

## Level of teaching of tobacco control measures and cessation interventions in a nursing care institute of Northern India- A case study

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### Abstract

Nursing professionals are in a unique position to exert profound effect in reduction of tobacco use in its different forms including cessation interventions in people using them. The current case study was carried out to understand the level of inclusion of tobacco control education in nursing curriculum of a premier nursing care institute of North India and based on this the readiness of the nursing professionals passing from the institute to successfully deliver cessation interventions. This case study represents the level of inclusion and extent of teaching of tobacco control education in nursing curriculum in a premiere nursing care institute of Northern India. The nursing faculty and students were interviewed in a single session, individually in proper settings to understand the tobacco control education inclusion and integration in the nursing curriculum. They go for outreach to a local slum for active case finding and then refer them to the Drug Dependent De-addiction Centre (D.D.T.C). The tobacco control and cessation education is taught in lectures, clinical and practical settings. They indicated that teacher's awareness about tobacco control and easy availability of facilities like D.D.T.C. with high number of patients helps their skill development and competency. This study finding implies that smoking cessation training can be recommended for future nursing guidelines so that India becomes smoke free.

**Keywords:** Tobacco, Tobacco free nurses, Tobacco cessation programme

### Introduction

Nursing professionals constitute the highest number of health care professionals and have been commonly involved in the care of people who smoke and thus have an important role to play in a tobacco cessation programme.<sup>(1)</sup>

They also work in primary care settings where healthy people live and work (for example institutions, prisons and work places) as well as with people looking for help for health-related problems. They work with people of different age, cultural and social groups. They used to make home visits. They also look after them at times when patients are receptive to advice to quit tobacco products during hospitalization for cardiovascular morbidity.<sup>(2)</sup> Nursing professionals have opportunities to involve themselves with families of those who smoke and they can offer support to them for quitting tobacco products, so that their health can be improved as well as to prevent the other members of the families from ill effects of passive smoking.<sup>(3)</sup>

In 2005, The World Health Organization (WHO) has insisted all healthcare professionals, to become more involved in tobacco control efforts, so that the tobacco-related deaths can be averted. WHO set an example of the work of Tobacco Free Nurses (TFN). It was emphasized that it can be adopted as a model for a national initiative to prevent tobacco epidemic. WHO specifically addressed the need for skill development of health workers in the field of tobacco cessation programme. They should also be capable to provide tobacco dependence treatment interventions in community as well as in hospitals.<sup>(4)</sup> It has been observed

among various interventions for preventing tobacco related deaths, the evidence-based tobacco cessation strategies are the most cost-effective. Unfortunately, it has been underutilized by healthcare professionals.<sup>(5)</sup>

Nursing professionals are capable to improve tobacco prevention and cessation strategies as together they take care of millions of peoples regularly in various settings and circumstances. Nursing professionals have the requisite experience and capability to assess smoking status, counsel on health hazards of smoking, and hence they can assist in smoking cessation programme. It is important for nursing professionals to comprehend the psychological and physical addiction of nicotine and role it plays in many people's lives. A non-judgmental environment should be impacted by the healthcare professionals that imparts a positive approach in support of smoking cessation rather of guilt or blaming the patient.

Treating Tobacco Dependence, a Clinical Practice Guideline, published from Public Health department, U.S.A. describes evidence-based strategies. It is for assisting patients with tobacco cessation by all healthcare providers.<sup>(6)</sup> Globally 42.5% of the current smokers per year attempt to quit smoking for at least 24 hours, among them only few are actually able to sustain long term abstinence without any external help.<sup>(6)</sup> Use of pharmacotherapy and behavioral counseling to aid in efforts to quit are implemented using the 'Five A's'; Ask about tobacco use, Advise to quit, Assess readiness to quit, Assist with quit efforts including recommendations of pharmacotherapy and Arrange for follow-up.<sup>(7)</sup>

To practice tobacco cessation interventions in different settings, healthcare providers need sustained training and adequate resources. The interventions should be an integral component of quality health care.<sup>(8)</sup> It has been observed that multiple healthcare professional involvement improve the quit rates.<sup>(6)</sup> Evidences are now emerging that nursing professionals are very much capable for tobacco cessation interventions.<sup>(9)</sup>

Only a few initiatives have been taken worldwide to enhance the capability of nursing professionals to provide cessation interventions. In India, the number is even lesser. Even very few of them were scientifically incorporated into clinical practice after the end of the projects, or they were confined to a special patient population (e.g., diabetics, cardiac, prenatal care etc.). Netherlands and Germany show that making system (structural) changes along with providing extra training, both to nursing students and practicing nurses, can have a positive impact on clinical practice by increasing delivery of cessation interventions by them.<sup>(10-12)</sup>

### The Case Study

This case study represents the level of Inclusion and extent of teaching of tobacco control measures and cessation interventions in nursing curriculum of a premiere nursing care institute, National Institute of nursing Education (NINE), PGIMER, Chandigarh.

The case study was conducted by the interview technique. The head of the nursing institution and nursing faculties teaching psychiatry nursing and mental health nursing to the BSc final year nursing undergraduate students were interviewed, each one in a single session, in proper settings.

Findings from the interviews showed that there were proper linkages for the students to understand the clinical correlation of tobacco cessation treatment. The nursing students used to go for outreach training to Daddu Majra, a local slum in Chandigarh where they took substance abuse history and referred people indulged in tobacco use to the Drug Dependent De-addiction Centre (D.D.T.C), PGIMER. The tobacco control measures and cessation strategies/ interventions were taught in lectures, clinical and practical settings. It was also evaluated in the form of individual case presentations by students at end module evaluations. However, no nursing student had taken research topics on tobacco control or tobacco cessation in past five years.

