

Research project summary

A Community-Based Participatory Action Pragmatic Randomized Controlled Trial using Electronic-Cigarette for Tobacco Dependence in the Inner City Population with a holistic approach

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- Awarded \$100,000 from the Canadian Institutes of Health Research (CIHR) in May 2017

Tobacco is the most preventable cause of disease and death in Canada. Though tobacco use rate has substantially gone down in the general population, significant differences exist between sub-populations in Canada, for example Ottawa's highly vulnerable homeless or insecurely housed population has an almost 100% tobacco smoking rate relative to 9-18% in the rest of the Canadian general population. This stark inequity in tobacco use translates into devastating healthcare outcomes such as a disproportionate amount of cancer, stroke, heart disease and death. Homeless or insecurely housed Canadians die 25 years earlier than housed Canadians, mostly due to tobacco. In order to tackle this tobacco use related inequity we urgently need novel approaches. Despite commonly held dogma that the drug use population does not want to quit smoking, many studies have demonstrated that in fact they are very interested in quitting. Moreover, our pragmatic peer-led community-based approach used in the PROMPT project has demonstrated that tobacco dependence strategies can be implemented with great success in this population. Importantly, we have demonstrated that we can gain the trust and engagement of marginalized populations and can create a low-threshold, safe and non-judgemental space to conduct projects in a community setting. We aim to compare two tobacco dependence management strategies in the homeless (or insecurely housed) multi-drug use population in Ottawa and Toronto. We will use the same peer-led approach in PROMPT with community peer researchers with lived experience. We hope that the cost-effective community based framework derived from this trial will serve as a template for interventions and treatments of chronic diseases (e.g. obesity, diabetes) in community settings.

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