

Tobacco Dependence: Education and Training for LGBTQ+ Centers

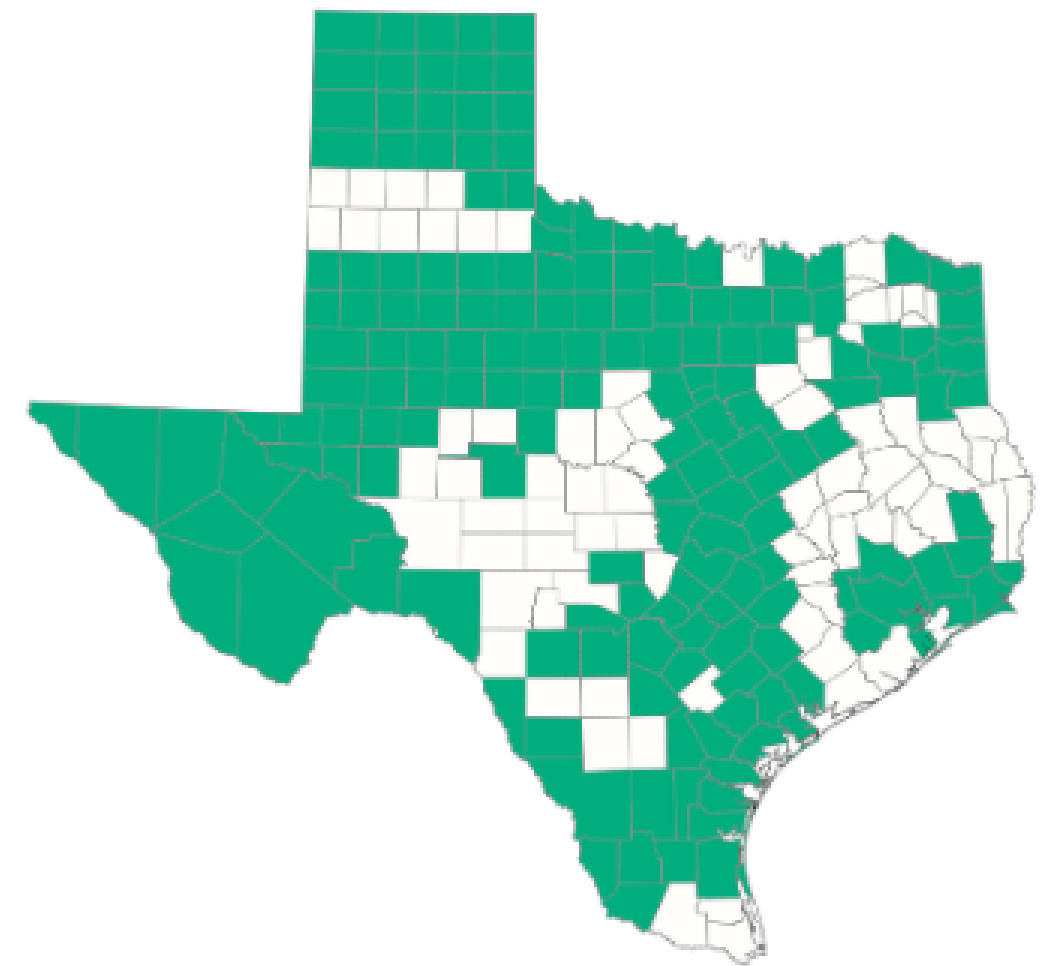


Agenda

1. Introduction of Project ACTION
2. Risks of Tobacco Use
3. Challenges and Barriers impacting Tobacco Use in the LGBTQ+ Community.
4. Evidence Based Treatment for Tobacco Dependence
5. Tobacco-free policy overview
6. Resources

Mission

Project ACTION (Alliances to Combat Tobacco Use in Organizations Now) promotes wellness among Texans by partnering with healthcare organizations to build capacity for system-wide, sustainable initiatives that will reduce tobacco use and secondhand smoke exposure among employees, patients, and visitors.



