

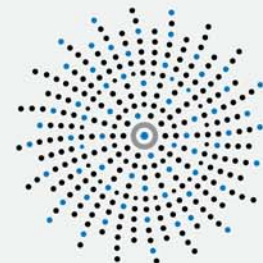
Smoking Cessation Referrals and Optometrists Assessing Practices and Opportunities in Canada

Ryan David Kennedy, PhD.
Scientist, Propel Centre for Population Health Impact

Transdisciplinary Tobacco Rounds (TTR)

Findings from the
CAN-ADAPTT Seed Grant Funded Research

March 23, 2011



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Research Team:



UNIVERSITY
OF MANITOBA



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Additional Funding:



THE ONTARIO
TOBACCO
RESEARCH
UNIT

UNITÉ
DE RECHERCHE
SUR LE TABAC
DE L'ONTARIO

Interdisciplinary Capacity Enhancement
advancing the science to reduce tobacco use

Rehaussement des compétences par l'interdisciplinarité
faire progresser la science pour réduire l'usage du tabac



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

Who are Optometrists?

- Optometrists are independent primary practitioners
- Approximately 4000 practicing across Canada
- Optometrists are a primary care provider group that has not been fully integrated into the national cessation network
- Many advantages of working with this community



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

Who are Optometrists?

- 2 universities in Canada (UWSO, UM)
- Direct link between smoking and ocular health
- Patients fear of blindness
- Information is new
- Opportunities for cessation and prevention efforts



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

Why Optometrists?

- Smoking is causally linked to numerous eye diseases in particular age-related macular degeneration (AMD) and cataracts
- AMD is the principal cause of blindness in developed countries.
- The United Kingdom has an estimated 18,000 people with blindness caused by AMD related to smoking
- Used in different social marketing campaigns including warning labels
- Evaluate very well in Australia and New Zealand

SMOKING CAUSES BLINDNESS
Health Authority Warning

Quitline
131 848

Smoking causes irreversible damage to the back of the eye. This is known as macular degeneration. Central vision is lost, blindness may follow.

You CAN quit smoking. Call **Quitline** 131 848, talk to your doctor or pharmacist, or visit www.quitnow.info.au



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

RESEARCH QUESTIONS

- What Involvement do Canadian optometrists have in:
 - Asking patients about their smoking behaviour?
 - Referring patients to cessation services?
 - Encouraging patients to reduce and/or quit smoking?
- What are Canadian optometrists' attitudes toward addressing tobacco use within the scope of their practice?
- What opportunities exist within the Canadian optometry community to assist with further tobacco cessation and prevention efforts?



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

RESEARCH METHODS

- Search and review the literature, regarding public health, tobacco control, and eye-health.
- Develop a survey tool relevant to optometrists in Canada
- Conduct focus groups with optometrists along with current students and new graduates of the University of Waterloo's School of Optometry.
- Write a grant proposal for a national survey of Canadian optometrists regarding current practices and opportunities around smoking cessation referrals



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

STUDY DETAILS:

- Lit Review
 - Health effects associated with smoking and ocular health
 - Chronic disease vs. quality of life
 - Fear of blindness
 - Risk communication related to eye disease
- Focus Groups with practicing community optometrists
- Focus Groups with Senior (4th year) UWSO students



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

STUDY DETAILS:

- In total 29 informants participated one of 5 focus groups
 - 2 optometrist sessions
 - 3 student sessions
- The majority of informants were women (76%, n=22).
- Participants were told that the focus groups would be dealing with public health issues including tobacco use among patients.
- Analysis of findings used the 'Framework Approach' – Bryman and Burgess (1993)



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

FINDINGS:

An analysis of the 5 focus group transcripts revealed four main themes regarding patient tobacco use and optometrists:

- 1) current practices,
- 2) rationalizations,
- 3) barriers and
- 4) opportunities.



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

FINDINGS:

1. Current Scope of Practice

- There is currently little involvement by optometrists to address smoking behaviour beyond establishing if patients smoke.
- There is currently no efforts by optometrists to support or facilitate cessation services with their patients.
- There were no reported incidents of using smoking and eye damage in a health prevention model (to non-smokers).

Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

FINDINGS:

2. Process of Rationalization

- Optometrists are widely involved in addressing lifestyle or behavioural impacts on eye health including UV exposure and diabetes. However, optometrists view smoking as a 'choice' or a lifestyle decision and not as an addiction.
- Optometrists perceive smoking as firmly in the domain of the family physician.
- There are concerns that the public will not think it is appropriate for optometrists to discuss smoking.

Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

FINDINGS:

3. Barriers

- Understanding of smoking behaviour, smokers, addiction or smoking cessation processes and services is very low.
- Minimal training is provided to students about smoking behaviour – presented largely as a risk factor to disease.
- There is a perceived lack of efficacy to addressing smoking behaviour.
- Consequences of counselling patients about smoking behaviour is feared, including losing patients from the practice.

Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

FINDINGS:

4. Opportunities

- Optometrists typically spend up to 30 minutes with patients, during which counselling about smoking could occur.
- Optometrists take mandated continuing education which could include communication training about smoking.
- Optometrists are open to inter-professional collaboration.
- Optometrists feel positive about the possibility of awareness campaigns that link eye damage to smoking.

