

GLOBAL NETWORK CONFERENCE 2024

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Wednesday 6th november 2024

International Conference
Center Hiroshima Japan
Hybrid Conference



International Network of
Health Promoting Hospitals
& Health Services

GLOBAL NETWORK
FOR TOBACCO FREE
HEALTHCARE SERVICES

Global Health through tobacco-free healthcare:

The inspiring journey of the Catalan Network

Hiroshima

6th November 2024

Susann Koalick

President Forum for Tobacco Prevention in Healthcare Services
GNTH, Switzerland

Laura Antón

Tobacco Control Unit, Catalan Institute of Oncology
WHO Collaborating Center For Tobacco Control, Barcelona

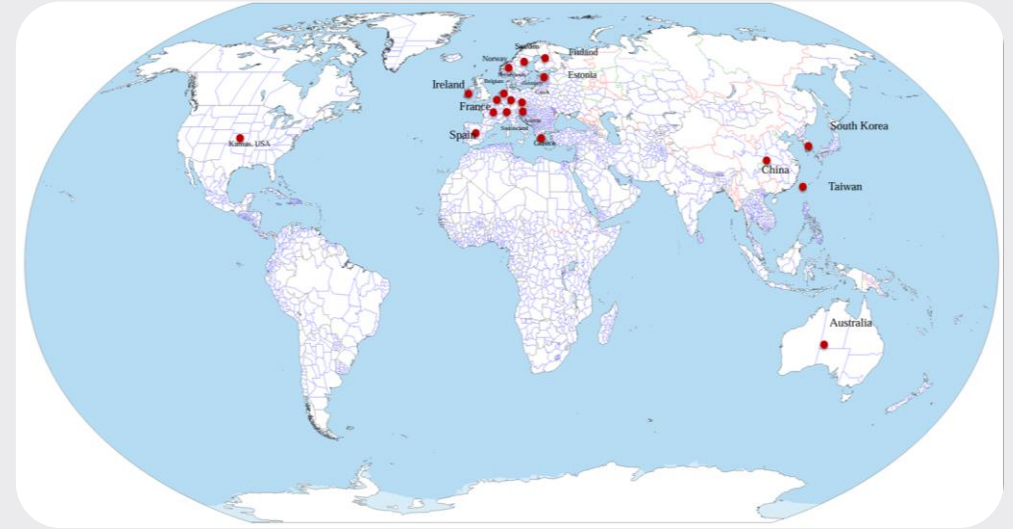
Salut/  ICO
Institut Català d'Oncologia

Xarxa Catalana | Hospitals Sense Fum

 GLOBAL NETWORK
FOR TOBACCO FREE
HEALTHCARE SERVICES

Global Network

History



ENSP Project / 6 networks

European Network of
Smoke free Healthcare
Services - ENSH

1997

Coordination of
11 European
Networks

2005

Global Project –
Taiwan, Australia

2009

14 countries

20 national/regional networks

1672 members

Coordination from Switzerland

Present

Global Network

About us



The Global Network represents **healthcare services** that are committed to implementing **tobacco-free policies** with the aim of delivering **safe quality care** in relation to tobacco for every service user, every time and everywhere.



GLOBAL NETWORK
FOR TOBACCO FREE
HEALTHCARE SERVICES



Global Network

Vision

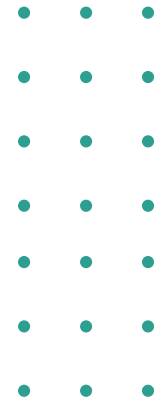
Our vision is **to implement tobacco control policies** in healthcare organizations that are aligned with the **WHO-FCTC objectives**.

Our aim is to **improve the health** of worldwide population by introducing **GNTH Standards** at healthcare facilities and **prevent and treat tobacco addiction** as part of routine healthcare.



Global Network

Mission



Empowering our members to **deliver safe quality care** in relation to **high Standards of tobacco control** with a comprehensive scope across the continuum of care.



Global Network

Strategy 2020-2025



- **Promote** and support tobacco prevention at international, European, and national level through the development and implementation of the WHO-FCTC, its protocols and guidelines.
- **Improve** the introduction of comprehensive tobacco control policies and the denormalization of tobacco use within healthcare services through the implementation of the *GNTH Concept*: Self-Audit tool, and Quality Standards.
- **Help** to achieve excellence in tobacco control across healthcare systems globally.
- **Facilitate** healthcare services to effectively deliver on their obligations as defined in the WHO/FCTC.

Global Network

Future goals

- Facilitate **knowledge sharing among members** through materials, webinars, and other resources.
- Conduct a **review of Standards** to ensure clarity and avoid redundancy.
- Enhance **member engagement** by providing welcome instructions for new GNTH members and tracking member activities through the Coordinating Center.
- Establish **strategic partnerships** with national and regional networks.
- Strengthen the **visibility** and presence of GNTH.



The inspiring journey of the Catalan Network





Tobacco Control Unit Activities

- Research projects and evaluation of programs and regulations
- Applied intervention projects:
 - *Catalan Network of Smoke free Hospitals Coordination*
- Health promotion services:
 - *Tobacco control consulting*

[TCU Presentation Video](#)



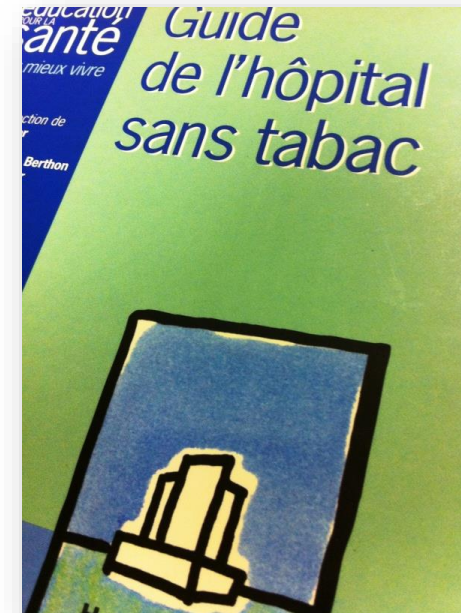
WHO Collaborating Centre for Tobacco Control



The experience of the Catalan Network of Smoke Free Hospitals

- 1995. Foundation of the Catalan Institute of Oncology (ICO).
- Adaptation of the “Smoke-free Hospital” (SFH) model from French emergent movement.

