The National Behavioral Health Network (NBHN) for Tobacco and Cancer Control’s 2020 State Tobacco Control Community of Practice (CoP) was offered in partnership and with support from the Centers for Disease Control and Prevention’s Office on Smoking and Health (OSH). Additional partners that served as faculty for the CoP included University of California San Francisco’s Smoking Cessation Leadership Center (SCLC), the University of Colorado’s Behavioral Health and Wellness Program (BHWP), and the Michigan Public Health Institute (MPHI). To best capture the CoP’s overall impact in assisting states around practice changes related to expanding their tobacco control activities to individuals with behavioral health conditions, a mixed methods evaluation was conducted by MPHI using multiple data sources. This report presents the major findings of the CoP evaluation.

**Goal:** initiate and/or enhance state’s tobacco control efforts for individuals with behavioral health conditions.

### States Participating in the CoP

- **6 months**
  - January - June 2020
- **14 states** engaged in the CoP
- **6 out of 10** DHHS regions represented

### Project Activities

- **Orientation Kick-off Webinar**
- **In-person training and action planning meeting**
- **Group Affinity Call, Coaching Calls, Monthly Peer Exchange & Report Out, Extended TTA**
- **Brag & Borrow Webinar Part 1 & 2**
- **Dec 2019**
  - Pre-CoP Survey
- **Jan 2020**
  - Initial Action Plan, Data Worksheet
- **Feb 2020**
  - Observation
- **March 2020**
  - Action Plan; Final Progress Report; PM Worksheet
- **April 2020**
  - Wrap Up Interview, Post-CoP Survey

### Data Sources Used for Evaluation

The timeline above of evaluation data collection activities aligned with the CoP activities. In order to build knowledge and skills to initiate and/or enhance states tobacco control efforts, CoP state teams were provided with tailored training and technical assistance (TTA) including:

- In-person training and action planning meeting
- TA in developing an action plan to address tobacco and behavioral health
- Tobacco control content webinars
- Monthly peer engagement virtual meet ups
- A 2-part ‘Brag & Borrow’ webinar series
- Individual monthly coaching calls with national experts
State teams shared expected, unanticipated outcomes and key learnings they believe will support long-term positive impact. Key themes that emerged as outcomes of this CoP included:

- **Increased inter-departmental collaborations** and commitment to supporting tobacco control strategies for individuals with behavioral health conditions.
- **Increased confidence implementing tobacco control strategies** that focus on individuals with behavioral health conditions.
- **Identification and selection of evidence-based strategies** for the next CDC tobacco control program grant cycle.

8 state teams reported the CoP contributed to their ability to identify and select evidence-based tobacco control strategies for their program as an outcome. Aspects of the CoP that were especially noted as helpful in this area included:

- Utilizing examples of assessments from other states that NBHN was able to collate and share.
- Understanding the process of conducting tobacco-free policy scans from peers and examples from past CoP participating state teams.
- Gaining commitment from partners.

Prior to and following the CoP, state teams were asked a series of questions about the skills and capacities they had, and their level of confidence to implement each skill or capacity. The chart below shows the overall increase in confidence to implement each skill and capacity before and after participating in the CoP. When comparing confidence ratings attributed to each statement pre- and post-CoP, state teams collectively demonstrated greater confidence across all five skills and capacities.

**How confident are you that your State team can...**

<table>
<thead>
<tr>
<th>Skill</th>
<th>Pre-CoP</th>
<th>Post-CoP</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify, prioritize, and customize relevant programs and services for behavioral health populations</td>
<td>67</td>
<td>82</td>
<td>+15</td>
</tr>
<tr>
<td>Collect and use data to inform tobacco control strategies for behavioral health populations</td>
<td>72</td>
<td>83</td>
<td>+11</td>
</tr>
<tr>
<td>Leverage resources to increase reach and impact of tobacco prevention and control efforts for behavioral health populations</td>
<td>68</td>
<td>79</td>
<td>+11</td>
</tr>
<tr>
<td>Establish and/or maintain key partnerships within and across sectors to impact tobacco control for behavioral health populations</td>
<td>73</td>
<td>83</td>
<td>+10</td>
</tr>
<tr>
<td>Increase your reach to behavioral health populations with evidence-based tobacco control interventions</td>
<td>74</td>
<td>83</td>
<td>+9</td>
</tr>
</tbody>
</table>

Mean Rating 0 (min.) to 100 (max.)

“... We had statewide membership association for community behavioral health organizations as a target and have tried to engage before and were unsuccessful... having this (CoP) support to approach them again, and "hey you know we are working on this big Community of Practice, and these are the people involved and we’d love the support and she said yes right away. It was really our involvement in this that got us in the door this time.”

- Selina McGlauflin, Tobacco Prevention and Control Professional/Education Specialist (ME)
KEY FINDINGS & RECOMMENDATIONS

Among the various components of the CoP, state teams found the following activities to be most helpful:

- **In-person kick-off meeting**
  The meeting promoted commitment and sparked enthusiasm

- **Focused, ongoing action planning**
  Action planning made their efforts accountable and feel attainable

- **Peer-to-peer learning networking opportunities**
  Provided the opportunity to learn, celebrate, and be inspired

We always have competing priorities when we’re back in the state. Really nice to have that time set aside to just spend with each other.”
- Post CoP Interview

State teams shared that they would really like an opportunity to present, share, and learn from fellow CoP state teams on the long-term outcomes of their strategies sometime in the future.

**Over half of the CoP teams addressed work in these areas:**

- Best practices for tobacco control within community behavioral health organizations
- Enhanced Quitline services to impact individuals with behavioral health conditions
- Systems change to impact individuals with behavioral health conditions
- Removing barriers for practitioners working on tobacco control within behavioral health settings
- Policy change to impact individuals with behavioral health conditions

For future consideration, state teams suggested strategies to enhance the experience and promote future impact, including:

- **Sustaining communication channels for this CoP cohort**
- **Creation of an interactive resource portal**
- **Opportunities for Showcasing Long-Term Outcomes**

Although the 2020 State Tobacco CoP was greatly affected by COVID-19, and required states to adjust their priorities, state teams said the compassionate and persistent support from NBHN allowed them to re-group, refocus, and maintain their commitment to addressing tobacco control and prevention among populations with behavioral health conditions.

“The fact that we can say that we were part of the Community of Practice with 13 other states and the National Behavioral Health Network; to hang our hats on that and brag about it to our internal partners... to say ‘this is actually a very big issue that spans the entire country, and we are part of something much bigger to move this work forward’ was valuable.”
- Nick Fradkin, Tobacco Treatment Consultant (WA)