Institutionalizing a Comprehensive Tobacco-Cessation Protocol in an Indigenous Health System: Lessons Learned

LorrieAnn Santos, BA1, Kathryn Braun, DrPH1,2, Kamuela Ae’a, MPH1,3, and Leimomi Shearer, CNA1,4

(1) ‘Imi Hale–Native Hawaiian Cancer Network; (2) University of Hawai`i, Office of Public Health Studies; (3) Hō’o‘āla Lāhui Hawai`i; and (4) Hui Mālama Ola Nā ‘O`iwi

WHAT IS THE PURPOSE OF THIS STUDY?
• To describe how the five Native Hawaiian Health Care Systems in Hawai`i developed and practiced new ways to identify tobacco users within the Native Hawaiian community and then to help these smokers quit. This effort built on earlier work that established that mainstream smoking cessation programs did not have a significant impact among Native Hawaiian people.

WHAT IS THE PROBLEM?
• Native Hawaiians are more likely to use tobacco and to die of lung cancer than other people living in Hawai`i. Widely available mainstream smoking cessation programs have not helped these individuals to a significant degree. In fact, although recent usage surveys have shown a downward trend for smoking overall among citizens of Hawai`i, the only ethnic group within the state to show an increase in prevalence of current smoking was Native Hawaiians.

WHAT ARE THE FINDINGS?
• Clinics that were most successful in changing their procedures and practices were more likely to have a tobacco-cessation champion on staff. That person, who ordinarily fills one of a variety of direct service roles (e.g., nurse, asthma educator, psychologist), assumed a leadership role and motivated others within the clinic to concerted action.
• Support for the smoking cessation champion must be forthcoming from multiple levels of the clinic bureaucracy. Helping clinics to change their procedures and practices takes support from administrators and record keepers. Champions need the support of leaders for policy implementation, of administrators for quality assurance implementation and of direct service providers for operational implementation.
• Clinics that were most effective at changing their procedures and practices achieved the greatest success in helping patients to stop using tobacco.

WHO SHOULD CARE MOST?
• Clinic staff
• Policy makers
• Funders

RECOMMENDATIONS FOR ACTION
• Encourage clinics to change their procedures and practices so that every client is routinely asked about tobacco use and helped to quit if he or she smokes.
• Provide funding and technical support to clinics that are willing to change their procedures and practices in support of tobacco cessation.