

The UMass Worcester Prevention Research Center, located at UMass Medical School in Worcester, MA, is a member of the CDC's Prevention Research Center (PRC) network. Our work promotes health and prevents disease and disability through: real-world community engaged research, evidence-based practice, and education.

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Overview

In the United States, 16.8% of adults smoke, contributing to 480,000 deaths per year. Despite strong evidence that tobacco-treatment methods are effective in helping users quit using tobacco, few users actually use these methods. Treatment is slowly being incorporated into clinical care, and screening and quitting assistance has improved. The Affordable Care Act has required insurance coverage for such services, thus increasing the demand for them. Since 1999, The University of Massachusetts Medical School's Center for Tobacco Treatment Research and Training (CTTRT) has offered the UMass Tobacco Treatment Specialist training (UMass TTS). Recognizing the need for more trained tobacco treatment specialists, it created an additional program to train others to deliver the training, called the Train-the-Trainer in Tobacco Treatment (T4) program. Both training models are included in the program's accreditation by the Council for Tobacco Treatment Training Programs. Graduates of both models are eligible to apply for the National Certificate in Tobacco Treatment Practice, a new national recognition co-sponsored by the Association for the Treatment of Tobacco Use and Dependence and NAADAC, the Association for Addiction Professionals. The purpose of this study was to test if the T4 model could extend the reach of the On-site UMass TTS Training Program and if its trainees could offer the same quality of training to participants.

Main Questions

- Could a well-designed train-the-trainer model for tobacco treatment specialists make the evidence-based program accessible to more people?
- Is the training delivered by the individuals trained in the T4 model of similar quality to that delivered by the On-site UMass TTS Training program?

Study

As an effort to expand the reach of the UMass TTS Training program, the CTTRT developed a program to provide the participants with the information and skills required to be able to coordinate and deliver the UMass TTS Training program in a standardized manner. This study compared the reach and quality of training provided by the On-site UMass TTS training program with the training provided by individuals trained by the Train-the-Trainer in Tobacco Treatment (T4) program. Tobacco treatment specialists trained by both methods completed the same online survey of demographic information including age range, education, race, gender and work setting; course evaluations; and content exams.

The Bottom Line

The Trainer-the-Trainer in Tobacco Treatment (T4) program has significantly increased the quantity of UMass-trained TTSs in the United States and beyond. There were no significant differences in participant knowledge as measured by exams. In addition, participants in both training models reported an increase in their ability to deliver tobacco dependence treatment.

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Source

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Spotlight on Results

- Fifty-three Trainers were certified during 2014–2017 and conducted 26 TTS trainings with 351 participants, thus extending the reach of the UMass TTS Training program.
- There were no significant differences in participant mean exam scores [On-site = 86.33 (SD = 7.83); Trainer-led = 86.15 (SD = 8.47)].
- Similar percentage of participants obtained a passing score on the exam (On-site 94.4%, Trainer-led 94.0%).
- There were no significant differences in increased self-efficacy in delivering effective tobacco-treatment services [On-site = 2.92, Trainer-led = 2.93; $p = .52$ (3-point Likert scale, 1 = not at all, 3 = a great deal)] or in overall satisfaction with the training [On-site = 3.84; Trainer-led = 3.81; $p = .072$ (4-point Likert scale, 1 = very dissatisfied, 4 = very satisfied)].

Call for Action

The prevalence of efficient and local TTS training programs and specialists would increase the quantity of available tobacco dependence services, consequently reducing the frequency of tobacco-related deaths in the United States per year.