to 2015



* Differences are statistically significant at $P < 0.05$

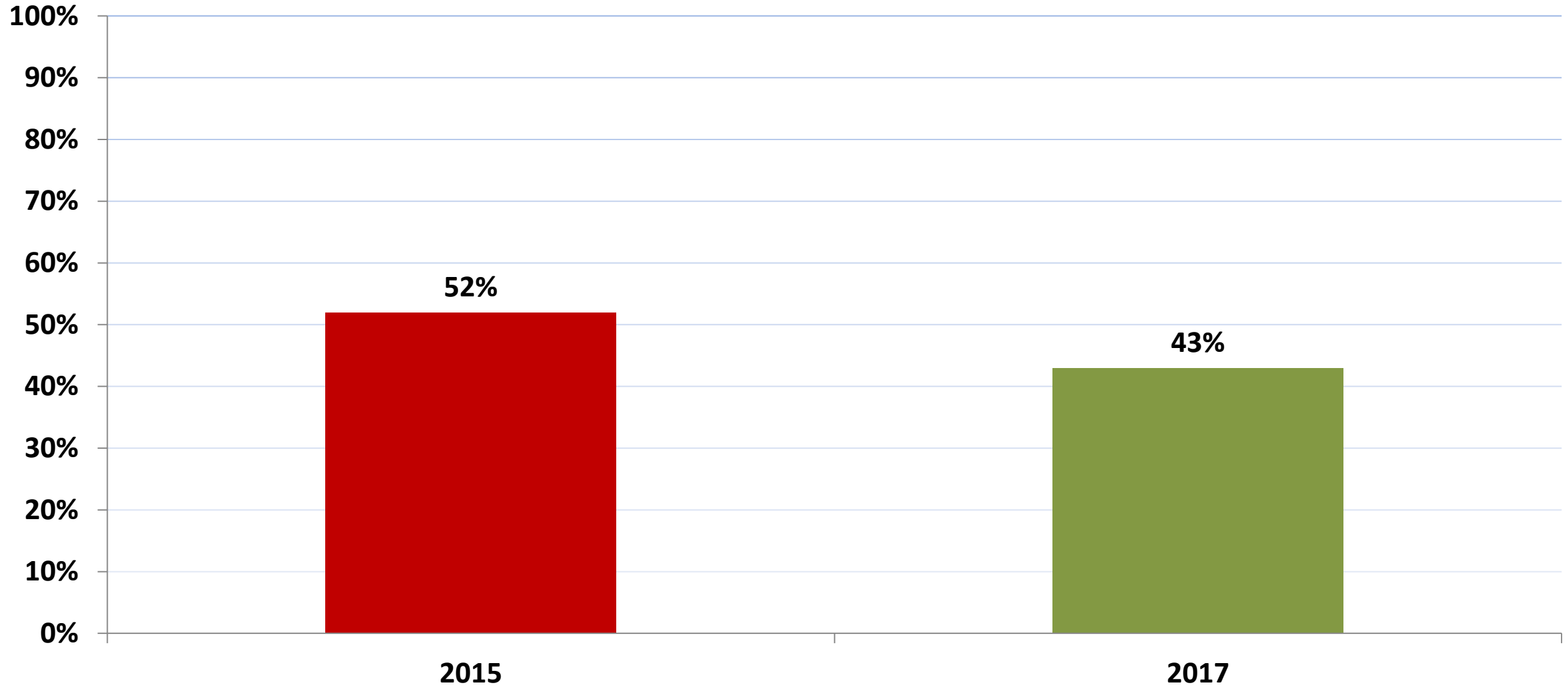
HIV Client Assessment Survey

Percentages of PLWH Whom are Concerned or not about their Smoking in 2017 Compared to 2015



