



# TOBACCO CONTROL AND ADVOCACY IN YOUTH

## Philippines

# Background

- The Philippine Ambulatory Pediatric Association (PAPA) is an organization of generalist pediatric clinicians dedicated to the improvement in the healthcare of the Filipino children
- Various public health preventive and advocacy campaigns
  - Tuberculosis
  - Health Care Prevention
  - Literacy
  - Tobacco Control

# Background

- In March 2010, during the 15<sup>th</sup> Annual PAPA Convention, some of the highlights were a focus on the role of pediatricians in tobacco control among children
  - Physicians may know tobacco effects but lack the skills needed to advocate for tobacco control
  - Physicians are a major force needed in the community for tobacco control advocacy

# Background

- Influence families to prevent and reduce tobacco use and second hand smoke exposure among children and youth
- Champions, advocates and spokespersons for changes in policies and social norms and supporting youth cessation programs

# Background

- In August 2010, PAPA adapted the Basic Tobacco Intervention Skills training module from the Guam version (Adapted from the University of Arizona)

**Training Pediatricians  
to Advise  
Parents and Youth**



# Background


- BTIS renamed to



(Brief Advice for Smoking Cessation)

# How we implemented the project

- Training modules and materials

-  (Brief Advise on Smoking Cessation) Manual
- Algorithm on giving brief advise
- Video role-play on brief advise
- Pre-and post-test assessment forms



# How we implemented the project

- Trainings on BASiC were given to select pediatric healthcare providers from different cities and municipalities



**Davao**



**Pampanga**





**Tarlac**



**Sorsogon**



**Medicine of the Philippines , INC. (SAMPI)**

# Project activities /photos

<b>City / Municipality</b>	<b>Date</b>	<b>No. of Participants</b>	<b>Designation</b>
Mandaluyong City	29-Sep-2010	14	MDs
Tarlac	01-Dec-2010	17	MDs
Bataan	03-Dec-2010	16	MDs
Davao City	06-Dec-2010	20	MDs, RNs
Leyte	07-Feb-2011	77	MDs
Sorsogon	17-Feb-2011	31	MDs, RN

# Project activities /photos

<b>Cebu City</b>	<b>07-Mar-2011</b>	<b>44</b>	<b>MD,</b>
San Juan City	30-Mar-2011	25	MD, Society of Adolescent Medicine of the Philippines , INC. (SAMPI)
Tarlac	29-Jul-2011	41	MD, BHW, RN
Dumaguete City	03-Aug-2011	82	MD, RN, RM, Dentist, Health Director, Jail Nurse
Pampanga City	27-Sep-2011	17	NCD Nurse Coordinators, MD, BHW
Dumaguete City	09-Oct-2011	33	Professors, RN, NGO, MDs,
Davao City	17-Nov-2011	22	MD, RN, TB DOTS Coordinators, RM

# BASiC Courses

Orientation and



Training in City of  
Santiago, Isabela



# Challenges and obstacles Beyond BASiC

- Lack of resources
  - Financial
  - human resources
  - Need Quit Clinic/Resource Center
- Constraints because of physical distance between sites, time constraints

# TOBACCO RESOURCE CENTER

Medical  
treatment

**MOTIVATIONAL  
INTERVIEWING  
(MIND)**



Brief Advice for Smoking Cessation

# Objectives of the Project

Establish a pilot “children and tobacco” resource centre in two sites (Metro Manila and Negros Oriental)



# How we planned the project

- Key persons from both sites were identified to lead in the development of the resource centers:
  - University of the Philippines-Philippine General Hospital
  - Silliman University in Dumaguete City, Negros Oriental

# How we planned the project



**PGH**



**Silliman University**

# How we planned the project

- Meetings were conducted in order to discuss issues with the development of the resource centers.
  - Focus of the centers will be children and adolescents
  - Four arms of the resource center have been identified
    - Research
    - Training
    - Service
    - Advocacy - public policy

# SERVICE

- Developed Standard Clinic Forms for use on patients given brief advise

QSC Form 1

**Quit Smoking Clinic  
BASIC INTAKE FORM**

SITE: \_\_\_\_\_  
 Referred by: \_\_\_\_\_ No. of times Brief Advise given: \_\_\_\_\_  
 DATE: \_\_\_\_\_ HEALTHCARE PROVIDER: \_\_\_\_\_  
 NAME OF PATIENT: \_\_\_\_\_ AGE/SEX: \_\_\_\_\_  
 DATE OF BIRTH: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ RELATIONSHIP TO PATIENT: \_\_\_\_\_  
 INFORMANT'S NAME: \_\_\_\_\_  
 CONTACT NUMBER: \_\_\_\_\_

**For all parents or guardians of pediatric patients:**  
 ASK: Does anyone in the house where the child lives smoke? ( ) Yes ( ) No  
 If yes, who? \_\_\_\_\_ Relationship to child/patient: \_\_\_\_\_  
 Does anyone smoke when the child is around? ( ) Yes ( ) No  
 If yes, who? \_\_\_\_\_ Relationship to child/patient: \_\_\_\_\_  
 (For adult patients) Do you smoke? Why? ( ) Yes ( ) No  
 Ask Further \_\_\_\_\_

ADVISE: Was advice given? ( ) Yes ( ) No  
 ASSES: Is the smoker willing to set a quit date? ( ) Yes ( ) No  
 If yes, quite date: \_\_\_\_\_

ASSIST: Were IEC materials given? ( ) Yes ( ) No  
 Was a quit plan done? ( ) Yes ( ) No

