

Project ID: 13514305

Project Title:

**IMPLEMENTING THE FCTC ARTICLE 14 IN ARMENIA THROUGH BUILDING NATIONAL CAPACITY IN SMOKING CESSATION TRAINING.**

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**B. Main Section of the proposal (not to exceed 12 pages):**

***Overall Goal & Objectives:***

The goal of this project is to design, implement and evaluate the first smoking cessation training program for health professionals in Armenia, a country in transition with high smoking rates. The proposed project will contribute to the overall mission of the RFP by mobilizing key players in health prevention and promotion to build the national capacity in smoking cessation training for health professionals. This project is in line with the mission of the School of Public Health at the American University of Armenia “to have a significant impact on improving the health of the people of Armenia and the region through interdisciplinary training and development of health professionals to be leaders in public health, health services research and evaluation, and health care delivery and management”.

While it is essential to educate medical students as future physicians, this proposal focuses on the continuing education training on nicotine dependence treatment for practicing physicians.

The Key Objectives:

**A. Build smoking cessation training capacity in Armenia:**

1. Develop and implement an evidence-based smoking cessation training program for health professionals (physicians and nurses) to enable them to provide a brief intervention to patients who smoke, in cooperation with the Yerevan State Medical University.
2. Establishing a National Smoking Cessation Training and Resource Center (a web portal) to make the materials of the training course publicly available.

**B. Advocate for a) integration of the smoking cessation training into medical and nursing curricula and b) adoption of a system-wide screening for tobacco use and recording of the smoking status.**

1. Develop a White Paper: “Mapping the FCTC Article 14 Implementation in Armenia” and discuss it with the health policymakers and other stakeholders.
2. Organize the first annual conference on smoking cessation in Armenia to discuss the issue and develop a strategic plan for the FCTC Article 14 Implementation in Armenia and to establish a national association to provide a common platform and networking space to advocate for further strengthening the national capacity in smoking cessation (such as establishing smoke-free hospital

environments, integrating smoking cessation into the medical and nursing curricula and the healthcare licensing requirements, etc)].

- C. Monitor the project indicators, analyze intermediate and final outcomes, produce reports and discuss the project activities through regular meetings with staff and partners.
- D. Disseminate results of the project and integrate the national smoking cessation network into the European and Global Bridges Partners smoking cessation networks.

This proposal's primary objective is to establishing a new training program to provide an evidence-based training course on smoking cessation for practicing physicians.

The secondary objective of the proposed project is to strengthen the support from the key stakeholders, including the policy and decision making community and the institutions of medical and nursing education to sustain the project outcomes and advocate for a system-wide change.

- ***Technical Approach:***

While there is a broad consensus among key actors in medical training, healthcare service providers and decision makers on the urgent need in reducing tobacco burden in Armenia and the important role of health professionals in this effort, limited resources are available for developing the national smoking cessation infrastructure, including the smoking cessation training capacity. No such training courses and/or cessation clinics are available at present in Armenia.

The majority of smoking cessation treatment approaches are based on the evidence form the developed countries that have a different socioeconomic background and healthcare. Therefore, the application of the existing best practices in a transition country such as Armenia (and perhaps in any other low or lower-middle income country) will require a careful examination and a thorough adjustment of the approaches to be used in the knowledge transfer.

This necessities carrying out formative (qualitative) research during development of the course, such as focus group discussions with future beneficiaries of the training to clarify the perceived needs for training and support for addressing tobacco use among their patients.

The proposal builds upon the existing partnership with the Yerevan State Medical University (YSMU) that provides graduate and postgraduate (including continuing medical education) education for medical students and practicing physicians. Partnering with the YSMU faculty will foster institutionalizing the course in the largest medical university in Armenia.

