

Title: Pilot: Veteran social support intervention for enhancing smoking treatment utilization and cessation

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Significance: Social support interventions may enhance access and use of evidence-based tobacco cessation treatments (EBCTs) to reduce tobacco-related health disparities. We piloted a social support intervention for Veterans who smoke cigarettes. The aims were: 1) to assess the feasibility of recruiting dyads comprised of Veterans who smoke and their support person (SP), and 2) to assess the preliminary intervention effects on Veteran use of EBCT and smoking abstinence.

Methods: We conducted a randomized controlled pilot trial within the national VHA health system. Veterans who smoke cigarettes, regardless of level of readiness to quit, were identified nationally and proactively recruited. To enhance recruitment among Veteran women, we received feedback from the Women's Veteran Engagement Panel on recruitment strategies. Interested Veterans were asked to identify a SP who would enroll. Participants were randomized as Veteran-SP dyads to the SP intervention (based on Cohen's theory of social support) or control condition. All Veteran and SP participants received information on EBCTs. All SP participants received support tips. SP participants in the intervention group additionally received a 1-call coaching session to encourage the Veteran to use EBCTs. Follow-up survey assessments for dyads were conducted at baseline, 1-month, and 4-months post-randomization. Veterans who self-reported abstinence completed remote biochemical verification at 1-month and 4-months.

Results: Of the 605 Veterans invited to join the study, 38 Veterans were interested in participating in the study, returned a baseline survey, and nominated a SP. 27 of the 38 nominated SPs consented to participate, resulting in 27 dyads randomized. A total of 14 dyads were randomized to the intervention group, and 13 dyads to the control group (18 women Veterans, 9 male Veterans). At 4-months, Veteran intervention participants reported a higher rate of cessation medication use (57% vs. 31%) and use of EBCT (64% vs. 38%) than control participants. Veteran intervention participants reported higher rate smoking abstinence than control participants (57% vs 15%).

Conclusion: The recruitment methods were feasible, especially for women Veterans. The intervention may lead to higher Veteran use of EBCT and smoking abstinence. This project including women Veterans provides preliminary evidence that a social support intervention increases use of cessation treatment among Veterans who smoke.