

Michigan Cancer Consortium: Native American Youth Cessation Project Final Report

Project Description

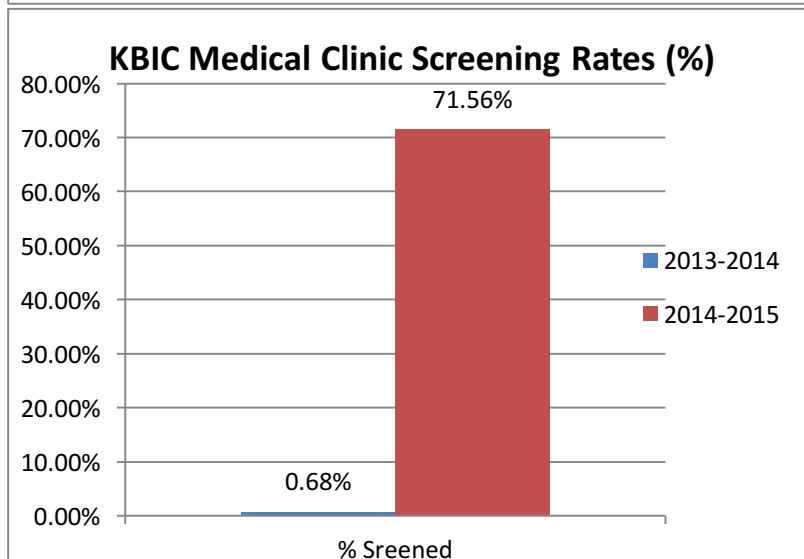
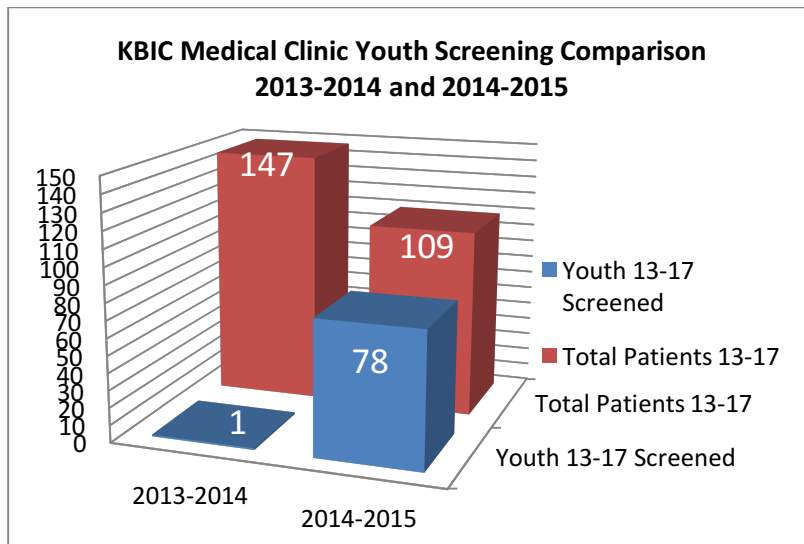
The Inter-Tribal Council of Michigan, Inc. (ITC of MI) implemented the Native American Youth Cessation Project to work towards reducing smoking rates among Native American youth aged 8 years and older. For the project ITC of MI contracted with the Saginaw Chippewa Indian Tribe (SCIT) and the Keweenaw Bay Indian Community (KBIC) to work towards two objectives:

- 1) By September 30, 2014, increase to 2, the number of tribal health systems that have a policy or protocol in screen youth (ages <18) for commercial tobacco use;
- 2) By September 30, 2015, increase to 50%, the percentage of youth smokers (age <18) within the target communities who are screened for commercial tobacco and referred to cessation services as measured by clinic RPMS (E.H.R.) reports

Results

The project was moderately successful in achieving the planned objectives. Both Tribes worked toward writing, revising and implementing policies to help achieve reduction in youth tobacco use of commercial tobacco. The Saginaw Chippewa Indian Tribe implemented a policy, seen above, for the Nimkee Memorial Wellness Center to screen all 12-18 year old youths who go through the medical and dental clinics for commercial tobacco use, including smoke-less tobacco in addition to smoking, tobacco exposure and use of nicotine delivery devices, such as e-cigarettes. The revisions to the draft policy to include screening for nicotine delivery devices slowed the implementation process. Youth patients that are identified as using commercial tobacco or nicotine delivery devices are referred to the Michigan Quitline and can be referred to a primary care provider if the youth requests Nicotine Replacement Therapy or more information.

The Keweenaw Bay Indian Community was unable to get a written policy implemented within the time period of the project, but they are still working to pursue the creation of a policy for screening youth for commercial tobacco use that can be successfully implemented and they have begun screening youth for tobacco use in both the medical and dental clinic without the policy. The KBIC was able to implement a smoke-free grounds policy for the Donald A. LaPointe Health & Education Center, which helps to reduce youth's exposure to commercial tobacco and reduce visibility of commercial tobacco use, which can normalize the behavior. The KBIC used this project to put an increased focus on youth screening and improve the rates through both the medical and dental clinics, the progress of which can be seen in the screening and referrals section.



Keweenaw Bay Indian Community saw a dramatic increase in screening rates at their medical clinic. As seen in the graph above, between October 1, 2013-September 30 2014 the medical clinic had one (1) patient aged 13-17 who was documented as having been screened for commercial tobacco use, which is a screening rate of 0.6%. Between October 1, 2014-September 30, 2015 the medical clinic screened 78 of the 109 patients aged 13-17 for a screening rate of 71.6%. This large improvement does not include screenings that have been done through the KBIC dental clinic which has begun screening for commercial tobacco use but is still working to implement the system for recording and tracking screening and currently the dental records that include commercial tobacco screening information are only on the paper forms kept in the patients' files. At this time the KBIC does not have a referral system for youth in place but they are looking for opportunities to create or strengthen partnerships in their service area to do so.

The Saginaw Chippewa Indian Tribe had a successful screening rate of 100% of youth through their health clinic for both years of the project. SCIT provided data for the time periods of July 1 to September 30 2014 and 2015, in 2014 the medical clinic screened all 186 youth patients on all visits (265 total) and in 2015 the medical clinic screened all 198 youth patients on all visits (282 total) in the respective quarters. Additionally in 2015 the dental clinic began to screening youth patients and in the quarter of July 1-Sep. 30 screened all 37 youth patients they say and offered referral services to 1.

The referral rates for both tribes did not meet the rates stated in the objectives. Issues such the delay on getting policies implemented and possible lack of community resources played a part in the inability to meet the objective. Another issue that was reported by both the KBIC and SCIT was that the youth were not forth coming with information during their screenings, as both had very low rates, for example the KBIC did not have any reported youth commercial tobacco users, of identifying smokers through screening. With the youth withholding information regarding their smoking status it makes it more difficult for providers to offer referral services. The ITC of MI has reached out to the Michigan Quitline to attempt to gather data on Native American Youth within the tribal services areas rates of calling in to attempt to gather information on youth self-referring to cessation services.