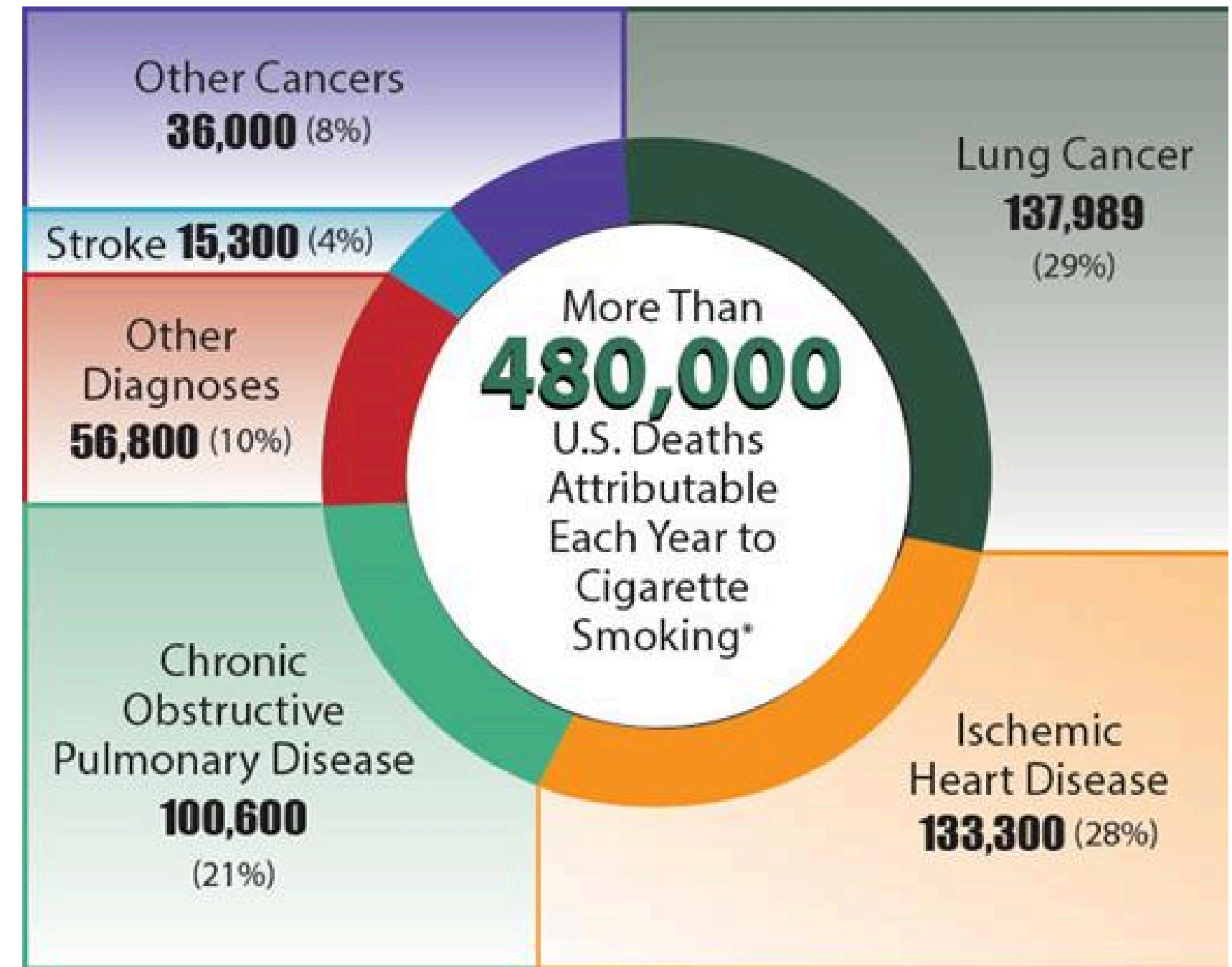
The Risks of Tobacco Use

Hazards of Smoking



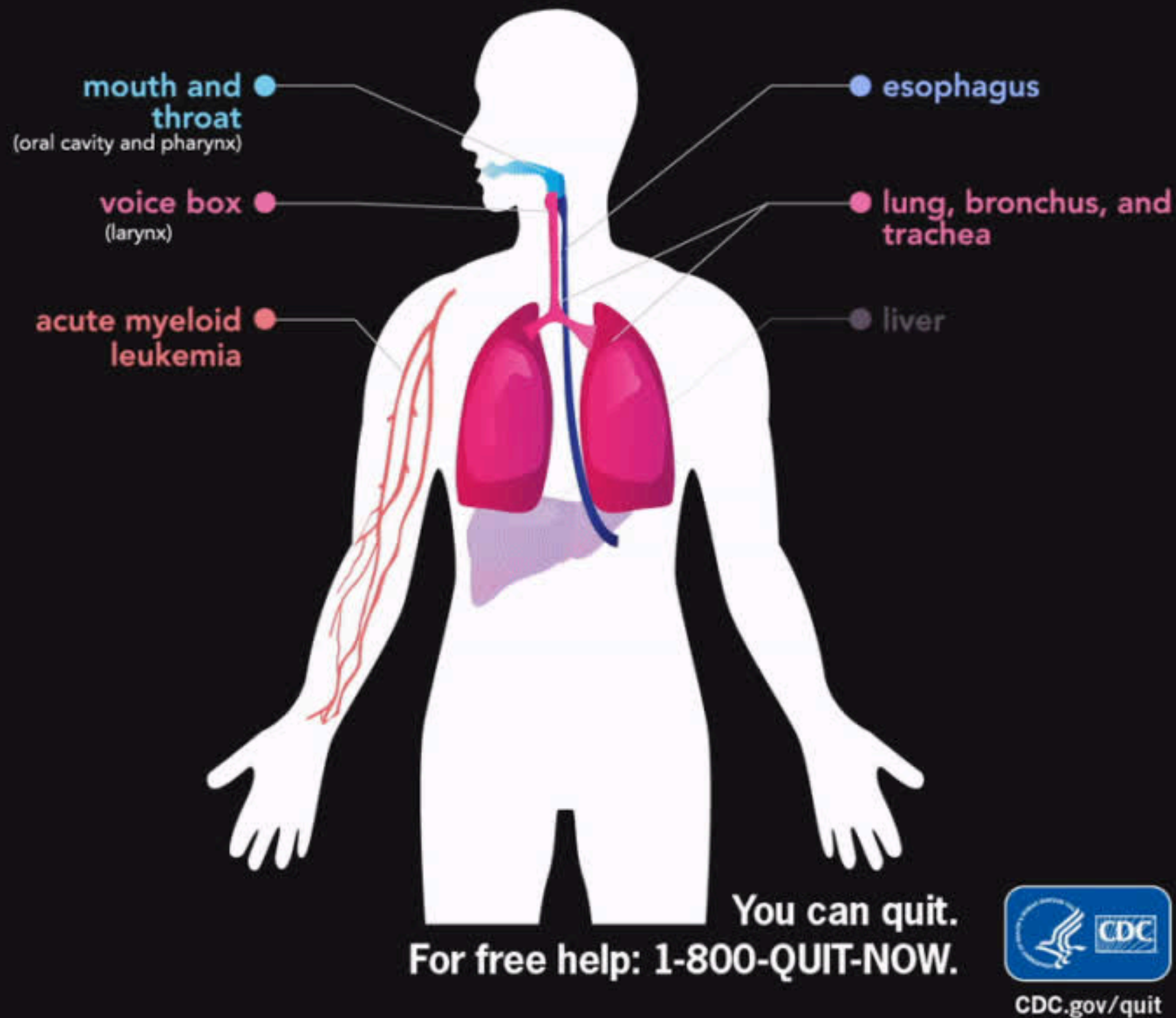
Smoking is the leading preventable cause of death and disability in the United States

- Smoking causes more than **480,000** deaths each year
- About **1 in 5 deaths** is related to smoking



Source: The Health Consequences of Smoking—50 Years of Progress:
A Report of the Surgeon General, 2014

Smoking can cause cancer almost anywhere in your body.



Smoking Tobacco and Cancer

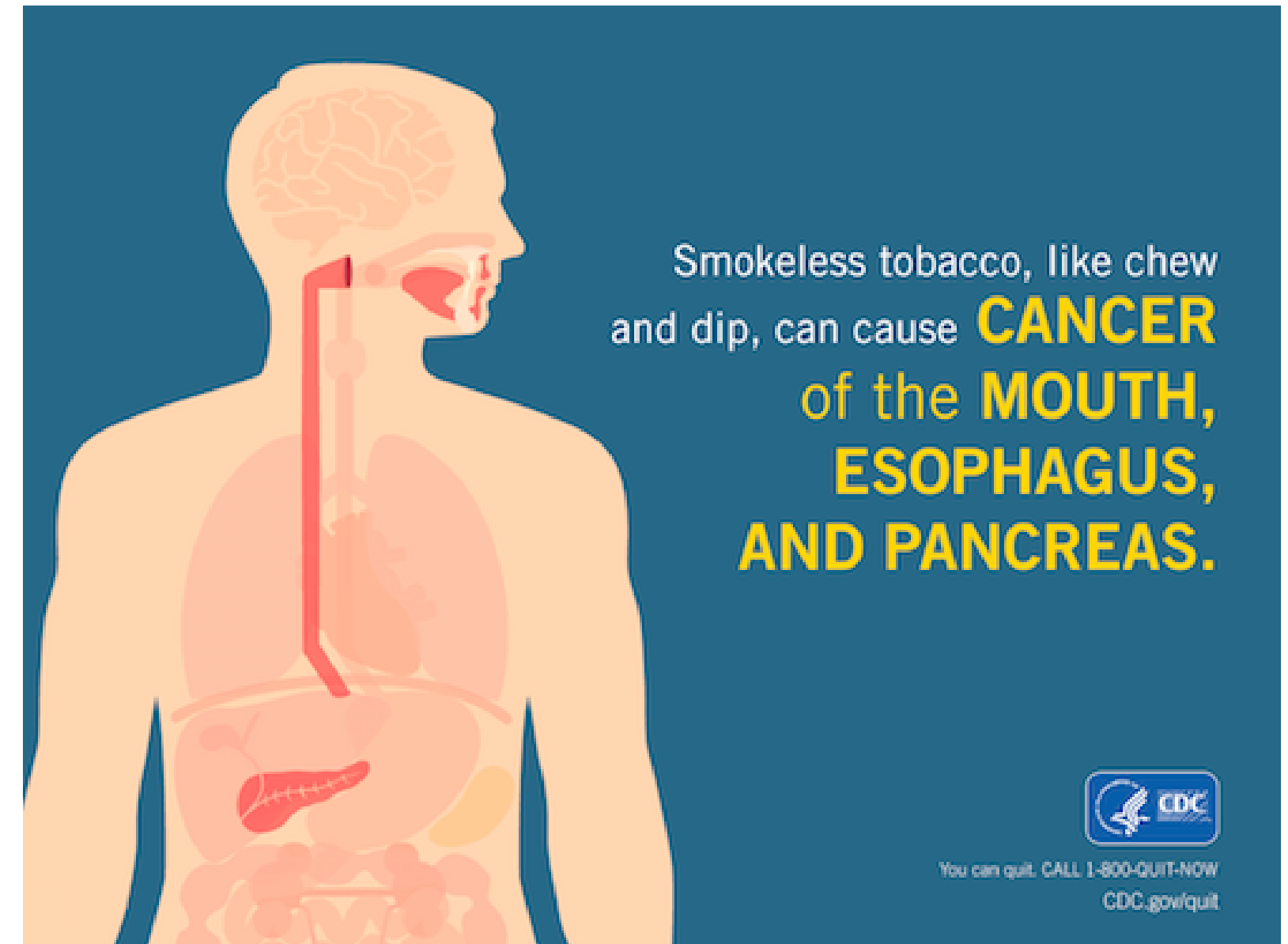
Smoking can result in cancer almost anywhere in the body. There are over 100 types of cancer and at least 12 types are currently known to be directly caused by smoking. Smoking can increase the risk of developing cancer as well as prevent the body from fighting it once diagnosed.

Smokeless Tobacco and Cancer

Smokeless tobacco products include:

- Chewing/spit tobacco,
- Snuff (moist and dry types)
- Any other tobacco-containing product that is not smoked

These products contain harmful chemicals and are **not a safe alternative.**



Challenges and Barriers associated with Tobacco Use in the LGBTQ+ Community

Intersectionality Framework



- Provides a comprehensive understanding of barriers and needs by exploring how various social groups are impacted and why specific health outcomes occur.
- It emphasizes that addressing inequities based on a single attribute is insufficient, as factors like sex, sexual orientation, race/ethnicity, and gender identity are interconnected and collectively shape health outcomes.
 - Ex: Individuals with lower socioeconomic status face greater challenges in successfully quitting smoking compared to those with higher SES
 - Ex: Black tobacco users may face racial discrimination as well as discrimination based on their sexual or gender identity

Disproportionate Impact Among LGBT

Sexual Orientation	Any Tobacco Use
Lesbian, gay, and bisexual adults	27.4%
Heterosexual adults	18.4%
Gender Identity	Cigarette/cigar/e-cigarette use
Transgender adults	39.7%
Cisgender adults	25.1%



Increased Negative Impact on Transgender Women

- Hormone Replacement Therapy (estrogen) is also associated with these same increased risks
- For transgender women, smoking while taking hormone therapy **doubles** the risk of stroke
- Smoking interferes with the absorption of estrogen therapy, impacting the effectiveness of Hormone Therapy

