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Azienda Unità Sanitaria Locale di Reggio Emilia

# Mediational Analysis of the LdP intervention

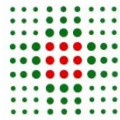
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ISTITUTO PER LO STUDIO  
E LA PREVENZIONE ONCOLOGICA



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# The LdP trial

Tumori, 99: 586-591, 2013

## A school-based peer-led smoking prevention intervention with extracurricular activities: the LILT-LdP cluster randomized controlled trial design and study population

Sandra Bosi<sup>1</sup>, Giuseppe Gorini<sup>2</sup>, Marco Tamelli<sup>1</sup>, Claudia Monti<sup>3</sup>, Simone Storani<sup>1</sup>, Giulia Carreras<sup>2</sup>, Andrea Martini<sup>2</sup>, Elias Allara<sup>4</sup>, Paola Angelini<sup>5</sup>, and Fabrizio Faggiano<sup>4</sup>



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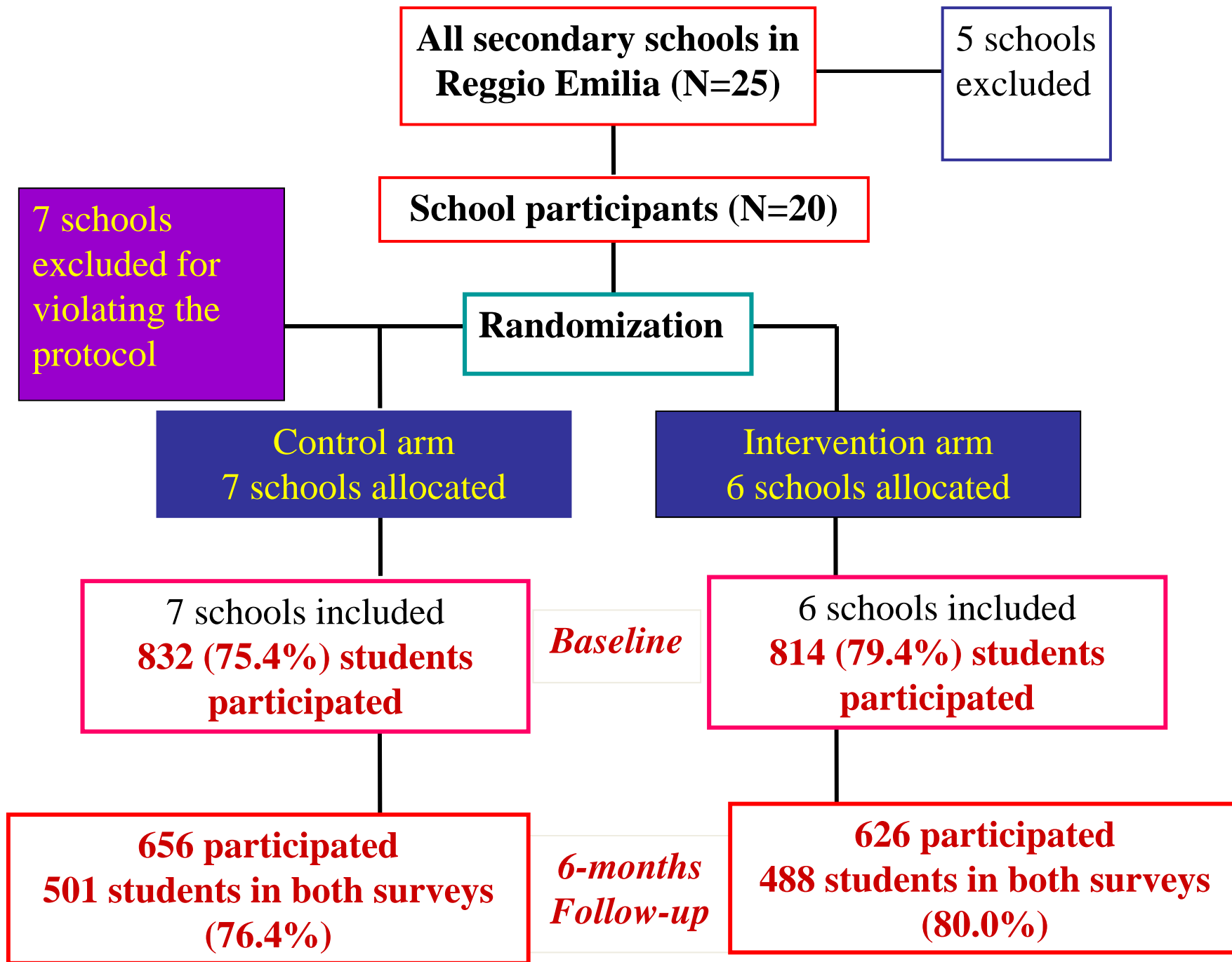
Preventive Medicine

journal homepage: [www.elsevier.com/locate/ypmed](http://www.elsevier.com/locate/ypmed)



## Effectiveness of a school-based multi-component smoking prevention intervention: The LdP cluster randomized controlled trial

Giuseppe Gorini <sup>a,\*</sup>, Giulia Carreras <sup>a</sup>, Sandra Bosi <sup>b</sup>, Marco Tamelli <sup>b</sup>, Claudia Monti <sup>c</sup>, Simone Storani <sup>b</sup>, Andrea Martini <sup>a</sup>, Elias Allara <sup>d</sup>, Paola Angelini <sup>e</sup>, Fabrizio Faggiano <sup>d</sup>



# LdP intervention in the experimental arm

Four parts:

- the “Smoking Prevention Tour” (SPT) workshops at the “Luoghi di Prevenzione” Center, four 40-minute sessions
- one in-depth lesson on one SPT topic
- a life-skills peer-led intervention (two 2-hour meetings per class)
- School anti-smoking policy: compliance control & revision