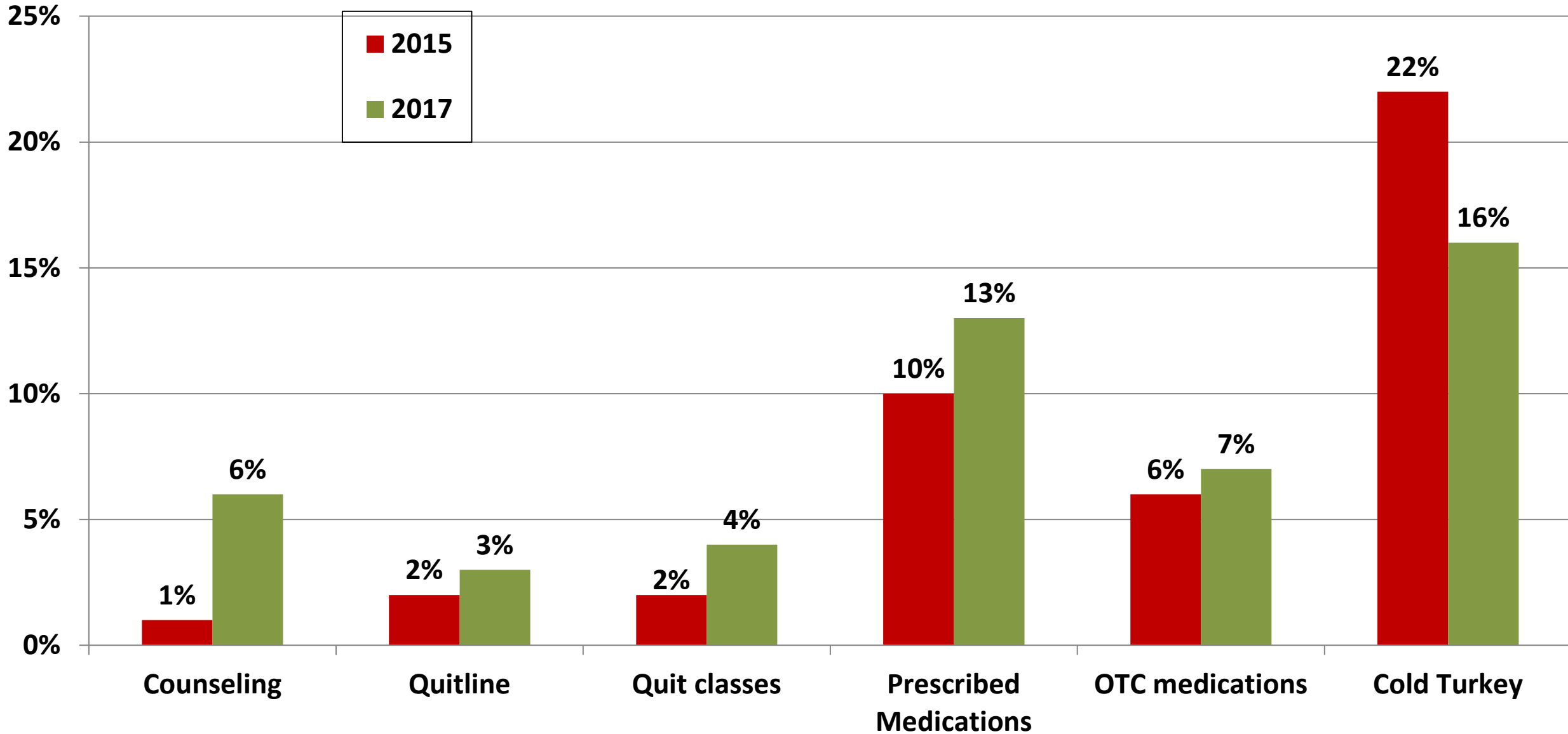
HIV Client Assessment Survey

Percentages of PLWH Smokers Who are Living with other Smokers in 2017 Compared to 2015