Why does the LGBTQ+ Community Smoke More? ★

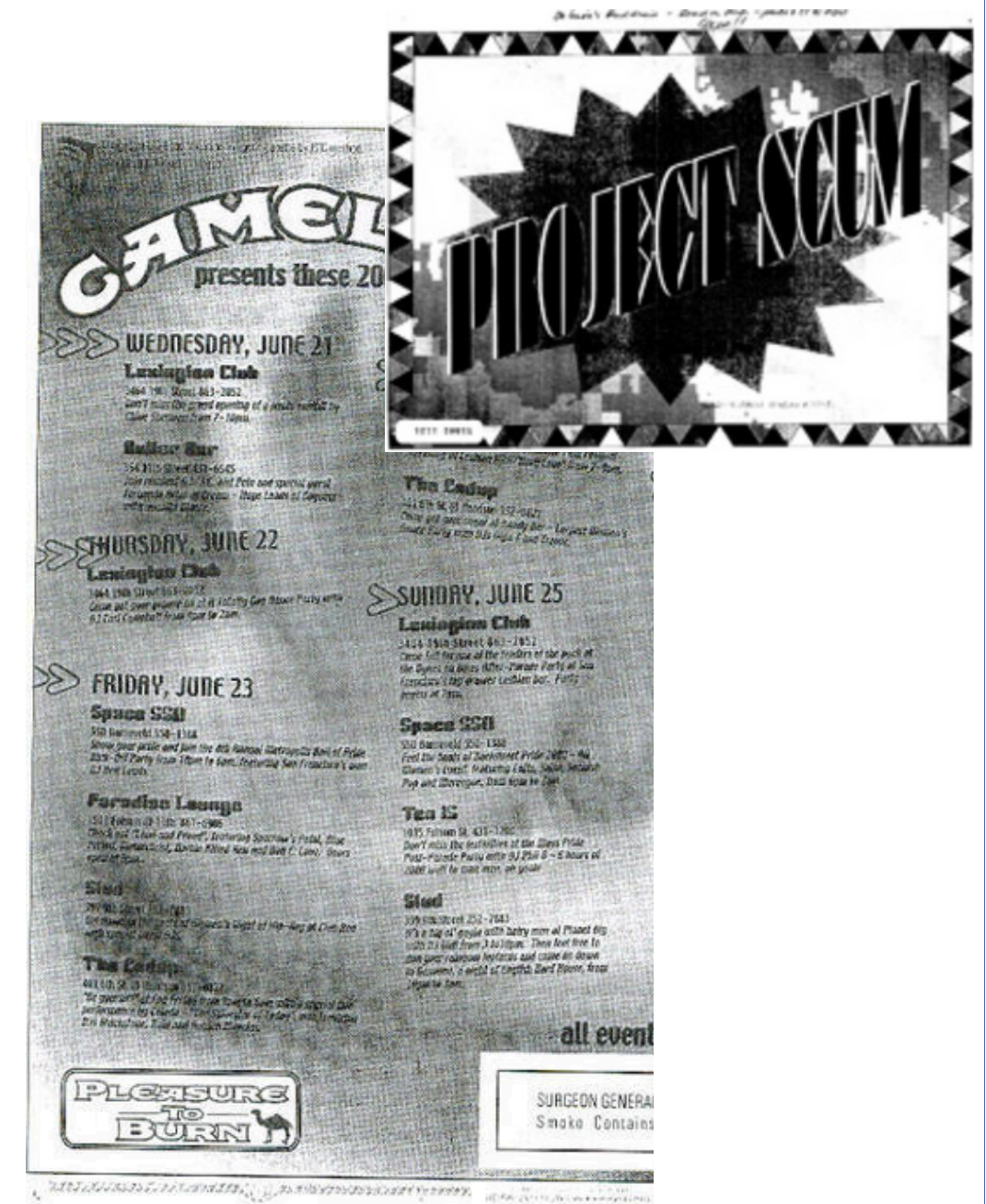
- Stigma and Discrimination
- Tobacco Industry Targeting
- Normalization of Smoking
 - 30% of non-tobacco ads in LGBTQ+ publications feature tobacco use (American Lung Association)
 - Historically, many LGBTQ+ leaders and even some now do not see tobacco as a priority tobacco as a priority
- Bar and Club Culture
 - Historically, bars were safe places for the LGBTQ+ community
 - Some LGBTQ+ leaders believe that drinking and smoking are central to the coming out process



Kulke, C. (2015, July 16).

Targeting by Big Tobacco

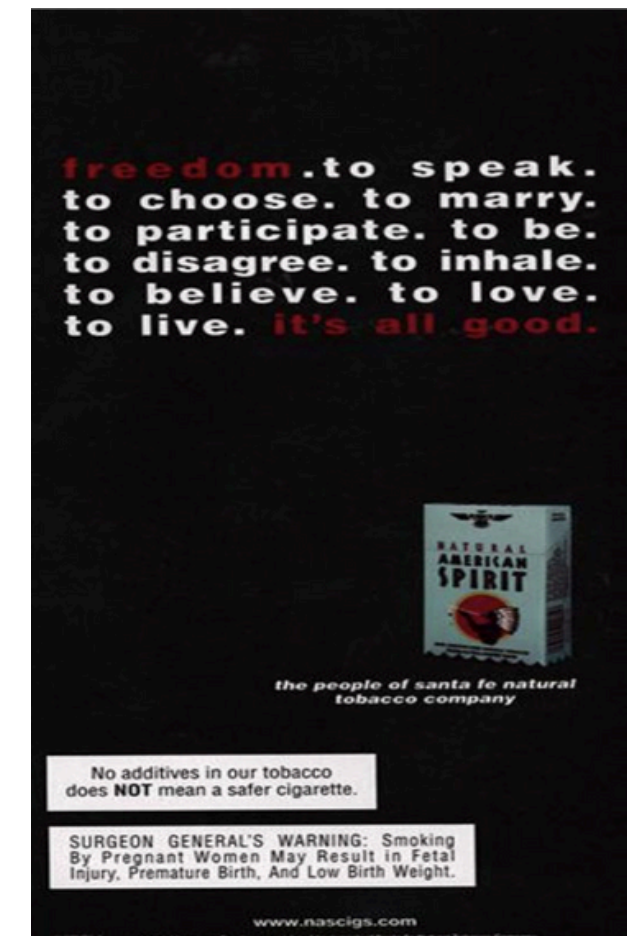
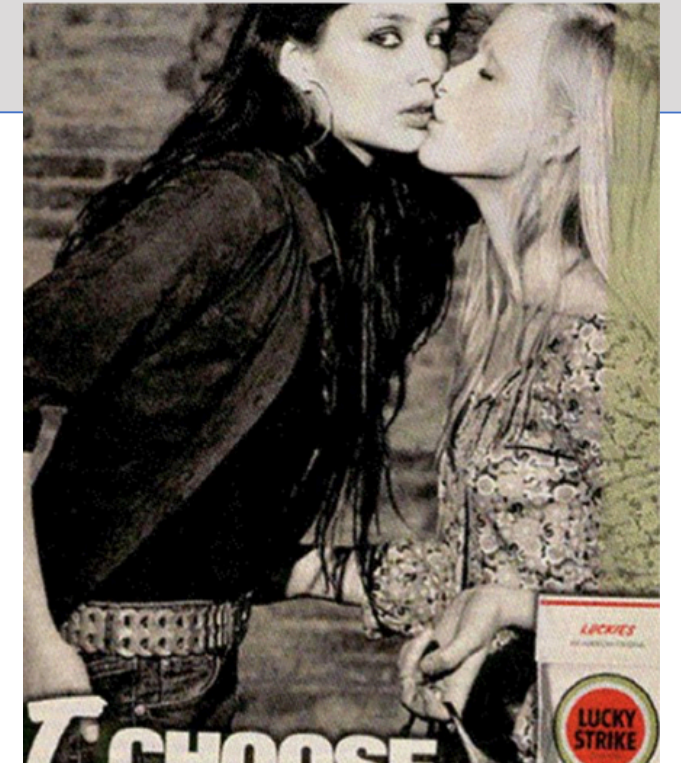
- 1995: Project SCUM (Subculture Urban Marketing) was RJR Tobacco Company's marketing campaign to push sale of Red Kamels specifically to gay and homeless people in SF Bay Area
- This included:
 - Aggressive Advertising
 - Privately funded Pride festivals
 - Cohosting events related to AIDS (ACT-UP) and LGBT organizations (i.e. GLAAD)
 - Promoting and hosting LGBT events; i.e. LGBT bar night
- Exposed in 2000
 - Same year camel (RJR) hosts booth at SF Pride and sponsored an after-party at popular gay nightclub



Targeting by Big Tobacco

- Marketing: price discounts paid to retailers to reduce cigarette costs LGBTQ+ and additional customers (FTC, 2016)
 - Accounted for 66.7% (\$5.8 billion) of expenditure
- Continue to advertise at Pride festivals and other LGBTQ+ community events
- Contribute to local and national LGBTQ+ and HIV/AIDS organizations
- Advertise smoking to be a norm in LGBTQ+ life

Kulke, C. (2015, July 16)



Truth Initiative (2017, June 21)
(DeCoursey, 2017)



Stigma and Discrimination



- The likelihood of commercial tobacco product use is twice as high in the LGBTQ+ community compared to their non-LGBTQ+ counterparts.
- LGBTQ+ individuals encounter additional challenges in accessing evidence-based treatment for smoking cessation.
 - Minimal efforts have been created to develop tobacco cessation interventions tailored to meet specific needs and preferences of this group.
- LGBTQ+ individuals might avoid health services if providers are perceived as unwelcoming or lacking in LGBTQ+ -specific training leading to reluctance in seeking care.
- LGBTQ+ residents in rural areas have difficulty accessing LGBTQ+ community-based cessation programs than residents in urban areas.

LGBTQ+ Teens and Tobacco Use

- Clinicians should ask teens about all tobacco products
 - If possible, ask when the parent/ caregiver is not in the room.
- Encourage patients to pick a quit date not too far in the future, have a support system, know their triggers and how to cope with them, and manage their withdrawal symptoms.
- For teens who are not ready to quit, challenge them to completely stop their tobacco use for 2 weeks.

