Can providing free NRT for use in disadvantaged homes help protect children from SHS? An update from an ongoing study.
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Working with Early Years Centres (EYCs) and the Family Nurse Partnership (FNP) in Edinburgh and the Lothians, and pharmacies in their locality.
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

Pilot

Provision of 8 weeks NRT for home and dual use for 9 parents with children under 5 in two disadvantaged Edinburgh communities for 8 weeks.

Most parents created smokefree homes, smoked less, saved money and gained confidence.

Current study

NRT provision for home and dual use for up to 35 parents in Edinburgh and the Lothians for 12 weeks, funded by NHS Lothian and SG
Step 1: Parent & Harm reduction advisor meet in the Early Years Centre/parents’ homes 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 12 weeks supply of NRT
Step 5: Researchers conduct interviews with parents
Recruitment so far

Ongoing until March 2019

We have engaged with 33 parents

• 4 did not smoke in the home and 2 were pregnant
• 2 decided to quit instead
• 3 changed their mind
• 6 DNA's

16 parents have attended the NRT assessment

• 3 are currently using NRT
• 2 have used their NRT and have been interviewed
• 2 have been interviewed and have not used NRT (yet)
• Awaiting confirmation from 3 participants if they have visited pharmacy
• 6 participants have not been to the pharmacy
Findings from first interviews with four parents

Positive outcomes reported for two parents, similar to pilot:

- Smoke-free homes
- Reduced smoking consumption

“Before I started the NRT I used to smoke 40 cigarettes [per day], I’m only on 20 now. […] and hopefully by January I want to be off all cigarettes, that’s my goal. I use ‘em [lozenges] at night when I’m in the house with the kids alone [before] I was bad like maybe smoked 12-13 at night [why bad?] cos obviously they’re getting passive smokin’-they’ve no asked for their lungs to be damaged” P3, mother of 3.
Other positive consequences

“I feel a lot better now, my clothes stopped smellin’ of smoke, ma house stopped smellin’ a smoke […]I have a lot more energy, not deflated an it saves me a lotta money too, 8 pounds 35 a pack, a lotta money in a day. I’ve got [the extra] in a tin” P3, mother of 3.
Negative experience of the pharmacy

“They’ve been really, really arrogant up there [pharmacy], […] I just think they cannae be bothered

I: But you managed to change the NRT product anyway?
Yeah after like I explained my situation, I’ve got 3 small kids so I’m trying to reduce the smoking in my house, even if I smoke in ma kitchen it still travels. I says “I cannae then go out in the stair which would leave 3 kids alone, they would be neglected” I just kept goin’ an arguin’ wi’ them “look I’m tryin’ t’better myself and m’health and keep m’children away from passive smokin””

P3, mother of 3.
Barriers

Two parents recruited and assessed did not attend the pharmacy:

1. They thought the study was about quitting and that NRT would be given out by our NRT adviser – they would have been more interested in that

2. They had not had a positive experience of the pharmacy involved in the past

“I was like “awe god I really don’t like that place” (short laugh) like they were just so rude […] I went in with my friend the other day to get Calpol and they turned round to my friend and was just like “you do know not to give them calpol when they don’t need it” and I’m like ken “we’re not stupid”. They’re just really rude and nasty.”

P1, mother of 3.
Next Steps

• Continued recruitment, engaging with other organisations. If you can help, please let us know.
• Potential social media advertising
• Engaging with pharmacies more regarding reception
• One-stop shop for assessment and provision in or outside of pharmacies?
Questions and comments?