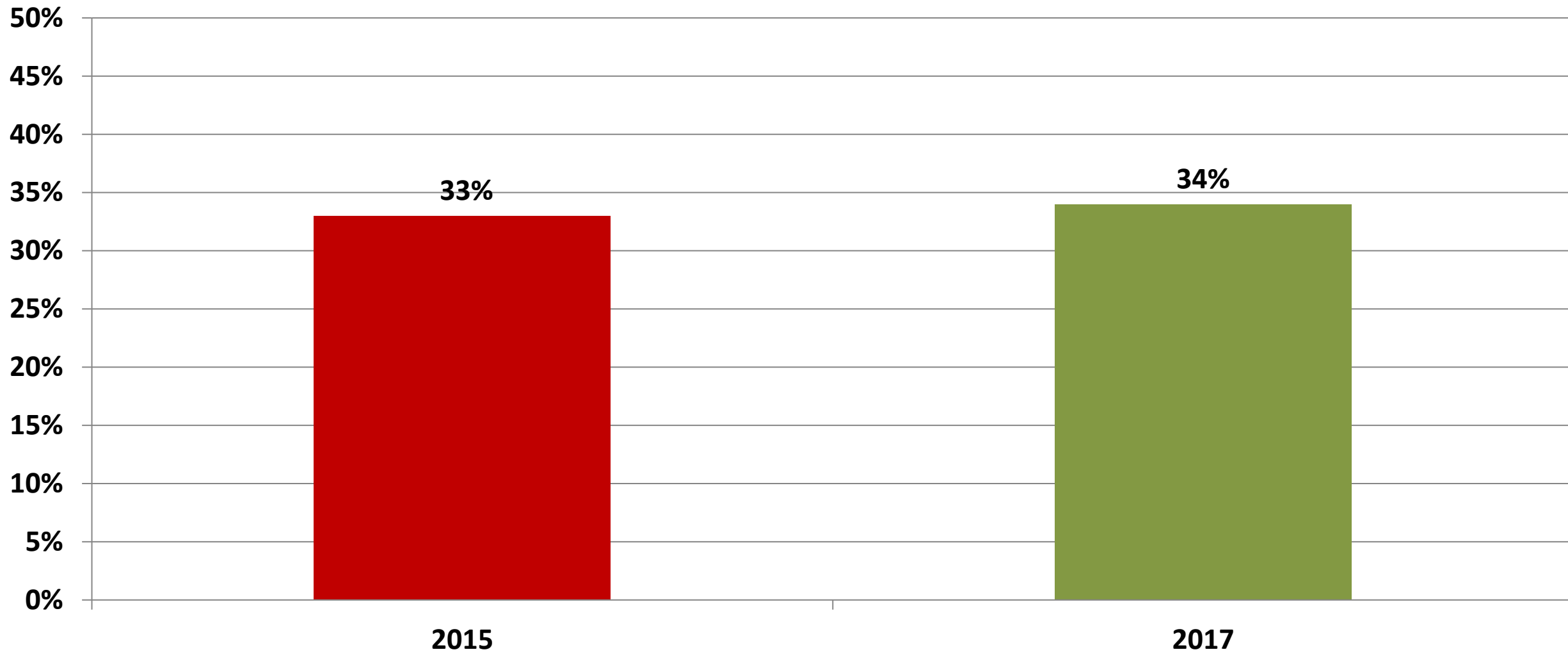
HIV Client Assessment Survey

Percentages of Quit Methods Used by PLWH Smokes in 2017 Compared to 2015



HIV Client Assessment Survey

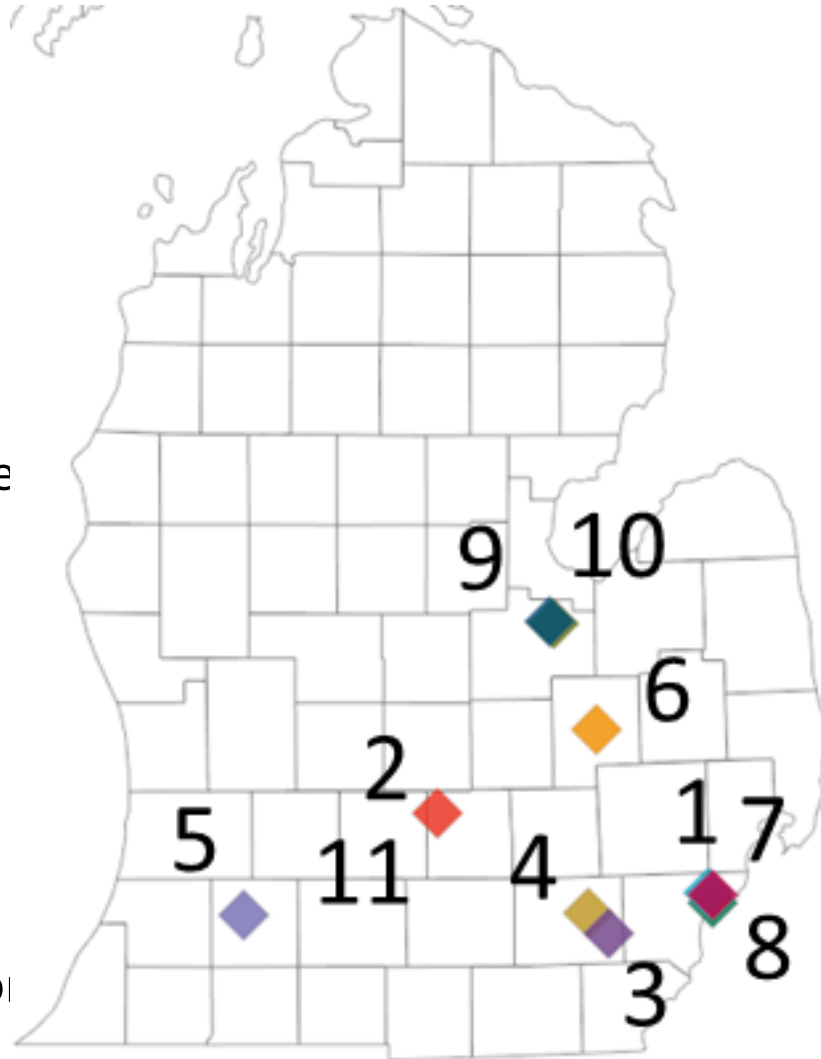
Percentages of PLWH Smokers Who Have Used Nicotine Replacement Therapy or other Medications when they tried to Quit Tobacco Use in 2017 compared to 2015