We plan to build the training capacity through a multi-steps process. First, the Family Medicine Chair Faculty (at least two persons) of the Yerevan State Medical University will be trained through the online courses provided by the Global Bridges Partners Network (Mayo Clinic, UK NCSCT, or other). Then, the AUA team will undertake a series of FGDs with the trained faculty and the practitioners to be trained, and after that will start to develop the training course curriculum and materials using the resources available through the GB website. In particular, the UK NCSCT provides several online trainings and their materials are accessible online. The project team will also refer to the materials of the Massachusetts Tobacco Treatment Specialist

Training and Certification Program accredited by the Association for the Treatment of Tobacco Use and Dependence (ATTUD).

Developing the national smoking cessation capacities is a long-term process and the realistic approach would be to start it with a basic course to train physicians to provide a brief advice. Furthermore, because a systems approach to tobacco treatment may have the highest value in a country with scarce resources, this approach needs to be included in the professionals' training. To integrate this approach, the project team will develop a provider smoking cessation toolkit with a branded set of educational materials, quick reference guides to provide advice to smokers and treatment options, etc. This toolkit would provide the physicians with prompts and reminders to help them address tobacco use on a routine basis.

To enhance the sustainability of the program, we will make the course materials, including patient education brochures, publicly available via the Online Training and Resource Center for Smoking Cessation. This website is envisioned as bilingual (Armenian, Russian) to allow for regional cooperation and trainings. A feedback from the trainees will be sought to adjust the course for cultural sensitivity before materials going online.

The project expert team will develop a White Paper: Mapping the FCTC Article 14 Implementation in Armenia to be discussed with the Armenian health policy makers and to advocate for introducing a system-wide change such recording of a smoking status as a vital sign and making the smoking cessation course a required part of the graduate and postgraduate continuing medical education.

Finally, to enhance the reach of the project and to increase the number of beneficiaries we plan to deliver the same Basic Training course to the control group at the end of the project (after completing the evaluation survey ).

- ***Current Assessment of need in target area***

Smoking rate among Armenian men is one of the highest in the European region (59.6%) (Andreasyan D., *et al* Health System Performance Assessment Report 2012, Yerevan Armenia). Smoking is also remarkable among Armenian physicians (48.5% M, 12.8% F) and medical students (50.0%M, 7.7% F) (Perrin, P, *et al*. Patterns of smoking behavior among physicians in Yerevan, Armenia. BMC Public Health 2006. . Armenia was the first ex-soviet country to accede to the WHO FCTC (November 2004), with following adoption of a national tobacco control law to ban smoking in healthcare, education, culture facilities and public transport. The country also banned tobacco advertising on TV and radio (2002) and on billboards (2006) and introduced larger (30%) health warnings on cigarette packs. One area where Armenia's progress was less than satisfactory is the FCTC Article 14. Though the Ministry of Health approved "Guidelines for tobacco cessation counseling and treatment" for use by primary health care physicians in 2009, no further steps were undertaken to enable physicians to implement the guidelines.

The proposed project will contribute to developing a national capacity in implementing the FCTC Article 14 in Armenia through: a) building smoking cessation training capacity of the medical faculty of the largest medical university in Armenia through online training on evidence-based methods and tools for teaching physicians and nurses the basic skills for working with smokers and supporting them to do so, b) training of primary healthcare practitioners to provide them with knowledge and skills to provide brief advice and assistance to smokers.

○ ***Intervention Design and Methods:***

The project intervention will target healthcare providers to arm them with the evidence-based smoking cessation counseling and treatment knowledge and skills and to apply those to motivate and assist patients to quit. We will train healthcare providers (family physicians) working in primary healthcare clinics at three (out of 10) provinces. The course participants will be recruited through the existing network of family physicians' association and through the Ministry of Health. After the completion of the formative research, the intervention will include:

1. Development of the training curriculum and materials.

The curriculum will include: (a) didactic sessions on the smoking-caused disease and death (local data and context will be used), including hazards of secondhand smoke exposure,, nicotine addiction and treatment; the role of social environment, tobacco control policies, barriers to change, the role of healthcare providers in motivating patient to quit (5As), and (b) interactive sessions, such as role play, mock case counseling and de-briefing, a demonstration of the film "30 seconds" produced by the English National Centre for Smoking Cessation and Training to highlight the importance of delivering a brief intervention to smokers (<http://www.globalbridges.org/Resources>), and other. This powerful video-spot can positively influence the attitudes of physicians and motivate them to be more pro-active in helping patients quit.