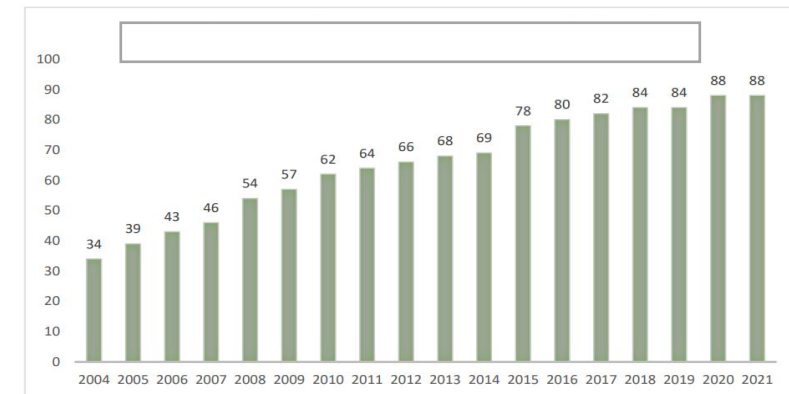
| | |
|---|--|
| <p>ACTE D'INAUGURACIÓ DEL PROJECTE 'HOSPITAL LLIURE DE FUM'</p> <p> Institut Català d'Oncologia</p> | <p>5 de maig de 1998</p> <p>L'acte serà presidit per l'Honorable Senyor Eduard Rius i Pey, conseller de Sanitat i Seguretat Social de la Generalitat de Catalunya.</p> <p>Tot seguit tindrà lloc un dinar especial que podreu accedir-hi amb el tiquet de cada institució.</p> <p>Lloc: cafeteria de l'Hospital Duran i Reynals (planta baixa) Hora: 13.30 hores</p> |
|---|--|



The experience of the Catalan Network of Smoke Free Hospitals

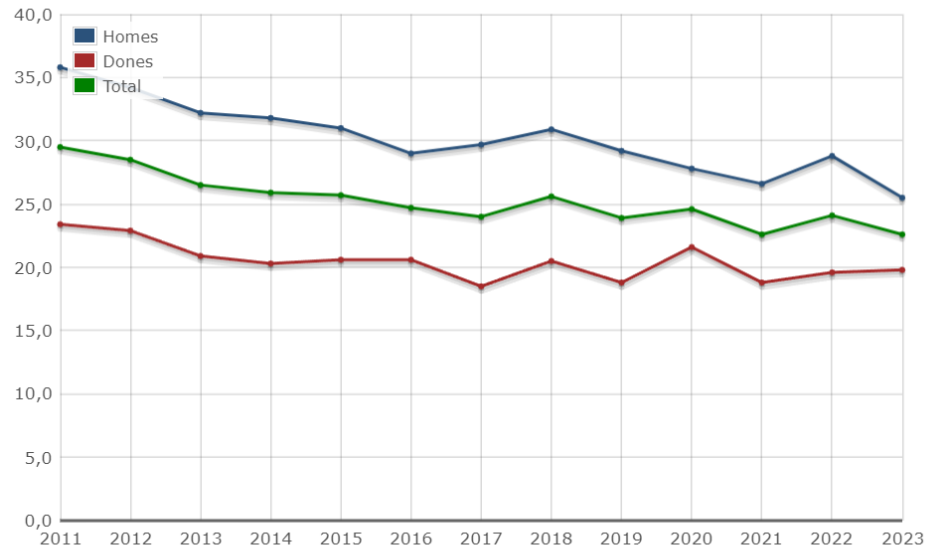
- Network established in 1998, after extension of SFH model from ICO to other 6 general hospitals.
- Currently, 89 centers affiliated (90% of Catalan NHS hospitals).
- **“Bottom-Top” initiative** (no government funding, just “support” at starting).
- Since 2007 funded by the regional Government of Catalonia.

Number of affiliated hospitals to the Catalan Network (2004-2021)

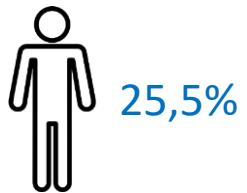


Smoking prevalence in Catalonia

Consum de tabac. Prevalença (%). Per sexe. Catalunya. 2011-2023



Font: Departament de Salut. Programa per a la prevenció i el control del tabaquisme. Enquesta de consum de tabac, alcohol i drogues, 1998. Enquesta de salut de Catalunya Enquesta de salut de Catalunya 2002, 2006, (2011-2023).



| | Total Catalonia | Men | Women |
|---|-----------------|------|-------|
| Non smoker (%) | 77.4 | 74.5 | 80.2 |
| Occasional consumption (less than once a day) (%) | 3.1 | 3.4 | 2.8 |
| Daily consumption (%) | 19.5 | 22.1 | 16.9 |
| Total (%) | 100 | 100 | 100 |

| | Total Catalonia | Men | Women |
|-------------------------|-----------------|------|-------|
| Manufactured cigarettes | 69.7 | 68.8 | 62.2 |
| Hand-rolled cigarettes | 37.8 | 37.1 | 38.6 |
| Cigars / mini-cigars | 4.9 | 8.2 | 0.9 |
| Pipe | 1.2 | 1.4 | 0.9 |
| e-cigarretes | 1.4 | 1.2 | 1.5 |
| e-cig with nicotine | 76.3 | 78.8 | 73.1 |

Spanish situation



A report of Smoke Free Partnership



How does your country rate on tobacco control?