Client Focus Group Results: 2019

11 Organizations Participated

1. Health Emergency Lifeline Programs
2. Ingham County Health Department
3. UNIFIED HIV Health and Beyond
4. University of Michigan Community AIDS Resource and Education Services
5. WELLNESS Services Inc.
6. Henry Ford Health System
7. Wayne State University Horizon's Project
8. Great Lakes Bay Health Center
9. Sacred Heart Rehabilitation Center Inc.
10. Lansing Area AIDS Network (LAAN)



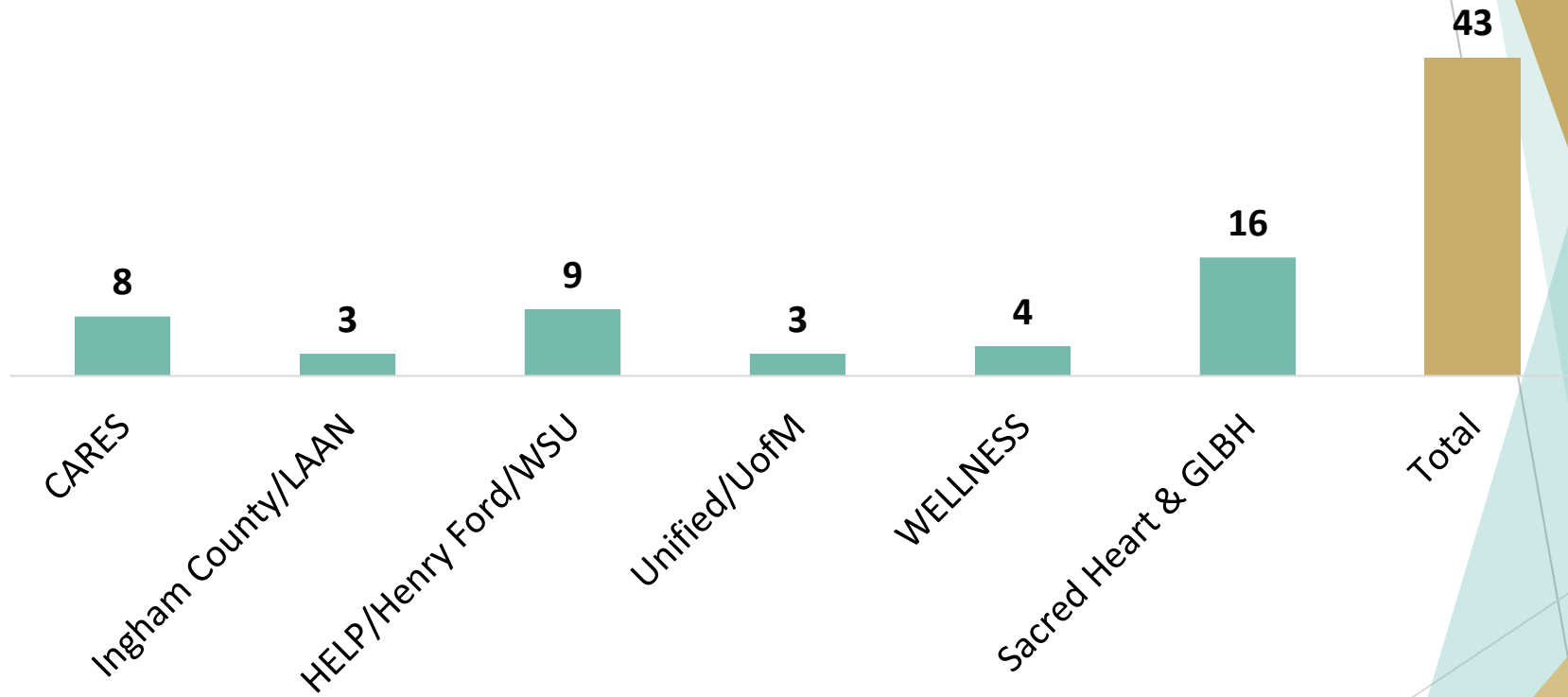
6
Focus groups
were conducted

*UNIFIED and UofM conducted joint focus group, Sacred Heart and Great Lakes Bay conducted a joint focus group, Ingham County and LAAN conducted a joint focus group & Henry Ford, HELP and WSU conducted a joint focus group.

