

## Tobacco cessation within TB programmes: A ‘real world’ solution for countries with dual burden of disease



### Background of TB and Tobacco in Nepal

- In Nepal, the prevalence (%) of current adult tobacco smoking is 18.5% (27% for Male and 10.3% for Female).
- The prevalence (%) of current adult cigarette smoking is 18.3% and daily adult cigarette smoking is 15.7%.
- Tobacco smoking increases the risk of acquiring TB infection, its progression to TB disease and poor disease outcomes.
- In Nepal, Practical Approach to Lung Health (PAL) was initiated in 2007 for the management of lung patients who attend primary health care services. Smoking cessation service (counselling) was included as one of the interventions in PAL including recording of smoking status and progress of smoking cessation.
- Since 2015, PAL initiative was discontinued due to its high implementation cost and other implementation barriers for scale-up.

## Our Research:

We developed and tested behavioural support interventions in two different phases in collaboration with Ministry of Health and Population, National Tuberculosis Programme (NTP) and National Health Education Information and Communication Centre (NHEICC).



## Phase 1: Development, Testing and Evaluation Phase:

Developed behavioural support materials (Flipbook, Poster and Leaflets) to be used by health workers to counsel TB patients who smoke. A participatory approach used in development of the materials with engagement of NTP and NHEICC officials, DOTS facilitators, health workers and stakeholders.

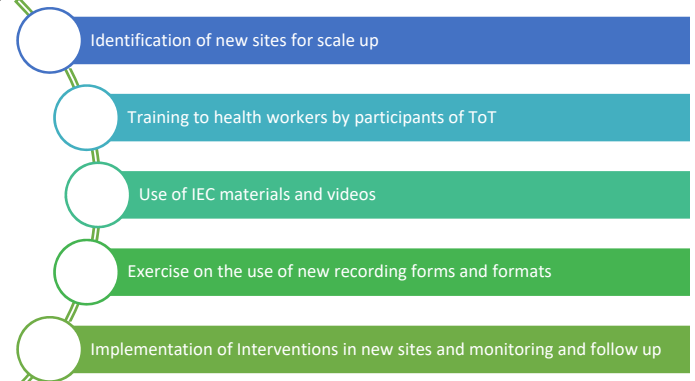


Eight DOTS centres in Kathmandu were selected for pilot interventions and the DOTS facilitators were trained on the use of materials. TB patients were counselled using the materials. The effectiveness of the materials and the delivery were evaluated by conducting interviews among health workers providing behavioural support and patients receiving the support. Behavioral support materials were accepted and the intervention was found to be helpful for TB patients to quit smoking.

## Scale Up Phase:

In coordination with NTP, the pilot intervention was scaled up in other DOTS centres. Videos and deskguide were prepared additionally for health workers. Training of Trainers (ToT) on TB & Tobacco was conducted and DOTS facilitators were Trained by the participants of ToT on delivering behavioral support to TB patients. NTP recording and reporting forms were revised to include three key indicators :

- i) tobacco status at registration,
- ii) advice given and
- iii) stats/quit at the 6 months



