



SOCIETY OF
BEHAVIORAL
MEDICINE

42ND ANNUAL MEETING & SCIENTIFIC SESSIONS

Virtual Conference | April 12-16, 2021



ABSTRACT PREVIEW: A CULTURALLY TAILORED MHEALTH SMOKING EDUCATION AND CESSATION INTERVENTION TO ENGAGE CHINESE AMERICAN PATIENTS

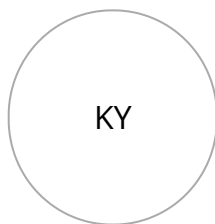
A Culturally Tailored mHealth Smoking Education and Cessation Intervention to Engage Chinese American Patients

Abstract ID: 937806

Presentation Type: Research Talk and Research Spotlight Session

Abstract Status: Complete / Locked

Presenter(s)



Kara Young, MA

Position:

Health Educator/Research Assistant

Organization:

Chinese Community Health Resource Center

Role:

Presenter

Is this presenter a student?:

No

Are you a speaker/presenter/co-author for this activity?

Presenter

List your education (basic preparation through highest degree held). Do not only list your highest degree.

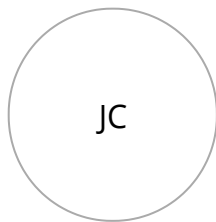
MA in China Studies, Zhejiang University, P.R. China BA in Biology, Bryn Mawr College

List your past experiences relevant to topic area (most recent first).

Presented on the enrollment process for this study at the UCSF ASPIRE Symposium 2019, has worked at CCHRC since June 2019 as Health Educator and Research Assistant, assisting with multiple research projects.

How is this presenter/co-author qualified (by education and/or experience) to teach assigned content? Expertise in a topic does not equate ability to teach the material.

I am the Research Assistant on the study being presented and was responsible for data management and report writing.



Joyce Cheng, MS

Position:

Executive Director

Organization:

Chinese Community Health Resource Center

Role:

Co-Author only

Is this presenter a student?:

No

Are you a speaker/presenter/co-author for this activity?

Yes, co-author

List your education (basic preparation through highest degree held). Do not only list your highest degree.

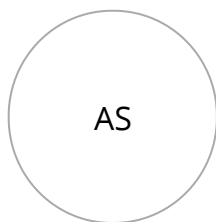
BS, Biology, concentration in Physiology, San Francisco State University MS, Physiology and Behavioral Biology, San Francisco State University

List your past experiences relevant to topic area (most recent first).

Over the past 14 years, I have served as an Administrative Official of several research projects, as well as functioning in numerous other roles at CCHRC. I work closely with the senior management, community members to develop, implement, evaluate programs and services of CCHRC.

How is this presenter/co-author qualified (by education and/or experience) to teach assigned content? Expertise in a topic does not equate ability to teach the material.

I was the Project Coordinator for this study and oversaw all steps of the intervention and follow-up.



Angela Sun, PhD, MPH

Position:

Executive Director, Emeritus

Organization:

Chinese Community Health Resource Center

Role:

Co-Author only

Is this presenter a student?:

No

Are you a speaker/presenter/co-author for this activity?

Yes, co-author

List your education (basic preparation through highest degree held). Do not only list your highest degree.

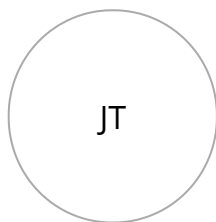
BS, Dietetics, San Francisco State University, MPH, San Jose State University Community-based Participatory Research Certification, University of California, San Francisco PhD, Public Health, Walden University

List your past experiences relevant to topic area (most recent first).

I have been the Executive Director of CCHRC since 2006. CCHRC is a non-profit organization, dedicated to building a healthy community through culturally and linguistically competent preventive health, disease management, research programs, and advocacy. I have over 25 years of experience in health education and have directed and evaluated numerous bilingual health education and patient support programs.

How is this presenter/co-author qualified (by education and/or experience) to teach assigned content? Expertise in a topic does not equate ability to teach the material.

I am the Co-Investigator on the study being presented who led the study and intervention design and oversaw intervention and dissemination activities.



Janice Y. Tsoh, PhD

Position:

Professor

Department:

Psychiatry and Behavioral Sciences

Organization:

University of California San Francisco

Role:

Co-Author only

Is this presenter a student?:

No

Are you a speaker/presenter/co-author for this activity?

