

Title of Intervention: A Pediatric Resident Training Program to Prevent Tobacco Use

Intervention Strategies: Provider Education

Purpose of the Intervention: To help pediatric residents incorporate smoking cessation counseling into their outpatient clinical practice

Population: Pediatric residents and parents of pediatric patients seen for well child examinations

Setting: A hospital-based pediatric residency program and continuity clinic; health care facility-based

Partners: None mentioned

Intervention Description:

- Provider Education: Pediatric residents were trained by educators over a two-week period to provide smoking cessation counseling to the parents of their pediatric patients. The training was based on the National Cancer Institute curriculum. The continuity clinic session contained one of the child health role-playing exercises from the National Cancer Institute guide. Copies of the National Cancer Institute Smoking Cessation Guide were provided to each physician trained.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Educators
- Training: Educator training
- Technology: Not mentioned
- Space: Meeting space
- Budget: Not mentioned
- Intervention: Presentation materials, the National Cancer Institute curriculum, smoking cessation guides
- Evaluation: Questionnaires: Smoking Cessation Counseling Practice - modified

Evaluation:

- Design: Pre- and post-test with no control
- Methods and Measures:
 - Questionnaires assessed residents' knowledge, attitudes and practices regarding smoking cessation.
 - Interviews with parents of pediatric patients assessed the self-report validity of physician counseling behavior.

Outcomes:

- Short Term Impact: Residents who received the manual and read it were more likely to ask about something, felt more able to counsel effectively and used more techniques associated with effective smoking cessation counseling than those who did not use or read the manual.
- Long Term Impact: Not measured

Maintenance: Not mentioned

Lessons Learned: Smoking cessation education should include strategies for involving office staff and for the creation of a health promoting, supportive clinical environment for provider counseling. These strategies should be applied in the training setting and should be addressed in didactic sessions designed to prepare residents for primary care practice. For residents to learn effective prevention counseling strategies, systematic, reinforced preventive educational curricula must become an institutionalized part of residency training.

Citation(s):

Klein, J. D., M. Portilla, et al. (1995). "Training pediatric residents to prevent tobacco use." *Pediatrics* 96(2 Pt 1): 326-30.