The nursing institutional head along with nursing faculty were highly aware and motivated about the tobacco control content inclusion in teaching to students. The participation of them was high in conferences and poster presentations related to tobacco control in nursing curriculum. They also reported that the tobacco control content was adequately included and integrated in the already existing Nursing curriculum.

*"Tobacco control is fully integrated already in almost all subjects like psychiatric, mental health*

*nursing, community nursing, surgical and oncology nursing, 1st to 4th years so when a student is in final year should be fully prepared for tobacco cessation and control"* (Nursing Institute head).

They indicated that the integration depends on teacher's awareness about tobacco control and easy availability of facilities like Drug Dependence Treatment Centre with high number of patients which makes it easier to train students theoretically and practically both.

A varied number of clinical postings were given to the students to help them in tobacco cessation counseling techniques like:

- De-addiction Centre
- Psychiatric ward case study
- Community health - family folder
- Health talk in community outreach e.g.; DadduMajra, Dhanas
- History taking of tobacco use in clinical postings
- Health education

*"Students are taught in detail regarding the tobacco cessation techniques including pharmacotherapy, occupational therapy and recreational therapy of tobacco users along with disulphuram therapy".* (Nursing faculty)

Nursing students also do case presentations present where management and follow up of tobacco users. The clinical posting of each student is for total of one month consisting of two weeks each in the community health nursing module and in psychiatric nursing module. However, some barriers were also reported for integration of tobacco control in nursing curriculum.

*"However the barriers to tobacco control education are Government apathy as the training is going on but government has not tightened laws regarding tobacco usage."* (Nursing Head)

### Discussion

Nursing professionals can make important contributions to smoking cessation in various clinical settings. Studies suggested that based on the AHCPR Smoking Cessation clinical practice guideline, nursing professionals could implement various effective smoking cessation interventions according to special populations and individual patient needs in all settings.<sup>(13-15)</sup>

A meta-analysis of 15 studies to determine the effectiveness of nursing-delivered smoking cessation interventions indicated the potential benefits of smoking cessation advice and counselling given by nursing professionals to their patients, with reasonable evidence that intervention could be effective.<sup>(4)</sup>

Thus, we can see that there are very few studies examining nursing professionals' role in helping patient cease smoking in India or globally. In addition, there is lack of local studies concerning the tobacco control and smoking cessation interventions provided by nursing

professionals. This study finding imply that nursing professionals have a potential to have a profound effect on the reduction of tobacco use, there is an urgent need to further study with larger sample size to investigate their role in smoking cessation so that specific implications for nursing practice on smoking cessation can be suggested and recommendations for future nursing guidelines on smoking cessation in India can be developed.

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## References

- Centers for Disease Control and Prevention (2007b) Smoking-cessation advice from health-care providers -Canada, 2005. *Morbidity and Mortality Weekly report* 56, 708–712. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5628a3.htm>.
- Persson LG & Hjalmarson A (2006) Smoking cessation in patients with diabetes mellitus: results from a controlled study of an intervention programme in primary healthcare in Sweden. *Scandinavian Journal of Primary Health Care* 24, 75–80.
- Wewers ME, Sarna L & Rice VH (2006) Nursing research and treatment of tobacco dependence: state of the science. *Nursing Research* 55, S11–S15.
- Centers for Disease Control and Prevention. A Practical Guide to Working with Health-Care Systems on Tobacco-Use Treatment. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2006.
- Segaar D, Willemsen MC, Bolman C & De Vries H (2007) Nurse adherence to a minimal-contact smoking cessation intervention on cardiac wards. *Research in Nursing & Health* 30, 429–444.
- Fiore MC, Hatsukami DK & Baker TB (2005) Effective tobacco dependence treatment. *Journal of the American Medical Association* 288, 1768–1771.
- World Health Organization. WHO report on the global tobacco epidemic. The MPOWER package. Geneva: WHO 2008.
- Cooke M, Mattick RP & Campbell E (1998). The influence of individual and organizational factors on the reported smoking intervention practices of staff in 20 antenatal clinics. *Drug Alcohol Review* 17, 175–185.
- Lillington LM. AHCPR smoking cessation guideline goals and impact: examples from the nursing field. *Tob Control*. 1997;6 Suppl 1:S39-43.
- Lindell KO, Reinke LF. Nursing strategies for smoking cessation. *Heart Lung*. 1999 Jul-Aug;28(4):295-302.
- Wewers, M., Kidd, K., Armbruster, D., & Sarna, L. (2004). Tobacco dependence curricula in U.S. baccalaureate and graduate nursing education. *Nurs Outlook*, 52(2),95-101.
- Galvin EA, Jacob D, White M. What strategies are required to MNA use to address nursing professionals' problems in the work setting? *Mich Nurse*. 2001 Jan;74(1):9-10.
- Katz DA, Brown RB, Muehlenbruch DR, Fiore MC, Baker TB & AHRQ Smoking Cessation Guideline Study Group (2004) Implementing guidelines for smoking cessation: comparing the efforts of nursing professionals and medical assistants. *American Journal of Preventive Medicine* 27,411–416.
- Pradeep Kumar AS, Thankappan KR, Nichter M. Smoking among tuberculosis patients in Kerala, India: Proactive cessation efforts are urgently needed. *Int J Tuberc Lung Dis* 2008; 12:1139-45.
- Joy JE, Watson SJ, Benson JA, editors. *Institute of Medicine*. ISBN 0-309-51408-8. Available from: <http://www.nap.edu/catalog/6376.html>.