

Georgia Tobacco Quit Line Preliminary Evaluation Report

Summary Report from the Survey of Callers- April 2006

Background

Tobacco use is a leading cause of preventable illness and death in Georgia. Over 11,000 adult Georgians die every year from a tobacco-related illness, about one death out of every six. Of these deaths, 38% are from cancer, 38% are from heart disease, and 24% are from respiratory illnesses. The annual cost of tobacco-related adult deaths in Georgia is \$1.8 billion in direct health care charges, and \$2.9 billion in lost productivity.^a

After years of remaining stable, the prevalence of smoking in Georgia dropped to 20% in 2004, from 24% in 2001. In addition, the percentage of people who have ever smoked cigarettes but have quit has increased from 47% in 2001 to 51% in 2004. However, one out of every five Georgians still smokes cigarettes. In Georgia, 22% of men and 18% of females currently smoke.^b

In Georgia, 59% of current adult smokers tried to quit smoking in the past year. National data shows that only about 4.7% of people who make a quit attempt maintain abstinence for at least 3 months. Tobacco quit lines can reach substantial numbers of tobacco users and have been proven to be effective in increasing the number of successful quit attempts. Recent analyses have shown that proactive quit lines provide a 56% increase in quit rates when compared to self-help.^c

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The Georgia Tobacco Quit Line

The Georgia Department of Human Resources contracts with Free and Clear, Inc. to operate the Georgia Tobacco Quit Line. The Quit Line became operational on October 15, 2001. The Quit Line is a free service for all Georgia residents, and provides telephone-based cessation counseling and follow-up by a certified tobacco cessation specialist. The Quit Line refers callers to local cessation resources and also offers information and resources to non-tobacco using individuals calling for assistance on how to help a family member or friend quit.

The Quit Line offers counseling to adults and youth 13 and older, based on the individual's readiness and willingness to make a quit attempt, through these components:

- Standard Intervention – Includes guidance and counseling on quitting tobacco, such as information on approved cessation medications and/ or behavior change strategies, referrals to community resources, and written materials. The caller also is advised around any potential benefits offered through insurance.
- Intensive Intervention – The Intensive Intervention is offered to all callers who have set a quit date or are currently pregnant. This component includes continuous strategic support and counseling for maintaining the caller's goals in quitting or maintaining abstinence from tobacco. Quit materials are mailed to participants based on their progress in the quitting process. The Quit Line offers up to a total of four support calls, along with the option for the caller to initiate support as needed.
- Youth Standard and Intensive Intervention – Includes exploration of the youth callers concerns about tobacco use, including helping the youth alter their tobacco use patterns, quitting altogether, and/or seeking additional support.
- Fax Program Service - Allows an initiating agency to request the Quit Line call a tobacco user, with that tobacco users consent. This program assists clinicians, worksites, and other agencies who work directly with tobacco users. The initiating agency then receives a faxed report on the progress of the tobacco user.

