

IMPROVING THE RETENTION RATES OF TWO EVIDENCE-BASED SMOKING CESSATION TRIALS DESIGNED THROUGH A PARTICIPATORY APPROACH

F. Wagner^{1,2}, *P. Sheikhattari*^{1,2}

¹Prevention Sciences Research Center, ²School of Community Health and Policy, Morgan State University, Baltimore, MD, USA

Introduction: Smoking cessation services targeted for underserved populations usually have lower retention and higher relapse rates.

Objectives/aims: This study reports the results of two consecutive randomized trials aimed at improving smoking cessation rates through better adherence to the intervention plan among residents of low income urban community in the United States.

Methods: We compare the effectiveness of a behavior change and pharmacotherapy intervention across participants in the clinic-based and the community-based interventions. A total of 543 participants were recruited. Participants in both trials received training on smoking cessation for twelve weeks, but the second intervention was delivered by peer motivators and included use of more motivational techniques, based on lessons learned from the first trial using principles of a participatory approach.

Results: The smoking cessation rate in the first trial was relatively low (i.e., quit rates of about 10%), with a high level of attrition (i.e., only 14% attended 6-12 sessions). Preliminary data show a very significant increase in the proportion of participants in second trial who quit smoking, as compared to participants in the first trial (OR=4.4; 95%CI= 2.4, 8.3; P< 0.001) with significantly higher level of retention rate (53%).

Conclusion: Community based smoking cessation programs in underserved communities can be more successful if they include proper incentives to retain participants and are supported by community organizations. The process of how the new intervention is informed by the previous trial will be described with special attention to a new incentive program that includes non-monetary club membership awards and status.