# The “Smoking Prevention Tour” workshop



Laboratorio scientifico fumo di sigaretta

**Lab session**



Laboratorio informatico

**Computer  
session**



Laboratorio analisi immaginativa

**Imaginative &  
creative writing  
sessions**

# Outcomes

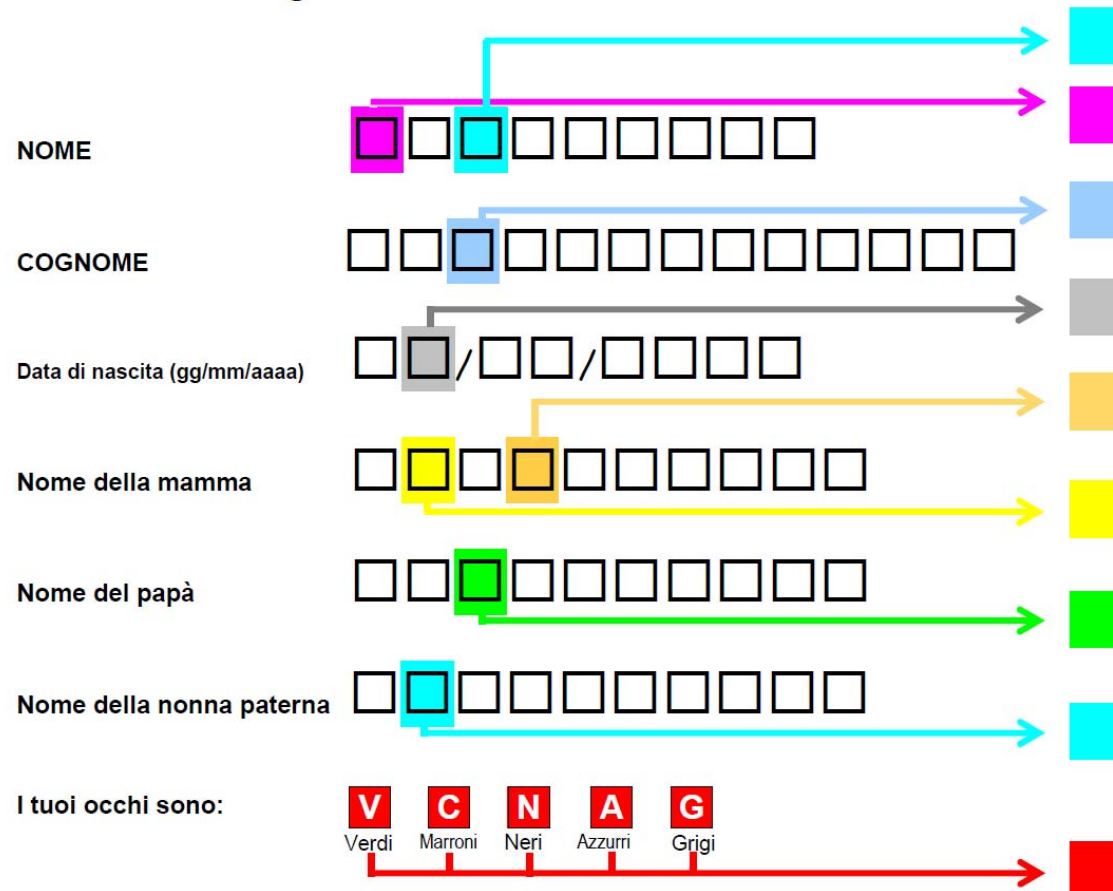
- Self-reported past 30-day smoking of  $\geq 20$  or 1–19 days of cigarette smoking (daily or frequent smoking, respectively)
- Smoking at school

recorded in 2 surveys administered before and 18 months after the beginning of the programme

# Anonymous questionnaire

32 items

## Auto-generazione CODICE ANONIMO





# Monitoring of the programme process

| <b>Programme parts</b>  | <b>Schools (%)</b> | <b>Students (%)</b> |
|---|--------------------|---------------------|
| Peer Education  | 6 (100.0)          | 471 (96.5)          |
| SPT workshops   | 6 (100.0)          | 461 (94.5)          |
| Class lesson on one SPT workshops   | 4 (66.7)           | 385 (78.9)          |
| At least one training lesson on SPT Workshops for teachers  | 6 (100.0)          | --                  |
| <b>School Tobacco Policy:</b> control of smoking signs and enforcement surveillance; formation of a school working-group; revision of school smoking regulation | 6 (100.0)          | 488 (100.0)         |
| <b>School Tobacco Policy:</b> introduction of the revised smoking policy  | 2 (33.3)           | 184 (37.7)          |



# Statistical analyses

- **A propensity score analysis was performed.** The covariates used for the propensity-matching analysis were independent from the intervention: age, gender, parents' education and origin, school type, and smoking status at baseline
- Two groups with comparable baseline information after matching were produced.
- The effect of the intervention was then estimated by fitting a logistic model applied to the propensity score-matched database by allowing for intra-school correlation and including the unbalanced intervention-dependent variables (date of the baseline survey and days between baseline and followup surveys) as covariates
- **Analysis was done by intention to treat**, with missing values on the outcome variables replaced by a value indicating current smoking

# Results – all students

Students in the experimental arm recorded:

- a significant 31% reduction in reporting having smoked in the last 30 days at follow-up
- a significant 46% reduction in reporting daily smoking (20+) in comparison to controls