| RANKING 2021 (2019) | COUNTRY | Price (30) | Smoke free places bans (22) | Budget (10) | Ad bans (13) | Health warning (10) | Treatment (10) | Illicit trade (3) | Art 5.3 (2) | Total (100) |
|---------------------|----------------------|------------|-----------------------------|-------------|--------------|---------------------|----------------|-------------------|-------------|-------------|
| 1 (3) | ▲ Ireland | 27 | 22 | 1 | 13 | 9 | 8 | 1 | 1 | 82 |
| 1 (1) | – UK | 27 | 22 | - | 12 | 9 | 9 | 2 | 1 | 82 |
| 3 (2) | ▼ France | 21 | 18 | 3 | 11 | 9 | 6 | 2 | 1 | 71 |
| 4 (14) | ▲ Netherlands | 15 | 21 | 3 | 10 | 9 | 6 | 2 | 1 | 67 |
| 5 (8) | ▲ Hungary | 16 | 21 | 0 | 11 | 9 | 6 | 2 | - | 65 |
| 6 (5) | ▼ Norway | 20 | 17 | 1 | 13 | 8 | 3 | 1 | 0 | 63 |
| 7 (6) | ▼ Finland | 17 | 18 | 2 | 13 | 5 | 6 | 1 | 0 | 62 |
| 8 (4) | ▼ Iceland | 15 | 17 | 8 | 13 | 4 | 4 | 0 | 0 | 61 |
| 8 (12) | ▲ Romania | 18 | 21 | 0 | 8 | 5 | 8 | 1 | 0 | 61 |
| 10 (10) | – Belgium | 14 | 16 | 1 | 10 | 9 | 7 | 2 | 0 | 59 |
| 11 (10) | ▼ Spain | 12 | 21 | 1 | 9 | 5 | 8 | 2 | 0 | 58 |
| 11 (17) | ▲ Turkey | 15 | 16 | 0 | 8 | 10 | 7 | 2 | 0 | 58 |
| 13 (29) | ▲ Denmark | 13 | 11 | - | 13 | 9 | 8 | 1 | 1 | 56 |
| 14 (7) | ▼ Israel | 16 | 15 | 0 | 10 | 6 | 8 | 0 | 0 | 55 |
| 14 (13) | ▼ Greece | 13 | 22 | - | 7 | 5 | 6 | 2 | 0 | 55 |
| 14 (17) | ▲ Malta | 16 | 16 | 0 | 11 | 5 | 5 | 2 | - | 55 |
| 17 (8) | ▼ Slovenia | 9 | 16 | - | 13 | 9 | 6 | 1 | 0 | 54 |
| 18 (15) | ▼ Italy | 13 | 18 | 0 | 9 | 5 | 6 | 1 | 0 | 52 |
| 18 (29) | ▲ Russian Fed. | 9 | 19 | 0 | 13 | 4 | 6 | 1 | - | 52 |
| 18 (29) | ▲ Lithuania | 14 | 15 | 1 | 10 | 5 | 5 | 2 | 0 | 52 |
| 21 (23) | ▲ Czechia | 13 | 15 | 0 | 8 | 5 | 6 | 2 | 0 | 49 |
| 21 (23) | ▲ Estonia | 13 | 15 | - | 11 | 5 | 3 | 2 | 0 | 49 |
| 21 (23) | ▲ Poland | 14 | 11 | 0 | 11 | 5 | 7 | 1 | 0 | 49 |
| 21 (15) | ▲ Sweden | 11 | 15 | 0 | 9 | 5 | 7 | 2 | 0 | 49 |
| 21 (17) | ▼ Croatia | 14 | 11 | 0 | 12 | 5 | 5 | 2 | - | 49 |
| 26 (23) | ▼ Latvia | 12 | 13 | - | 11 | 5 | 5 | 2 | 0 | 48 |
| 26 (20) | ▼ Austria | 11 | 18 | 0 | 7 | 5 | 5 | 2 | 0 | 48 |
| 28 (27) | ▼ Cyprus | 12 | 12 | 0 | 11 | 5 | 5 | 2 | - | 47 |
| 28 (34) | ▲ Lux. | 9 | 16 | 0 | 9 | 5 | 6 | 2 | 0 | 47 |
| 30 (20) | ▼ Portugal | 14 | 11 | - | 10 | 5 | 4 | 2 | 0 | 46 |
| 30 (32) | ▲ Slovakia | 11 | 13 | - | 9 | 5 | 6 | 2 | 0 | 46 |
| 30 (20) | ▼ Ukraine | 12 | 15 | - | 11 | 4 | 4 | 0 | 0 | 46 |
| 33 (27) | ▼ Bulgaria | 13 | 11 | - | 9 | 5 | 5 | 1 | 0 | 44 |
| 34 (36) | ▲ Germany | 14 | 11 | 0 | 6 | 5 | 5 | 2 | 0 | 43 |
| 35 (33) | ▼ Serbia | 13 | 11 | 0 | 9 | 1 | 3 | 1 | 0 | 38 |
| 36 (35) | ▼ Switzerl. (-1) | 12 | 11 | 1 | 2 | 5 | 5 | 0 | 0 | 35 |
| 37 (new) | Bosnia & Herzegovina | 14 | 4 | 0 | 5 | 0 | 2 | 0 | 0 | 25 |

Draft new Spanish Law

PRINCIPALS MESURES DE LA NOVA LLEI D'ADDICCIONS



Proposarà **prohibir el tabac als llocs següents:**



Equipararà la regulació dels nous dispositius, com **les cigarretes electròniques i el tabac sense combustió**, als productes convencionals del tabac.



La prohibició de fumar s'estendrà a 5 metres



Catalan Network – Goals

- ▶ **1** Be an example in promoting smoke-free environments and take the lead in implementing smoke-free control policies, the "Smoke-Free Hospital" model.
- ▶ **2** Recommend health protection measures for all users: patients, visitors and staff.
- ▶ **3** Decrease opportunities for smoking in health care centers. Promote the reduction or cessation of tobacco consumption.