Smoking Cessation Referrals and Optometrists

RD Kennedy| March 23, 2001
TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

3 Conference Posters:

RD Kennedy, MM Spafford, C Parkinson, GT Fong. (October 2010) Knowledge of the Causal Association between Smoking and Blindness in Canada, United States, United Kingdom, and Australia: Findings from the ITC Four Country Survey. Asia Pacific Conference on Tobacco or Health (APACT), Sydney Convention & Exhibition Centre, Sydney, Australia.

RD Kennedy, MM Spafford, MD Iley, A Schultz. (February 2010) Optometrists and smoking cessation referrals- practices, barriers and opportunities in Canada. Society for Research on Nicotine and Tobacco (SRNT) Annual Meeting, Hilton Baltimore Hotel, Baltimore, Maryland.

RD Kennedy, M Spafford, A Schultz, MD Iley (November, 2009) 6th Optometrists and smoking cessation referrals - Assessing practices and opportunities in Canada, National Conference on Tobacco or Health, Queen Elizabeth Hotel, Montreal, Quebec.



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

1 Conference Presentation:

ME Spafford, RD Kennedy, A Schultz, MD Iley. Smoking cessation referrals by optometrists: A pilot study assessing practices and opportunities. American Academy of Optometry National Conference, Orlando, Florida. November 12, 2009.

1 invited talk to public health practitioners:

Ryan Kennedy invited to speak to the Southwest Tobacco Control Area Network (TCAN) - August 18, 2010, about the research findings to help inform their efforts to increase cessation referrals.



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

4 academic journal papers:

MM Spafford, MD Iley, A Schultz, RD Kennedy. 2010 Tobacco dependence education in optometry: A Canadian pilot study assessing practices and opportunities. *Optometric Education*, 36(1): 38-44.

RD Kennedy, MM Spafford, CM Parkinson, GT Fong., Knowledge about the Relationship between Smoking and Blindness in Canada, United States, United Kingdom, and Australia: Results from the ITC Four Country Survey. *Optometry Journal of the American Optometric Association*. (accepted January 2011)



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

4 academic journal papers (cont.):

RD Kennedy, MM Spafford, ASH Schultz, MD Iley & V Zawada. Smoking cessation referrals in optometric practice: A Canadian pilot study. *Optometry & Vision Science* (in press – June 2011).

MM Spafford, RD Kennedy, MD Iley, & ASH Schultz. Smoking and blindness: What optometrists want their patients to see. *Canadian Journal of Optometry*. Submitted December 2010.

1 academic journal papers currently under consideration:

ASH Schultz, RD Kennedy, MM Spafford, & MD Iley. Seeing opportunities to link optometrists and tobacco interventions.



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

Policy and Practice Outcomes:

- Discussions about the research with a public health nurse (Carol Bossonberry) in Oxford County resulted in Carol sending cessation kits to all community optometrists in Oxford county.
- The poster presented at the Montreal conference attracted the attention of different public health units –
 - The Southwest TCAN (tobacco control area network) in Ontario became very interested after the conference in engaging optometrists. This group of public health workers co-operated with the Ontario Association of Optometrists to produce a document



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

Policy and Practice Outcomes:

Ontario Association of Optometrists to produce a document

Quitting tobacco is hard, but optometrists can help

Tue, 31 Aug 2010

Quitting Tobacco is Hard:

Optometrists are in a unique position to help - it just takes 3 minutes!

Optometrists have an important role to play in helping patients quit using tobacco.
As an optometrist, you see the impact of tobacco use on your patients.....



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001
TTR – CAN-ADAPT

OUTCOMES FROM THE RESEARCH

32 Public Health

JANUARY 2010 / Optometry Times

Optometrists can establish role in promoting smoking cessation

Pilot study identifies OD training in proper communications to patients, outlines potential barriers

By Cheryl Guttman

Reviewed by Marlee M. Spafford, OD, PhD

Orlando, FL—A link between smoking and eye diseases establishes a role for optometrists in promoting smoking cessation. Results of a pilot study exploring key attitudes and behaviors among optometrists and optometry students, however, show smoking habits are not routinely discussed with patients. Neither are referrals for smoking cessation being made, reported Marlee Spafford, OD, PhD, at the annual meeting of the American Academy of Optometry.



Dr. Spafford

Dr. Spafford, professor, University of Waterloo School of Optometry, Ontario, Canada, presented the findings from a collaborative study led by psychology doctoral student, Ryan Kennedy, MAEd, and involving optometry (Dr. Spafford and Matt Ley, RSc, OD) and nursing (Annette Schultz, RN, PhD). Transcripts prepared from five 90-minute, audio-recorded focus sessions involving 18 senior optometry students from the school and 11 optometrists practicing in the surrounding Waterloo region were reviewed by research team members and coded for themes on attitudes and behaviors.