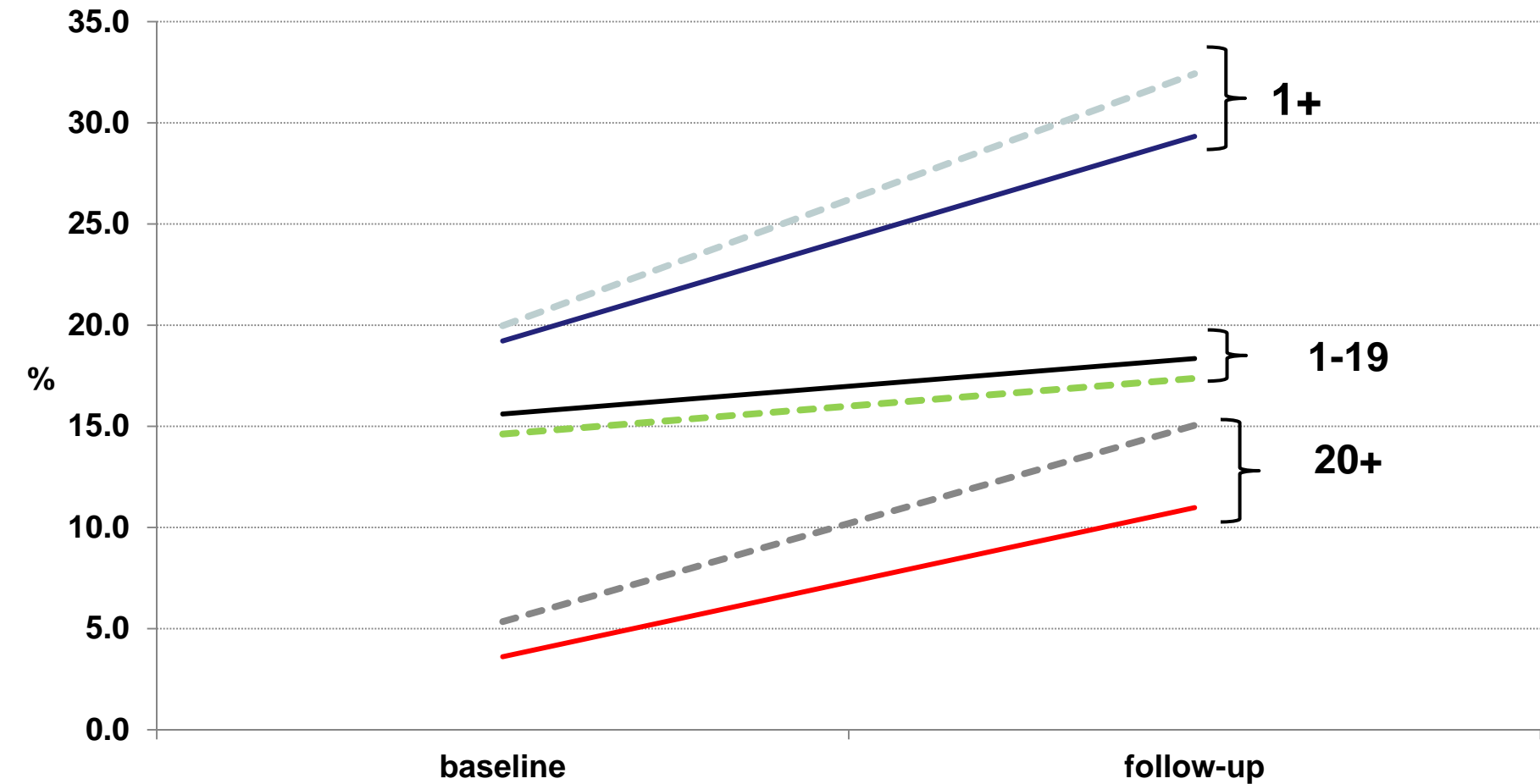
*A “delay” effect in the progression towards daily smoking*

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|                                | Control            | Intervention       | Matched on propensity score |
|--------------------------------|--------------------|--------------------|-----------------------------|
|                                | N=501<br>7 schools | N=488<br>6 schools | OR (95% CI)                 |
| Past 30-day smoking (1+) at fu | 169                | 147                | <b>0.69 (0.50-0.95)</b>     |
| Daily smoking (20+) at fu      | 79                 | 53                 | <b>0.54 (0.40-0.72)</b>     |
| Frequent smoking (1-19) at fu  | 90                 | 94                 | 0.85 (0.63-1.14)            |

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# Results –all students



--- Daily smoking (20+), control arm

— Daily smoking (20+), intervention arm

--- Frequent smoking (1-19), control arm

— Frequent smoking (1-19), intervention arm

--- Past 30-day smoking (1+), control arm

— Past 30-day smokings (1+), intervention arm

# Results – non-smokers at baseline

Students in the exp arm showed:

- a significant 59% reduction in reporting daily consumption

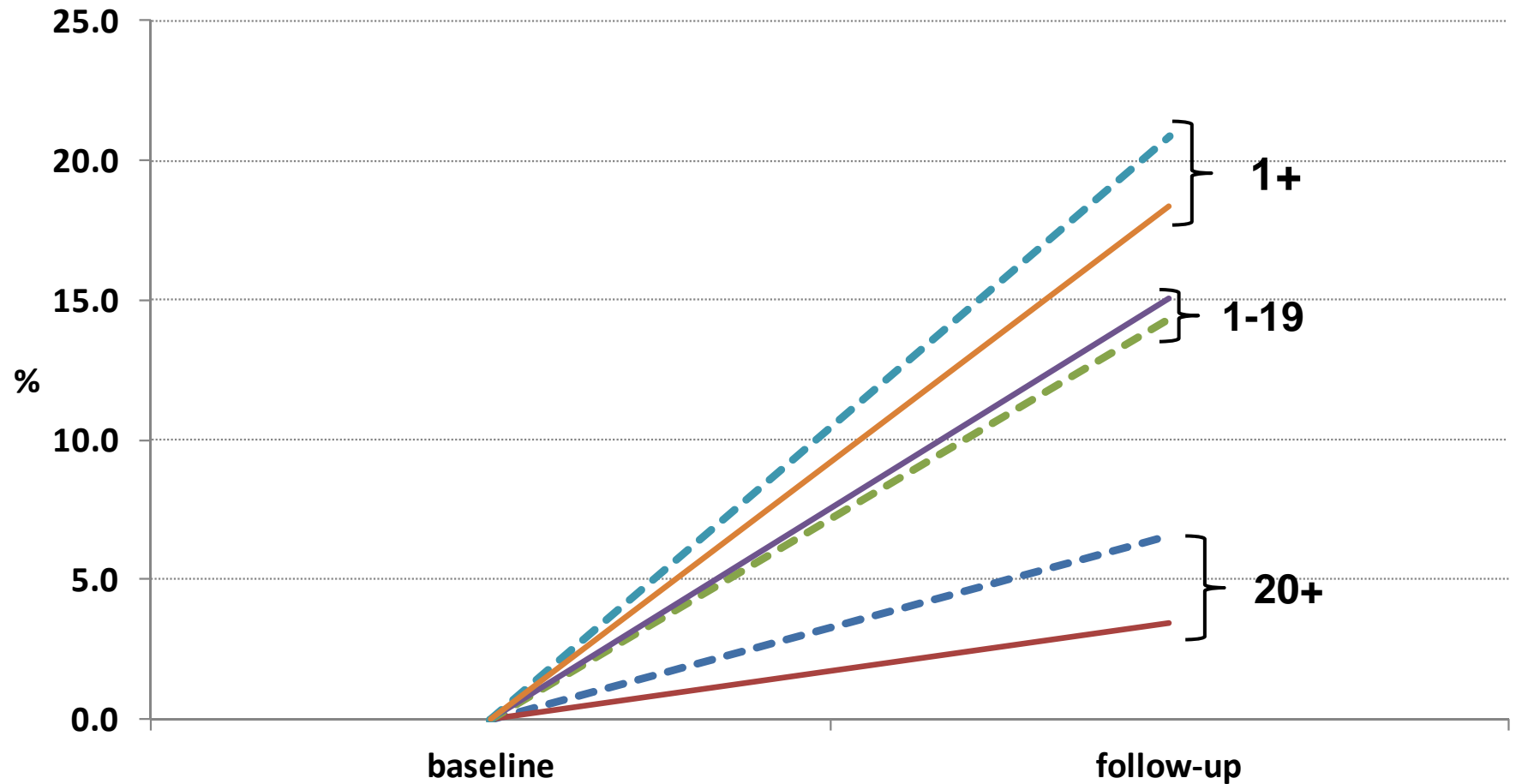
*This “delay” effect especially worked in non-smokers at the baseline*