TREBALLEM PER GAUDIR DE
CENTRES SANITARIS
SENSE FUM

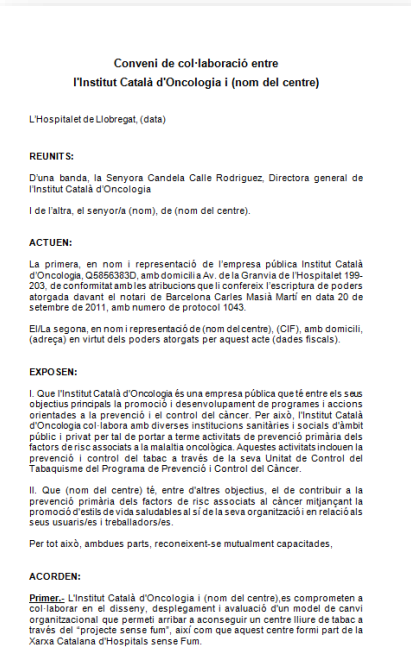
Catalan Network – Process

1 Signing of the **Agreement**.

2 **Communication** of the Smoke free Hospital (SFH) project.

3 **Signage** of the health care center.

Treballant per gaudir
de centres sanitaris
sense fum



Signage examples



Catalan Network – Process

4 Smoking consumption survey among staff.

5 Annual Self-Audit Questionnaire.

Questionari Self-Audit de la Global Network i planificació d'accions



| ESTÀNDARD 1: Política de gestió i compromís | | AUTO AUDITORIÀ | | | |
|---|--|---|---|---|---|
| El centre sanitari té un lideratge clar i fort per implementar sistemàticament una política lliure de tabac. | | 0 = No / No implementat 1 = Menys de la meitat implementat 2 = Més de la meitat implementat 3 = Sí / Totalment implementat | | | |
| CRITERIS D'IMPLEMENTACIÓ | REFLEXIÓ Resum de la situació actual (Si us plau, descriu la situació actual per a cada criteri d'implementació. Aja proporcionalment un comentari per a les seves accions planificades en els pròxims 12 mesos) | PLA D'ACCIÓ Resum de plans pels pròxims 12 mesos | | | |
| | | 0 | 1 | 2 | 3 |
| 1.1 El centre sanitari té documents de política clars per a la implementació dels estàndards de la Global Network. | 1.1.1 El centre sanitari té documents que especifiquen el compromís d'implementació de tots els estàndards de la Global Network. | | | | |
| 1.2 El centre sanitari prohibeix l'acceptació de patrocinis o finançament de la indústria tabaquera, així com la venda del productes de tabac* i els DSAN*. | 1.2.1 El centre sanitari prohibeix l'acceptació de patrocinis i finançament de la indústria tabaquera. | | | | |
| | 1.2.2 El centre sanitari prohibeix la venda de productes del tabac*, incloent els dispositius susceptibles d'alliberament de nicotina o similars (DSAN)*. | | | | |
| 1.3 El centre sanitari determina clarament la responsabilitat per a cada nivell i per a cada estàndard. | 1.3.1 Un membre de la direcció participa en la implementació de la política sense tabac. | | | | |
| | 1.3.2 La responsabilitat en la implementació de la política està definida per a cada nivell i per a cada estàndard. | | | | |
| 1.4 Els contractes laborals del personal del centre sanitari (incloent els contractes de serveis i externalitzats) sol·liciten el compromís de tot | 1.4.1 En els contractes laborals dels empleats es sol·licita el seu compromís envers la política sense tabac del centre sanitari. | | | | |

Xarxa Catalana Hospitals Sense Fum

CONSUM DE TABAC ENTRE ELS PROFESSIONALS SANITARIS 2016

Hospital _____ Codi _____

1. Estat anys

2. Sexe Dona Home

3. A quin col·lectiu o grup pertany?
 Mèdic Infermera Auxiliar d'infermeria
 Tècnic Personal administratiu Altres

4. Actualment, vostè fuma?
 Sí, fuma diàriament (passar a pregunta 18) No, no he fumat mai (passar a pregunta 25)
 Sí, fuma ocasionalment (passar a pregunta 18) No, sóc ex fumador/a (+5 mesos sense fumar) (passar a p.5)

5. Quin recurs o servei va utilitzar per a deixar de fumar? (resposta múltiple)
 Servei d'ajuda proporcionada pel centre Centre d'Atenció Primària
 Ajuda telefònica / Internet Ajuda de la família
 Altres (especificar: _____) Cap

6. Quina quantitat de tabac fumava diàriament vostè abans de deixar-ho?
 cigarretes cigars ("purcs")/vils
 cigarrets d'emboïscat cigarrets electrònics (marcar només si fuma cigarrets electrònics)

7. A quina edat va començar a fumar regularment? anys

8. A quina edat va deixar de fumar? anys

9. Quantes vegades havia fet vostè l'intent de deixar de fumar? vegades (passar a pregunta 20)

10. Quina quantitat de tabac fuma diàriament?
 cigarretes cigars ("purcs")/vils
 cigarrets d'emboïscat cigarrets electrònics (marcar només si fuma cigarrets electrònics)

11. A quina edat va començar a fumar regularment? anys

12. Quan fuma vostè la primera cigarreta/cigar del dia?
 < 5 minuts després de llevar-se 31-60 minuts després de llevar-se
 6-30 minuts després de llevar-se > 60 minuts després de llevar-se

13. Alguna vegada fuma en alguna de les següents àrees del recinte? (resposta múltiple)
 A la porta d'entrada principal
 A qualsevol àrea exterior dins del recinte del centre sanitari
 A qualsevol àrea exterior fora del recinte del centre sanitari
 A altres llocs (especificar: _____)
 No fuma durant la meua jornada laboral

14. Ha intentat deixar de fumar alguna vegada? Sí (passar a p.16) No (passar a p.17)

15. Quantes vegades ha intentat deixar de fumar? vegades

16. Va rebre ajuda per a deixar de fumar per part del centre?
 Sí No m'interessava No és accessible No m'hi ha cap

17. Li preocupen els efectes nocius del tabac envers la seva salut?
 Sí, molt Bastant No gens En absolut

18. Li preocupen els efectes nocius que el tabac pot provocar en la salut dels no fumadors exposats?
 Sí, molt Bastant No gens En absolut

Si us plau, tingui en compte les següents indicacions:
 - Atorgar's de contactar totes les preguntes.
 - Marcar la seva resposta abans del responer.
 - Si us plau, no esborri res.
 Moltes gràcies per la seva col·laboració!