Yes, co-author

List your education (basic preparation through highest degree held). Do not only list your highest degree.

PhD, Clinical Psychology, University of Rhode Island MA, Psychology, University of Rhode Island BA, Psychology, Binghamton University

List your past experiences relevant to topic area (most recent first).

-Professor of Psychiatry & Behavioral Sciences at the University of California San Francisco School of Medicine for >20 years engaging in teaching and research with a focus on health disparities, addiction, and immigrant population health. -Practicing clinical psychologist for 20 years serving a diverse outpatient population with a focus on behavioral medicine.

How is this presenter/co-author qualified (by education and/or experience) to teach assigned content? Expertise in a topic does not equate ability to teach the material.

I am the Co-Investigator of the study being presented. I participated in intervention design and led data analysis and interpretation.

Twitter Handle:

@janicetsoh

Abstract & Details

Topic

1st choice: Tobacco Control and Nicotine-Related Behavior

2nd choice: Health of Marginalized Populations

Clinical Relevancy

- NO

First Time Submitter

- Yes

Mentorship

- No

I want to be considered for:

- Both - Research Talk and Research Spotlight Session

Abstract Body

Significance: Smoking prevalence remains high among Chinese American immigrants, particularly in men with limited English proficiency. We pilot tested the use of WeChat, a culturally accepted and widely used multipurpose messaging platform among Chinese Americans and Chinese globally, to engage Chinese outpatients in a mHealth smoking education and cessation intervention.

Methods: "WeChat-To-Quit," a new mHealth Smoking Cessation Intervention utilizes WeChat to deliver weekly educational messages over six weeks. Education contents were guided by 5A's (Ask, Advise, Assess, Assist, and Arrange) recommended by the clinical practice guidelines for addressing tobacco dependence. The intervention contents, in Traditional Chinese text, and in Cantonese Chinese audio and video formats, were culturally tailored based on feedback received from Community Advisory Board members. Adult Chinese patients who were current tobacco users identified via electronic health records of a community-based medical center in San Francisco, California were recruited and randomized into intervention (WeChat, n = 30) or Control (assessment-only, n = 30). Using WeChat video group chat, 3 post-RCT focus groups were conducted with 10 participants with high and low levels of intervention engagement.

Results: Participants included 95% male, 48% aged 65+, 53% had < high school education, and 86% spoke poor or no English. A majority (72%) smoked 10+ cigarettes daily and 70% had no intention to quit within 6 months. Program engagement was high, 74% interacted with at least 1 message, and 50% completed 3 out of 6 weeks of the program. At 3-month, 80% would recommend the program to others. Few (n = 1) participants achieved 7-day abstinence, but WeChat Intervention participants reported more 24-hour quit attempts than Control participants (0.5 vs 1.8; p = 0.02). Focus group participants unanimously preferred using WeChat to receive health-related messages due to the convenience of this messaging platform. The participants liked the one-on-one messaging feature for personalized and private communications where they did not have to interact with other participants. Although some participants required assistance with using WeChat for navigation and clicking on hyperlinks, logging in to the intervention webpage, they all agreed that WeChat was easy to learn after a few uses.

Conclusions: The newly developed messaging-based intervention was able to engage both motivated and unmotivated smokers, including elderly participants. This culturally appropriate social media intervention has high acceptance and is promising for motivating smokers to make quit attempts, which may ultimately promote smoking cessation. Findings provide preliminary evidence for building a culturally appropriate and scalable health systems intervention to address tobacco-related disparities in vulnerable Chinese American immigrants.

Classification

Instructional Level

Beginner/Intermediate

Special Interest Group

Optimization of Behavioral and Biobehavioral Interventions

Select two keywords from the drop-down lists that best capture your abstract.

Keyword 1

Community intervention

Keyword 2

Tobacco control

Additional Information

Funding Partners: Did you receive funding outside of your institution for your research? If so, please indicate your sources of funding. If none, please state N/A.

National Institutes of Health.

N/A

Foundation/Non Profit Grant.

N/A

Other Sources of Funding.

Tobacco-Related Disease Research Program (TRDRP)

Did you plan this presentation in partnership with a professional organization other than SBM? Please list the professional organizations as they should appear in the SBM Program. If none, please state N/A.

N/A

Did you plan this presentation in partnership with an SBM Special Interest Group, Council or Committee? Please list the SIG/Council/Committee(s) as they should appear in the SBM Program. If none, please state N/A.

N/A

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