2. Training of the faculty: two faculty members will participate in the online trainings provided by GB partners (the courses to be determined in consultation with the GB partners).

3. Develop and distribute smoking cessation toolkit for health professionals.

4. Delivering a Basic training course for the healthcare practitioners by the trained faculty.

5. Developing and launching an online Smoking Cessation Training and Resource Center to make the materials of the training course publicly available.

○ ***Evaluation Design:***

The project will employ a quasi-experimental design to assess the change in physicians performance and patient-related outcomes. We will select three provinces as intervention group and will match other three (by distance from the capital city and urbanization level) as a control group and then recruit all available primary healthcare physicians at these sites through the existing networks and through the Ministry of Health.

We will measure the provider performance using quantitative and qualitative methods. The project team will use a participatory evaluation approach to empower the project beneficiaries

(practitioners), to build the trust and improve the quality of the intervention through self-assessments and shared decision-making process.

The focus group discussions will be conducted by trained facilitators at baseline with a dual purpose: to assist in the development of the training course and to assess the baseline knowledge, attitude and practices. The FGDs will be repeated at 1 year follow up to identify the progress being made and obstacles raised when applying the smoking cessation counseling skills in practice. A self-assessment performance questionnaire will be administered at baseline and at 1year follow up. This questionnaire will assess the extent of implementation of the core competencies obtained through the training. These competences should correspond to basic to intermediate levels of training and will be defined during the curriculum and course development using the existing Standards for Tobacco Treatment Specialists.

Patient-related outcomes, including the advice received, number of quitting attempts and their success, will be measured via interviews (phone interviews or face-to-face), at baseline and 1year follow up. The patient contact information will be retrieved from the medical charts/registrar office; the interview will be conducted by a trained interviewer upon oral consent from the patient, either at home or by phone. To minimize the recall bias, we will collect patient-related outcome data on a monthly basis. We will define a quitting success using a conservative approach (Russel standard); however, we do not expect to have enough power to detect the effect of the intervention on the actual quitting rates.

Assuming 30% improvement in providers' performance and 10% increase in quitting attempts (Aveyard, P, *et al.* Brief opportunistic smoking cessation interventions: a systematic review and meta-analysis to compare advice to quit and offer of assistance. *Addiction*. 107.1066-1073) we estimate the size of providers sample to be equal to 49 and patients survey sample of 286, accordingly. After adjusting for the expected 90% response rate among providers and 85% for patients, we would need to survey 55 practitioners and 337 patients (smokers only) in each of the groups (intervention and control).

Dissemination:

- International meetings and conferences: Global Bridges website and meetings, World and European Conferences on Tobacco Or Health, Smoke-Free Hospitals European Network, European Network for Smoking Cessation
- Social media/Websites: Eastern European Network for Tobacco Control Facebook Group established by the Armenian PI (Russian, English) and the new website of Online Smoking Cessation Training and Resource Center (Russian, Armenian)
- Media: Press conferences, reports, briefs, interviews

- ***Detailed Workplan and Deliverables Schedule:***

**Project Workplan: 1November 2014 - 31 October 2016**

<b>Project Milestone</b>	<b>Expected duration</b>	<b>Deliverables</b>
Formative research (FGDs)	2 months	Report available

Development of the course and training of the faculty	6 months	Curriculum designed. Materials developed. Promotional kit and patient education materials ready. Two members of the YSMU Faculty are trained
Baseline survey	2 months	Assessment tools ready Interviewers/facilitators trained Baseline survey completed at intervention and control sites
Physicians' Training	3 months	At least 55 FP successfully completed the course.
Designing and launching the SC Resource Center	3 months	The Website is launched
1 year follow up FGDs/ Workshops	2 months	Report available
Follow up survey	2 months	Survey completed at intervention and control sites
Conference	2 months	Conference materials
Evaluation	2 months	Evaluation report
Publicizing the results	6 months (including after the completion of the project)	Abstracts, presentations, articles