Evidence-based Treatments for Tobacco Dependence



Using the 5 A's

(Ask, Advise, Assess, Assist, Arrange)



Ask - about current tobacco use

Advise- to quit

Assess - willingness to make a quit attempt

Assist - the quit attempt

1. Brief counseling
2. Medication, if appropriate
3. Refer to additional resources

Arrange - a follow-up appointment (in person or by telephone)

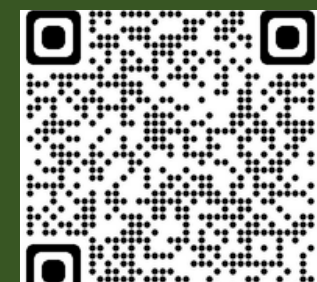
Ask – every patient, at every visit about their tobacco use (e.g., "Do you smoke, even once in a while?")

Advise – them to quit using tobacco products (e.g., "Quitting is one of the most important things you can do to improve your overall health.")

Assess – their desire to quit smoking (e.g., "Do you have a desire to quit smoking in the next 30 days?")

Assist – those who have a desire to quit to access treatment resources (e.g., "I am happy you want to quit. Would you like to hear about the options to help you quit smoking?")

Arrange – a follow-up session to check in on their progress (e.g., "I would like to meet with you again in two weeks to discuss your progress.")



Scan here to
download your 5 A's
badge card today!

Using the 5 R's (Relevance, Risks, Rewards, Roadblocks, Repetition)

USING THE 5R's

RELEVANCE of their current tobacco use and reasons to stop.

RISKS of continued tobacco use.

REWARDS of tobacco cessation.

ROADBLOCKS to a successful quit attempt.

- Need counseling referral?
- Medication or NRT?
- Any additional resources?

REPETITION of all 5R's in each contact with currently unmotivated tobacco users.

RELEVANCE: *"What do you think the overall impact is to your health?"*

RISKS: *"Do you have children who may be exposed to the secondhand smoke?"*

REWARDS: *"You've had several visits this year for your asthma, can you tell me how quitting smoking might help your asthma symptoms?"*

ROADBLOCKS: *"You've talked about being concerned about withdrawal symptoms, would you like to talk about nicotine replacement therapy?"*

REPETITION: Patients with a failed quit attempt should be advised that most people make multiple quit attempts before they are successful.



Scan here to
download your 5 R's
badge card today!

Using Group-Based Interventions



- Provides many potential benefits, including bolstering social support networks, reducing isolation and stigma, and practicing recovery-oriented coping strategies with group members.
 - LGBTQIA+ community is a tight-knit community and group-based interventions creates an effective safe space among these groups
 - Group-based smoking cessation interventions doubles the rate of smoking cessation at 6-month follow-up.
- Group therapy is better for helping people stop smoking than self-help, and other less intensive interventions.

Why Use Nicotine Replacement Therapy?

NRT

Helps relieve physical withdrawal symptoms

Addresses a person's physiological need

Delivers lower levels of clean nicotine



Tobacco Treatment Medications

	Patches	Gum	Lozenge	Varenicline (most effective)	Bupropion (Zyban/Wellbutrin)
Strength	21, 14, 7 mg	2, 4 mg		.5, 1 mg	150 mg SR (sustained release) 300 mg XL (extended release)
Dosing	1 patch/ 24 hours	1 piece every 1-2 hours		<ul style="list-style-type: none">• Days 1-3: .5 mg every morning• Days 4 - 7: .5 mg twice daily• Day 8 – end of treatment: 1 mg twice daily	Days 1-3: 150 mg once in AM Day 4 – end: 150 mg twice daily or may take 300 mg XL once a day
Advantages	Private Once a day	Offset cravings Reduces dependence		High success rates	Also treats depression
Adverse Reactions	Skin reaction Sleep Disturbance	Mouth soreness Hiccups	Indigestion Hiccups Insomnia	GI upset- nausea, vomiting, constipation, gas Abnormal, strange or vivid dreams Very rare but should monitor for depressed mood, agitation, changes in thoughts/behavior, and suicidal ideation	Dry mouth, Insomnia, Decreased appetite Do not use with seizure disorder, eating disorders, MAOIs, or abrupt discontinuation of alcohol, benzodiazepines, or antiepileptic medication.



Tobacco Treatment Medications



	Patches	Gum	Lozenge
Strength	21, 14, 7 mg	4, 2 mg	
Dosing	<p>1 patch every 24 hours</p> <ul style="list-style-type: none">Any patient smoking 5 or more cigarettes a day should be recommended a patch	<p>1 piece every 1-2 hours</p> <ul style="list-style-type: none">To improve chances of quitting, use at least 8 pieces per dayInstruct patients to set an alarm on their phone to remind them, this will help them keep track and avoid nicotine withdraws	
Advantages	<p>Private</p> <p>Once a day</p>	<p>Offset cravings</p> <p>Reduces dependence</p>	
Adverse Reactions	<p>Skin reaction</p> <p>Sleep disturbance</p>	<p>Mouth soreness</p> <p>Hiccups</p>	<p>Indigestion</p> <p>Hiccups</p> <p>Insomnia</p>





Tobacco Treatment Medications

	Varenicline (most effective)	Bupropion/Zyban/Wellbutrin
Strength	1, .5 mg	300 mg XL (extended release) 150 mg SR (sustained release)
Dosing	Set quit date and start medication at least 1 week before <ul style="list-style-type: none">• Days 1-3: .5 mg every morning• Days 4-7: .5 mg twice daily• Day 8-end of treatment: 1 mg twice daily	Days 1-3: 150 mg once in AM To start 1-2 weeks before quit date Day 4-end of treatment: 150 mg twice daily or may take 300 mg XL once a day
Advantages	High success rates	Also treats depression
Adverse Reactions	GI upset (nausea, vomiting, constipation, gas) Abnormal, strange, or vivid dreams Very rare but should monitor for depressed mood, agitation, changes in thoughts/behavior, and suicidal ideation	Dry mouth, insomnia, decreased appetite Do not use with seizure disorder, eating disorders, MAOIs, or abrupt discontinuation of alcohol, benzodiazepines, or antiepileptic medication.

- About **44%** of people who use Varenicline and are talking to a counselor, quit coach or getting some type of support, successfully quit using tobacco products. It works very well for the people who can tolerate it.



Medications for Tobacco Users - Summary

Medication Type	Availability
Nicotine Patch	Over the counter
Nicotine Gum	Over the counter
Nicotine Lozenge	Over the counter
Nicotine Nasal Spray	Prescription only
Varenicline	Prescription only
Bupropion (Zyban/Wellbutrin)	Prescription only

Nicotine from NRT = Nicotine from Tobacco



- The amount of nicotine a person receives from their NRT **should equal or be a little more than** the nicotine they were receiving from their tobacco
- People inhale approximately 1-1.8 mg of nicotine with every cigarette.
- There are **20 cigarettes in a pack of cigarettes**. So, a person smoking a pack of cigarettes per day should start **with at least a 21mg nicotine patch**.
 - Little cigars or cigarillos are similar to cigarettes but have different packaging standards – may be sold individually, in packages or 2, 3, or 5 little cigars) – they are likely flavored as well.
 - Spit tobacco (chew, snus, snuff) have differing nicotine concentrations and people use the products in many different ways.

Step Down Instructions For Patches

Step down instructions can also be found on the NRT box

If smoking more than 15 - 20 cigarettes per day...

- Step 1: one 21 mg patch per day for weeks 1 – 6
- Step 2: one 14 mg patch per day for weeks 7 – 8
- Step 3: one 7 mg patch per day for weeks 9 – 10 (or end of treatment plan)

If smoking 8 - 14 cigarettes per day...

- Step 1: one 14 mg patch per day for weeks 1 – 6
- Step 2: one 7 mg patch per day for weeks 7 – 8 (or end of treatment plan)

If smoking less than 7 cigarettes per day...

- Step 1: one 7 mg patch per day for weeks 1 – 4

If a person is using multiple patches per day (example: smokes 30 cigarettes per day), they might use a 21 mg and a 14 mg patch (but could also use a 21 mg patch plus gum/lozenges). They would step down one patch at a time until they are only using one patch, then follow the above guidelines.



