

Abstract

The North American Quitline Consortium (NAQC) is a nonprofit organization that promotes evidence based quitline services across diverse communities in North America. NAQC strives to unite state and provincial quitline administrators, quitline service providers, researchers and national organizations in the United States and Canada. By bringing these quitline partners together, NAQC helps facilitate shared learning and encourages a better understanding of quitline operations, promotions and effectiveness to improve quitline services.

Together with its partners, NAQC has developed a Web repository of case studies on states that implemented new clean indoor air laws in 2006 and 2007. The case studies focus on describing quitlines' experiences providing cessation services during the implementation of new statewide smokefree policies. Each case study highlights the main issues, opportunities, challenges and lessons learned by quitlines and their partners. These case studies can assist other states with plans to promote their quitlines during policy implementation by providing information about implementation strategies and approaches and the potential impact on quitline services. As part of NAQC's efforts to strengthen the linkages of quitlines and other tobacco control policy efforts, the case studies foster networking and idea exchange among the tobacco control and cessation communities.

Information collected from case studies and through additional outreach has been synthesized into a playbook with ideas and strategies to encourage states and municipalities to incorporate quitlines into the implementation activities surrounding smokefree laws and to identify opportunities to promote quitlines during tobacco tax increases. The playbook includes practical tools to assist with the integration of quitline promotion and policy change. Project materials are easily accessible on NAQC's Web site (www.naquitline.org/playbook) and can assist quitlines in states or provinces with future policy changes.

The content of state-specific case studies and the *NAQC Policy Playbook: A Guide to Promoting Quitlines During Policy Changes* include:

- The quitlines' role during policy implementation
- Collaboration and partnership strategies
- Diverse approaches to promoting quitlines
- Suggested action steps and materials
- Issues and challenges
- Lessons learned and key opportunities
- The impact on quitline calls



Introduction: Project Background and Funding

As summarized in the National Cancer Institute (NCI) Monograph: *Population Based Smoking Cessation*, more tobacco users attempt to quit following the passage of smoke-free policies.¹ An increase in smoke-free laws is driving a growing need for easy access to effective cessation treatments for tobacco users who want to quit. With more states poised to pass tobacco-control legislation, telephone-based cessation counseling (quitlines) offers a unique and cost-effective opportunity to provide cessation support to a broad

and diverse population of tobacco users who may be motivated by these policy changes to quit.

Committed to strengthening the linkages of quitlines and other tobacco control policy efforts and recognizing the impact of smoke-free policies on quitline usage, NAQC launched the project, *Maximizing the Cessation Benefit from Policy Changes*. The project focuses on how to increase quit attempts through the use of quitlines following the passage of smoke-free policies. ♦

Background

Eliminating exposure to secondhand smoke and promoting cessation are two evidence-based strategies cited by the Centers for Disease Control and Prevention (CDC) that can contribute to a reduction in the disease, disability and deaths related to tobacco use and second hand smoke exposure.² Combining these strategies presents an opportunity to maximize the use of evidence-based cessation interventions, including quitlines. When smokefree laws are passed, easy access to cessation services is essential to connect tobacco users who are ready to quit with evidence-based treatments and services.³ These programs can increase tobacco users' chances of successfully quitting tobacco in conjunction with their workplaces and communities going smokefree. Furthermore, to capture the increased demand for services resulting from these policy changes, both the National Tobacco Cessation Collaborative (NTCC), which focuses on collaboration among national organizations to improve cessation among tobacco users in the U.S. and Canada, and the Tobacco Cessation Leadership Network (TCLN), which helps increase the capacity in every state to establish effective, sustainable and affordable cessation services, have stressed the importance of integrating tobacco cessation and tobacco control policy initiatives.^{4,5}