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|                                | Control            | Intervention       | Matched on propensity score |
|--------------------------------|--------------------|--------------------|-----------------------------|
| Non-smoking at baseline        | N=392<br>7 schools | N=403<br>6 schools | OR (95% CI)                 |
| Past 30-day smoking (1+) at fu | 84                 | 80                 | 0.67 (0.42-1.06)            |
| Daily smoking (20+) at fu      | 26                 | 15                 | <b>0.41 (0.24-0.69)</b>     |
| Frequent smoking (1-19) at fu  | 58                 | 65                 | 0.79 (0.49-1.28)            |
| Non-smoking at fu              | 308                | 323                | 1.49 (0.94-2.36)            |

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# Non-smokers at baseline



— Daily smoking (20+), control arm

— Daily smoking (20+), intervention arm

— Frequent smoking (1-19), control arm

— Frequent smoking (1-19), intervention arm

— Past 30-day smoking (1+), control arm

— Past 30-day smoking (1+), intervention arm

# Results – smoking in school areas

Smoking students showed a significant reduction of 62% in smoking in school areas (playgrounds, aisles, toilets) at follow-up, in comparison to controls

*Revising and enforcing a school smoking policy worked*

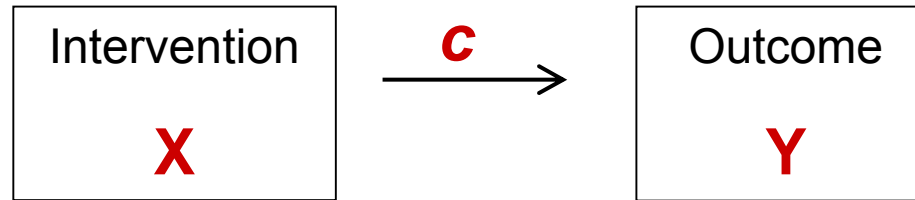
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|                                | Control            | Intervention       | Matched on propensity score |
|--------------------------------|--------------------|--------------------|-----------------------------|
|                                | N=501<br>7 schools | N=488<br>6 schools | OR (95% CI)                 |
| Past 30-day smoking (1+) at fu | 169                | 147                | <b>0.38 (0.16-0.90)</b>     |
| Daily smoking (20+) at fu      | 79                 | 53                 | 1.01 (0.20-4.87)            |
| Frequent smoking (1-19) at fu  | 90                 | 94                 | <b>0.22 (0.07-0.71)</b>     |

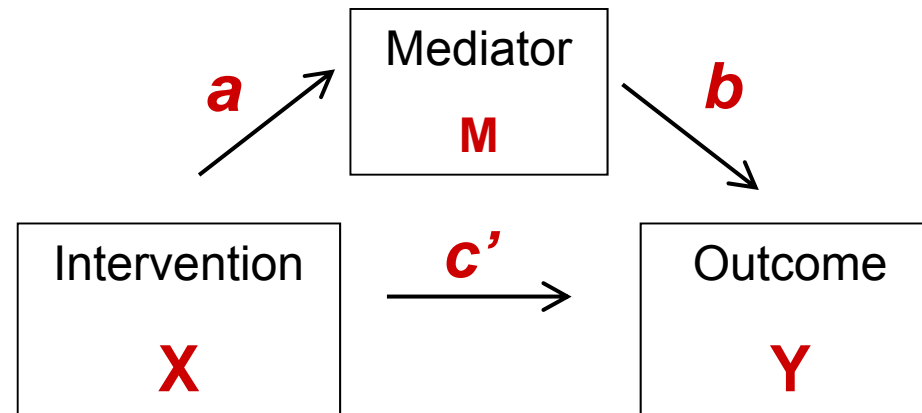
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# Mediation & effectiveness analyses

*Effectiveness analysis of the Cluster RCT*



*Mediational analysis*



**a**: how the programme modifies mediators

**b**: how mediators are associated to the outcome

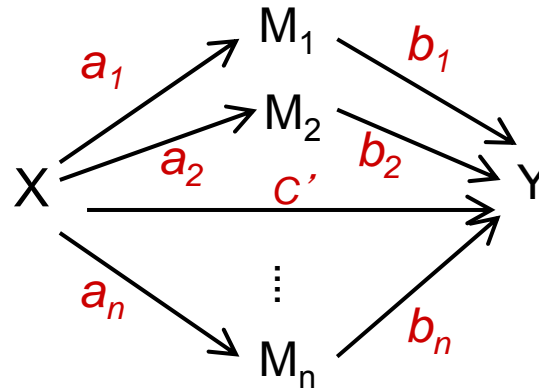
**direct effect  $c'$** : X effect on Y, adjusting for M

**mediated/indirect effect  $ab$** : X effect on Y through M

**total effect  $c=c'+ab$** : direct effect + mediated effect



# Multiple mediation



Indirect effect specific of each M<sub>i</sub>:  $a_i b_{itot}$

Overall mediated effect :  $\sum_i a_i b_i$

Overall effect  $c = c' + \sum_i a_i b_i$

- Analysis is similar to a multiple regression
- We estimated the effect of each mediator, adjusting for the others

# Statistical analysis

- We carried out a multilevel multiple mediation analysis entering all mediators simultaneously.
- Randomization occurred at the school level, so we entered school as the second level, and individuals as the first level and we implemented a  $2 \rightarrow 1 \rightarrow 1$  multilevel model, where the intervention is designed to change mediators in order to reduce outcomes.
- We took into account missing data, performing a multiple imputation procedure, the Multivariate Imputation by Chained Equations (MICE)

[Zhang et al, 2009, Preacher and Hayes, 2008, Krull and MacKinnon, 2001, Whang et al, 2014; Zhang and Whang, 2013, Raghunathan et al, 2001]