How to Use Nicotine Patches

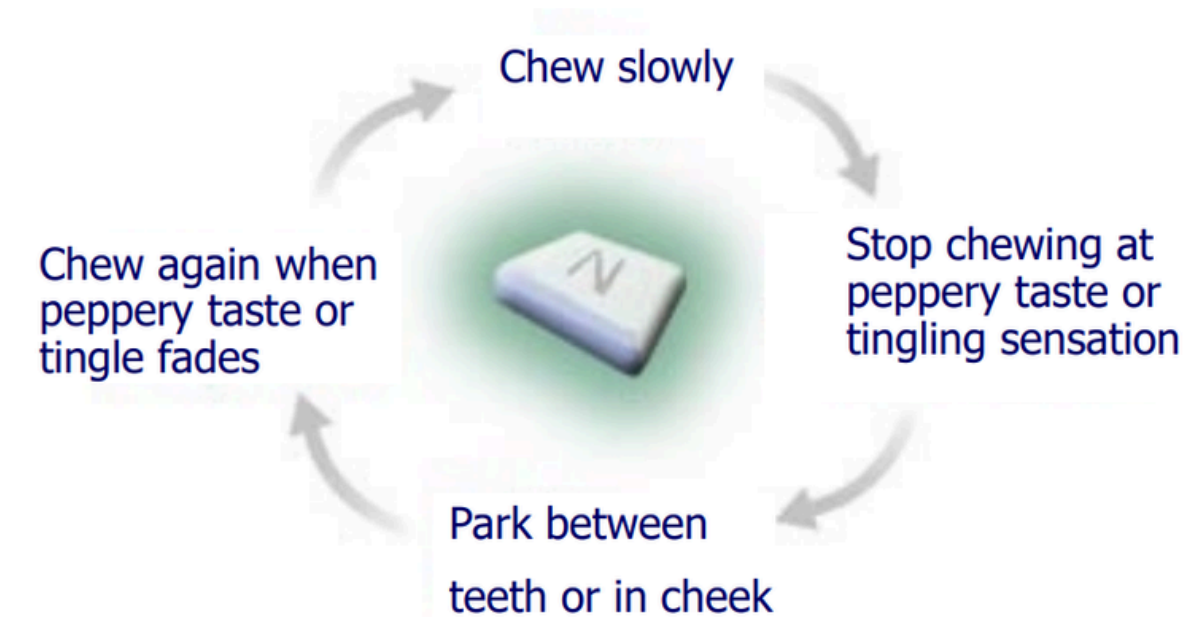


To view this video &
more, scan the QR code:



Nicotine Replacement - Gum/Lozenges

- Step down instructions for gum/lozenges:
 - **Step 1:** one piece of gum or lozenge every 1 – 2 hours for weeks 1 – 6
 - **Step 2:** one piece of gum or lozenge every 2 – 4 hours for weeks 7 – 9
 - **Step 3:** one piece of gum or lozenge every 4 – 8 hours for weeks 10 – 12
- **Gum:** Repeat "Chew and Park" method until no tingle left from gum
 - Alternate different sides of mouth for approximately 25 minutes
- **Lozenges:** Place between gums and cheek
 - Will dissolve in mouth within approximately 10 – 12 minutes
- **Both** nicotine gum and lozenges work great in combination with the nicotine patches for high craving times



How to Use Nicotine Gum



To view this video & more, scan the QR code:



How to Use Nicotine Lozenges



To view this video & more, scan the QR code:



Electronic Nicotine Delivery Systems (ENDS): To Vape or Not to Vape?

Electronic Nicotine Delivery Systems (ENDS): To Vape or Not to Vape?

- **Evidence suggests ENDS are less harmful than traditional, combustible cigarettes, but not harmless**
- **Research states:**
 - Presence of toxic substances (i.e., fine/ultrafine particles, cytotoxicity, various metals, TSNAs, and carbonyls), but lower levels than cigarettes
 - Dual use of ENDS & combustible cigarettes is common & more problematic than either alone
 - Long term health consequence of e-cigarette use is unknown, including as relates to lung diseases

**Use of ENDS should not be encouraged as a first line cessation method
as it is not FDA approved**



**1st Generation
- Cigalike**



**2nd Generation- Tank
System**

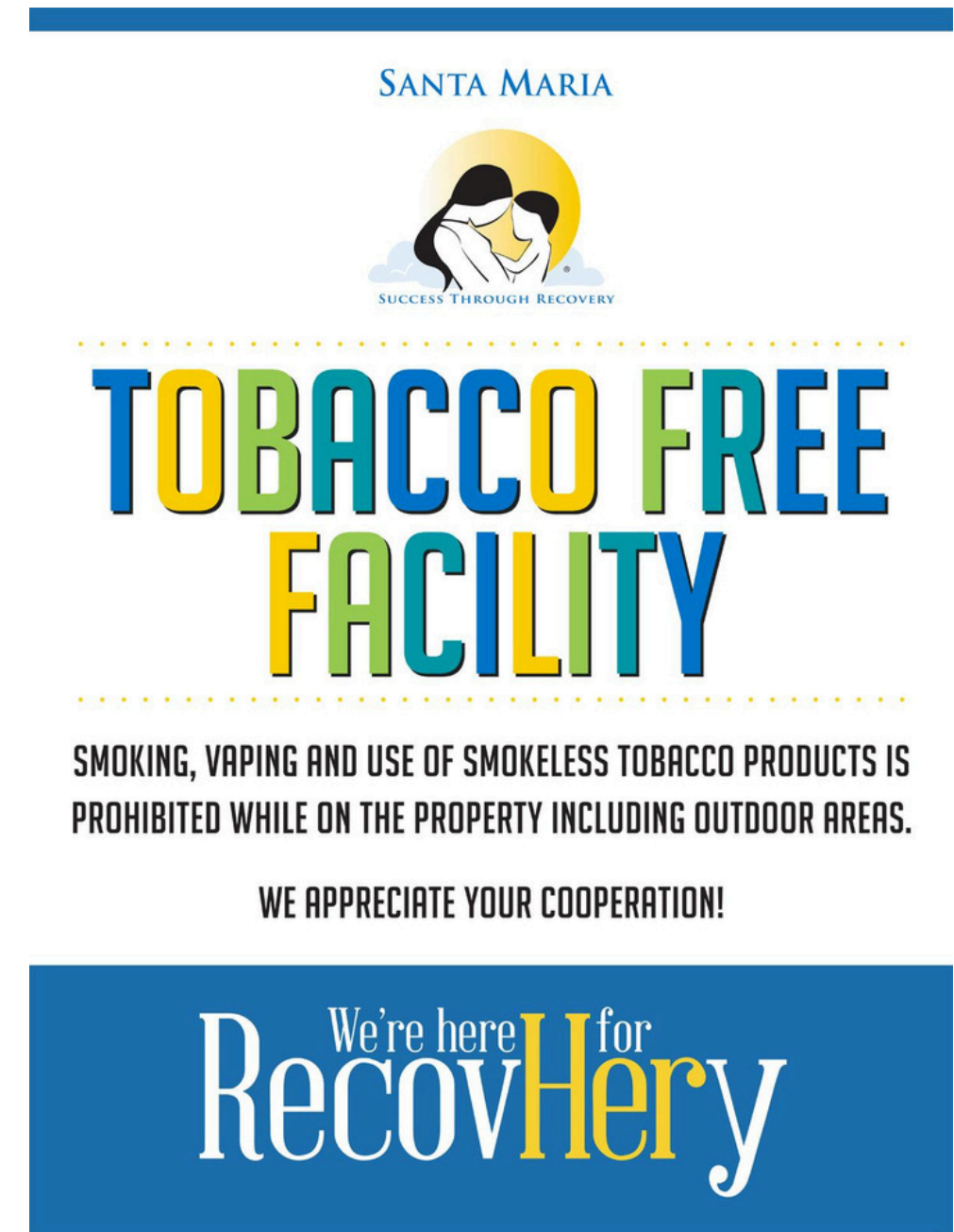


Tobacco-Free Policy Overview



Engaging Tobacco Users on Tobacco-Free workplace

1. Significantly reduces exposure to secondhand smoke
2. Increases in quit attempts and decreases number of cigarettes smoked per day
3. Benefits clients, staff, stakeholders, and community
4. Increases effectiveness of medications
5. Promotes abstinence from other substances, lowers relapse rates
6. Lowers health costs
7. Reduces sick days of former smokers and their families



Engaging Tobacco Users on Tobacco-free Facility



Thank You For Your Cooperation



- **Polite and Respectful:** Be empathetic & understanding
- **Listen to them:** Hear what they have to say
- **Educate:** Share information about the policy and why it is in place, inform them about cessation services, answer their questions
- **Be non-judgmental:** Don't make assumptions or criticize/blame people, be comfortable with yourself

Resources

Telephone Quitlines: Staffed by counselors who provide helpful information, advice, and support.

- **1-800-QUIT-NOW (1-800-784-8669)** English
- **1-800-DEJEO-YA (1-855-335-3569)** Spanish
1-800-332-8615 (for the hearing-impaired)

Quitline services and hours vary by state.