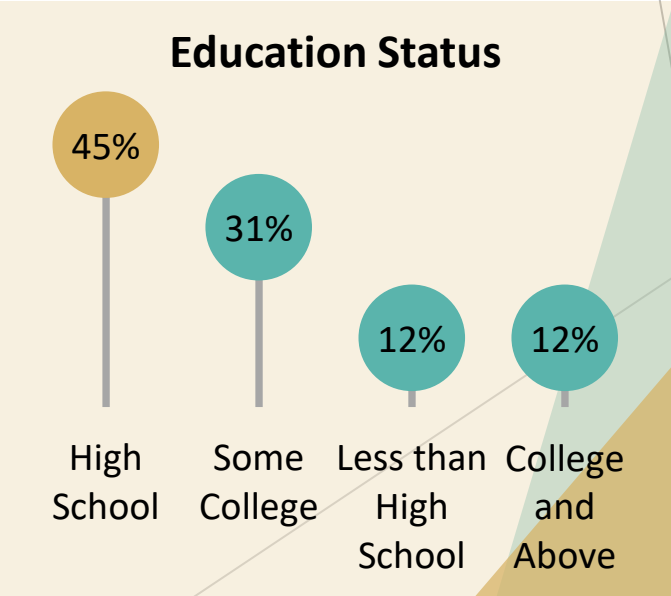
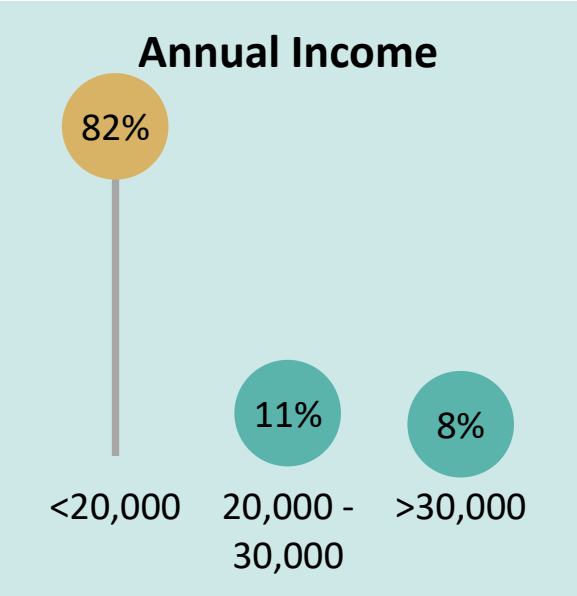
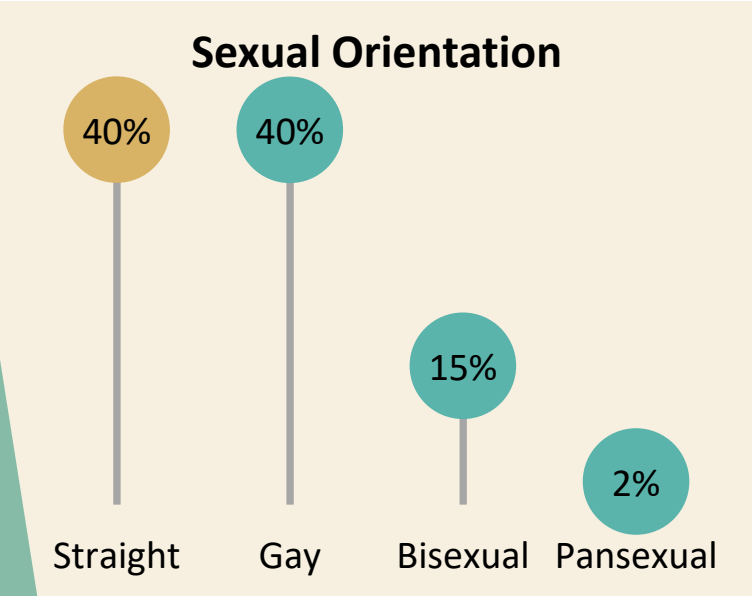
