

TB & Tobacco

Policy Brief: Integrating tobacco cessation within the TB programme: findings from the 'TB & Tobacco' study



Key Messages

- Health workers have an important role to play in helping patients to quit and having a diagnosis of TB provides a strong motivation to quit
- Behavioral support interventions are accepted by DOTS facilitators and health workers and can be implemented within Tuberculosis services
- Quitting tobacco increases patients' chances of being successfully treated for their TB. A recent large trial among TB patients in Bangladesh and Pakistan found that only 78% of those that had not quit were successfully treated for their TB whereas to 90% treatment success among those who had managed to quit.
- Including tobacco within TB recording and reporting forms will support implementation and provide data on tobacco use among TB patients
- Given the feasibility of implementation, this intervention is likely to be scaled up throughout the country if the challenges of infrastructure and trained staff are addressed.

Background of TB and Tobacco in Nepal

- In Nepal, the prevalence of current adult tobacco smoking is 18.5% (27% for male and 10.3% for female).
- Smoking increases the risk of acquiring TB infection & doubles the risk of death due to TB
- In Nepal, Practical Approach to Lung Health (PAL) was initiated in 2007 for the management of lung patients who attend primary health care services. Smoking cessation service (counselling) was included as one

of the interventions in PAL including recording of smoking status and progress of smoking cessation.

- Since 2015, PAL initiative was discontinued due to its high implementation cost and other implementation barriers for scale-up.

Research: TB & Tobacco in Nepal

We developed and tested a behavioural support intervention in two different phases in collaboration with the Ministry of Health and Population, National Tuberculosis Programme (NTP) and National Health Education Information and Communication Centre (NHEICC).

Phase 1: Development, Testing and Evaluation of behavioural support materials

We developed behavioural support materials (Flipbook, Poster and Leaflets) to be used by health workers to counsel TB patients who smoke. A participatory approach was used in development of the materials with engagement of NTP and NHEICC officials, DOTS facilitators, health workers and stakeholders.



Eight DOTS centres in Kathmandu were selected to pilot the intervention. DOTS facilitators were trained on the use of materials. TB patients were counselled using the materials.

Preliminary results

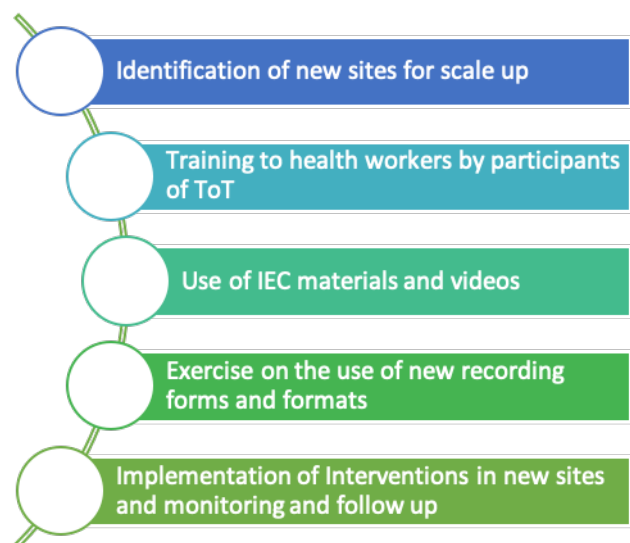
The effectiveness of the materials and the delivery were evaluated by conducting interviews with two health workers providing behavioural support and ten patients receiving the support. Behavioral support materials were accepted by the health workers and the intervention was found to be helpful for TB patients to quit smoking.

“another point is, while mentioning about smoking, smoke and smokeless issues were raised [in the training]. I used to understand that smoking is about consuming cigarettes. But now I know about smokeless tobacco. There are people who came chewing tobacco or Guthkha. Now we can provide counseling to such people as well.”

The evaluation also illustrated how the training of health workers needed to be shorter to fit within NTP schedules and that a video was needed to demonstrate how to support patients to quit.

