Background and Objective

Tobacco consumption is a major public health threat especially during pregnancy. Healthcare workers, especially midwives, can contribute to the reduction of tobacco use among pregnant women and young families. Pregnancy is considered to be a preferable moment to quit smoking. Smoking cessation interventions need to be taught during their professional education. It can be assumed that individual smoking habits and knowledge of the health consequences of smoking influences counselling activities. The aim of this study is to ascertain the necessity and the general conditions for multilevel interventions for smoking prevention and health promotion. Broad data on midwifery students in German speaking countries are currently limited.

Methods

In 2010, a self administered questionnaire survey was conducted among Austrian, German and Swiss midwifery students. This study examines the sociodemographic characteristics of midwifery trainees and their smoking habits, individual attitudes towards smoking, knowledge of cessation strategies, and perceived self-efficacy and competence to counsel pregnant women about their smoking habits. Statistical analyses were performed with SPSS Version 19.0 and Microsoft Excel.

Results

1,126 student midwives and 38 teachers answered this questionnaire (RR=61.8%). 22.7% are daily or occasional smokers (fig. 1). Nicotine dependency and number of cigarettes per day are comparatively low. 6.8% are considered as heavy/very heavy smokers according to Fagerstrom. 98.1% consider cessation counselling for pregnant and breastfeeding women as a midwife’s task (fig. 2), while 76.5% feel competent enough to do so (figure 3), but only 25.6% know effective cessation therapy methods. 75.5% rate midwifery as an effective way to stop smoking, although there is a sketchy understanding of both smoking related health risks (fig. 4) and effective stop smoking strategies (fig. 5).

Discussion and Conclusions

The self-reported smoking prevalence in our population is considerably lower than in previous studies among other similar populations (age & profession wise). Awareness of the health consequences and of effective treatment options needs improvement. Revealed gaps of knowledge might have a negative impact on counselling procedures. Intervention strategies on tobacco cessation should be included in a broader way into midwifery curricula within studied countries.

Literatur


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