ASHES, Vol. 18(10) – Participant satisfaction with the "Power to Quit" smoking cessation program

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Among people experiencing homelessness, smoking rates are triple that of the general population. Smoking is a risk factor for many diseases including cancer, heart disease, and lung disease. It remains important to develop smoking cessation interventions that are accessible and acceptable for this population. The "Power to Quit" (PTQ) smoking cessation program is the first clinical trial program specifically adapted to meet the unique needs of people experiencing homelessness; among other adaptations, counselors conduct counseling sessions at participating homeless shelters. This week, ASHES reviews a study by Oluwakemi Odukoya and colleagues that examined satisfaction and outcomes of the PTQ smoking cessation program.

What was the research question?

How did participants experiencing homelessness feel about the PTQ program?

What did the researchers do?

This study examined 430 adult smokers who: (1) were experiencing homelessness in Minneapolis and St. Paul, Minnesota at the time of the study and (2) participated in a randomized controlled trial (RTC) of the PTQ program. All participants were freely given a two-week supply of nicotine patches at baseline, as well as an additional two-week supply every two weeks for eight weeks. One group participated in six 15-20 minute participant-led motivational interviewing counseling sessions and the control group only did one 15-20 minute counselor-led session. This study however did not explore the results of the RTC, but rather overall satisfaction with various program components among the 315 participants who completed a week-26 feedback survey, and differences in satisfaction across participant race and age of smoking onset. The researchers used Pearson's chi-square test and Fisher's exact test to analyze bivariate associations and logistic regression analyses to assess predictors of being very satisfied by the program and differences in satisfaction across program components/incentives.

What did they find?

Among the interventions offered, participants were most satisfied with counseling (59.4%) and the patch (55.3%). While fewer than half (45.7%) of participants continued using the patch after the study concluded, over 80% noted that they would have continued using it if it was continually provided for free. Overall, almost 80% of participants reported being very satisfied with the program as a whole (see Figure). African Americans/Black participants had 1.85 times greater odds of being very satisfied with the program than White participants or participants of other races, and participants who had started smoking younger had greater odds than older onset smokers of being highly satisfied with the program.

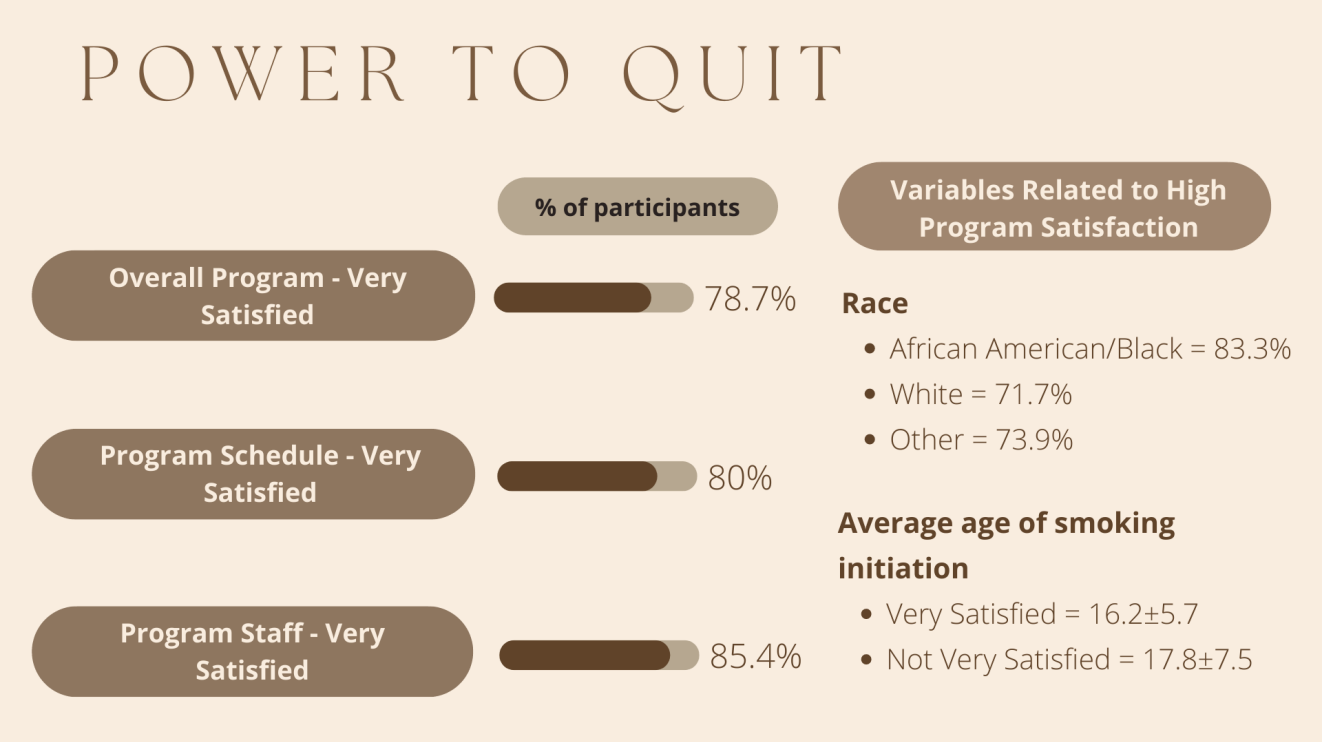


Figure. PTQ program satisfaction, percentage of high satisfaction by race, and the average age of smoking initiation (mean±standard deviation) by program satisfaction rating. Click image to enlarge.

Why do these findings matter?

Because smoking rates are so high among people experiencing homelessness, it is important to develop practical interventions for this population. This study suggests people experiencing homelessness respond well to smoking cessation programs specifically designed for them. Additionally, the use of staff and a community advisory board with lived experience and racial demographics that matched the participants may have contributed to the high satisfaction rate among African Americans, who tend to distrust medical programs due to

historical discrimination and injustice. Other types of cessation programs may benefit by following this model and employing staff that are representative of the population they are studying and serving.

Every study has limitations. What are the limitations of this study?
The study did not account for which type of counseling the participants received when ranking satisfaction for counseling. Also, program satisfaction was not tested against program outcomes due to the small number of successful quitters from this study.

For more information:
The National Alliance to End Homelessness lists resources for those at risk of or currently experiencing homelessness. SmokeFree offers tools and tips for quitting and maintaining abstinence from smoking tobacco. The Centers for Disease Control and Prevention also provides research and tips about cigarettes and how to quit. For more details about addiction, visit our Addiction Resources page.

— Taylor Lee

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