

Smoking Cessation Procedures Online Course Assessment

Just in the Pre test

Demographic information

1- personal:

1. Name
2. Sex
3. Date of birth
4. Educational field.
5. Public or Private University
6. Name of the University
7. Work
8. Contact information
9. Email
10. Facebook account

In BOTH Pre and Post-test

Knowledge Section:

Each learning objective below is assessed by two questions (one multiple-choice, one true/false). The 20 questions in this section (10 MCQs, 10 true/false) are arranged alphabetically after translation into Arabic.

I. Define smoking prevalence in Syria.

- 1) Smoking rates among Syrian men is among the highest in the region. **(T)**
- 2) The highest reason for Syrian university students to smoke was:
 - a) Syrian crisis-related pressures.
 - b) Economic pressure.
 - c) Personal pressure.
 - d) Friends.
 - e) **Habit and addiction.**
 - f) Low will power to quit.

II. List smoking harmful effects on both the individual.

- 3) Smoking is not considered as a disease, rather a bad habit. **(F)**
- 4) Smoking just one cigarette per day accounts for:
 - a) **Half of the risk caused by smoking 20 cigarettes.**
 - b) Doesn't do any harm.
 - c) Do only a slight harm.
 - d) Is a good strategy for smoking cessation.

III. List smoking harmful effects on community levels.

- 5) Nargileh smoke causes more harm to passive smoker than cigarette smoke even for those who are in the adjacent room. **(T)**
- 6) Second hand smoking from nargileh causes:
 - a) Cancer.

- b) Cardiovascular diseases.
- c) Respiratory infectious.
- d) Ear infections.
- e) Sudden infant death syndrome
- f) **All of the above.**

IV. List the benefits of smoking cessation.

- 7) Blood pressure decreases after the first 20 minutes of smoking cessation. **(T)**
- 8) Smoking cessation will **negatively** affect:
 - a) The financial status of the smoker.
 - b) The health situation of the smoker.
 - c) The financial status of the society.
 - d) The health situation of the society.
 - e) **None of the above.**

V. To treat tobacco use in the clinic. 5As

- 9) The five A's is an effective evidence-based approach to treat nicotine-dependance. **(T)**
- 10) The five A's include the following **except**:
 - a) Ask about tobacco use
 - b) Advice providing to quit smoking
 - c) Assess readiness to quit smoking.
 - d) **Apply strict measure to quit smoking.**
 - e) Arrange for a follow-up.

VI. To treat tobacco use in the clinic. 5Rs

- 11) The five R's is an effective approach to smokers who intent to quit smoking. **(F)**
- 12) The five R's include the following **except**:
 - a) Relevance: providing a personalized advice.
 - b) Risks of smoking.
 - c) Rewards from smoking cessation.
 - d) **Remember why you want to quit in the first place.**
 - e) Repetition to enhance smoker motivation to quit smoking

VII. To treat tobacco use in the clinic. Pharmacological therapy

- 13) Pharmacological treatment of tobacco dependance is more effective when used with behavioral interventions. **(T)**
- 14) All of the following consider as a Nicotine Replacement Therapy (NRT), except:
 - a) **Bupropion**
 - b) Nicotine Gum
 - c) Lozenge
 - d) Nicotine oral inhaler
 - e) Nicotine nasal spray

VIII. Identify withdrawal symptoms.

- 15) All of the following are considered withdrawal symptoms, except:
- a) **Decreased appetite.**
 - b) Depression.
 - c) Sleep disturbance.
 - d) Impaired concentration.
 - e) Aggression.
- 16) Withdrawal symptoms begin after the first 24 hours of quitting smoking. **(F)**

IX. Identify the quit day characters.

- 17) Quit day should be:
- a) **Normal working day.**
 - b) Stressful day.
 - c) After two weeks.
 - d) Should not tell its date to anyone.
- 18) Setting a quit day and sticking to it is an effective way of quitting smoking. **(T)**

X. List Community-based Smoking Cessation procedures and their benefits

- 19) National tobacco quit line is an effective and feasible measure in the Low- and Middle-Income Countries (LMICs). **(T)**
- 20) The smoking cessation model to be implemented in the LMICs consist of:
- a) Avoid implementing clinical practice guidelines.
 - b) Bann the interference of the business community.
 - c) **Encourage health professionals to play their role.**
 - d) Increasing social acceptability of smoking.

Perceived Skills

On a scale from 1 (Least confident) to 5 (most confident), how confident are you about your skills in:

1. Treating tobacco dependence in a smoker who do intent to quit smoking
2. Asking a patient about his smoking status.
3. Providing a clear advice for a smoking patient to help him quit smoking.
4. Assessing a smoker's readiness to quit smoking.
5. Assisting a smoker in raising his readiness to quit smoking.
6. Arranging with a patient who smoke for a follow-up session.
7. Treating tobacco dependence in a smoker who do NOT intent to quit smoking.
8. Providing a personalized advice to a smoker health status.
9. Asking a smoker patient to list by himself the smoking harmful effects.
10. Asking a smoker patient to list by himself the benefits from smoking cessation.
11. Asking a smoker patient to list the obstacles in the way of total abstinence.
12. Motivating a smoker patient to give smoking cessation a try.

