Acknowledgements:
The study was funded by ASH Scotland, the Glasgow Healthy City Partnership and the Queen’s Nursing Institute Scotland.

The Research Team would like to acknowledge the important contribution that Charlotte Woods made to the successful outcome of the study. We would also like to thank Kim Kemp for the work that she undertook in the early stages of the project. We would like to acknowledge the input of the senior/lead nurses and other senior managers who assisted with the process of recruitment. Finally, and most importantly, we would like to thank the study participants.

Smoking Cessation in Later Life:
What difference can brief intervention training make?
1. Introduction

Smokers aged 65 years and older are a vulnerable group of people who are likely to have conditions that are caused or complicated by smoking. Older smokers are also likely to die prematurely, losing on average 16 years from their projected life expectancy.

In recent years a growing body of research has demonstrated that older smokers can derive significant health benefits from stopping smoking in later life, despite having smoked for many years. The benefits of cessation are almost immediate for conditions such as heart disease and stroke. Stopping smoking also reduces the risk of developing cancer and stabilises existing conditions such as chronic obstructive pulmonary disease.

Healthcare contacts provide excellent opportunities for smoking-cessation interventions and there is compelling evidence that interventions delivered by health professionals can be effective in triggering and supporting cessation attempts. Professionals working in primary care therefore have a crucial role to play in discussing the topic of smoking cessation with older people who smoke.

Unfortunately, despite such evidence, research has shown that health professionals, including members of the primary care team, often fail to target this group of people. Previous work has indicated that health professionals’ failure to discuss smoking/cessation can often be the result of limited knowledge of smoking cessation products and services. Professionals have also reported that they do not have the skills required to deliver effective smoking cessation interventions (smoking cessation training is rarely incorporated into undergraduate or postgraduate educational programmes). Finally, pessimistic attitudes towards smoking cessation in later life have been noted, with health professionals often believing that few older people manage to stop smoking successfully.

In light of the above, the current study sought to develop and evaluate a specially tailored smoking cessation training programme for members of the primary care team who work with older people. The aim was to provide professionals with the knowledge and skills required to deliver effective brief interventions.

2. Training

The training, which has been approved by Partnership Action on Tobacco & Health (PATH) and NHS Education for Scotland (NES), was delivered during one study day by a professional experienced in the delivery of smoking cessation training. The training focused on knowledge about, and attitudes towards, smoking and smoking cessation in later life (i.e. those aged 65 years and over). It also focused on development of the skills required to raise and sustain the subject of smoking/smoking cessation when having contact with older people.

3. Methodology

The study used a mixed methods approach to evaluate the impact of the training. Seventy-three health professionals were recruited from seven Community Health and Social Care Partnerships. The participants included health visitors, district nurses, practice nurses and nurses and allied health professionals working in Community Older People’s Teams. Participants were randomised to the intervention group (who received the training) or the control group (who did not receive the training).

The knowledge, attitudes and practice of the study participants were assessed using three valid and reliable questionnaires, just before the training (at baseline), one week after the training and three months after the training.

Qualitative interviews were also undertaken to explore, in some depth, the intervention group’s views on the impact of the training.

4. Results

Analysis of the questionnaire data demonstrated the following:

- A statistically significant improvement in the knowledge of the intervention group that was maintained over time.
- A statistically significant improvement in the attitudes of the intervention group that was maintained over time.
- A statistically significant improvement in the reported practice of the intervention group that was maintained over time.

4. Results Contd.

The training was therefore found to be effective i.e. it had a demonstrable positive impact on the knowledge, attitudes and practice of the study participants.

The findings from the interviews supported the results from the questionnaires. The in-depth interviews highlighted that prior to the training many of the participants had limited knowledge and a lack of skills to raise and sustain the subject of smoking/smoking cessation. This often produced a lack of confidence and outcome expectations that focused on failure. Participants’ pessimistic attitudes towards older people stopping smoking also affected their subsequent actions and together these factors strongly influenced their smoking cessation practice.

After the training the participants’ practice clearly demonstrated changes. These changes were reported to be as a result of increased knowledge levels, more positive attitudes towards smoking cessation in later life and the skills that had been developed during the training.

Enhanced levels of self-efficacy following the training were clearly evident.

5. Discussion/Conclusions

This study developed and tested specially tailored smoking cessation training for members of the primary care team who work with older people. The evaluation of the training has demonstrated that it was effective in enhancing the knowledge, attitudes and practice of those who participated in the study.

Previous research has demonstrated that the delivery of brief opportunistic interventions by health professionals is highly cost-effective.

While the need for generic smoking cessation training has been evident for a number of years, the need to develop tailored training for professionals who have contact with key priority groups such as older adults, has been identified more recently. We believe that we are the first group at a UK-wide level to develop and formally test the efficacy of tailored smoking cessation training for professionals who have contact with older adults. We therefore consider that this study makes an important contribution to the current knowledge base.

Following the positive evaluation of the training we recommend that the training be rolled out at a Scotland-wide level. Further evaluative work will be required.

Copies of the full report can be obtained by contacting Susan Kerr on s.m.kerr@gcal.ac.uk.

---

**Research Advisory Group**

Agnes McGowan/Kirsty Scott
SMOKING CONCERNS, NHS GREATER GLASGOW & CLYDE

Fiona Borrowman
NHS HEALTH SCOTLAND

Julia Quickfall
QUEENS NURSING INSTITUTE SCOTLAND

Liz Duncan
HELP THE AGED SCOTLAND

Douglas Guest
ASH SCOTLAND (UNTIL 2006)

George Laird
GLASGOW HEALTHY CITY PARTNERSHIP (UNTIL 2008)

Angela Vettraino
PARTNERSHIP ACTION ON TOBACCO & HEALTH (UNTIL 2007)

Judith Burchett
PARTNERSHIP ACTION ON TOBACCO & HEALTH (UNTIL 2007)

Frances McGaughrin
DISTRICT NURSING SISTER, NHS GREATER GLASGOW & CLYDE

Margaret Martin
LAWSON HEALTH VISITOR, NHS GREATER GLASGOW & CLYDE

Marion Welsh
SENIOR LECTURER IN PRACTICE NURSING, GLASGOW CALEDONIAN UNIVERSITY