क्रमांक	नाम	पेशा	संस्था	संस्थाको ठेगाना	संस्थाको प्रकार
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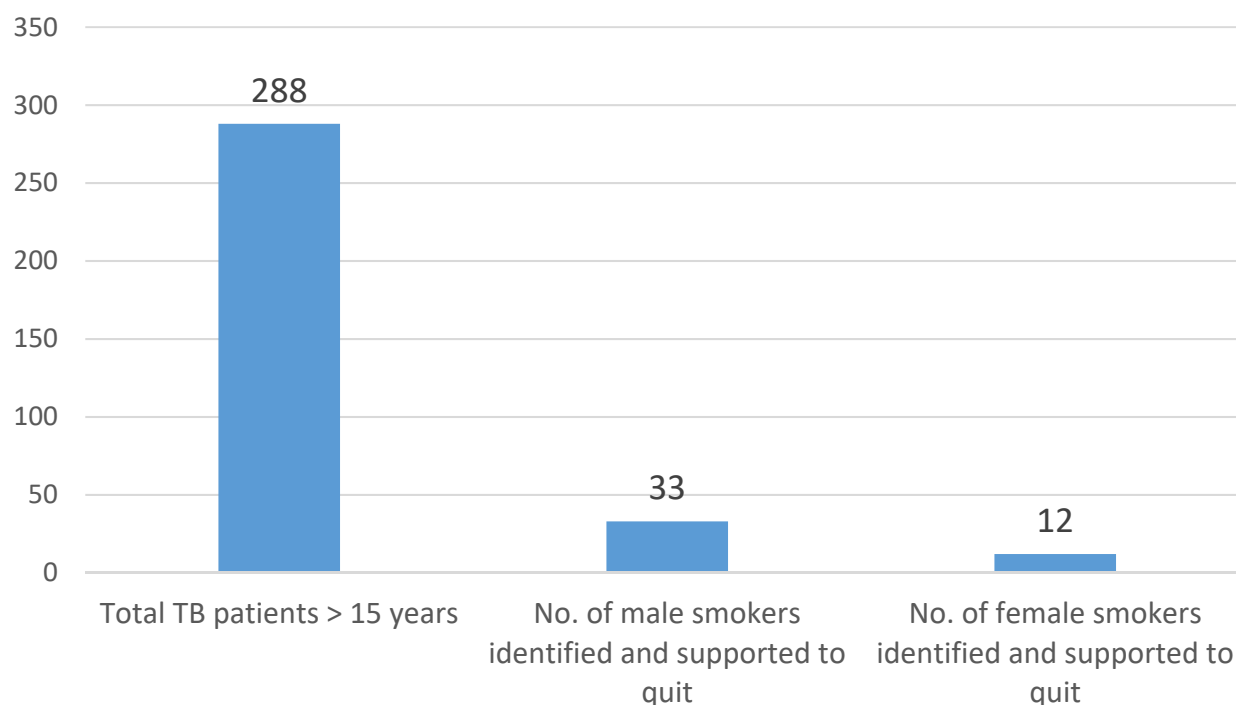
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## Preliminary Results

The scale up of the TB Tobacco interventions was conducted in 18 DOTS centres in Kathmandu (13 centres) and Lalitpur (5 centres) districts. However, the results consists of findings from only 13 centres as 5 centres did not use the new recording forms. The duration of the interventions was for a period of 3 months from mid May to mid July.

A total of 288 TB patients (>15 years) were registered in the centres for TB treatment. Of which 45 patients (15.6%) were found to be smoking during registration. All the smokers were provided behavioral support for quitting smoking.



## Way Forward

- Incorporate tobacco cessation services into NTP policy, guidelines, recording and recording formats and training manuals/materials.
- Incorporate tobacco cessation indicators into routine NTP monitoring system.
- Strengthen DOTS centres and health workers to institutionalise tobacco cessation services through supportive supervision, coaching and mentoring and other capacity enhancement measures.
- Interventions to be tailored taking the local context into account (health workers availability, TB patients time and willingness etc) but key essence of behavioural support should remain intact.

## Key Messages

- Behavioral support interventions are accepted by the health workers and the patients, hence it aids in implementation of the interventions.
- Given the context and need, it is feasible to implement tobacco cessation interventions within the routine TB programmes.
- Recording and reporting is essential for implementation of the interventions.
- Given the feasibility of implementation, this intervention can be scaled up throughout the country.

All materials including flipbook, leaflet, posters, health worker guide, training slides and videos are available in Nepali and English in the following website:  
<https://tbandtobacco.org/>

More information and evidence can be accessed from the website.



UNIVERSITY  
*of York*



UNIVERSITY OF LEEDS

**HERD**  
International

**HERD International**  
**Thapathali, Kathmandu, Nepal**  
**P O Box: 24144**  
**Phone: +977-1-4243839**  
**Email: [info@herdint.com](mailto:info@herdint.com)**  
**Web: [www.herdint.com](http://www.herdint.com)**

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