

Smoking cessation among low-socioeconomic status and disadvantaged population groups:

A systematic review of research output



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Background

- Tobacco smoking rates are markedly higher among low-SES and disadvantaged population groups.
 - Yet... little known about research output.
- Smoking cessation research must move beyond describing patterns to evaluating the effectiveness of evidence-based interventions that reduce smoking rates.
- *“Intervention research is great... M’KAY!”*
(Prof Shakeshaft + co-author, 2015)



The Difference is Research

Aims

To Identify in low-SES & disadvantaged population groups:

The number and methodological quality of published smoking cessation research over two time periods (TP1: 2000-2004) and (TP2: 2008-2012) and by country (Australia/New Zealand, United Kingdom, United States/Canada and Other countries).

Method

Search strategy, selection of studies and coding

- Medline, Embase, PsycINFO, Cochrane, Project Cork (n=5)
- Studies included if: written in English, published between 2000-2004 (TP1) or 2008-2012 (TP2) and examined smoking cessation in a low-SES or disadvantaged group.
- Included publications coded by country, publication year, and type of low-SES and disadvantaged population group:
 - Low-SES, homeless, Indigenous, prisoners, at-risk youth, & mental illness.

Method cont.

Publication volume and types

- Publications were coded into 3 groups: (i) reviews; (ii) non data-based research; and (iii) data-based research.
 - Data-based research publications were further coded by study type (descriptive or intervention).

Evaluation designs

- Intervention studies coded according to Cochrane Effective Practice Organisation of Care (EPOC) evaluation design:
 - EPOC (RCT, CCT, ITS, or CBA) vs. non-EPOC.

Results

Evidence synthesis

- Time period 1 (TP1) - 1064 articles screened.
 - 75 articles included.
- Time period 2 (TP2) - 2521 articles screened.
 - 203 articles included.

Overall research output (n = 278 articles)

- Trend of overall increase in total research output (TP1 = 27% vs. TP2 = 73%).
- No change in country or population group.

Results cont.

Data-based research output

- Increased between TP1 (n = 43 studies) and TP2 (n = 122 studies) **but....**
- The proportion of data-based research that was **intervention** was comparable over time (77% at TP1 and 67% at TP2) and this pattern of research was consistent for all countries.
- No significant change in population group studied.

Results cont.

Intervention studies using EPOC evaluation design

- ↑ overtime TP1 (21) to TP2 (44) but proportion of output remained comparable from TP1 (64%) and TP2 (57%) ($\chi^2 = 0.24, p = 0.63$).
- No change in output by population group studied.

Implications

- Research output less than ideal.
- To optimize improvements in health more rigorously tested intervention research is needed among low-SES and disadvantaged population groups.
- Tobacco-related inequalities and high rates of smoking may continue for low-SES and disadvantaged population groups unless we meet this endpoint.

Acknowledgments

- NHMRC (APP1021862).
- Cancer Institute NSW (12/ECF/1-46).
- NDARC is supported by funding from the Australian Government under the Substance Misuse Prevention and Service Improvements Grants Fund.



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IJERPH

Volume

Author

Section

all

Issue

Article Type

all

Special Issue

all

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Int. J. Environ. Res. Public Health **2015**, *12*(6), 6403-6422; doi:10.3390/ijerph120606403

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Received: 29 April 2015 / Revised: 2 June 2015 / Accepted: 3 June 2015 / Published: 8 June 2015

(This article belongs to the Special Issue [Tobacco Control 2015](#))