

**Smoking Cessation Intervention Project for  
Pregnant Women in Lanarkshire.**

**Cross Lanarkshire Action on Smoking in Pregnancy. (C.L.A.S.P.)**

**Executive Summary.**

**NHS Lanarkshire.**



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The views expressed in this report are those of the project and do not necessarily reflect the views of the funding body.

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## Cross Lanarkshire Action on Smoking in Pregnancy.

(C.L.A.S.P.)

Executive summary.

December 2006.

### 1) Introduction.

There are approximately 6,100 births per annum in Lanarkshire. 27% of women currently smoke in early pregnancy.(1) Smoking is the most avoidable cause of ill health in the United Kingdom.(2) Smoking during pregnancy causes harm to the unborn baby. This includes major medical conditions e.g. intra-uterine growth retardation and serious complications after delivery e.g. respiratory problems and infections.(3) 29% of Lanarkshire women continue to smoke throughout their pregnancy.(4) Cigarette smoking is the single largest modifiable risk factor for pregnancy related morbidity and mortality and is a major cause of health inequalities.(5) Reducing the number of pregnant women within NHS Lanarkshire who smoke is a national and local priority. Pregnant women are a Scottish Executive priority group for reducing smoking prevalence. Many pregnant women are reluctant to give up smoking, therefore new ways of engaging with pregnant women and supporting them in smoking cessation are needed. The Cross Lanarkshire Action on Smoking in Pregnancy (C.L.A.S.P.) project was designed to offer pregnant women the additional social support of a "Buddy" when attempting to stop smoking.

Project Title: Cross Lanarkshire Action on Smoking in Pregnancy (C.L.A.S.P.) project. The CLASP project ran from 26<sup>th</sup> January 2004 until 31<sup>st</sup> March 2006.

### Project aim.

To reduce the number of pregnant women in Lanarkshire who smoke.

### Final CLASP Project Objectives.

- 1) Provide project information on smoking cessation services for pregnant women.
- 2) Provide in-house training for midwives and relevant health professionals in Brief Intervention techniques and project awareness.
- 3) Provide access to smoking cessation services for pregnant women at the earliest opportunity.
- 4) Identify and train female ex-smoker volunteers to become support buddies. This included clearance from Disclosure Scotland.
- 5) Provide Health Promotion literature and advice for pregnant women on the health implications of smoking during pregnancy.
- 6) Provide access to a buddy to support pregnant clients.
- 7) Provide a smoking cessation service for clients' partners and significant others.
- 8) Monitor and evaluate the project, and provide a final project report for funding provider.

The CLASP project met all of these objectives.

## 2) Methodology.

Female ex-smokers were identified and trained to become buddies. They obtained Disclosure Scotland clearance.

Midwives and other relevant health professionals were trained in Brief Intervention techniques and CLASP project awareness.

Project publicity materials were designed and produced for display in NHS Lanarkshire areas e.g. GP and health centre waiting rooms and Family Planning clinics. This included the Assisted Fertility Dept, at Hairmyres Hospital. Health Promotion literature was available to provide information and advice about smoking to pregnant women.

Seven out of eight LHCCs participated fully and provided brief intervention at ante-natal clinics. Women were asked if they wished to be referred to the Smoking Cessation service for assessment of support needed to stop smoking.

Smoking Cessation Co-ordinators discussed with clients the options available including the offer of the buddy support system in addition to the usual smoking cessation services.

The volunteer buddy was supported by their local Smoking Cessation Co-ordinator. Both client and buddy were invited to keep an anonymous diary of their progress.

Clients were followed up at four weeks, three months, and one year from quit date. They were also followed up at six weeks and one year post partum in recognition of this being a stressful time when many ex-smokers may relapse.

Client information was collated and held on the project database by the CLASP project administrator.

## 3) Results.

1) Information on the smoking status of 6,067 pregnant women was collected from 1<sup>st</sup> November 2004 – 31<sup>st</sup> March 2006.

2) 1583 women identified as smokers.

3) 816 women were referred to their local Smoking Cessation Co-ordinator for assessment.

4) 191 women (including five ex-smokers) were seen for assessment.

5) 148 set a quit date.

6) 3 women took up the offer of a support buddy.

7) 1 woman who used the buddy support system was smoke free at one year from quit date.

8) 30 women following the generic smoking cessation services only, were smoke free at four weeks from quit date.

9) 14 women following the generic smoking cessation services only, were smoke free at three months.

10) 2 women following the generic smoking cessation services only, were smoke free at one year from quit date.

11) The CLASP project involved considerable resource implications and months of preparatory work for an outcome of three women selecting a buddy to help them give up smoking.

12) As a result of the project, midwives now report feeling more assertive and confident in relation to their professional responsibilities, discussing the potential effects of smoking on pregnant women and their unborn babies.

13) As a result of interim reports, a piece of work will be carried out looking at barriers to engagement with smoking cessation services.

#### 4) Conclusions and Recommendations.

##### Conclusions.

- 1) Pregnant women in this study did not wish to receive buddy support.
- 2) It was difficult to engage with pregnant women in quitting smoking using nationally recognised techniques. This reflects current research.
- 3) The project was successful in engaging midwives in approaching smoking issues with pregnant women.

##### Recommendations.

- 1) Discontinue the buddy support service for pregnant women.
- 2) Midwives to continue with Brief Intervention training.
- 3) Midwives to continue to refer clients to specialist smoking cessation services as for some people this was successful.
- 4) Ensure that smoking cessation is discussed with all pregnant women using Brief Intervention. Despite the small numbers who succeeded in quitting, the project did give a systematic approach to ensuring that smoking cessation is discussed with all pregnant women. Also, the change in the political climate regarding smoking, associated with the implementation of the Smoking, Health and Social Care (Scotland) Act 2005 may bring about increased uptake of services.
- 5) Brief Intervention to be provided to all pregnant women within NHS Lanarkshire area including Cumbernauld and Kilsyth locality. This locality had problems in being actively involved in the project, due to difficulties with midwives changing work practice. This is reflected in the number of referrals from this area. 13 women in total were referred to the project from Cumbernauld & Kilsyth locality in comparison to hundreds from other localities within NHS Lanarkshire area. (See graph 1. p18 of main report)
- 6) Explore the reason why only one in eleven pregnant smokers arranged a quit date with their local co-ordinator, (1,583 smokers – 148 set a quit date)
- 7) Maternity Services to pay for future supplies of appropriate Health Promotion/information leaflets for clients.

#### 5) Acknowledgments.

- 1) Many thanks to the volunteer buddies who gave their time and energy to the very worthwhile cause of helping pregnant women give up smoking, and to Katrina Purcell NHS Lanarkshire Volunteer Co-ordinator.
- 2) Thank you to Irene Hill the part-time project administrator who did so much more than required.
- 3) Thank you also to Gail Nottman, Clinical Governance who organised the database and produced figures and results at short notice.

6) References.

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