Catalan Network – Activity

Training



SPECIFIC TRAINING

4 courses | > 100 participants



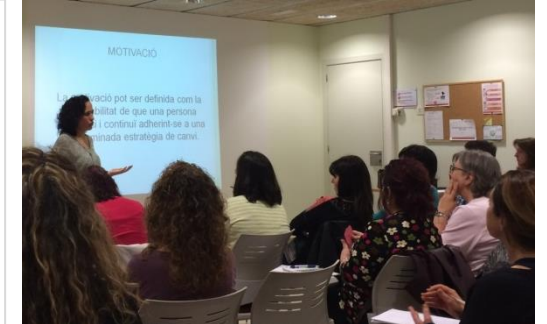
ON-LINE TRAINING

4 editions /year | 1000 places /year



TRAINING OF TRAINERS

Specialists from each health care centre



Catalan Network – Activity

Smoking cessation intervention Programmes



Establish protocols and intervention circuits for smoking cessation intervention for hospitalized patients and workers.



To help maintain psychiatric patients' abstinence after a hospital stay, and to promote the coordination between hospital and outpatient units at discharge.



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Cristina Martínez, PhD, BA, RN
Jose M. Martínez-Sánchez, PhD
María Ballbé, BA
Gemma Nieto, BA
Marcelo Fu, PhD, BA
María Puig, PhD
Esther Carabaso, BA
Josep Maria Sánchez-García, MD
Esteve Saló, MD
Esteve Fernández, MD, PhD
The Tobacco Cessation Program Project Coordinators

Smoking Cessation in Hospital Workers

Effectiveness of a Coordinated Program in 33 Hospitals in Catalonia (Spain)

KEY WORDS
Database
Evaluation
Hospitals
Program
Smoking cessation

Background: The Catalan Network of Smoke-free Hospitals coordinates a smoking cessation program addressed to hospital workers. The program included training in tobacco cessation, a common software, and free access to pharmacological treatments. **Objective:** This study aimed to evaluate the effectiveness of the Catalan Network of Smoke-free Hospitals smoking cessation program for abstinence among workers of the 33 participating hospitals. **Methods:** A total of 930 hospital workers (in 33 hospitals) attended the cessation units between July 2005 and December 2007. The program included active follow-up during 6 months after quitting. We calculated 6-month abstinence

Author Affiliations: Tobacco Control and Research Unit, Institut Català d'Oncologia (ICOO), L'Hospitalet del Llobregat (Dr. Martínez, Martínez-Sánchez, Puig, and Ferrández); and M. Ballbé, Nieto, Fu, and Carabaso; Catalan Network of Smoke-free Hospitals, L'Hospitalet del Llobregat (Dr. Martínez, Puig, and Ferrández); and M. Ballbé, Nieto, Fu, and Carabaso; Department of Clinical Sciences, School of Medicine (Dr. Martínez, Martínez-Sánchez, and Ferrández); and M. Puig and Psychosocial and Mental Health Nursing Department (Dr. Puig); Catalan Tobacco Program, Department of Public Health (Dr. Ferrández); Universitat de Barcelona, Alcohol and Addiction Unit, Hospital Clínic, Hospital del Mar, Hospital de la Santa Creu i Serra, Hospital Universitari Vall d'Hebron (Dr. Nieto); Department of Preventive Medicine, Hospital Universitari Vall d'Hebron Hospital (Dr. Sánchez-García); Department of Public Health, Universitat Autònoma de Barcelona (Dr. Sánchez-García); and Public Health Department, Ministry of Health, Generalitat de Catalunya (Dr. Saló). Barcelona, Spain.

Received for consideration: October 1, 2011; accepted for publication: February 19, 2012. This study was supported by the Directorate of Public Health, Ministry of Health from the Government of Catalonia (Grant number 2011SGR1305) and the Government of Spain (Theme 2008, Network of Cooperative Research in Cancer, 2006000200089). In addition, Dr. Martínez has been supported by "La Caixa Foundation" during the period of 2008 to 2009 completed her education at the University of California, San Francisco, in Health Policy Analysis. Contributions: Dr. Martínez and Ferrández conceived and designed the study. M. Ballbé, Dr. Puig, M. Carabaso, and Dr. Ferrández, Martínez-Sánchez, and Saló operated data collection. Dr. Martínez-Sánchez and Fu were responsible for the analysis and interpretation of data. Dr. Martínez, M. Ballbé, and Dr. Puig and Martínez-Sánchez supervised the study, interpreted the data, and wrote the first draft of the manuscript, to which the rest of authors contributed. The final TCT program guidelines were compiled in recruitment and management of participants. All authors read and approved the final manuscript.

The authors have no conflicts of interest to disclose.

