

Recommendation 8.0 Evidence Profile (Indirect)

Recommendation Question: Should smoking reduction and cessation interventions embedded within broader health and wellness programs be recommended?

Recommendation 8: The expert panel recommends that health service organizations embed nicotine cessation interventions within broader health and wellness and treatment programs with Indigenous parents, families and communities.

Population: Persons who smoke

Intervention: Smoking reduction and cessation interventions embedded within broader health and wellness programs

Comparator: No intervention or usual care

Outcomes: Quit rates

Setting: Primary care, dental settings, cancer care center

Bibliography: 63, 211, 762, 1644

Quality assessment							Study details		Reported outcome		Summary of results	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Country	Intervention	Intervention	Control			
Quit rates (self report and/or biochemically confirmed at varying time points)													
4	Systematic Reviews	Serious ^a	Not serious	Not serious	Not serious	Not serious ^b	Various	Nicotine cessation interventions embedded within broader health and wellness programs (primary care, dental settings, regional cancer care)	211: pooling of 14 studies suggested interventions conducted by oral health professional can increase tobacco abstinence rates (OR 1.71, 95% CI 1.44 to 2.03)	211: see left column 63: no	Across the four systematic reviews, results of abstinence favoured the intervention group in which smoking cessation efforts were provided in broader health and wellness programs (dental settings, primary care and cancer care).	⊕⊕○○ Low	211: Carr & Ebbert, 2012 63: Day et al. (2019) 762: Cantera et al., 2015 1644:

Quality assessment							Study details		Reported outcome		Summary of results	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Country	Intervention	Intervention	Control			
								program)	63: Each centre in the primary studies reported a range of abstinence rates (14.4-38%)	control group			Papadakis et al., 2010
									762: 9 studies; all studies reported higher cessation rates for the intervention groups (versus control when present)	762: see left column			
									1644: across 7 trials, multicomponent interventions resulted in greater rates of	1644: see left column			

Quality assessment							Study details		Reported outcome		Summary of results	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Country	Intervention	Intervention	Control			
									cessation in the intervention group (OR 2.2 [95% CI 1.7, 2.8].				

Explanations

- a. We downgraded by 1 due to serious concerns in risk of bias using the ROBIS tool.
- b. We downgraded by 0.5 due to some concerns regarding the possibility that some studies did not synthesize all studies that answered their research question.

Recommendation 8 Evidence Profile (Direct)

Recommendation Question: Should smoking reduction and cessation interventions embedded within broader health and wellness programs be recommended?

Recommendation 8: It is recommended that health service organizations embed smoking reduction and cessation services within existing health and wellness programs.

Population: Indigenous women and persons during pregnancy and the post-partum period, their families and communities

Intervention: Smoking reduction and cessation embedded within broader health and wellness programs

Comparator: No intervention

Outcomes: Reach, engagement and acceptability

Setting: community setting

Quality assessment							Study details		Reported outcome		Summary of results	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Country	Intervention	Intervention	Control			
Reach/engagement: measured with observational data													
1	Case series	Very serious ^a	Not serious	Not serious	Very serious ^b	Not serious	Canada	Smoking reduction and cessation interventions embedded within broader health and wellness programs (such as substance use and harm reduction program, baby and youth program, regional cancer care program)	N/A	N/A	Four expert panel members provided observational data based on their experiences of working answers ranged from "unsure", "10-15 people", to "large" Engagement – estimated engagement ranged from unsure and 75-80% Acceptability – in general, responses were that people appreciate the support, very good client feedback	⊕○○○ Very Low	N/A

Explanations

- a. We downgraded by 2 due to very serious concerns in risk of bias using the ROBINS-I tool
- b. We downgraded by 1 due to the low sample size (4 people) who completed the survey.