Survey of Georgia Tobacco Quit Line Callers

Methods

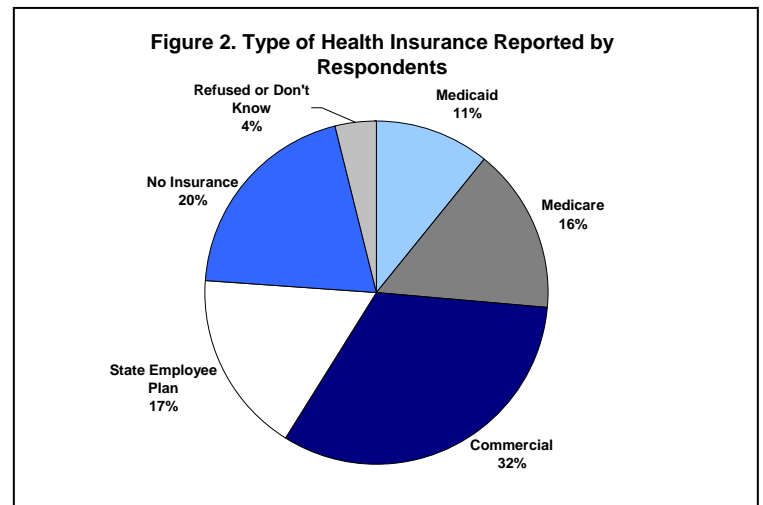
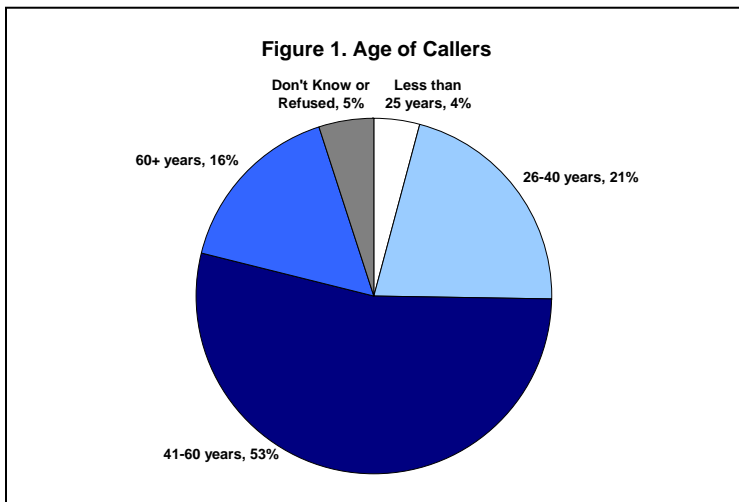
The Georgia Department of Human Resources contracted with Georgia State University, Institute of Public Health to conduct a comprehensive assessment of the effectiveness and impact of the Georgia Tobacco Quit Line. The Survey Research Center of the University of Georgia under contract with the Institute of Public Health conducted a survey of

adult Georgians who contacted the Quit Line during the time period of January 1, 2004 – June 30, 2005. The survey, one component of the assessment, was intended to examine quit status and satisfaction with the Quit Line and to determine what, if any, improvements should be made. The survey was conducted between November 8, 2005 and December 2, 2005, approximately 6 - 23 months after the participants first called the Quit Line.

Free and Clear, Inc. provided Georgia State University with a database of approximately 6,000 eligible Quit Line callers. An eligible caller was defined as someone who had contacted the Quit Line between the dates of January 1, 2004 and June 30, 2005, was defined as a tobacco user, and had not refused to be contacted again for follow-up. A sample size of 1,000 was determined by the University of Georgia to be the number of completed surveys needed to yield statistically significant results. Of the 1,320 eligible respondents contacted, 1,001 participated in the survey, for a participation rate of 75.8%.

Characteristics of Georgia Tobacco Quit Line Callers who Completed the Survey

- 65% of respondents were female
- 4% were under the age of 25, 21% were 26-40, 53% were 41-60, and 16% were 60 and older
- 66% were White
- 27% were African American
- 44% had a high school degree or less
- 32% had some college, but no degree
- 51% were currently employed
- 78% of respondents reported having health insurance



Overall Satisfaction

- 85% of respondents reported that they were very or somewhat satisfied with the Quit Line (59% were very satisfied and 26% were somewhat satisfied).
- 87% of respondents would recommend the Quit Line to others.
- 77% of respondents found the Quit Line very or somewhat helpful as they tried to quit using tobacco (48% said the Quitline was very helpful and 29% said it was somewhat helpful).

Quit Attempts and Abstinence Rates

- 27% of respondents were not smoking cigarettes at all at the time of the survey and 11% were only smoking cigarettes on some days.
- 65% of respondents who were current smokers or tobacco users at the time of the survey had made a serious quit attempt.
- Of respondents who had quit using tobacco or made a quit attempt: 35% made 1 attempt; 34% made 2 to 3 attempts; and 16% made more than 4 attempts.

