Developing a harm-reduction approach to protect children from second-hand smoke: A pilot study with parents and practitioners

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Working with four Early Years Centres (EYCs) in disadvantaged areas of Edinburgh, and pharmacies in their locality.

"Many households face complex practical, social, cultural and personal issues in creating and maintaining smoke free homes (SFHs), which vary within and between contexts...Programmes should consider harnessing the steps already made towards SFHs and valuing the motivation of households to introduce SFHs rules. This recognises that the vast majority of households have some knowledge and make some concessions towards having a SFH, for example, not smoking around a newborn, not smoking in children's bedrooms, and are doing the best they can." (Passey et al, 2016)

There are stark differences in children's second-hand smoke exposure levels by deprivation.

Our pilot study aims to address this disparity.

Children in the most deprived areas were most likely to be exposed to second hand smoke in the home



(Scottish Health Survey data, 2016)

The 2014 Harm Reduction addendum by Health Scotland recommends that "tobacco control and smoking cessation services should consider offering and providing NRT to smokers for temporary abstinence to avoid exposing others to second-hand smoke, when smoking outside may be impractical/impossible. In cases where NRT products are not provided directly to the smoker, they should be signposted to pharmacies that sell (and provide advice on how to use) NRT products approved for this purpose."

Participants and study design

Stage 1

Individual interviews with 17 mothers of children aged under 5 recruited from four Early Years Centres in three Edinburgh communities

Stage 2

Individual and focus group interviews with health and social care practitioners e.g. GPs, pharmacists, health visitors, early years practitioners (15) and policy and practice leads with a second-hand smoke remit (5)

Stage 3

Pilot provision of NRT for home and dual use for 20 parents in two disadvantaged Edinburgh communities

Step 1:	Parent & Harm reduction advisor meet in the Early
·	Years Centre to discuss NRT options

Step 2: Parent takes NRT recommendation letter to designated local pharmacy

Step 3: Pharmacy assess, prescribe and dispense NRT

Step 4: Parent attends pharmacy weekly for up to 8 weeks to obtain ongoing NRT supply

Step 5: Researchers conduct interviews with parents, early years staff and pharmacy staff

Progress

Study has been extended until December 2017

13 parents have discussed NRT options with our Harm Reduction (Smoking Cessation) advisor

12 have taken their recommendation letter with NRT choice to the pharmacy

9 participants have finished their 8 week course and completed a qualitative interview about their experience

3 participants lost to follow up

8 Interviews conducted with EYC workers, pharmacy staff and wider team

Preliminary findings – Parents accounts

Positive outcomes reported:

- Smoke-free homes
- Reduced smoking consumption
- Quit smoking
- More time spent with children
- Saving money
- A changed mindset not being pressured to quit in this study was refreshing
- Parents exceeded their own expectations of change

Exceeding own and others expectations of behaviour change:

SA001WH: "I didn't think I could dae it. As soon as I came here and you were talking to me aboot it I wis like aye I'll try it but I dinnae think I'm going to succeed. See at the start I didnae have the willpower, I said I'll just stick to the fags. And then I gave it a try and I just didnae need my fags...so I bought a packet and it's still lasted me the whole two weeks. [...]"

Financial benefits:

SA002WH: "I actually went out and bought myself about four pairs of jeans because I actually had the money to. Because I needed new jeans, they were like threading in the middle of my legs so I was like right I'm going to go to [Inaudible 22.55] and buy new jeans and I actually had the leftover money to do that."

Cutting down and spending more time with the children:

D0006GR: "Instead of having to get up and down and go outside all the time I would use the spray."

Interviewer: Did you find if helpful at all?

D0006GR: "Yeah. I didn't feel like I was in and out of the living room constantly away from them [children] because I could just spray where I was sitting. [...]I went from 30 to 40 fags to 10 to 15."

H0005CR: "I smoked a lot but I can go three, four, five hours without having any cigarettes now."

Cutting down, health benefits and maintaining a smoke-free home:

SA001WH: "What I do is I used the wee white [inhalator] during the day in the house and then at night I'll go out for a fag."

Interviewer: "So you're not smoking in the home at all."

SA001WH: "No I'm not smoking in the house."

Interviewer: "That's pretty impressive."

SA001WH: "I feel better, I feel, I dinnae feel as, like when you wake up in the morning and you feel horrible I dinnae feel that bad any more I can actually get up in the morning without a struggle. So the wee stick[inhalator] is quite good. I would recommend it to anyone."

Preliminary findings – EYC and Pharmacy Staff

- Parents needed minimal to no support from EYC staff during the 8 week study
- Several parents changed NRT product during the 8 week study, finding that their initial choice of product didn't meet their needs
- Parents used less NRT overall than anticipated
- Both EYC and Pharmacy staff welcomed the study and could see the rationale in piloting this empowering approach
- Both sets of staff would welcome involvement in a bigger study to examine longer term outcomes

Next Steps

Disseminate the pilot findings to parents, practitioners, policymakers and academic audiences

Applying for funding for a larger study to explore these promising findings

Thank you. Any questions?