Correspondence: Cristina Martínez, PhD, BA, RN, Tobacco Control Research Unit, Institut Català d'Oncologia, Av. Gran Via de L'Hospitalet, 199-205, L'Hospitalet del Llobregat (Barcelona), Spain, 08908 (e-mail: cmar@icoo.cat).
Accepted for publication August 5, 2011.
DOI: 10.1097/NCC.0b013e3182321389

Smoking Cessation in Hospital Workers
Cancer Nursing, Vol. 35, No. 5, 2012 ■ 327

SRNT Europe 19th Annual Conference in Oslo

Generalitat de Catalunya
Departament de Salut

ICO Institut Català d'Oncologia

Xarxa Catalana Hospitals Sense Fum

Impact of a program to promote smoking intervention in mental health wards and after discharge [The PDT-sm program]

Laura Antón, Mònica Ballbé, Antoni Gal, Cristina Puig, Sílvia Costa, Blanca Carral, Maria Puig, Isabel Ferrández, Rosa Hernández-Rillo, Sergio Hernández, Silvia Martínez, Gemma Nieto, Marcelo Nieto, Jordi Román, Oscar Gómez, Margarita Lora, Gemma Nieto, Eugeni Puigdemunt, Isabel de Soria, María Saló, Francisco Salas, Anaquel Vázquez, Anselm Vázquez, Josep Maria Sánchez, and Esteve Fernández

Objectives
The aim of the PDT-sm program is (a) to help maintain psychiatric patients' abstinence after a hospital stay, and (b) to promote the coordination between hospital and outpatient units at discharge.

Methods
• Twelve hospitals of the Catalan Network of Smoke-Free Hospitals (Spain) participated in the program elaborating a protocol of smoking cessation intervention during hospital stay and its continuity after discharge.
• Smoking cessation intervention had to be followed up and registered for 1 year.
• All patients in the program were offered free pharmacological treatment for smoking cessation after discharge (NRT, varenicline or bupropion), provided by the Catalan Ministry of Health.
• Smoking cessation was verified with carbonycoten (CO).

Results

n = 548
Age (years) 45.7
Sex 61.2% C
95.5 cigarettes per day
16.3 jin age of initiation
1.1 post quit attempts
48.8% no quit attempts
51.5% 1-3 attempts
6.4% 4-5 attempts

High nicotine dependence → Fagerström 6.7
High motivation to quit → Richmond 8.3
CO levels 20.0 ppm at admission
3.8 ppm at discharge

• 64.9% of patients were hospitalized in detoxification units and 28.2% in acute patients units.
• At discharge, 31.2% of patients were referred to specialized tobacco units and 25.8% to drug addiction units.

Main psychiatric diagnosis

| | |
|------------------------|-----------|
| Other | 1,319 (4) |
| Anxiety disorder | 1,142 (3) |
| Personality disorder | 1,071 (3) |
| Major depression | 1,071 (3) |
| Psychotic disorder | 1,071 (3) |
| Substance use disorder | 1,071 (3) |

Consumption of other substances

| | |
|-----------------|--------------|
| Other | 4,411 (98) |
| Synthetic drugs | 8,031 (187) |
| Cocaine | 1,042 (24) |
| Cannabis | 1,042 (24) |
| Alcohol | 40,181 (914) |

Abstinence rates post-discharge

| | |
|------------|------|
| 1st visit | 42.3 |
| 3rd visit | 47.4 |
| 6th visit | 52.4 |
| 9th visit | 58.8 |
| 12th visit | 62.8 |

• Professionals referred that smoking cessation intervention and the number of professionals involved increased in both of the participant hospitals.
• Systematic referral to outpatient units was achieved in both of the hospitals.

Conclusions
• Smoking cessation after discharge from a mental health ward is plausible (1st abstinence at 1 year follow up).
• The PDT-sm program has promoted smoking cessation interventions during hospital stay and referrals at discharge with acceptable cessation rates; and has increased the number of professionals involved.

Funding: This study has been supported by the Directorate of Public Health, Ministry of Health from the Government of Catalonia (Grant number 2011SGR1305) and the Government of Spain (Theme 2008, Network of Cooperative Research in Cancer, 2006000200089). Submission to the SRNT Europe 19th Annual Conference in Oslo (2012).


SRNT Europe 19th Annual Conference in Oslo Institut Català d'Oncologia

Catalan Network – Activity

Tobacco and Mental Health Working Group

- 26 health care workers
- 17 institutions

Elaboration of materials, specialized conferences and scientific articles.

 @psychonicotine

Special article

Deconstructing myths, building alliances: a networking model to enhance tobacco control in hospital mental health settings

Montse Ballbè^{a,b,c,d,*}, Antoni Gual^d, Gemma Nieva^e, Esteve Saltó^{f,g}, Esteve Fernández^{a,b,c,h}, the Tobacco and Mental Health Working Group⁺

^a Tobacco Control Unit, Cancer Prevention and Control Program, Institut Català d'Oncologia, WHO Collaborating Center for Tobacco Control, L'Hospitalet de Llobregat, Barcelona, Spain

^b Catalan Network of Smoke-free Hospitals, L'Hospitalet de Llobregat, Barcelona, Spain

^c Cancer Prevention and Control Group, Institut d'Investigació Biomèdica de Bellvitge – IDIBELL, L'Hospitalet de Llobregat, Barcelona, Spain

^d Addictions Unit, Psychiatry Department, Institute of Neurosciences, Hospital Clínic de Barcelona – IDIBAPS, Barcelona, Spain

^e Addictive Behaviours Unit, Department of Psychiatry, Hospital Universitari Vall d'Hebron, Universitat Autònoma de Barcelona, Barcelona, Spain

^f Health Plan Directorate, Ministry of Health, Generalitat de Catalunya, Barcelona, Spain

^g Department of Public Health, Universitat de Barcelona, Barcelona, Spain

^h Department of Clinical Sciences, Campus of Bellvitge, Universitat de Barcelona, Barcelona, Spain

Ballbè et al. Gaceta Sanitaria. 2016; 30(5):389-92

Catalan Network – Activity

Annual Meeting

**Trobada:
Hospitals sense Fum 2007**

“Avancem en Xarxa”