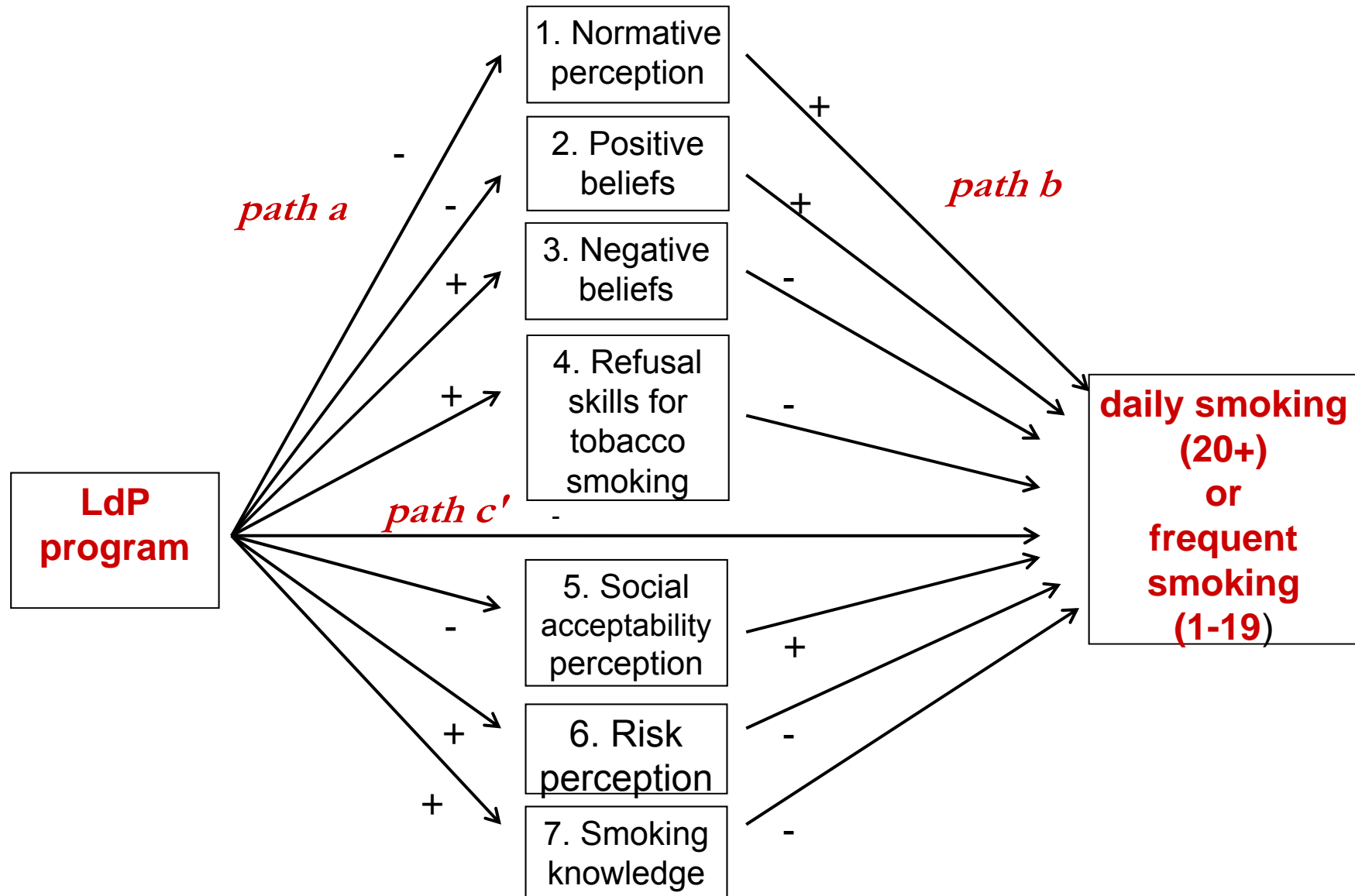
# Definition of mediators - 1

| <b>Mediator</b>                       | <b>Question and items</b>   | <b>Definition</b>   |
|---------------------------------------|---|---|
| 1. Normative perception               | In your opinion, how many students are current smokers?   | 0: 10%-25%<br>1: 50%-75%-all                              |
| 2. Positive beliefs                   | If you will smoke in the next month, do you think that you will<br>-Feel more relaxed<br>-Have more fun<br>-Be more popular<br>-Feel more friendly and approachable | 0: no positive beliefs<br>1: at least one positive belief |
| 3. Negative beliefs                   | If you will smoke in the next month you think you will become addicted?   | 0: no negative belief<br>1: at least one negative belief  |
| 4. Refusal skills for tobacco smoking | If one of your best friends offered you a cigarette, would you smoke?   | 0: no ability to refuse<br>1: ability to refuse           |

