



GENERATIONS
FAMILY HEALTH CENTER

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As the program manager for two of DPH funded tobacco cessation programs at Generations and an American Lung Association group facilitator for the *Freedom from Smoking* and *Not-On-Tobacco* curriculum, I am here today to bring a positive yet familiar message to all of you. Tobacco cessation groups, individual counseling, the CT Quitline, and access to free nicotine replacement therapies; all work to help people addicted to tobacco products to reduce and stop their use of these products. The key is continuing to increase access to all of these supports for people in CT.

From February 2009 through February 2010 we have identified 936 individuals with the desire to try to quit smoking. Out of 936 referrals to date, 206 women were able to successfully enroll in the Smoking Cessation Program at Generations. To date there are 229 eligible women referred to the program awaiting contact. Of the remaining 501 individuals who were not eligible for our DPH funded smoking cessation program all were referred to the CT Quitline. Several of these individuals did attend out Smoking Cessation Groups as they are open to the public and received their NRT's from the CT Quitline.

The program uses the ALA *Freedom from Smoking* curriculum for the group sessions and an individual counseling curriculum develop by Project Manager and previously approved by DPH, based on ALA guidelines. We also provide nicotine replacement therapies at no cost to all participants, and access to other resources in the community.

Program Improvement Suggestions:

- Expand program guidelines to include males in target populations. Most pregnant women (and non-pregnant) are involved to some extent with a partner who is often using tobacco products as well. If both parties can received their NRT's, counseling/group services from the same agency it helps to create a more seamless access to the service. While some male partners were able to utilize the CT Quitline, it took longer for the partner to receive their NRT's from the CT Quitline. Through our agency, NRT's could be accessed at the first intake session for one partner only creating some issues for the couple.
- Due to the rural nature of our health center service area, the current program model of one coordinator for smocking cessation services is inefficient. There are difficulties providing comprehensive services at 4 different sites spanning 90 miles. A revised program model would include smoking cessation facilitators at each site with oversight by a part time program manager. At Generations we have over the years of our grants trained approximately 6 ALA facilitators in an effort to be able to provide services at each site. The current funding model which the grant supports did not allow for the dispersion of funds to more than one staff.