Dilluns 14 de maig

**trobada anual
2010**

XVII Trobada anual de la Xarxa 2019

27/11/2019

| | | | | |
|----------------|---------------------------|------------------------------------|------------------------|-------------------------------|
| Inofes | Miquel Vilardell Yna... | Lupe Ortega | Lidia Sarró | Maria del Carme Caudet Balgas |
| Maria Lahosa | Nuria Celerrio | Olena Tigova, Catalan Institute... | SALVADOR DIAZ BELMONTE | silvia mondon |
| Anna Riccobene | cama | elisenda Barberà | Esther | Josefina Hernández Roz |

XVIII Trobada de la Xarxa
27 de novembre de 2020

XIV
Trobada Anual
Xarxa Catalana
d'Hospitals Sense
Fum

18 de novembre 2016
Pavelló Ave Maria
Departament de Salut

Salut

XXI Trobada anual de la Xarxa Catalana d'Hospitals sense Fum

2023

Catalan Network – Activity

World No Tobacco Day – Smoke free Week



IMPULSEM ACTIVITATS AL VOLTANT DEL DIA MUNDIAL SENSE TABAC



Catalan Network – Activity

Support

II JORNADA EUSKADI LIBRE DE HUMO DE TABACO “Avanzamos enREDandonos”

Abordaje del tabaquismo desde las Organizaciones Sanitarias: bueno, bonito y barato.

Dr. Esteve Fernández
Institut Català d'Oncologia
Xarxa Catalana d'Hospitals sense Fum
WHO Collaborating Center for Tobacco Control

@stvfz

I Jornada de la Red Cántabra de Centros Sanitarios sin Humo

Centros Sanitarios sin Humo: Qué son y cómo organizarlos

Dr. Esteve Fernández
Jefe de la Unidad de Control del Tabaco del ICO
Coordinador Red Catalana Hospitalares sin Humo
Ex Coordinador European Network Smoke-Free Hospitals

efernandez@iconcologia.net

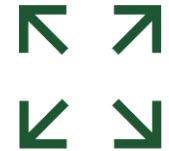
@stvfz

qTabac

Servei de consultes sobre intervenció en tabaquisme

Ja coneixes el qTabac?

ALLUNYEM EL TABAC
NO FUMEU ALS ACCESOS DEL RECINTE SANITARI



Dins del Campus fumar està fora de lloc

Imprescindible Prescindible

Vall d'Hebron

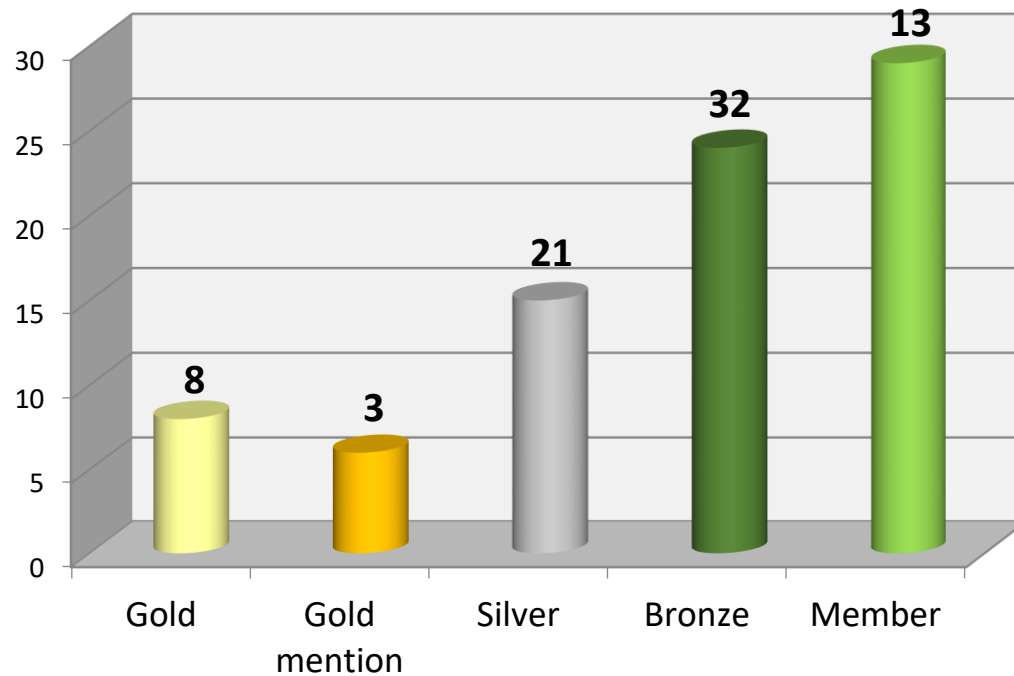
Dins del Campus fumar està fora de lloc

Si fumes al Campus la teva imatge s'esfuma

Vall d'Hebron



Catalan Network - Accreditation



Salut/  **ICO**
Institut Català d'Oncologia

Xarxa Catalana | **Hospitals Sense Fum**

 GLOBAL NETWORK
FOR TOBACCO FREE
HEALTHCARE SERVICES

Catalan Network - Accreditation

Support Gold Candidates

8 Gold Forum Catalan members



Hospital Clínic | Hospital de Granollers, 2019



Hospital Clínic. 2023



Hospital Benito Menni | Althaia. 2018

Catalan Network – Research

Published by Oxford University Press on behalf of the International Epidemiological Association
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International Journal of Epidemiology 2013;42:886–893
doi:10.1093/ije/dyt014

INEQUALITIES

Second-hand smoke in mental healthcare settings: time to implement total smoke-free bans?