ARRANGE: Was the smoker referred to Quit Clinic? ( ) Yes ( ) No  
 Was the smoker willing to go to the Quit Clinic? ( ) Yes ( ) No

**For patients 6 to 9 years old AND adolescents 10 to 17 years old:**  
 ASK: Does the patient smoke? ( ) Yes ( ) No Have you tried smoking? ( ) Yes ( ) No  
 If yes, at what age did you first try smoking? \_\_\_\_\_  
 If yes, where do you get/buy the cigarettes? \_\_\_\_\_  
 If yes, do you smoke regularly? ( ) Yes ( ) No  
 How many sticks in a day? \_\_\_\_\_  
 Why do you smoke? \_\_\_\_\_

Does anyone smoke when the patient is around? ( ) Yes ( ) No  
 If yes, who? \_\_\_\_\_ Relationship to child/patient: \_\_\_\_\_

ADVISE: Was advice given? ( ) Yes ( ) No  
 ASSES: Is the smoker willing to set a quit date? ( ) Yes ( ) No  
 If yes, quite date: \_\_\_\_\_

ASSIST: Were IEC materials given? ( ) Yes ( ) No  
 Was a quit plan done? ( ) Yes ( ) No

ARRANGE: Was the smoker referred to Quit Clinic? ( ) Yes ( ) No  
 Was the smoker willing to go to the Quit Clinic? ( ) Yes ( ) No

QSC Form 2

**QUIT CLINIC  
PATIENT ASSESSMENT CHART**

SITE: \_\_\_\_\_  
 REFERRING DOCTOR: \_\_\_\_\_  
 CASE NUMBER: \_\_\_\_\_  
 VISIT NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

**PERSONAL INFORMATION:**  
 NAME: \_\_\_\_\_ AGE/SEX: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 CONTACT NUMBER: \_\_\_\_\_

RACE: ( ) ASIAN ( ) OTHER: \_\_\_\_\_

MARITAL STATUS: ( ) SINGLE ( ) MARRIED ( ) SEPARATED ( ) WIDOW/WIDOWER ( ) Partner

EMPLOYMENT STATUS: \_\_\_\_\_  
 ( ) EMPLOYED: ( ) FULL TIME ( ) PART-TIME OCCUPATION: \_\_\_\_\_  
 ( ) UNEMPLOYED  
 ( ) STUDENT: GRADE/LEVEL: \_\_\_\_\_  
 ( ) RETIRED  
 ( ) HOMEMAKER

EDUCATIONAL ATTAINMENT: ( ) NONE ( ) ELEMENTARY ( ) HIGH SCHOOL  
 ( ) COLLEGE ( ) VOCATIONAL ( ) POSTGRADUATE

SOCIAL AND ENVIRONMENTAL PROFILE  
 Household Profile: Number of people in household \_\_\_\_\_  
 Living with parents \_\_\_\_\_  
 Alone \_\_\_\_\_  
 Significant others, please specify: \_\_\_\_\_  
 Support System: \_\_\_\_\_

**MEDICAL HISTORY:**  
 SYSTEMS REVIEW  
 ( ) SKIN DISEASES: \_\_\_\_\_  
 ( ) HEENT: \_\_\_\_\_  
 ( ) THYROID CONDITIONS: \_\_\_\_\_  
 ( ) CARDIOVASCULAR: \_\_\_\_\_  
 ( ) RESPIRATORY: \_\_\_\_\_  
 ( ) GASTROINTESTINAL DISEASES: \_\_\_\_\_  
 ( ) GENITOURINARY /RENAL DISEASES: \_\_\_\_\_  
 ( ) HEMATOLOGIC DISEASES: \_\_\_\_\_  
 ( ) PSYCHIATRIC CONDITIONS: \_\_\_\_\_  
 ( ) NEUROLOGIC CONDITIONS: \_\_\_\_\_  
 ( ) OTHERS: \_\_\_\_\_

# ADVOCACY

- Developed IEC materials and posters for use in the resource centers





Brief Advise for Smoking Cessation



**“Stop smoking!  
Start with the BASiC”**

# Project achievements and outcomes

- Started the process of Establishing a Tobacco Resource Center in Manila (PGH) and Dumaguete City Negros Oriental (Silliman University)
- Trained select pediatric healthcare providers from both sites to serve as future trainers
- Developed IEC Materials, standard clinic forms for BASiC and training manual and materials for use of the resource centers

# The way forward

- Formulate ways for the centers to become sustainable
  - Expansion of BASiC
    - medical/nursing/paramedical
    - Local organizations and lay people
      - Teachers
      - Parents
      - School children
  - Elicit support from LGUs, NGOs, local civic groups, etc.



# The way forward

- Mobilize the network of pediatricians for advocacy on tobacco control policies and regulations in the sites; and
- Produce materials for use by the resource centers.

# The way forward

- Create and formalize these tobacco resource centers and subsequently to expand its operations to nearby areas
  - Expansion of training on BASiC as well as MIND (intensive intervention)
  - Encourage research on tobacco cessation
  - Expansion of service on tobacco cessation to nearby areas
  - Encourage Advocacy on tobacco control

# The way forward

- Incorporate BASiC in existing programs
  - TB DOTS
  - IMCI counselling



DAVAO CITY 2011



Clark Pampanga 28-Sep-2011



---

**Davao City**

**17-Nov-2011**

---



**Dumaguete City**

# The Future

- Formalize a coalition to include a multi-sectoral group
  - a. Local chief executives
  - b. Government Agencies
  - c. Media -- broadcasters and journalists
  - d. Children and Youth Groups
  - e. Medical, Nursing and Paramedical Organizations



# COALITION