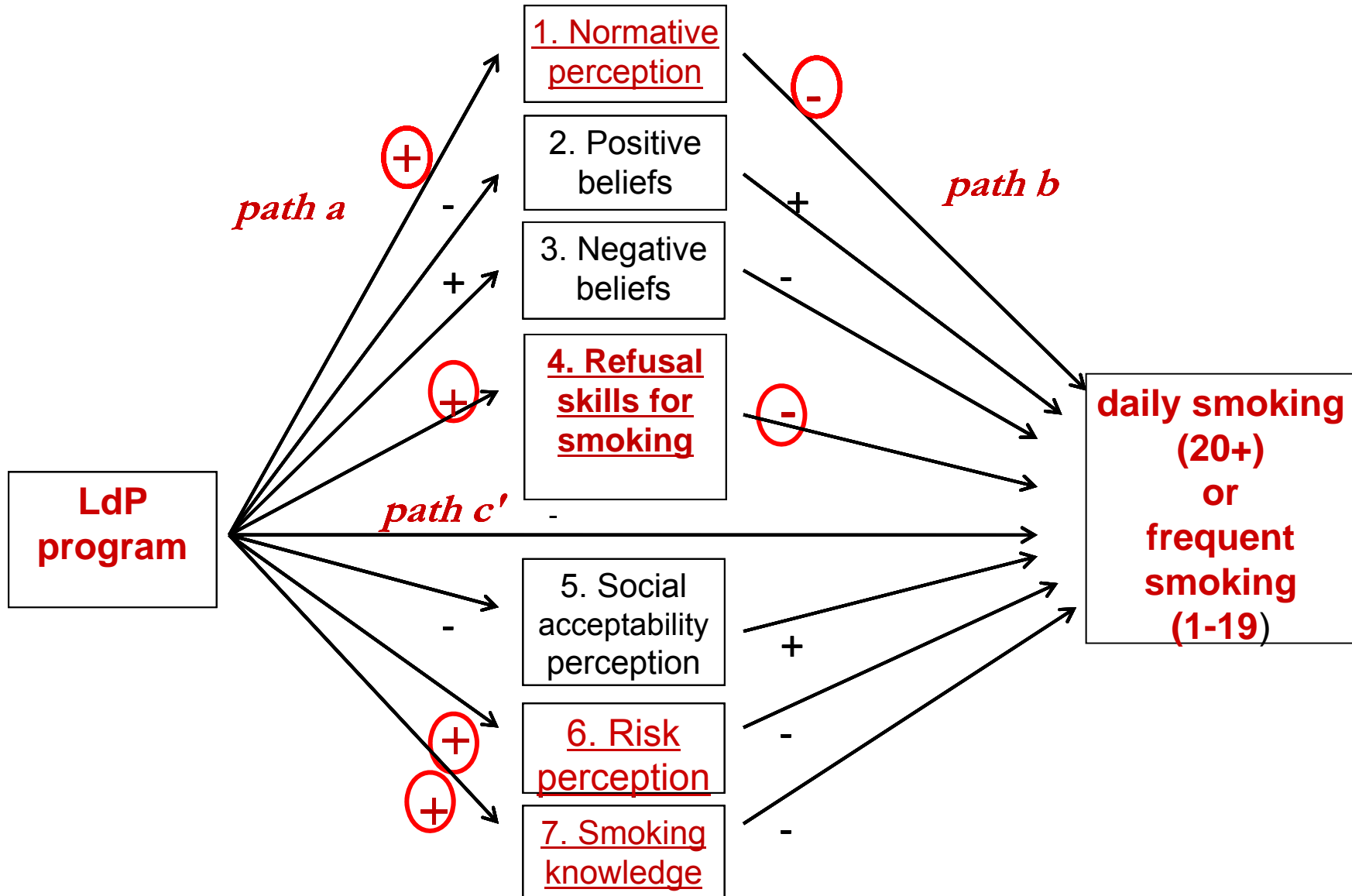
# Definition of mediators - 2

| <b>Mediators</b>                                | <b>Question and items</b>   | <b>Definition</b>   |
|---|---|---|
| 5. Social acceptability perception              | Do you agree with the following statements?<br>-Youths who smoke have more friends<br>-Smoking makes youths cooler<br>-Not smoking is a way of expressing my independence | 0: smoking socially not accepted<br>1: smoking socially accepted or accepted on average |
| 6. Risk perception                              | -How much do you think are likely to be damaged (physically or otherwise), people who smoke cigarettes occasionally   | 0: misperception<br>1: right perception   |
| 7. Smoking knowledge                            | Do you agree with the following statements?<br>-Nicotine is the substance that causes lung cancer<br>-You need to smoke a lot of cigarettes a day to become addicted      | 0: no/little knowledge<br>1: correct knowledge  |
| 8. Awareness about dangers of second-hand smoke | Breathing other people's smoke is bad for your health   | 0: does not agree<br>1: agree   |

# Mediation hypothesis



# Mediation results



# Results - 1

- **Refusal skills** – LdP programme determined a significant increase in refusal skills (path a), and this determined a significant reduction in smokers (path b). The total indirect effect (ab) is strong (coeff=-1.98) in the hypothesized direction
- **Normative perception** - LdP determined a significant increase in normative perception (path a) and this determined a significant reduction in smokers (path b). The indirect effect is significant and in the hypothesized direction (smokers' reduction); coeff=-0.15



# Results - 2

- **Risk perception** – LdP determines a significant increase in risk perception (path a), but this did not cause any smokers' reduction (path b), and the total indirect effect is not significant
- **Smoking knowledge** – LdP determines a significant increase of knowledge (path a), but this did not cause any smokers' reduction (path b), and the total indirect effect (ab) is not significant

# Results - All students, outcome: daily smoking (>20 sig in 30 days)

Total indirect effect  $\sum_i a_i b_i = -1.00 (-6.73, 2.42)$

Direct effect  $c' = 0.13 (-1.23, 0.40)$

| MEDIATORS                             | a           |             |             | b            |              |              | ab           |              |              |
|---------------------------------------|-------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|
|                                       | coeff       | 95% CI      |             | coeff        | 95% CI       |              | coeff        | 95% CI       |              |
| 1. Normative perception               | <b>0.38</b> | <b>0.04</b> | <b>0.80</b> | <b>-1.02</b> | <b>-1.65</b> | <b>-0.47</b> | <b>-0.38</b> | <b>-1.02</b> | <b>-0.04</b> |
| 2. Positive beliefs towards smoking   | -0.08       | -0.54       | 0.21        | -0.15        | -0.33        | 1.09         | 0.01         | -0.31        | 0.13         |
| 3. Negative beliefs towards smoking   | 0.62        | -0.14       | 0.64        | <b>1.27</b>  | <b>0.04</b>  | <b>0.80</b>  | 0.79         | -0.24        | 1.15         |
| 4. Refusal skills towards smoking     | <b>0.41</b> | <b>0.11</b> | <b>1.00</b> | <b>-3.50</b> | <b>-5.63</b> | <b>-3.09</b> | <b>-1.44</b> | <b>-4.23</b> | <b>-0.42</b> |
| 5. Perception of social acceptability | -0.19       | -0.60       | 0.19        | -0.80        | -1.29        | 0.01         | 0.15         | -0.12        | 0.49         |
| 6. Risk perception                    | <b>0.48</b> | <b>0.26</b> | <b>1.00</b> | -0.07        | -0.90        | 0.30         | -0.03        | -0.68        | 0.19         |
| 7. Knowledge towards smoking          | <b>0.59</b> | <b>0.01</b> | <b>1.10</b> | -0.19        | -0.22        | 1.23         | -0.10        | -0.13        | 0.92         |