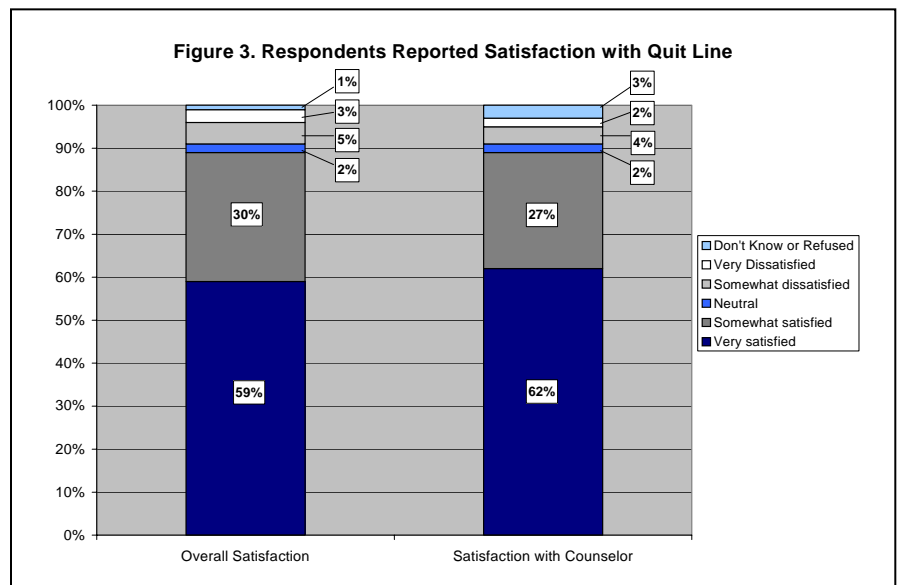
- Respondents were asked about their smoking habits at six months after their initial call to the Quit Line:
 - 15% reported being a non-smoker;
 - 16% reported being an occasional smoker trying to quit;
 - 53% reported making a quit attempt but had relapsed to smoking again;
 - and 14.5% reported not making a quit attempt.
- 25% of all respondents had not used any tobacco in the 30 days prior to the survey.
- 27% of all respondents had not used any tobacco in the 7 days prior to the survey.
- 53% of respondents who were still using tobacco said they intend to quit within the next 30 days.
- 42% of these current tobacco users were confident that they could quit using tobacco if they wanted.

25% of respondents had not used any tobacco in the 30 days prior to the survey.

These quit rates are consistent with or better than national quit rates for similar statewide telephone tobacco counseling services. Other statewide quit lines show quit rates that range from 15% to 28%.^{defg} Research studies show quit rates for individuals who use telephone counseling services are more than double the quit rates of individuals using self-help methods.

Information and Support

- 71% of respondents said the Quit Line was very or somewhat helpful in providing information about medications such as the nicotine patch or Zyban (45% said the Quit Line was very helpful and 26% said it was somewhat helpful).
- 84% of respondents said the Quit Line was very or somewhat helpful in suggesting ways to quit tobacco such as how to deal with urges or getting social support (58% said the Quit Line was very helpful and 26% said it was somewhat helpful).
- 39% of respondents indicated that the Quit Line referred them to additional quit tobacco resources in their communities; however, 29% of respondents indicated the Quit Line said there were no additional resources in caller's area or the Quit Line did not have any information on them for referral.



