FIRST BREATH
Addressing Tobacco and Other Substances During Pregnancy and Beyond
Moranda Medina López, TTS
Community Outreach Coordinator & Bilingual Maternal Health Educator
Wisconsin Women’s Health Foundation

First Breath is...
Wisconsin’s evidence-based tobacco treatment program for pregnant, postpartum, and caregiving individuals.

Today’s Agenda
- Why First Breath?
- Brief Program Overview
- How First Breath Works
- Co/Poly-Substance Use
- Next Steps
- Questions/Discussion
Why First Breath?

Self-Reporting and Cultural Considerations

10% of pregnant people reported tobacco in Wisconsin in 2018
Tobacco Use as a Health Inequity

2018 Tobacco use during pregnancy in Wisconsin by select demographics.

Tobacco Use as a Health Inequity

Birth Outcomes and IMR in WI, 2018

Low Birth Weight (<2,500 g) and Preterm Birth (<37 weeks):

- Smoker: 10.5%
- Non-Smoker: 9.0%

Infant Mortality Per 1,000 live births:

- Smoker: 4.0
- Non-Smoker: 2.5

Tobacco-Saturated Social Networks

In Wisconsin, more than half of pregnant people who smoke live with another smoker.

"It's so hard to quit when everyone I know smokes" - Participant Quote
One of the LEADING preventable causes of poor birth outcomes

First Breath
An Overview

First Breath Programming

- Statewide program that helps pregnant, postpartum and caregiving individuals become tobacco-free
- Operated by Wisconsin Women’s Health Foundation, statewide non-profit organization founded in 1997.
- Reached 23,000+ pregnant and postpartum tobacco users since 2001
20 Years in the Making

Evidence-based program
- Treating Tobacco Use & Dependence Clinical Practice Guidelines
- 3 Randomized Controlled Trials: STE and ICTR
- Wisconsin Institute for Clinical and Translational Research
- Ongoing data monitoring and analysis

Participant Centered Programming
- Focus Groups & Participant Advisory Groups
- Satisfaction Surveys

Participants who engage in the Quit Coaching intervention are three times as likely to be smoke-free at six months postpartum than usual care (usual care meaning - brief intervention as part of existing prenatal care)

First Breath Key Players

- **First Breath Providers** identify tobacco users and use the Ask-Advise-Refer model
- **First Breath Quit Coaches** provide judgement-free, evidence-based, tobacco treatment services
- **First Breath Participant Advisory Group** members guide programming decisions

How First Breath Works
ASK, ADVISE, & REFER
Quit Coaching Timeline

Monthly contacts with school-based Quit Coach from enrollment to 6 months postpartum

Pregnancy 1st Trimester 2nd Trimester 3rd Trimester Postpartum

Quit coaching support

Home visit

Data Collection

Eob break test

Quick exit (per visit)

2020 Results

QUIT COACHING OUTCOMES

Quit Coaching Participants (n=458)

2,046 phone counselling sessions

738 in-person counselling sessions

Participant Quit Rates:

- 1 month postpartum (n=258)
  - 30% smoke free
  - 25% quit down
- 6 months postpartum (n=211)
  - 20% smoke free
  - 20% quit down
- 1 year postpartum (n=144)
  - 10% smoke free
  - 10% quit down
- 3 years postpartum (n=80)
  - 5% smoke free
  - 5% quit down

7% of families achieved smoke-free homes

44% achieved peer infant exposure to tobacco smoke

Long-Term Engagement

Participant Focused Programming through:

- Annual check-ins through 5 years postpartum
- Annual Participant Advisory Groups
- Encouragement to Share Your Story
Co-Use in Perinatal Populations

Background

• Co/poly-use = “concurrent or simultaneous use of two or more substances”
• Negative impact on health is compounded compared to single use
  • Synergistic effect (1+1 = 3)
• Implications well known, particularly for co-use with tobacco: stillbirth, preterm birth, and low birth weight

Prevalence & Need
National Data on Co-Use (NSDUH 2006-2014)

• Substance use among pregnant people
• Of pregnant people who used substances, most common = combination of tobacco, alcohol, and cannabis
• Determinants of co-use
  • Younger age (18-25 yr)
  • Lower income
  • White
  • Unmarried
  • Public insurance

Co-Use, 5.10%
Single Use, 18.70%
No Use, 76.20%
Prevalence & Need
First Breath Data = Similar Data

- Of those who reported co-use:
  - Tobacco & Illicit Substance, 9.50%
  - Tobacco & Cannabis, 9.50%
  - Tobacco, Alcohol, & Cannabis, 43%
  - Tobacco & Alcohol, 32%

- Demographics of those who reported co-user:
  - Majority white, very low income, low educational attainment, Medicaid recipients, unemployed, married*

- * Relationship status was different than national data

First Breath Substance Use Expansion 2020-2021 Pilot Development

- Developed over the course of 5 years
- Planning included feedback & direction from
  - Individuals with lived experience
    - Ongoing testing
    - Development
  - Approval of all program components
  - Healthcare Professionals as Subject Matter “Experts”

"If I would've had the knowledge that I have now that I potentially could have gotten from a program...it would have completely changed my outcome."

- Advisory Group Member

First Breath Substance Use Expansion 2020-2021 Pilot Intervention

- Screening, Education, and Early Intervention Program
- Services
  - Screening, education, and early intervention throughout perinatal period
  - Text message campaign education and support
  - Referral and follow-up: assessment, treatment, and other health and social needs
Next Steps

First Breath Substance Use Expansion
Stay tuned!
• Pilot Results
• Formal launch of program expansion in 2022 (Funding Pending)

Refer to First Breath
• Become a First Breath Provider
• Implement the Ask, Advise, Refer Model
• Offer clients direct referrals to First Breath
• Promote First Breath to clients that are uncertain
Partner with First Breath

- Quarterly e-Newsletter
- Email miloper@wwhf.org
- Support First Breath
  - Promote
  - Connect

FIRST BREATH

Questions?
Comments/Suggestions

Quotes From Participants

"The meetings were very helpful. I found they were doing the right thing for my child. They helped me listen to her feelings and talk about them. It helped me understand why she was still upset a few days after the accident and why she had nightmares. It was really hard for me. I just want to help her get out of the way of healing." - First Breath Participant
Quotes From Participants

IF AND WHEN YOU START TO QUIT. PLEASE GIVE IT A TRUE CHANCE. KEEP AT IT. IT WILL GET EASIER.

I have noticed I can breathe better. I have more energy and my clothes don’t shrink. Ever. First Breath.

Connect With Us

Moranda Medina López, TTS, Community Outreach Coordinator
Bilingual Maternal Health Educator
414-902-4701

Lauren Luber
MCH Program Operations Manager
608-251-1675, Ext. 122