

### Recommendation 3 Evidence Profiles

**Recommendation Question:** What are the needs (social, cultural, environmental supports) and views (barriers and facilitators) expressed by Indigenous persons of reproductive age, their partners & their families?

**Recommendation 3:** It is recommended that holistic and culturally specific smoking reduction and cessation services also be offered to the support network of perinatal Indigenous women and persons who are accessing these services.

**Population:** Indigenous persons of reproductive age, their partners & their family members

**Intervention:** smoking reduction and cessation services

**Comparison:** usual care available/accessible

**Outcomes<sup>a</sup>:** reach and engagement, quit rates, quit attempts

**Setting:** health service organizations, Indigenous communities

**Bibliography:** 55, 1088

Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Country	Intervention	Control				
<b>Reach/Engagement measured with:</b> Numerical count of the total number and proportion (%) of participants who enrolled (reach) in and/or completed the study (engagement).													
1	RCT	No concerns	No concerns	No concerns	Serious concerns <sup>b</sup>	None	55: Australia & New Zealand	55: Family-Centered Second-Hand Smoke (SHS) Intervention: 3 home visits by community workers over 3 months in which mothers (and family members that were present) who smoked, received usual care plus behavioral "coaching" (harms of smoking, ways to reduce children's exposure to smoking) & offered free NRT and/or quit line if interested  <b>Comparison group:</b>	55: Partners or other N (%): At baseline: 83/116 (72)  Partners or other at 4 months: 75/109 (69)  Partners or other at	55: Partners or other N (%): At baseline: 81/122 (66)  Partner or others at 4 months: 72/108 (67)	55: the study was successful in reaching and engaging some partners or other members of the household, into the smoking cessation program.	⊕⊕○○ Low	55: Walker, et al. (2015)

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Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Country	Intervention	Intervention	Control			
								received "usual care": standard management by hospital and primary care providers, which ranged from brief quit advice to the provision of cessation treatment.	12 months: 59/99 (60)	Partners or other at 12 months: 72/109 (66)			
1	Single-arm	Very serious concerns <sup>c</sup>	No concerns	No concerns	Very serious concerns <sup>d</sup>	None	1088: Australia	1088: ESF (Empowering Strong Families) had three key components: art activities; case management support; and incentivized smoking cessation support. Recognizing the influence of partners on maternal smoking, women were encouraged to invite a significant other to participate in the program. The case managers provided individualized support to participants from recruitment until 3 months postpartum. The case managers used individualized, strengths-based,	Partners or significant others: Baseline: N=13 2 weeks: N=7 1 month: N=7 3 months: N=5 1 month postpartum: N=5	NA	1088: The intervention was able to reach and engage the partners/significant others of the pregnant Indigenous women participating in the smoking reduction and cessation program.	⊕○○○ Very Low	1088: Askew et al. (2019)

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Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Country	Intervention	Intervention	Control			
								<p>motivational interviewing strategies to encourage and enable participants to reduce or quit smoking. Free nicotine replacement therapy (NRT) was provided. The level of exhaled carbon monoxide (CO) was assessed using CO monitors.</p> <p>All participants completed assessments at baseline, 2 Weeks, 1 month, 3months and 1 month postpartum.</p>					
<p><b>Quit rates measured with:</b> self-reported smoking abstinence (quit rate) &amp; biochemically confirmed (cotinine analysis or exhaled C).</p>													
1	Single-arm	Very serious <sup>e</sup>	Serious <sup>f</sup>	Serious <sup>g</sup>	Very serious <sup>h</sup>	None	1088: Australia	1088: See above	1088: Partners or significant others self-reported quit: n/total participants (%):  At 2 weeks: 0 (0%)	NA	Two partners and two parents sharing a household with pregnant Indigenous women participating in the intervention, quit smoking during the pregnancies.	⊕○○○ Very Low	1088: Askew et al. (2019)

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Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Country	Intervention	Intervention	Control			
									At 1 month: 0 (0%) At 3 months: 1 (20%) At 1 month postpartum: 0 (0%)  Partners or significant others self-reported smoking reduced or quit: At 2 weeks: 6/7 (86%) At 1 month: 7/7 (100%) At 3 months: 5/5 (100%) At 1 month postpartum: 4/5 (80%)				
<p><b>Quit attempts measured with:</b> Numerical counts of: self-reported quit attempts biochemically confirmed (exhaled CO measure).</p>													

