



Smoke Free Homes Project Evaluation

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1. Introduction

Smoke Free Sefton Homes is a project set up to encourage families and households of both smokers and non-smokers to make their home a smoke free environment. By pledging to become a Smoke Free Home householders are providing a safe and pleasant environment for themselves, their families and their friends.

It was decided that a pilot study would be carried out in the Netherton area incorporating all addresses in the L21 and L30 areas, this is around 19,000 homes. A leaflet was produced and distributed to inform occupiers of the risks of smoking in the home and the benefits of a Smoke Free Home. A Door to Door leaflet drop was made in the week preceding the launch of the project to 10,000 homes; more were delivered to other key places and key figures in the community via a variety of locations. These included The Netherton Feelgood Factory, the Netherton Activity Centre and several chemists in the Netherton area along with the nurses from the Stop Smoking Service and Netherton Sure Start.

For the public to pledge their commitment to make their home totally smoke free they were required to fill in an application form which was attached to the smoke free homes literature and return it to the Sefton Health Improvement Support Service using the free post which was made available. Once the application was received a certificate was sent out to confirm their pledge and a resource pack was included to support the participants in maintaining their commitment to this project.

To further promote and publicise the Smoke Free Homes Project a launch event was organised on Saturday 11th June at the Netherton Feelgood Factory between 11am and 2pm. A flyer inviting people to attend was produced and 3000 delivered door to door in a random selection of houses around Netherton.

As well as using the day as a launch event for the project the opportunity was taken to host a family fun day. There were a range of activities throughout the day for all ages including: Sefton O.P.E.R.A (alternative therapies), Healthworks, Kids EXCEL, beauty therapies for pregnant mums, B&Q DIY demonstrations, Children's art sessions and the crèche. In addition, information stalls were manned by a selection of local service providers i.e. Sure Start, SHISS and the Stop Smoking Service. This event has been evaluated and a report was compiled.

2. Evaluation

This health project was assessed to provide validated results on the effectiveness of this initiative using a standardised questionnaire. This was distributed to all participating households three months after they had pledged to become Smoke Free Home.

The aim of this evaluation was to determine the current smoking status of each of the households' i.e. is the household still a Smoke Free home after 3 months? It will also be of interest to find out whether people have changed their smoking habits, by making that informed decision to smoke outside the home or even stop smoking all together.

A total of 74 households out of 10,000 pledged to become a Smoke Free Home equating to an overall response rate of 0.7%. Of these, 29 respondents (39%) returned the questionnaire, 8 males and 21 females. The average age of the respondents was 43 years, with a range between 22-80 years. That resulted in 45 respondents not returning the questionnaire. When analysing the data of the non respondents the vast majority were female (81%) and over half (61%) lived within the Netherton area.

2.1 Composition of Household

Twenty four percent (24%) of the respondents live in single occupancy households. 28% of households are occupied by 2 people, 24% are occupied by 3 people and 18% of households are occupied by 4 people. 6% of households are occupied by more than 4 people.

In total 45% of the respondents have children (under 16's) living in these households. 24% have one child, 14% have two children and 7% have three children.

Of the 29 respondents who returned their questionnaires three stated that one person from their household smoked and another two stated that two people smoked. 83% of households had no smokers.

2.2 How did they hear about the project?

It is important to analyse how each household became aware of this project resulting in them pledging to become a Smoke Free home. 24% of respondents received details from health professionals, 17% received a leaflet through the door, and 17% pledged to become a Smoke Free home when they attended the launch event at the Netherton Feelgood Factory. A further 7% were recommended by friends or family who had already heard about the programme. The final 32% gave other responses which included:

- At the Chemist
- At Sure Start
- At the Feelgood Factory
- Via Children's School
- At Netherton Library

2.3 Resources

Once a household signed up for the event they received a certificate and a selection of resources to display and to support them in maintaining their commitment to this project.

93% of respondents stated that they liked the design of the resources. The table below shows which resources were seen as useful and which resources were actually used.

Table 1

	Useful	Used
Window Sticker	62%	66%
Car Window Sticker	62%	59%
Air Freshener	79%	86%
Support Credit Card	31%	17%
Venue list of Smokefree Pubs and Cafes	45%	31%

The table shows that the air freshener was seen as the most useful resource and was used the most. The Support Credit Card was seen as the least useful and was subsequently used the least. This can be explained by the low numbers of smokers, actually in the study cohort.

2.4 Other information

A fifth (21%) of respondents suggested that other information could have been included in the pack. Suggestions included:

- Information on local quitting centres/support services

- Information on how long it takes for the toxins from cigarettes to empty themselves from the human body after people quit smoking
- More information on the benefits of a smokefree home
- More information regarding smoking patches.
- Pictures of the effects of smoking
- Health benefits of quitting smoking

Suggestions were also made to distribute the information on this project to other locations. They included:

- Schools and nurseries
- Public places
- Post Office
- Pubs
- Doctors Surgeries
- Supermarkets
- Restaurants
- Libraries
- Shopping Centres
- Workplaces.