- **1-877-44U-QUIT (1-877-448-7848)** – National Cancer Institute Quitline provides information on how to quit (in both English and Spanish). Services are available Monday through Friday, 8:00 a.m. to 8:00 p.m. (Eastern).
- **1-877-YES-QUIT** – Has phone and online options with web-based programs.
(www.quitnow.net/mve/quitnow?qnclient=texas). Click on the **Refer A Patient** in the upper right-hand corner.
- **1-855-QUIT-VET (1-855-784-8838)** – Quitline for veterans receiving health care through the U.S. Department of Veterans Affairs (VA). Monday through Friday, 8:00 a.m. to 10:00 p.m. (Eastern). The quitline is closed on Federal holidays
- CDC/NCI Smoking Quitlines:
 - **1-855-335-3569 (Spanish)**
 - **1-800-383-8917 (Chinese)**
 - **1-800-556-5564 (Korean)**
 - **1-800-778-8440 (Vietnamese)**

Texas Specific Resources

www.map.naquitline.org/profile.aspx?stateid=tx – Resources specific to the state of TX

Quitline: Texas Tobacco Quitline

Began Operations: September 2001
Website: <https://www.yesquit.org/>

Standard Hours of Operation

Monday: 12:00 AM - 11:59 PM
Tuesday: 12:00 AM - 11:59 PM
Wednesday: 12:00 AM - 11:59 PM
Thursday: 12:00 AM - 11:59 PM
Friday: 12:00 AM - 11:59 PM
Saturday: 12:00 AM - 11:59 PM
Sunday: 12:00 AM - 11:59 PM
Closed on: Closed Independence day: 11:59 pm-7/3-4:00 am 7/5,
Thanksgiving: 11:59-11/22-4:00 am 12/26, Christmas: Noon 12/24-4:00 am 12/26 and New Year's: 3:00 pm -12/31-4:00 am 1/1

Telephone Numbers

Line	Phone Number	Language/Subject
1	(877) 937-7848	English

Supported Languages

Counseling offered in: English, Spanish
Third-party counseling: English, Spanish, Mandarin, Cantonese, Korean, Vietnamese, French, Russian, AT&T services with translation in over 140 languages
Deaf/Hard of hearing: Direct TTY machine

**ENROLL IN ONLINE
CESSATION SERVICES**

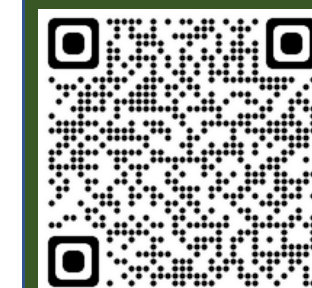


Scan the QR code to access website

Texas Specific Resources – FREE Professional Cessation Counseling

- The Texas Department of State Health Services provides the Texas Quitline and combines an online and phone counseling program. It also has an array of tools and services to help people live tobacco free. Counseling services are available in over 100 languages. Professional cessation counselors receive 200 hours of training to personalize quit advice and to work with individuals based on lifestyle and specific needs.
- Qualifying tobacco users can get up to 5 counseling sessions
- Qualifying tobacco users can get 8 weeks of NRT
- For help connecting patients to the Texas Quitline services call (512) 232-4166
- <https://www.takingtexastobaccofree.com/>

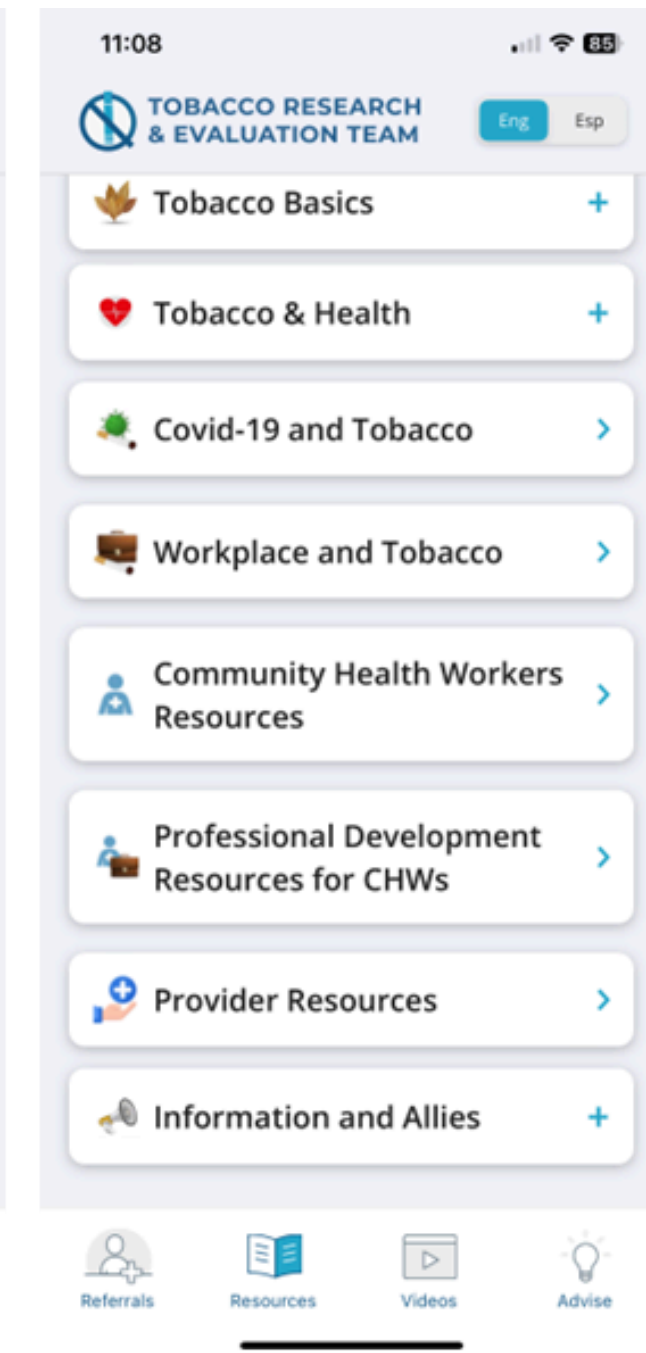
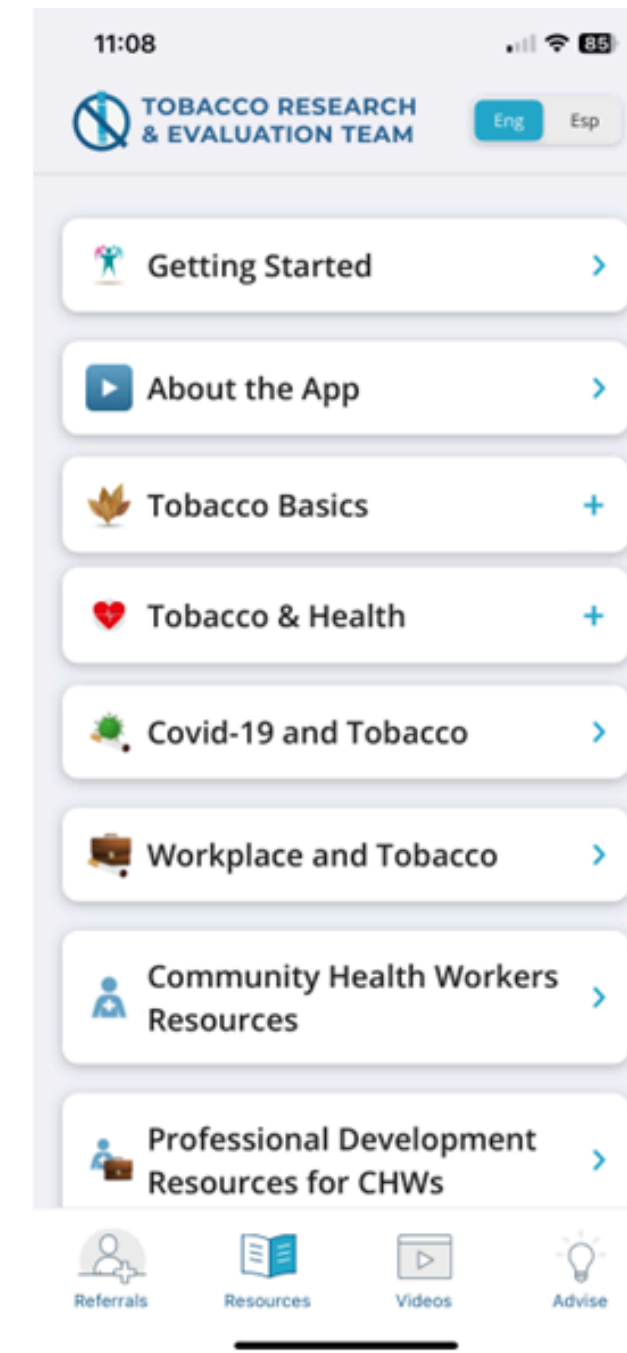
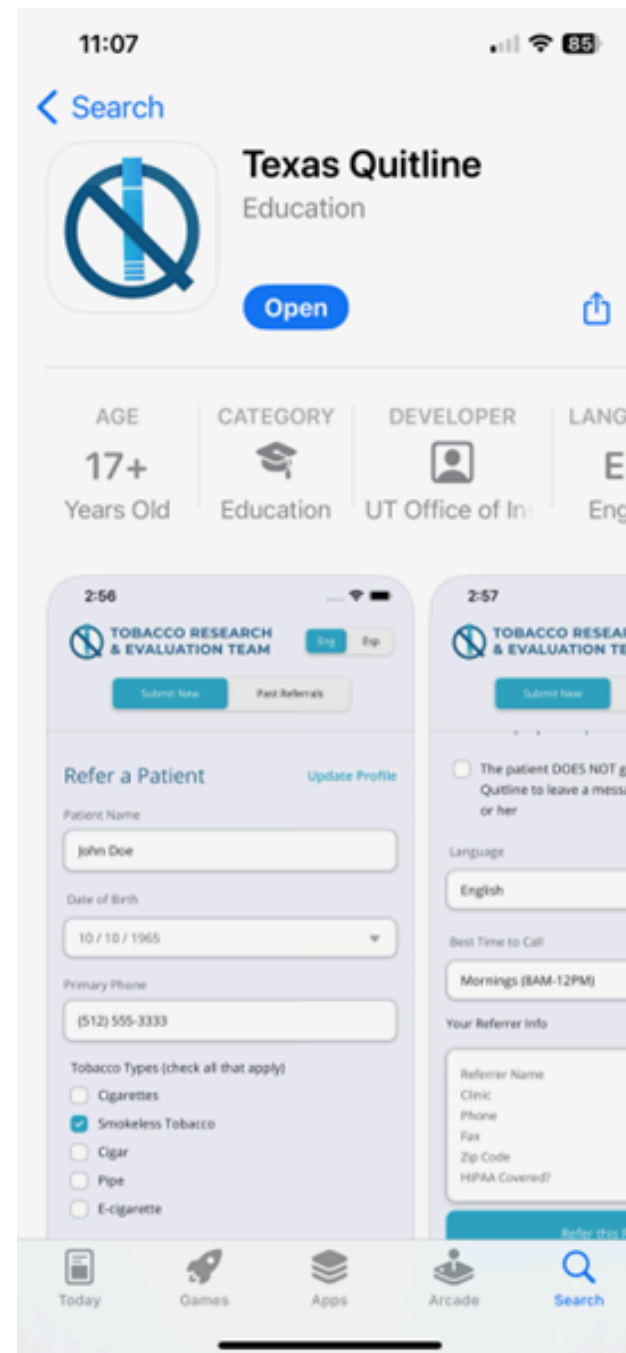
YES QUIT
877-YES-QUIT YESQUIT.ORG