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Quality assessment							Study details		No. of participants		Reported effects/outcomes	Certainty	Reference
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Country	Intervention	Intervention	Control			
1	Single-arm	Very serious <sup>i</sup>	No concerns	No concerns	Very serious <sup>i</sup>	None	1088: Australia	1088: See above	1088: Partners or significant others self-reported quit attempts n/total participants (%): At 2 weeks: 2/7 (29%) At 1 month: 3/7 (43%) At 3 months: 3/5 (60%) At 1 month postpartum: 3/5 (60%)	NA	1088: A small number of partners or significant others who received the smoking reduction and cessation intervention, reported making quit attempts during the program. At each measurement, the majority of the partners or significant others reported reducing the amount they smoked. The self-reporting was biochemically confirmed. A reduction in the mean CO (ppm) level was observed.	⊕○○○ Very Low	1088: Askew et al. (2019)

Explanations:

<sup>a</sup>Based on external review, a PICO question including outcomes was developed based on this recommendation question, in order to identify quantitative evidence

<sup>b</sup>There were serious concerns regarding the small sample size using the ROB 2.0 tool. We downgraded by 1.0

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- Ⓒ There were very serious concerns regarding risk of bias and how the study was conducted, using the ROBINS-I tool. We downgraded by 2.0
- Ⓓ The number of events was <300. We downgraded by 1.0
- Ⓔ There were very serious concerns regarding risk of bias and how the study was conducted using the ROBINS-I tool. We downgraded by 2.0
- Ⓕ There were serious concerns with inconsistency using the ROBINS-I tool. We downgraded by 1.0
- Ⓖ There were serious concerns regarding indirectness, using the ROBINS-I tool. We downgraded by 1.0
- Ⓗ The number of events was <300. We downgraded by 1.0
- Ⓙ There were very serious concerns regarding risk of bias and how the study was conducted, using the ROBINS-I tool. We downgraded by 1.5
- Ⓜ The number of events was <300. We downgraded by 2.0.

**CERQual Evidence Profile**

**Recommendation Question:** What are the needs (social, cultural, environmental supports) and views (barriers and facilitators) expressed by Indigenous persons of reproductive age, their partners & their families?

**Recommendation 3:** It is recommended that holistic and culturally specific smoking reduction and cessation services also be offered to the support network of perinatal Indigenous women and persons who are accessing these services.

**Aim:** To explore the social, cultural and environmental needs and views (barriers and facilitators) identified by Indigenous persons of reproductive age, their partners & their families towards nicotine cessation

**Bibliography:** 203, 571, 644, 849, 1608, 1609, 1997, 2725

Finding: Many participants described their smoking behaviors to be influenced by their household environment (shared child-care responsibilities, shared stress/loss, smoking as a means for bonding).							
Studies contributing to the Finding	Included study designs	CERQual Assessment				Overall CERQual Assessment of Confidence	Explanation of Judgement
		Assessment of Methodological Limitations	Assessment of Relevance	Assessment of Coherence	Assessment of Adequacy of Data		
1 systematic review, 1 evidence synthesis	571: yarning methodology (conversational talking) and	No concerns	No concerns	No concerns	No concerns	⊕⊕⊕⊕ High confidence	This finding was graded as high confidence because there were no concerns regarding methodological limitations.

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<p>203: Small, Porr, Swab &amp; Murray (2018)</p> <p>1608: Gould, McEwen &amp; Waters (2013)</p> <p>4 individual studies: 571: Gould, Bovill, Clarke, Gruppetta, Cadet-James &amp; Bonevski (2017)</p> <p>644: Lyall et al. (2021)</p> <p>849: Wyndow, Clifton &amp; Walker (2020)</p> <p>1997: Passey, Gale &amp; Sanson-Fisher (2011)</p> <p>1609: Gould, Munn, Avuri, Hoff, Cadet-James, McEwen &amp; Clough (2013)</p>	<p>narrative analysis</p> <p>644: yarning methodology and thematic analysis</p> <p>849: yarning, semi-structured interviews and inductive analysis</p> <p>1997: semi-structured interviews and content analysis</p> <p>1609: Focus groups and constant comparative analysis</p>						
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**Finding: Studies reveal that family relationships and social networks are highly valued across Indigenous persons and communities.**

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<p>1 systematic review and meta-ethnography:</p> <p>1608: Gould, McEwen &amp; Waters (2013)</p> <p>3 individual studies:</p> <p>571: Gould, Bovill, Clarke, Gruppetta, Cadet-James &amp; Bonevski (2017)</p> <p>1997: Passey, Gale &amp; Sanson-Fisher (2011)</p> <p>2725: Bottorff et al. (2018)</p>	<p>571: yarning methodology (conversational talking) and narrative analysis</p> <p>1997: semi-structured interviews and content analysis</p> <p>2725: Group consultation, semi-structured interviews and content analysis</p>	<p>Moderate concerns due to methodological limitations</p> <p>(Some individual studies did not consider researcher reflexivity)</p>	<p>No concerns</p>	<p>No concerns</p>	<p>No concerns</p>	<p>⊕⊕⊕○ <b>Moderate confidence</b></p>	<p>This finding was graded as moderate confidence because of moderate concerns regarding methodological limitations.</p>
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