2.5 Progress

The results reveal that 86% of the households are still smokefree after the initial 3 month period. This figure is slightly deceiving as it actually means that four out of the original five smoking households are now no longer Smoke Free. Therefore only one household containing smokers are maintaining their commitment to be a Smoke Free Home. It is important to highlight that this project was also targeting non smokers and all of these homes have continued to stay completely smoke free.

When asked if there had been a positive change in behaviour towards smoking since their commitment to join this project there were some encouraging comments which included:

"I no longer smoke in the house and now go in the garden!"

"My friend has seen how well I am doing and has quit also!"

"Our friends don't smoke in the house now!"

"Haven't had a ciggie for 4 months now and my friends and family respect my home and my health by not smoking around me or in my house!"

"I have always tried to discourage people from smoking!"

The respondents were also asked how likely they were to continue having a smokefree home as a result of this campaign? 48% stated that they were very

likely to continue being a Smoke Free home, with 41% being likely to continue. 3% stated that they were very unlikely to continue being a Smoke Free home and 7% of respondents were unsure on their likely future smoking behaviour within the home.

2.6 Further support

Respondents were asked whether they would use the smoking support service if they wanted to quit smoking. A third (34%) stated that they would. Other services or advice that they said would also help them quit included public places becoming smoke free, and longer use of the patches as the 3 month time span was just not long enough. Another suggestion was to increase the price of cigarettes as more people would be unable to afford them.

2.7 Other Comments

Further comments that were provided included:

"I am lucky to have a good family and support to have given up smoking!"

"The support groups that are on offer are very good and I hope more people use them!"

"I think this project is a really worthwhile cause, keep up the good word!"

"It is great to see that there is lots of support out there to give up smoking!"

"I don't smoke myself but believe in campaigning to stop my son and daughter from smoking!"

3.0 Conclusion

The aim of this project was to encourage families and households of both smokers and non-smokers to make their home a Smoke Free environment and further alert them to the dangers of why second-hand smoke is so dangerous. After financial investment surmounting to around £7000, less than one percent (74 homes) applied to become part of the project and become a Smoke Free Home. However there are resources still in stock and are available for further distribution to prospective future clients.

The evaluation was constructed to assess the relative merits of this project by analysing the smoking patterns in the homes of the respondents three months after they signed up to go smoke free. 29 out of the 74 households returned the questionnaires they were sent out, which is a 39% response rate.

When analysing the responses from the returned questionnaires it was seen that on application to become a Smoke Free household, 5 out of the 29 houses

contained smokers whilst the other 24 houses had no smokers living there in the first place. After the three month period when the questionnaires were posted out four out of the five smoking households who had made a commitment to the project was no longer Smoke Free. Consequently after significant financial support and staff time over three months, this project has successfully managed to change the smoking habits of only one household of smokers.

This figure does not inspire much confidence in the success of the project; although it was clear from the questionnaires that the remaining four smoking households were making a concerted effort to change their smoking behaviours within the home. In some of the homes there was still one member of the family smoking inside when other members of the family had made a significant decision and now only smoked outside the house. It was also highlighted that friends and families had also respected the change in circumstance and were now smoking outside these homes too.

After researching the relative success and failures of other PCTs and organisations that had already developed Smoke Free Homes projects in other areas of the UK, the smoke free homes pilot project in Netherton appears to be quite parable. Other groups had experienced the same slow start in their campaigns; immediate success was not always observed. The equivalent projects around the country took a significant amount of time to develop and suggests that if the support and effort being invested into this project continue, then in time the success rate will increase.

To assist with the monitoring of the project, a database has been developed and will be continuously updated with details of each home that has applied to become a Smoke Free Home. This monitoring tool will allow immediate clarity to show the progress of each Smoke Free Home participant.

4.0 Limitations

A limitation which has been identified in this pilot is that during the evaluation it was clear that two of the questions in the questionnaire were interpreted as referring to home heating rather than smoking behaviours within the home environment. Comments were made regarding burning coal and the council's policy to stop using other fossil fuels in the Netherton Area. These questionnaires have therefore been removed from the analysis. This maybe linked to the style of the logo used, which isn't dissimilar to those utilised by energy companies.

A further limitation to this pilot was that only a third of participants responded by filling in the evaluation questionnaire so the statistical data provided may be of only limited significance. It does however provide a general overview of the thoughts and likely behaviours of this group.

5.0 Recommendations

1. Distribution of the smoke free homes packs should be extended to include all South Sefton NRF wards until all existing resources are utilised. Given that the large majority of pilot respondents were recruited to the scheme via health professionals, potential participants should be engaged through existing professional networks including Midwives, Health Visitors and SureStart employees as well as the Passive Smoking training course delivered by SUPPORT.
2. Future resources should include information regarding how smokers can contact SUPPORT, Sefton's stop-smoking service (helpline number and related website), in addition to the benefits of having a smoke free home.
3. Details of project participants should be obtained and collated on a central database within SHISS to monitor progress and inform the future development of the project. As a minimum, information should include demographic details (age, gender, ethnicity, and residential postcode), referral details, smoking status and home smoking status.