# Results - All students, outcome: current smokers (>1 sig in 30 days)

Effetto totale indiretto  $\sum_i a_i b_i = -1.80 (-5.47, 0.79)$

Effetto diretto  $c' = -0.64 (-0.47, 0.78)$

| MEDIATORS                             | a           |             |             | b            |              |              | ab           |              |              |
|---------------------------------------|-------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|
|                                       | coeff       | 95% CI      |             | coeff        | 95% CI       |              | coeff        | 95% CI       |              |
| 1. Normative perception               | <b>0.37</b> | <b>0.04</b> | <b>0.86</b> | <b>-0.41</b> | <b>-1.30</b> | <b>-0.37</b> | <b>-0.15</b> | <b>-0.80</b> | <b>-0.03</b> |
| 2. Positive beliefs towards smoking   | -0.03       | -0.54       | 0.18        | 0.04         | -0.27        | 0.79         | 0.00         | -0.26        | 0.09         |
| 3. Negative beliefs towards smoking   | 0.76        | -0.10       | 0.66        | 0.20         | -0.67        | 0.31         | 0.15         | -0.25        | 0.10         |
| 4. Refusal skills towards smoking     | <b>0.53</b> | <b>0.11</b> | <b>0.94</b> | <b>-3.72</b> | <b>-4.10</b> | <b>-3.10</b> | <b>-1.98</b> | <b>-3.38</b> | <b>-0.37</b> |
| 5. Perception of social acceptability | -0.08       | -0.58       | 0.18        | 0.22         | -0.77        | 0.19         | -0.02        | -0.08        | 0.29         |
| 6. Risk perception                    | <b>0.50</b> | <b>0.26</b> | <b>0.99</b> | -0.05        | -0.87        | 0.08         | -0.02        | -0.61        | 0.05         |
| 7. Knowledge towards smoking          | <b>0.32</b> | <b>0.00</b> | <b>1.09</b> | 0.71         | -0.17        | 0.91         | 0.23         | -0.10        | 0.68         |

# Results – Non smokers at baseline, outcome: daily smokers ( $\geq 20$ sig in 30 days)

Effetto totale indiretto  $\sum_i a_i b_i = -0.62 (-1.33, 0.57)$

Effetto diretto  $c' = -0.82 (-2.10, 0.47)$

| MEDIATORS                             | a           |             |             | b            |              |              | ab           |              |             |
|---------------------------------------|-------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|-------------|
|                                       | coeff       | 95% IC      |             | coeff        | 95% IC       |              | coeff        | 95% IC       |             |
| 1. Normative perception               | <b>0.06</b> | <b>0.00</b> | <b>0.17</b> | <b>-0.31</b> | <b>-2.06</b> | <b>-0.23</b> | <b>-0.02</b> | <b>-0.21</b> | <b>0.00</b> |
| 2. Positive beliefs towards smoking   | -0.05       | -0.14       | 0.04        | 0.78         | -0.26        | 1.74         | -0.04        | -0.16        | 0.03        |
| 3. Negative beliefs towards smoking   | 0.02        | -0.03       | 0.12        | <b>1.10</b>  | <b>0.13</b>  | <b>2.11</b>  | 0.03         | -0.04        | 0.17        |
| 4. Refusal skills towards smoking     | <b>0.12</b> | <b>0.00</b> | <b>0.16</b> | <b>-4.23</b> | <b>-4.70</b> | <b>-2.37</b> | <b>-0.50</b> | <b>-0.59</b> | <b>0.00</b> |
| 5. Perception of social acceptability | -0.12       | -0.14       | 0.03        | -0.31        | -1.15        | 0.60         | 0.04         | -0.04        | 0.10        |
| 6. Risk perception                    | <b>0.13</b> | <b>0.05</b> | <b>0.23</b> | -1.17        | -1.78        | 0.27         | -0.15        | -0.28        | 0.04        |
| 7. Knowledge towards smoking          | <b>0.02</b> | <b>0.00</b> | <b>0.14</b> | <b>0.89</b>  | <b>0.12</b>  | <b>2.22</b>  | <b>0.02</b>  | <b>0.00</b>  | <b>0.23</b> |

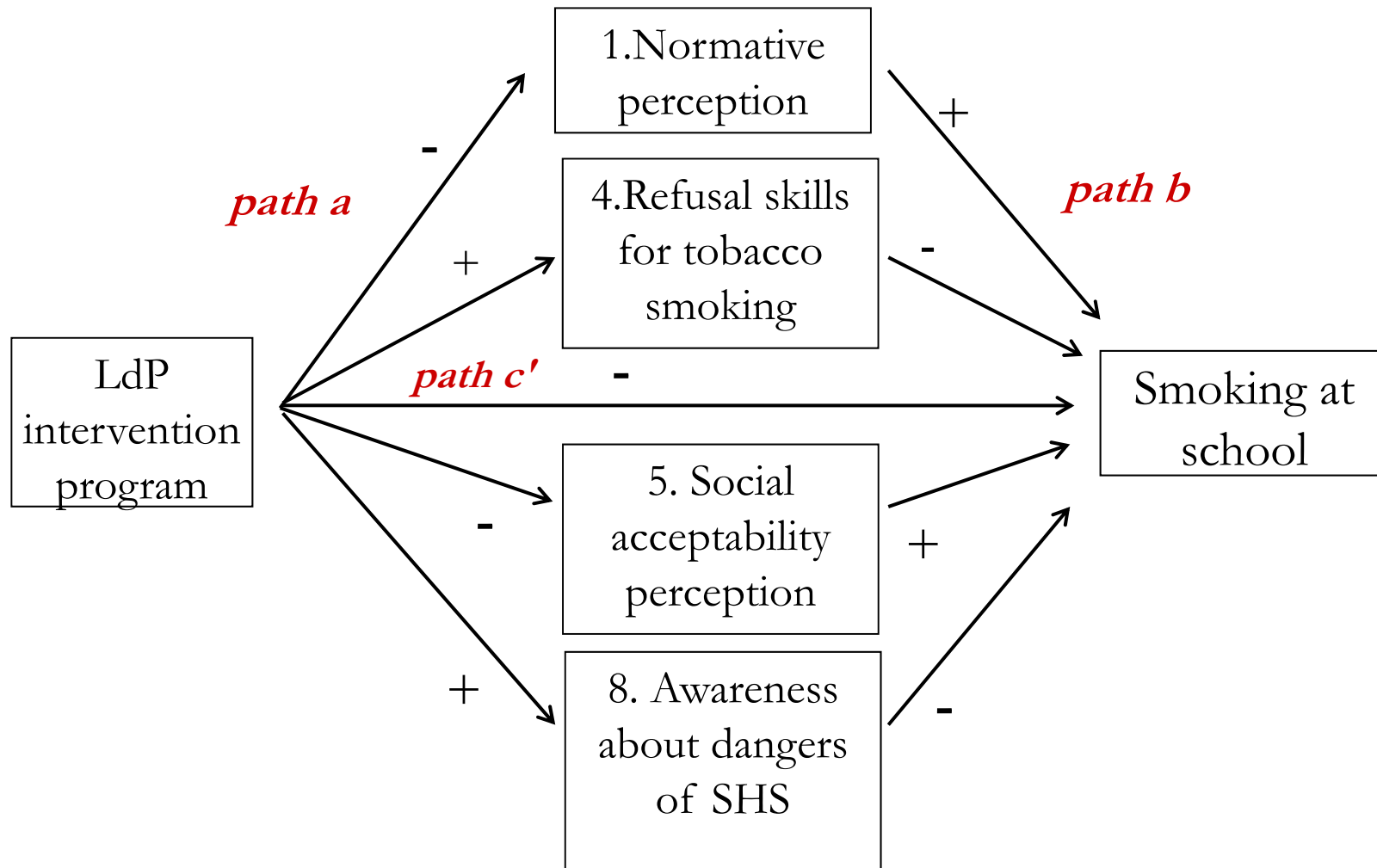
# Results - Non smokers at baseline, outcome: current smokers (>1 sig in 30 days)