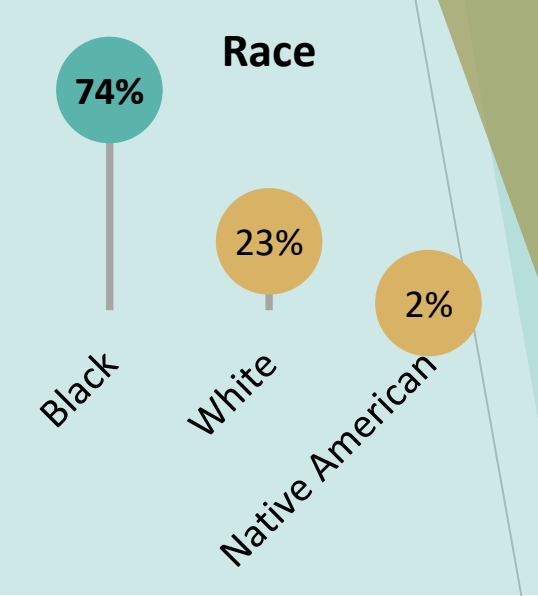
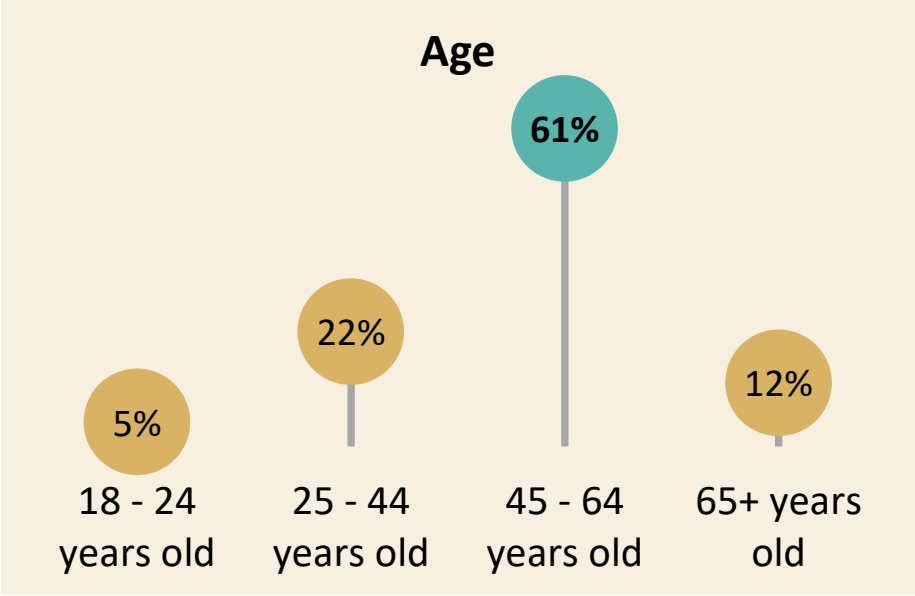
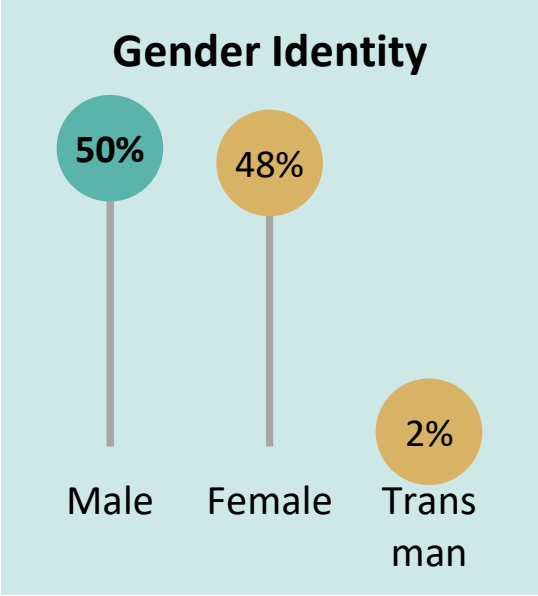