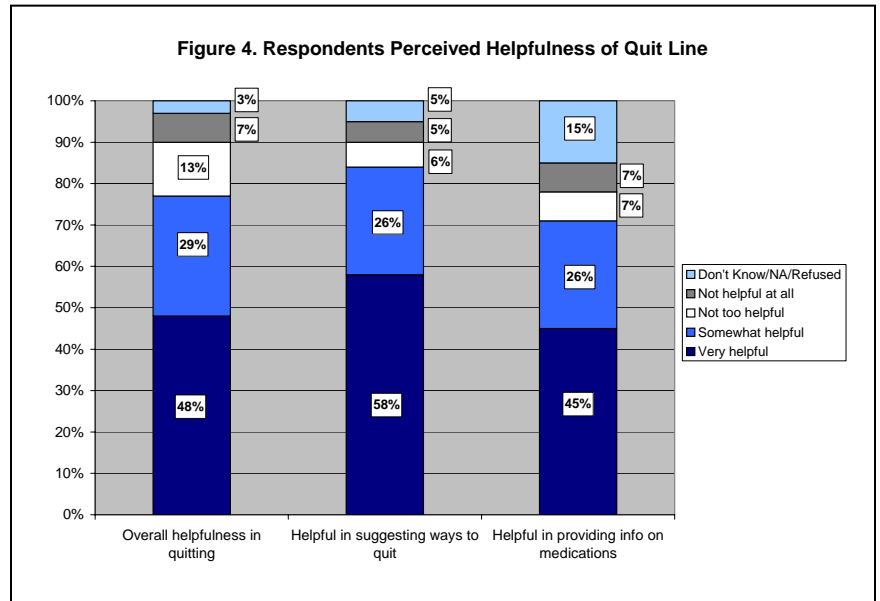
Counseling and Other Services

- 56% of survey respondents reported being immediately transferred to a counselor when they initially called the Quit Line.
- Of the callers who were not transferred directly to a counselor (callers who left a message or were told someone would call them back): 37% reported being called back in less than one day; 39% reported being called back in 1-2 days; 10% reported being called back within 3 or more days; 4% reported never being called back; and 9% didn't know when they were called back or refused to answer.
- 89% of respondents were very satisfied or somewhat satisfied with the process of contacting the Quit Line and getting registered for services (59% were very satisfied and 30% were somewhat satisfied).
- 89% of respondents were very satisfied or somewhat satisfied with their experience with the Quit Line counselor (62% were very satisfied and 27% were somewhat satisfied).
- 83% of respondents felt that the amount of time that they spoke to the Quit Line counselor was just right.

- 87% of respondents who received the Quit Kit materials were very satisfied or somewhat satisfied with them (55% were very satisfied and 32% were somewhat satisfied).

Callers Recommended Improvements

- Only 28% (277) of respondents responded “yes” to the question that there was something that would improve their satisfaction with the Quit Line.
- Of the 277 people who said something would improve their satisfaction:
 - 18% wanted free nicotine patches, gum, or Zyban;
 - 12% wanted more or better community resources available to them to help with the quitting process;
 - 12% wanted the availability of more follow-up calls; and
 - 8% wanted more time to talk with the counselors.



Preliminary Conclusions and Future Reports

Tobacco Cessation Quit Lines are an integral component of a state’s comprehensive tobacco control program. By increasing the success rates of individuals trying to make quit attempts, and by increasing the total number of individuals in the general population making quit attempts, Quit Lines lead to a higher overall cessation rate. In addition, with the recent passage of the Georgia Smokefree Air Act and the smoking surcharge used by the State Health Benefits Plan, the Quit Line is a good way to provide cessation services. One key advantage of a quitline in a state like Georgia is its accessibility to populations that are typically underrepresented in traditional cessation services, such as people with limited mobility or living in rural areas of the state.

Results of this survey suggest that the Georgia Tobacco Quit Line has been a useful a tool to help residents of the State of Georgia quit using tobacco. The majority of individuals surveyed (85%) reported that they were satisfied with the services provided by the Quit Line. The majority of respondents (78%) also felt that the Quit Line was helpful to them as they tried to quit using tobacco, and 87% reported that they would recommend the Quit Line to others. Quit rates reported by survey participants appear to be consistent with other statewide telephone counseling services reported quit rates. The findings suggest a need for enhanced community cessation resources and access to pharmaceutical support for Georgian tobacco users wanting to quit.

This report represents a preliminary overview of initial survey results. The Institute of Public Health is conducting a complete analysis of the Quit Line. A full report will be completed by summer 2006. In addition to performance evaluation, the full report will have information on strategies for program enhancement and improvements.

^a Figueroa A, Kanny D., Chowdhury PP, Powell, KE. 2004 *Georgia Tobacco Surveillance Report*. Georgia Department of Human Resources, Division of Public Health, Chronic Disease, Injury, and Environmental Epidemiology Section, Sept. 2004.
^b Center for Disease Control and Prevention. *State-Specific Prevalence of Cigarette Smoking and Quitting Among Adults – US 2004*. MMWR 2005;54(44): 1124-1127.
^c Center for Disease Control and Prevention. *Telephone Quitlines: A Resource for Development, Implementation and Evaluation*. September 2004.
^d Abdullah ASM, et. al. *Which smokers use the smoking cessation Quitline in Hong Kong, and how effective is the Quitline?* Tobacco Control 2004;13:415-421.
^e Grossnickle D, O'Rourke T. *Illinois Tobacco Quitline Evaluation by Smoking Behavior*. AAHPERD National Convention. 2005.
^f Colorado Quitline and National Jewish Medical and Research Center. *Tobacco Cessation Outcome Results*. March 5, 2004.
^g California Smokers' Helpline. *The California Smokers' Helpline: A Case Study*. California Department of Health Services/Tobacco Control Section. May 2000.