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Smoking cessation in drug and alcohol treatment settings: a qualitative study of staff and client barriers and facilitators

Billie Bonevski
University of Newcastle

Amanda Wilson
University of Newcastle

Adrian Dunlop
Hunter New England Drug and Alcohol Services

Anthony Shakeshaft
National Drug and Alcohol Research Centre

Flora Tzelepis
University of Newcastle

See next page for additional authors

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Abstract

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Authors

Billie Bonevski, Amanda Wilson, Adrian Dunlop, Anthony Shakeshaft, Flora Tzelepis, Scott Walsberger, Michael Farrell, Peter James Kelly, Ashleigh Guillaumier, and Eliza Skelton

SMOKING CESSATION IN DRUG AND ALCOHOL TREATMENT SETTINGS: A QUALITATIVE STUDY OF STAFF AND CLIENT BARRIERS AND FACILITATORS

BILLIE BONEVSKI,¹ AMANDA WILSON,¹ ADRIAN DUNLOP,² ANTHONY SHAKESHAFT,³ FLORA TZELEPIS,^{1,4} SCOTT WALSBERGER,⁵ MICHAEL FARRELL,³ PETE KELLY,⁶ ASHLEIGH GUILLAUMIER,¹ ELIZA SKELTON¹

1School of Medicine and Public Health, University of Newcastle, Newcastle, New South Wales, Australia,

2Hunter New England Drug and

Alcohol Services, Newcastle, New South Wales, Australia, 3National Drug and Alcohol Research Centre,

Sydney, New South Wales, Australia, 4Hunter New England Population Health, Hunter New England Local

Health District, Newcastle, New South Wales, Australia, 5Tobacco Control Unit, Cancer Council New South

Wales, Sydney, New South Wales, Australia, 6Psychology Department, University of Wollongong, Wollongong,

New South Wales, Australia

Presenter's email: billie.bonevski@newcastle.edu.au

Issues: In Australia 77–95% of people entering drug and alcohol treatment smoke tobacco. Tobacco treatment guidelines recommend smokers with dependence be offered help to quit. However, drug and alcohol services rarely address tobacco smoking. In order to design interventions to help increase delivery of smoking cessation care within the drug and alcohol setting, and to increase uptake by clients who smoke, it is important to understand the barriers and facilitators of the delivery and use of smoking cessation treatment. The aim of this study was to explore the barriers and facilitators for the implementation of smoking cessation care in drug and alcohol treatment settings from the perspective of staff and clients who smoke.

Approach: A qualitative study was conducted in four government funded drug and alcohol services in NSW, Australia. In-depth interviews were conducted with 20 staff and two focus groups were held with 11 clients who smoke.

Key Findings: Staff indicated they do not routinely speak to clients about quitting smoking. Staff believed that tobacco was a serious health concern and an appropriate part of their role. Barriers identified were largely related to the system of care: a lack of acknowledgement that tobacco is a drug like other illicit drugs, lack of resources and lack of dedicated time. Clients who were using tobacco reported previous attempts to quit, and a desire to quit but no offer of help from the treatment services. They reported they would like to receive quitting assistance from staff.

Implications: The results suggest that strategies that build the capacity of drug and alcohol treatment services and staff to address client tobacco use are needed.

Conclusion: This study found that drug and alcohol treatment clients would accept an offer of help to quit smoking from staff. Staff need organisational support to address their clients' smoking.

Implications for Practice or Policy: The study has important implications for the introduction of routine and systematic provision of smoking cessation support for drug and alcohol clients.

Implications for Translational Research: This study was conducted as part of the development phase of the Tackling Nicotine Together trial which is an organisational change intervention aimed at increasing rates of smoking cessation care delivery in Australian drug and alcohol treatment centres and increasing smoking cessation amongst clients.