

MIECHV Measure: Tobacco Cessation Referrals



Tobacco harms babies and young children before and after they are born. Smoking during pregnancy can increase the risk for miscarriage, certain birth defects, and pregnancy complications, such as stillbirth, preterm birth, and delivery of a low birthweight infant. Babies exposed to smoke in-utero and babies who are exposed to secondhand smoke after birth are at risk of sudden infant death syndrome (SIDS) and lung problems in childhood. ([CDC, Smoking During Pregnancy](#))

Measure: Percent of primary caregivers who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment

What to collect:	Status of use of tobacco products or e-cigarettes (Tobacco includes combustibles (cigarettes, cigars, pipes, hookahs, and bidis), non-combustibles (chew, dip, snuff, snus, and dissolvable), and Electronic Nicotine Delivery Systems (ENDS) at enrollment, and status of referral to tobacco cessation services
For whom:	Newly enrolled primary caregivers in MIECHV funded programs
When to ask:	Assess once per family, within 3 months of enrollment

Measure Production Details

Calculate: Percent of eligible primary caregivers who received a referral for cessation within 3 months of enrollment.

Numerator	Number of primary caregivers who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment
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Denominator	Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months
Missing	No documentation of tobacco use status at enrollment

Required Data Elements:

- Family enrollment date
- Family exit date (if applicable)
- Tobacco use survey date
- Tobacco use at enrollment status (y/n)
- Already receiving tobacco cessation services? (y/n)
- Date tobacco cessation referral given