Montse Ballbè,^{1,2,3,4} Xisca Sureda,^{2,3,5} Jose M Martínez-Sánchez,^{1,3,5} Esteve Saltó,^{3,6,7} Antoni Gual⁴ and Esteve Fernández^{1,2,3,5*}

¹Tobacco Control Unit, Cancer Prevention and Control Program, Institut Català d'Oncologia, L'Hospitalet de Llobregat, Barcelona, Spain, ²Catalan Network of Smoke-free Hospitals, L'Hospitalet de Llobregat, Barcelona, Spain, ³Cancer Prevention and Control Group, Institut d'Investigació Biomèdica de Bellvitge – IDIBELL, L'Hospitalet de Llobregat, Barcelona, Spain, ⁴Alcohol Unit,

Martínez et al. *BMC Health Services Research* (2016) 16:517
DOI 10.1186/s12913-016-1764-0

BMC Health Services Research

RESEARCH ARTICLE

Open Access



The role of middle managers in tobacco control after a national smoke-free hospital campus ban

Cristina Martínez^{1,2,3,7*}, Montse Ballbè^{1,2,4,5}, Miquel Vilardell⁶, Marcela Fu^{1,2,3} and Esteve Fernández^{1,2,5}

Research paper

Smoke-free policies in psychiatric services: identification of unmet needs

Montse Ballbè,^{1,2} Gemma Nieva,³ Sílvia Mondon,² Cristina Pinet,⁴ Eugeni Bruguera,³ Esteve Saltó,^{5,6} Esteve Fernández,^{1,7} Antoni Gual,² and the Smoking and Mental Health Group*

Catalan Network – Materials



ELSEVIER

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Second-hand smoke in hospitals in Catalonia (2009): A cross-sectional study measuring PM_{2.5} and vapor-phase nicotine

Xisca Sureda^{a,b}, Marcela Fu^{a,b}, María José López^{c,d}, Jose M. Martínez-Sánchez^{a,b}, Esther Carabasa^{a,e}, Esteve Saltó^{d,f,g}, Cristina Martínez^{a,b,e}, Manel Nebot^{c,d,h}, Esteve Fernández^{a,b,e,*}

^a Institut Català d'Oncologia-IDIBELL, L'Hospitalet, Barcelona, Spain

^b Department of Clinical Sciences, School of Medicine, Campus de Bellvitge, Universitat de Barcelona, L'Hospitalet, Barcelona, Spain

^c Agència de Salut Pública de Barcelona, Barcelona, Spain

^d CIBER de Epidemiología y Salud Pública, Barcelona, Spain

^e Xarxa Catalana d'Hospitals sense Fum, L'Hospitalet, Barcelona, Spain

Gac Sanit. 2016;30(1):55-58

Original breve

Prevalencia de consumo de tabaco en trabajadores hospitalarios: metaanálisis en 45 hospitales catalanes



Cristina Martínez^{a,b,c,d,*}, Jose M. Martínez-Sánchez^{a,b,e}, Laura Antón^{a,b,c}, Anna Riccobene^{a,b,c}, Marcela Fu^{a,b,c}, Nuria Quirós^{a,b,c}, Esteve Saltó^{f,g}, Esteve Fernández^{a,b,c,h} y Grupo de coordinadores de los Hospitales de la Red^o

^a Unidad de Control del Tabaco, Programa de Prevención y Control del Cáncer, Institut Català d'Oncologia-ICO, L'Hospitalet de Llobregat (Barcelona), España

^b Grupo de Prevención y Control del Cáncer, Institut d'Investigació Biomèdica de Bellvitge-IDIBELL, L'Hospitalet de Llobregat (Barcelona), España

^c Red catalana de hospitales libres de humo, Institut Català d'Oncologia, L'Hospitalet de Llobregat (Barcelona), España

^d Departamento de Enfermería, Escuela de Medicina y Ciencias de la Salud, Universitat Internacional de Catalunya, Sant Cugat del Valles (Barcelona), España

^e Unidad Biostatística, Departamento de Ciencia Básica, Escuela de Medicina y Ciencias de la Salud, Universitat Internacional de Catalunya, Sant Cugat del Valles (Barcelona), España

^f Agència de Salut Pública, Ministerio de Salud, Generalitat de Catalunya, Barcelona, España

^g Departamento de Salud Pública, Escuela de Medicina, Universitat de Barcelona, Barcelona, España

^h Departamento de Ciencias Clínicas, Escuela de Medicina, Universitat de Barcelona, L'Hospitalet del Llobregat (Barcelona), España

BMC Public Health



Research article

Open Access

Tobacco control policies in hospitals before and after the implementation of a national smoking ban in Catalonia, Spain

Cristina Martínez^{*1,2,3}, Marcela Fu^{1,3}, Jose M Martínez-Sánchez^{1,3}, Montse Ballbè^{†1,2,4}, Montse Puig^{1,2,5}, Montse García¹, Esther Carabasa^{1,2}, Esteve Saltó^{6,7} and Esteve Fernández^{1,2,3}

Address: ¹Tobacco Control & Research Unit, Cancer Prevention and Control Department, Institut Català d'Oncologia-IDIBELL, L'Hospitalet de Llobregat, Spain, ²Catalan Network of Smoke free Hospitals, L'Hospitalet de Llobregat, Spain, ³Department of Clinical Sciences, Campus of Bellvitge, Universitat de Barcelona, Barcelona, Spain, ⁴Alcohol and Addictions Unit, Hospital Clínic i Provincial, Barcelona, Spain, ⁵Psychosocial and Mental Health Nursing Department, Universitat de Barcelona, Barcelona, Spain, ⁶Public Health Department, Ministry of Health, Generalitat de Catalunya, Barcelona, Spain and ⁷Department of Public Health, Universitat de Barcelona, Barcelona, Spain

Challenges in Tobacco Control for Hospitals and Networks

Enforcement of bans

Enforcement of interventions

Cessation

Funding

Involvement

Poly-tobacco use

Generational
replacement



Forum Tabakprävention
in Gesundheitsinstitutionen
Schweiz

**Xarxa
Catalana** | **Hospitals
Sense Fum**



**GLOBAL NETWORK
FOR TOBACCO FREE
HEALTHCARE SERVICES**

*thank
you*



susann.koalick@ftgs.ch

lanton@iconcologia.net



BARMELWEID

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WHO Collaborating Centre
for Tobacco Control