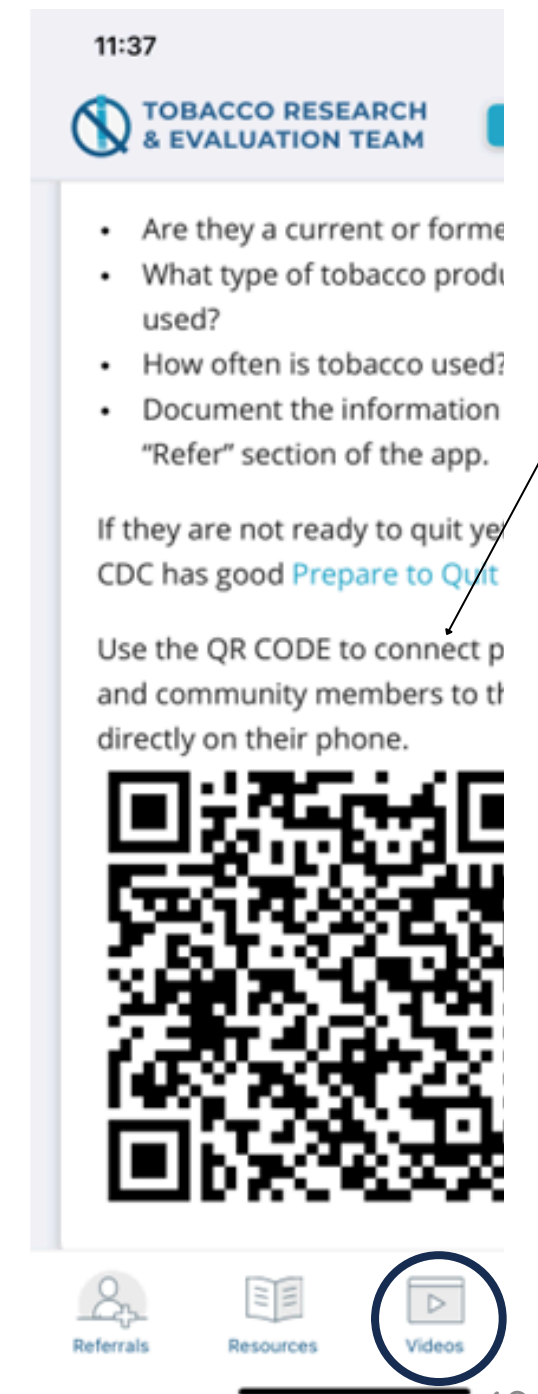
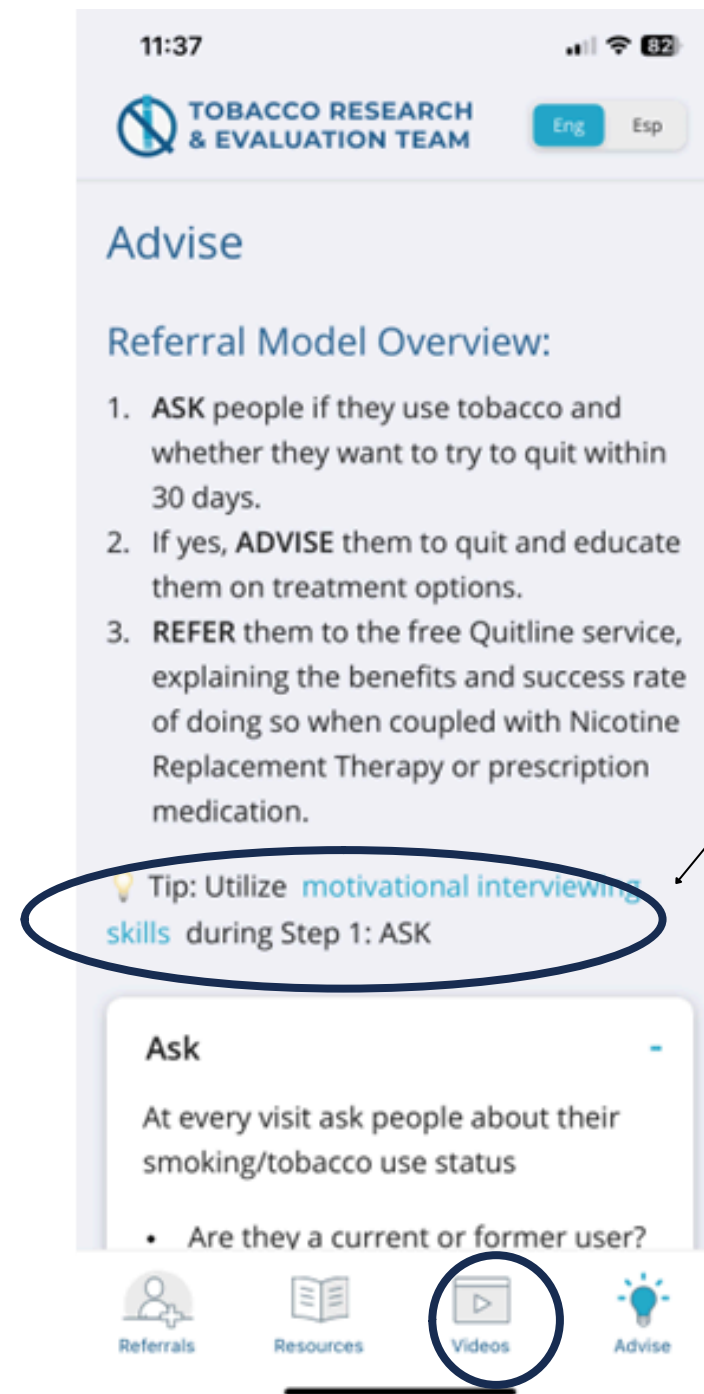
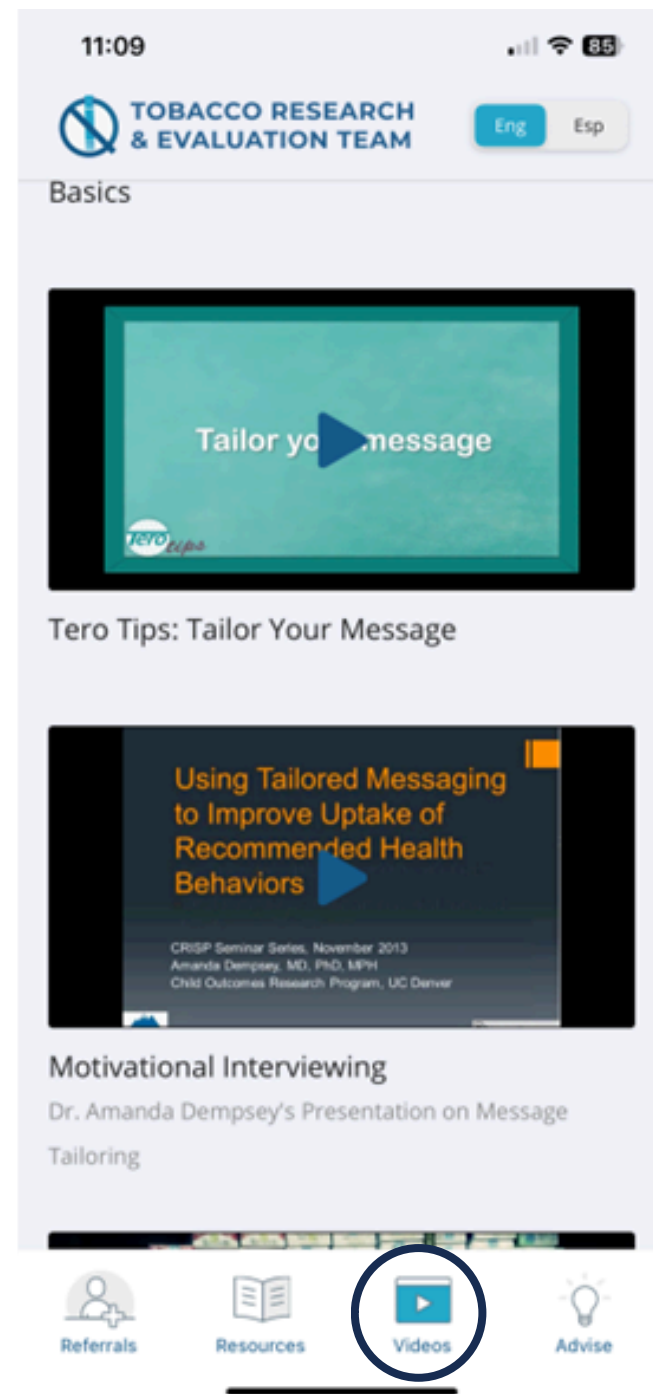
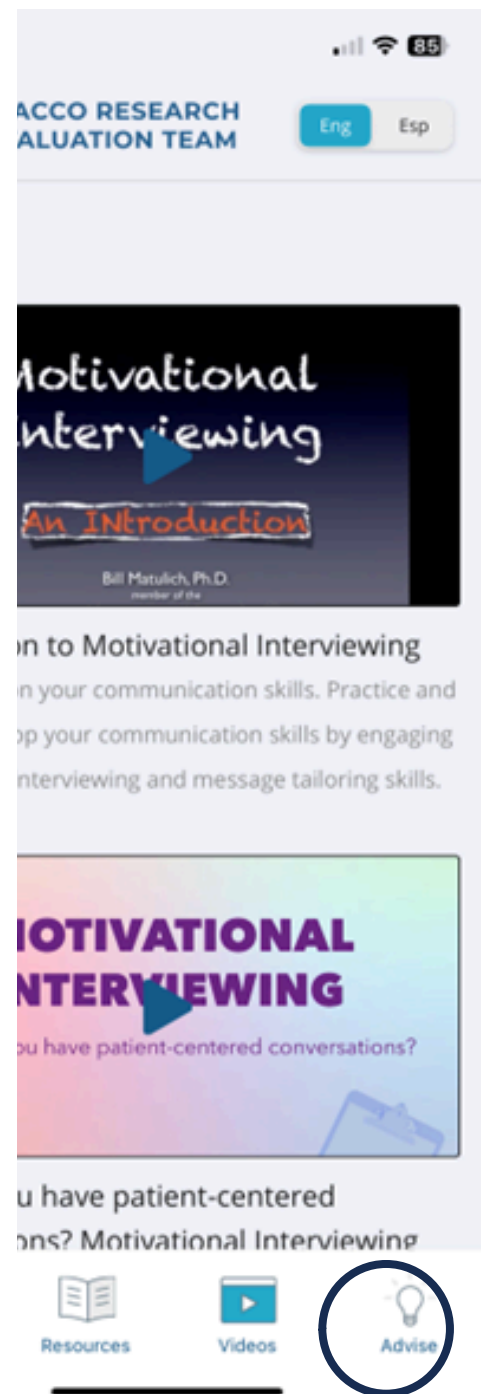
Scan the QR code
to access website