43
Total
Participants

Number of Participants per Focus Group



Participant Demographics



Demographics Overview



82% have annual income of less than \$20,000



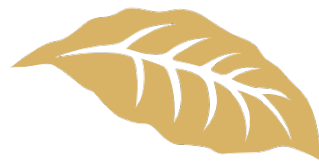
57% only completed high school or less



70% rated their health as 'good' or better



77% had at least one quit attempt in the last year



41% have been using tobacco for 21+ years



84% are unemployed or on disability income

Major Themes

- Stress
 - Often the driving force behind why individuals use tobacco products
 - Is a major reason why many quit attempts are not successful
- Support
 - Individuals want in-person support
 - Preferably from someone who has been in their situation
- Media
 - Many individuals noted negative media campaigns did little to influence them
- Reasons to quit
 - Health Concerns
 - Many individuals cited their health as a major reason to quit
 - Cost
 - Many individuals noted that rising costs are inconvenient but did not influence them to quit



Stress

- Stress is a major reason why many individuals choose to use tobacco products
 - Provides a sense of relief and comfort (especially for those who feel a lack of control over their own lives)
 - An outlet for dealing with the demands of one's life
- During quit attempts stress can cause individuals to 'slip' or 'relapse'
 - Participants expressed the need to learn to deal with the stress in their lives without tobacco
 - Quit attempts often elicit feelings of anger, frustration and sadness making individuals more likely to begin using tobacco again

Individuals indicated wanting to quit but not knowing where to begin or how to deal with the stress when quitting. Peer support and group meetings would be beneficial in providing individuals with the advice and support they need to be successful.



Support

- Individuals overwhelmingly indicated that they prefer in-person support or group meetings over services like the Quit Line or mobile apps
 - Many stated the need to have someone hold them “accountable”
 - Group meetings are helpful because they provide a community of support from people experiencing the same issues (shared accountability)
- Individuals would prefer to work with someone or a group that can relate to their life experience and understands the unique challenges they face
 - Understands the unique challenges
 - Provides a “roadmap/model” for success
 - Focused on empowerment of the individual

"I go to as many group meetings as possible, especially the addiction ones. -
- When I come back from these meetings, I always feel empowered."



Media

- While some individuals indicated that the negative media campaigns scared them, the majority indicated they did little to motivate them to quit
 - Many individuals reported disengaging the message and actively trying to ignore it (may lead to the dissonance that drives the pre-contemplation stage)
- Respondents indicated they would quit when they were ready and media reminding them of the health consequences did little to motivate them
 - Underlies the need to be autonomous and have control over one's life (similar to rational for individuals who use tobacco to manage their stress)
 - Need to build intrinsic (what is your why?) motivation to quit rather than “scaring” individuals into action

“It doesn't make me think about quitting. I think whenever I am ready to quit, I will quit.”

Reasons to Quit

- Health concerns were a major reason why many individuals indicated trying to quit
 - Many individuals indicated having persistent coughs or having difficulty with everyday tasks
- While cost was discussed as a potential reason to quit, most individuals indicated finding ways to accommodate the higher costs of tobacco products
 - Utilize unsafe or illegal methods (smoking ‘butts’, buying ‘loosies’, etc.)
- Several individuals indicated that family member’s health problems or the desire to be in their family’s lives motivated them to quit

“Cost is such an issue. I never pull out my pack of cigarettes when I am waiting at the bus station because everyone wants to grab one from me”

“My health is my biggest concern”