Promoting Smoke-Free Homes Among 2-1-1 Callers

Adapted from: A Minimal Intervention to Promote Smoke-Free Homes Among 2-1-1 Callers: A Randomized Controlled Trial

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Introduction and Purpose

Children and adults who live with a smoker are exposed to much more second-hand smoke (SHS) than those who do not. SHS is known to contribute to many illnesses and impacts children more severely.

The purpose of this study was to test the effectiveness of a simple program to create smoke-free homes in low-income households. Participants were recruited through the United Way of Greater Atlanta **2-1-1**. Callers to **2-1-1** services are often low-income and have a higher rate of smoking.

How the Study Was Done (Methods)

A random sample of **2-1-1** callers who were not in crisis and had a smoker in the home were invited to participate. 498 people were enrolled in the study. About half were in the intervention group and half were in the **control group**.

The simple Smoke-Free Homes intervention consisted of 3 mailings and 1 coaching call over a 6-week period. The content focused on 5 steps to create a smoke-free home and used engaging materials such as a comic book and window clings. The messages encouraged people to smoke outside rather than **smoking cessation**.

Key Words

2-1-1: An information and referral system that connects callers to local social services.

Control group: Enrolled participants who do not recieve the intervention, but are monitored as a comparison group

Smoking cessation: stopping smoking completely

Statistically significantly: A statistical term that means there is enough evidence that the results obtained were not only due to chance.

Interviews were conducted 3-months and 6-months after the intervention and measured self-reported full home smoking bans and SHS exposure in the home. Indoor air nicotine monitors verified self-reported bans after the 3-month interview. Smokers were asked about **cessation** attempts, number of cigarettes smoked per day, and belief they can quit.

Results of Study

Participants were mostly smokers, women, African American, and not employed, with an annual household income of $10,000 or less.

The intervention worked for both smokers and nonsmokers, as well as those with or without children. 6-months after the intervention:

- **Statistically significantly** more intervention participants reported a full ban on smoking in the home than **control** participants (40.0% vs 25.4%).
- Intervention participants self-reported a larger reduction in exposure to SHS in the home.
- The indoor air monitors confirmed that homes with a full ban had **statistically significantly** lower nicotine concentrations.
- Smokers in the intervention group reported fewer cigarettes smoked per day, however there was no difference in **cessation** rates between intervention and **control** groups.

Tips

If you would like support creating a smoke-free home or quitting smoking:

- See the Smoke-Free Homes website: http://smokefreehomes.emory.edu/
- See the CDC website for smoke-free homes: https://www.cdc.gov/tobacco/secondhand-smoke/home.html
- Call 1-800-QUIT-NOW

Limitations (Why we can't draw stronger conclusions)

Most participants reported partial bans at baseline, which might indicate a certain level of readiness to create a smoke-free home. The participants in this study were mostly African American women living in Atlanta, however these results were recently reproduced in seven different settings, showing that the results are likely applicable to other groups.

What does this mean?

This simple intervention was effective in promoting smoke-free homes in low-income households and offers an accessible model for protecting children and adult nonsmokers from secondhand smoke exposure in their homes.

Read the full article here: https://www.ncbi.nlm.nih.gov/pubmed/25602863

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