Smoking questions limited

The analyses showed that although the optometry students and optometrists usually asked patients about smoking habits, their questions were generally limited to identifying if patients smoked and how much. In addition, risk advice regarding smoking tended to be provided only when patients had evidence of diseases known to be causally related to smoking, such as age-related macular degeneration or nuclear cataract; and none of the focus group participants had ever made smoking cessation referrals.

Group discussions revealed, however, that the students and practitioners appreciated the importance of discussing smoking habits with patients and indicated several potentially modifiable barriers to this role.

"Numerous international studies have shown that while smokers have a high level of knowledge about smoking as a risk factor

Take-Home Message

A pilot study investigated current practices of optometrists in determining smoking status among their patients and aiding with smoking cessation.

for heart disease, lung disease, and stroke, fewer than 10% recognize its association with eye disease. The relevance of this information is that various studies also show smokers are afraid of blindness, and so intervention by eye care providers may be an opportunity to work toward smoking cessation," Dr. Spafford said.

"International studies have shown that while smokers have a high level of knowledge about smoking as a risk factor for heart disease, lung disease, and stroke, fewer than 10% recognize its association with eye disease."

Marlee M. Spafford, OD, PhD

"Our findings identify needs to: increase understanding among optometrists that speaking with patients about smoking cessation is within their role; improve training for communicating with patients on addiction, smoking behavior, and cessation strategies; and increase interprofessional collaboration opportunities and public education."

The barriers to optometrists facilitating smoking cessation reflected four major themes related to the optometrists' perceived role: insufficient training, perceived patient attitudes, and health care system limitations.

Participants considered family physicians the key health care providers who should be working with patients about smoking cessation, but they felt uncomfortable taking on this task themselves. They felt they lacked sufficient training in addition, smoking behavior, cessation strategies, and communication strategies for discussing these issues.

Furthermore, the students and optometrists assumed patients would be surprised to be approached by optometrists about this topic and were worried patients would reject their efforts and perhaps lead them to discontinue their optometry care.

Finally, a lack of financial reimbursement for optometrists to counsel patients or make smoking cessation referrals and a lack of time during the office visit were identified as health care system constraints.

Need for multidisciplinary care

The focus group participants showed clear interest in interprofessional collaboration. This stance suggests opportunities for optometrists and family physicians to work together regarding smoking cessation referrals for patients and a need for governments to provide public education on the links between smoking and blindness, Dr. Spafford said.

"In Australia, where a public education campaign on smoking and blindness was launched 3 years ago, about 50% of the public recognizes the vision risks of smoking," she noted.

The results of this pilot study are being used to develop a national survey of Canadian optometrists regarding practice patterns and opportunities for smoking cessation referrals in optometric practice. **OP**

FYI
Marlee M. Spafford, OD, PhD
E-mail: mspaff@uwaterloo.ca
Dr. Spafford did not indicate a financial interest in the subject.

News Stories in:

- "Optometry Times" (on left)
- Waterloo Region Record
- University of Waterloo Daily Bulletin



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT*

In partnership with:

UNIVERSITY OF
WATERLOO



Canadian Society
for Cancer Care
société canadienne
de soins
du cancer

Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

OTHER GRANT:

The following grant was applied for – January 15, 2011: Canadian National Institute for the Blind (CNIB), Baker New Investigator Award

Optometrists and Tobacco Use Interventions – Assessing Current Practices, Opportunities and Barriers to Prevent Vision Loss

PI – Ryan David Kennedy, Ph.D. Propel Centre for Population Health Impact

Co-Investigators --

Marlee M. Spafford, OD, MSc, PhD, FAAO, Professor, University of Waterloo School of Optometry

Annette SH Schultz, Ph.D., RN, Assistant Professor, Cancer Prevention, Cancer Nursing Research, University of Manitoba

Geoffrey T. Fong, Ph.D., Professor, University of Waterloo, Senior Investigator, Ontario Institute for Cancer Research (OICR)

Collaborators

Julie Brûlé, OD, MSc., Professeure adjointe (Assistant Professor), École d'optométrie, Université de Montréal

David Hammond, Ph.D., Assistant Professor, Health Studies and Gerontology, University of Waterloo

Mary E. Thompson, PhD, Professor Emerita, Department of Statistics and Actuarial Science, Co-Director, Survey Research Centre, University of Waterloo



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO



Smoking Cessation Referrals and Optometrists

RD Kennedy | March 23, 2001

TTR – CAN-ADAPTT

OUTCOMES FROM THE RESEARCH

OTHER GRANT:

RESEARCH OBJECTIVES:

The proposed CNIB funded project will:

Conduct a census survey of community optometrists and senior Doctor of Optometry students to:

1. Generate evidence of current practices with respect to addressing tobacco use prevention and cessation interventions
2. Explore perceptions of opportunities or barriers to the optometry community's involvement in preventing vision loss caused or exacerbated by using tobacco



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

In partnership with:

UNIVERSITY OF
WATERLOO





PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™



Canadian Cancer Society
Société canadienne
du cancer

UNIVERSITY OF
WATERLOO

The Propel Centre for Population Health Impact™
is a partnership between the Canadian Cancer
Society and the University of Waterloo (UW).