Attitudes Section

On a scale from 1 (Totally disagree) to 5 (Totally agree), how much do you agree with the following statements:

- 1) Smoking is a chronic disease. (P)
- 2) Treating tobacco dependence is my responsibility. (P)
- 3) Increasing taxation on tobacco, and transfer this money to establish a national Quitline is an effective strategy to deal with smoking in Syria. (P)
- 4) Treating tobacco is the responsibility of the smoker alone. (N)
- 5) Smoking is not a disease, rather a bad habit. (N)
- 6) Implementing community-based smoking cessation is a waste of resources. (N)
- 7) Smoking cessation procedures should be implemented to smokers who clearly mention that they wish to quit. (N)
- 8) Every smoker should receive a smoking cessation advice. (P)
- 9) It is okay for me to smoke in front of my patients. (N)
- 10) Health workers as they play a role model for their patients should not smoke or at least don't mention that they smoke in front of their patients. (P)
- 11) Vaping is an effective way of quitting smoking. (N)
- 12) It is essential for the Syrian medical education to cover the new trends in smoking cessation procedures. (P)
- 13) Medical education does not relate to smoking cessation procedures. (N)
- 14) Vaping is harmful. (P)
- 15) Smoking rates is reaching dangerous levels in Syria. (P)
- 16) Smoking nargileh is more harmful than smoking cigarettes. (P)
- 17) It is okay for a smoker to quit cigarettes smoking and move to nargileh. (N)
- 18) It is the responsibility of the health ministry to deal with smoking epidemic. (N)
- 19) All the parts of the government should work towards decreasing smoking levels. (P)
- 20) Smoking is a minor health issue. (N)

Only For Clinical Practioners who SMOKE

1. Are you a smoker:
 - a) Yes
 - b) No
2. Are you a
 - a) Cigarette smoker
 - b) Nargileh smoker
 - c) E-cigarette smoker

Decisional balance (Velicer et al., 1985)

The following statements represent different opinions about smoking. Please rate HOW IMPORTANT each statement is to your decision to smoke according to the following five point scale.

- 1 = Not important**
2 = Slightly important
3 = Moderately important
4 = Very important
5 = Extremely important

1. Smoking relieves tension.
2. I'm embarrassed to have to smoke.
3. Smoking helps me concentrate and do better work.
4. My smoking bothers other people.
5. I am relaxed and therefore more pleasant when smoking.
6. People think I'm foolish for ignoring the warnings about smoking.

Motivation to Stop Using Tobacco (Chung et al., 2011)

A. Thinking about the **next 30 days**, how MOTIVATED are you to ABSTAIN (*not use at all*) from smoking

	Not at all				Somewhat				Very Motivated	
Tobacco:	1	2	3	4	5	6	7	8	9	10

B. How DIFFICULT would or will it be to ABSTAIN (*not use at all*) from smoking

	Not at all				Somewhat				Very Difficult	
Tobacco:	1	2	3	4	5	6	7	8	9	10

C. How CONFIDENT are you that you will be able to ABSTAIN for the next 30 days from smoking

	Not at all				Somewhat				Very Confident	
Tobacco:	1	2	3	4	5	6	7	8	9	10

Readiness Ruler (Chung et al., 2011)

Using the ruler below, indicate how ready you are to make a change (quit or cut down) in your smoking habits. If you are not at all ready to make a change, you would circle "1". If you are already trying hard to make a change, you would circle "10".

	Not ready to change			Unsure			Ready to Change		Trying to Change		
Tobacco (e-Cigarettes.)	1	2	3	4	5	6	7	8	9	10	

Just in the Post-test:

Feasibility and Utility of the Electronic Course (Hugenholtz et al., 2012)

	Statements	Strongly agree	Agree	Disagree	Strongly disagree
1	The objective of the online course was clear to me				
2	The content of the online course was understandable to me				
3	The online course met my expectations				
4	The online course offered me sufficient information for an introductory course				
5	The content of the online course matches my educational level				
6	I will be able to use what I learned in this online course				
7	The content of the online course fits to my work setting				
8	This online course will help me to better practice smoking cessation procedures				
9	This online course will help me to improve the quality of my work				
10	The difficulty level of the online course was appropriate				
11	The online course was presented in a clear logical manner				
12	The online format was a good way for me to learn smoking cessation procedures				
13	I enjoyed taking the online course				
14	I would like to take more of this kind of online courses				

15. Please rate your satisfaction in each part of the online course, from 1 to 5? 1 means not satisfy at all, while 5 means highly satisfy.

- a) 1st educational unit.
- b) 2nd educational unit.
- c) 3rd educational unit
- d) YouTube as a way to deliver this online course.
- e) Google forms as a way to deliver the tests.
- f) The duration of the online course.
- g) The presentations.
- h) The explanation of the course instructor.

16. Overall, I appreciate this online course with the figure (1 – 10)

1	2	3	4	5	6	7	8	9	10
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18. Do you agree on contacting you in the future for other online courses?

- a) Yes
- b) No

19. Did you attend all the asynchronous sessions?

- a) Yes
- b) No

20) If not, what was the one you did not attend, and why?

21) Lastly, your opinion is highly important to us and will help us to improve our future work, so please provide us with any of the suggestions, comments or critics that you have on our work?