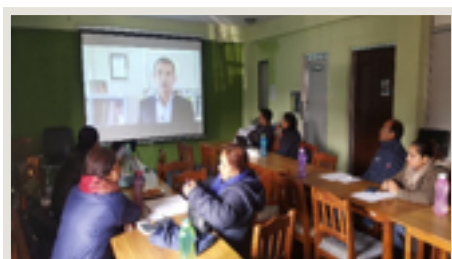
Phase 2: Scale Up of intervention

In coordination with NTP, the pilot intervention was scaled up in additional 10 DOTS centres, adding up to a total of 18 centres (13 centres from Kathmandu and 5 centres from Lalitpur) for this phase. The duration of the interventions was for a period of 3 months from mid-May to mid-July. In addition to behavioral support materials, we developed videos that can be used during routine NTP training to help DOTS facilitators see how to deliver the quit support to TB patients. All videos are in Nepali and are available from project website (tbandtobacco.org). We also developed a deskguide for health workers to stick to their wall or desk to remind them of the key messages to help patients quit.

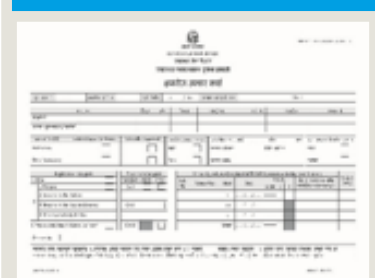


Training of Trainers (ToT) on TB & Tobacco was conducted and 18 DOTS facilitators were trained by the trainers who were all NTP supervisors, to delivering behavioral support to TB patients. NTP recording and reporting forms were revised to include three key indicators, to capture the data on tobacco consumption and quit status:

TB and Tobacco training for health workers



Simple changes to the routine TB reporting forms:



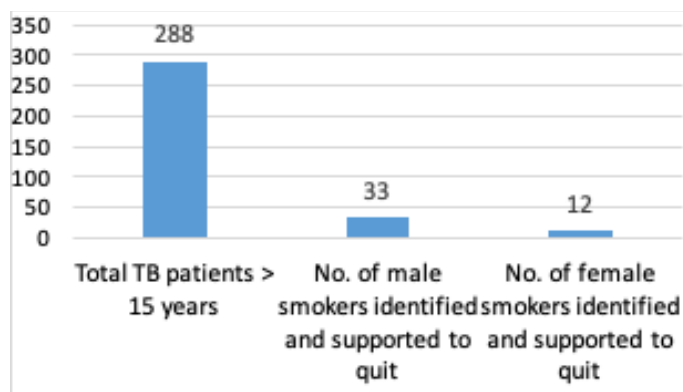
- tobacco status at registration,
- advice given and
- stats/quit at the 6 months

Preliminary Results

We observed the effectiveness and feasibility of this intervention through the data recorded on the tobacco status and quit status, in the new recording forms that were introduced to 18 DOTS centres. Moreover, we also conducted qualitative interviews with 13 key-informants including DOTS service providers, health facility in-charges and officials from NTC and municipality. The quantitative results consist of findings from 13 centers only, as 5 centers did not use the new recording forms.

A total of 288 TB patients who were above 15 years of age were registered in the centres for TB treatment. Of these, 45 patients (15.6%) were found to be smoking at registration. Records showed that all 45 TB patients who were smoking at registration were provided behavioral support for quitting smoking.

Smokers identified and supported to quit in 18 health centres April to July 2019



Moreover, recording form with information about tobacco status was also reportedly useful for service providers to record tobacco consumption and quit status. One of the DOTS providers expressed that

"I have liked it [recording from]. Before, there was no space to record but now it reminds us and encourages us to maintain recording mandatorily."

From qualitative interviews it was noted that use of behavioral support materials was very helpful and effective in counselling TB patients to quit tobacco. An official from NTC was of the view that

"It can be taken forward by piloting it at certain places or areas or provinces first where the number of TB patients are higher. And then we will have to take the program to the rest of the country stage- wise."



Way Forward

- Strengthen DOTS centres and health workers to institutionalize tobacco cessation services through supportive supervision, coaching and mentoring and other capacity enhancement measures.
- Incorporate tobacco cessation services into NTP policy, guidelines, training manuals/materials and regular NTP training sessions.
- Incorporate tobacco cessation indicators into routine NTP recording and recording formats and the monitoring system.
- Interventions can be tailored taking the local context into account (health workers availability, TB patients time and willingness etc.) but the key essence of behavioural support should remain intact.

All materials are freely available:

All materials including flipbook, leaflet, posters, health worker guide, training slides and videos are available in Nepali and English in the following website: <https://tbandtobacco.org/>



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Note: The EC is not responsible for any of the content of this document

This project has received funding from the European Union's Horizon 2020 research and innovation programme, under Grant Agreement No. 680995