Resources for Providers

- Go to app store
- Search "Texas Quitline"
- Download app (see image)



Resources for Providers



Resources – Tools and Apps

- Mobile text messaging services:
 - **SmokefreeTXT** (www.smokefree.gov/tools-tips/text-programs/quit-for-good/smokefreetxt) – Provides 24/7 encouragement, advice and tips to help you quit and stay quit.
 - **SmokefreeMom** (www.women.smokefree.gov/tools-tips-women/text-programs/smokefreemom) – Provides 24/7 encouragement, advice and tips to help pregnant women quit and stay quit.
 - **SmokefreeVET** (<https://veterans.smokefree.gov>) – Provides 24/7 encouragement, advice and tips to help veterans quit and stay quit.
- Smartphone apps:
 - **Smokefree.gov: QuitGuide** (www.smokefree.gov/tools-tips/apps/quitguide) – Free app that provides insight into what to expect when you quit.
 - **Smokefree.gov: QuitSTART** (www.smokefree.gov/tools-tips/apps/quitstart) – Free app that provides tips, inspiration, and challenges to help you quit and live a healthier life.
- Other tools available online
 - **Smokefree.gov: Free Resources to Help you Quit** (www.smokefree.gov/tools-tips/get-extra-help/free-resources) – Get free tools, guides, and resources designed to help you quit and stay quit.

Resources – Tools and Apps

- **SmokefreeTXT en español: (www.espanol.smokefree.gov/consejos-herramientas/smokefreeTXT)**

¿Para quién es este programa? Para adultos en Estados Unidos que hablan español y que están listos para dejar de fumar. Este programa es ofrecido por Smokefree.gov del Instituto Nacional del Cáncer.

¿Cómo funciona? Inscribise con el siguiente formulario o envíe un mensaje de texto con la palabra ESP al 47848. Recibirá mensajes de texto diarios para apoyarlo a dejar de fumar desde el código corto 47848 (pueden aplicar tarifas de mensajes y datos). El programa dura de 6 a 8 semanas. Puede optar por no participar en cualquier momento enviando el mensaje de texto **PARAR**.

- **SmokefreeVET en español: (www.veterans.smokefree.gov/tools-tips-vet/smokefreevetesp)**

¿Para quién es este programa? Para adultos en Estados Unidos que hablan español y que están listos para dejar de fumar. Este programa es ofrecido por Smokefree.gov del Instituto Nacional del Cáncer y El Departamento de Asuntos de Veteranos.

¿Cómo funciona? Inscribise con el siguiente formulario o envíe un mensaje de texto con la palabra VETESP al 47848.

Recibirá mensajes de texto diarios para apoyarlo a dejar de fumar desde el código corto 47848 (pueden aplicar tarifas de mensajes y datos). El programa dura de 6 a 8 semanas. Puede optar por no participar en cualquier momento enviando el mensaje de texto **PARAR**.

Resources – Websites

- **Smokefree.gov** – The National Cancer Institute provides free information and professional help to people trying to quit smoking. This site is also available in *Spanish* (www.espanol.smokefree.gov/)
- **Smokefree Teen** (www.teen.smokefree.gov/)
- **Smokefree Women** (www.women.smokefree.gov)
- **Smokefree Vet** (www.veterans.smokefree.gov)
- **You Can Quit 2** (www.ycq2.org) – Sponsored by the U.S. Department of Defense, helps U.S. service members and veterans quit tobacco
- **BeTobaccoFree.gov** – U.S. Department of Health and Human Services provides free information and tools for quitting
- **Become an Ex** (www.becomeanex.org) – Helps you "re-learn your life without cigarettes" and develop a free personalized quit plan
- **CDC: Smoking and Tobacco Use** (www.cdc.gov/tobacco/quit_smoking) – Provides quitting advice, the latest research and news on tobacco use, publications to order, and an array of useful links. This site is also available in *Spanish* (www.cdc.gov/spanish/vidasaludable/)
- **Truth Initiative Resources** (www.truthinitiative.org/research-resources) – In partnership with the Schroder Institute, this site provides the latest facts and analyses on the most important issues in tobacco and substance use

Resources – Smokeless Tobacco

- **National Institutes of Health: Smokeless Tobacco: A Guide for Quitting** (<https://www.nidcr.nih.gov/health-info>) – Booklet includes reasons to quit, addresses myths about smokeless tobacco, and helps you develop a plan for quitting
- **American Cancer Society: Guide to Quitting Smokeless Tobacco** (<https://www.cancer.org/healthy/stay-away-from-tobacco/guide-quit-smoking/other-ways-to-quit-smoking.html>) – Provides information about smokeless tobacco, reasons for quitting, and information to help you quit
- **American Academy of Family Physicians: Smokeless Tobacco: Tips on How to Stop** (<https://familydoctor.org/smokeless-tobacco-tips-on-how-to-stop/>) – Provides brief tips to help you quit smokeless tobacco
- **National Cancer Institute: SmokefreeVet** (<https://veterans.smokefree.gov/smokeless-tobacco/how-to-quit>) – Provides resources to help adult veterans quit smokeless tobacco
- **University of Michigan: Quitting Smokeless Tobacco** (<https://www.rogelcancercenter.org/breaking-habits-beating-us/smokeless-tobacco>) – Provides information on the health consequences of smokeless tobacco and resources to help quit smokeless tobacco
- **Mayo Clinic: Chewing Tobacco: Not a Safe Product** (<https://www.mayoclinic.org/healthy-lifestyle/quit-smoking/in-depth/chewing-tobacco/art-20047428>) – Provides information on the facts about chewing tobacco and other forms of smokeless tobacco



Videos on Nicotine Replacement Therapy and Other Resources:
www.takingtexastobaccofree.com/videos

Provider Resources/Tools (Badge Cards, NRT Guidelines, etc.):
www.takingtexastobaccofree.com/provider-materials



Printable Materials:
<https://www.takingtexastobaccofree.com/lgbt-resources>

Questions?





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Thank you!