Effetto totale indiretto  $\sum_i a_i b_i = -0.59 (-1.12, 0.23)$

Effetto diretto  $c' = 0.40 (-0.64, 0.76)$

| MEDIATORS                             | a           |             |             | b            |              |              | ab           |              |             |
|---------------------------------------|-------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|-------------|
|                                       | coeff       | 95% IC      |             | coeff        | 95% IC       |              | coeff        | 95% IC       |             |
| 1. Normative perception               | <b>0.02</b> | <b>0.00</b> | <b>0.16</b> | <b>-1.08</b> | <b>-1.62</b> | <b>-0.52</b> | <b>-0.02</b> | <b>-0.21</b> | <b>0.00</b> |
| 2. Positive beliefs towards smoking   | -0.05       | -0.14       | 0.03        | 0.05         | -0.27        | 0.89         | 0.00         | -0.08        | 0.02        |
| 3. Negative beliefs towards smoking   | 0.08        | -0.04       | 0.12        | -0.37        | -1.01        | 0.09         | -0.03        | -0.08        | 0.02        |
| 4. Refusal skills towards smoking     | <b>0.12</b> | <b>0.00</b> | <b>0.15</b> | <b>-3.40</b> | <b>-4.21</b> | <b>-3.15</b> | <b>-0.39</b> | <b>-0.55</b> | <b>0.00</b> |
| 5. Perception of social acceptability | -0.02       | -0.14       | 0.03        | -0.25        | -0.98        | 0.14         | 0.01         | -0.02        | 0.10        |
| 6. Risk perception                    | <b>0.26</b> | <b>0.05</b> | <b>0.23</b> | -0.62        | -0.93        | 0.09         | -0.16        | -0.16        | 0.01        |
| 7. Knowledge towards smoking          | <b>0.08</b> | <b>0.01</b> | <b>0.13</b> | 0.08         | -0.54        | 0.73         | 0.01         | -0.04        | 0.06        |

# Outcome “smoking at school”



# Results

- Ldp programme showed a significant effect in reducing smoking in school areas, adjusting for mediators (direct effect c')
- Ldp programme did not show any effect through mediators (path a)

*Promoting and enforcing an anti-smoking school policy may act directly reducing the habit of smoking in school areas, or through other mediators we did not consider*



# Results – current smokers (>1 sig in 30 days)

Overall indirect effect  $\sum_i a_i b_i = 0.11$  (-5.27,2.84)

Direct effect  **$c' = -1.42$  (-2.38,-0.69)**

| MEDIATORI                             | a     |        |      | b            |              |              | ab    |        |      |
|---------------------------------------|-------|--------|------|--------------|--------------|--------------|-------|--------|------|
|                                       | coeff | 95% CI |      | coeff        | 95% CI       |              | coeff | 95% CI |      |
| 1. Normative perception               | -0.31 | -0.48  | 0.94 | <b>-0.59</b> | <b>-1.43</b> | <b>-0.19</b> | 0.18  | -0.86  | 0.41 |
| 4. Refusal skills                     | 0.09  | -0.67  | 1.33 | <b>-2.31</b> | <b>-3.39</b> | <b>-1.45</b> | -0.22 | -3.02  | 1.55 |
| 5. Perception of social acceptability | -0.09 | -0.57  | 1.00 | <b>-0.89</b> | <b>-1.37</b> | <b>-0.02</b> | 0.08  | -0.87  | 0.49 |
| 9. Awareness on SHS effects           | 0.17  | -0.86  | 0.59 | 0.42         | -0.45        | 1.14         | 0.07  | -0.52  | 0.39 |

# Conclusions

- LdP programme was **effective in delaying** the progression towards daily smoking, in particular among non-smokers at baseline
- The LdP intervention reduced cigarette smoking through two mediators: **refusal skills for smoking & normative perception**.
- The association between the intervention and normative perception however acted in the direction opposite to the expected.
- The programme showed to act significantly increasing risk perception and smoking knowledge, but these mediators had no effect on smoking reduction.
- LdP intervention directly acted on reducing smoking in school areas.



**Grazie**

# The “Smoking Prevention Tour” (SPT) **workshops** at the LILT “Luoghi di Prevenzione” Centre - 1

SPT consists of 4-hour extracurricular activities divided into four 40-minute sessions:

- a) **Creative writing**: smoking signs (smoking and emotions, thoughts, experiences, key-words), personal feeling of smoking (feelings, beliefs, experiences)
- b) **Lab experiments**: PM measurement, lab trials for separating different smoking substances  
policy

# The “Smoking Prevention Tour” (SPT) **workshops** at the LILT “Luoghi di Prevenzione” Centre - 2

- c) **Computer session**: on physical and psychological wellness and on stress levels; for non-smokers: test on curiosity level about smoking; for smokers: the Fagerstrom Tolerance Questionnaire, test on motivation to quit; for former smokers: test on motivation to be a sustained non-smokers
- d) **Imaginative session**: the educator read a novel on the experience of smoking a cigarette during a Saturday night in a disco-club. Students had to identify themselves with the character. This experience was compared with a non-smoker experience.