The Campaign for Tobacco Free Kids (CTFK) documented the positive impact smokefree laws have on increasing quit attempts and successful quits in a 2007 fact sheet.⁶ As described in this fact sheet, key reports and studies have consistently documented reductions in tobacco use, prevalence and consumption following the implementation



of smokefree policies and restrictions. Experience demonstrates that many smokers begin looking for help once they know that a new policy is coming, especially as the policy's implementation date draws near. In New Zealand, an increase in registrations in the national Quitline Service resulted from its smokefree law, suggesting a promising opportunity to promote quitlines.⁷ In Canada, researchers have found that both smokefree home rules and smokefree workplace policies are associated with quitting.⁸ ♦

About Quitlines

Quitlines are telephone-based tobacco cessation services that help tobacco users quit through a variety of services including counseling, information and self-help materials.⁹ Quitlines are “well-suited to lead the cessation component of a comprehensive tobacco control program because they provide cessation assistance in an easily accessible, cost-effective manner with the ability to serve large numbers of tobacco users.”³ Counseling services can be tailored to fit individual tobacco users’ motivations, needs and unique experiences. Quitlines offer both reactive counseling, requiring tobacco users to call the quitline when needed and proactive counseling, where quitline counselors or coaches place a series of calls to participants at agreed upon dates and times. In addition, counselors can offer callers advice on how to prepare for smokefree workplaces, bars, restaurants and public spaces impacted by smokefree laws. Some quitlines offer additional services such as medications, online cessation information and programs and referral to community-based cessation programs.

Research has shown that quitlines are an effective way to deliver tobacco cessation services. The *Treating Tobacco Use and Dependence: 2008 Update (Guideline)* confirmed that quitline counseling is an effective treatment for helping tobacco users quit and has the ability to reach a broad and diverse group of people, including youth. Telephone counseling through quitlines can provide multiple contacts with a specialist, which, according to the *Guideline*, contributes to effective treatment. Clinicians and health care systems are encouraged to ensure access to quitlines and promote quitline use through patient referrals.¹⁰

Quitlines and quitline promotion can play an important role in realizing the national tobacco control goals and objectives set forth in the following four key documents.

- *Healthy People 2010*¹¹

Quitline-related Goal or Recommendation

12% smoking prevalence and increase to 75% the percent of adult smokers who stopped smoking for one day or longer because they were trying to quit by the year 2010.

- *Preventing 3 Million Premature Deaths and Helping 5 Million Quit: A National Action Plan for Tobacco Cessation from the Interagency Committee on Smoking and Health*¹²

Quitline-related Goal or Recommendation

16% quitline reach to smokers each year.

- *Best Practices for Comprehensive Tobacco Control Programs*²

Quitline-related Goal or Recommendation

Provide counseling to 6% of tobacco users age 18 years and older and offer a minimum of two weeks of NRT to all callers receiving counseling and at least four weeks for the uninsured or those who receive publicly financed insurance.

- The Institute of Medicine report, *Ending the Tobacco Problem A Blueprint for the Nation*¹³

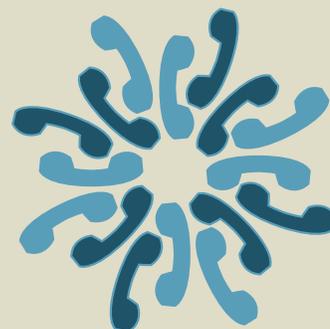
Quitline-related Goal or Recommendation

Stable funding for the national network of quitlines and state tobacco control agencies working with partners to increase demand for cessation services.

The number of states and provinces in North America offering quitline services for smokers and other tobacco-users has increased exponentially in the last decade. Today, 67 quitlines provide service to residents in all ten provinces in Canada; the 50 U.S. states, the District of Columbia, Puerto Rico, Guam, American Samoa, the Federated States of Micronesia, the Northern Mariana Islands and Mexico. The dramatic growth in the number of these services has led to an increased awareness of the important role quitlines can play in helping tobacco users quit and how they contribute to comprehensive tobacco control programs. For more information about quitlines, view the NAQC Fact Sheet *Quitline Basics: Telephone-Based Cessation Services that Help Tobacco Users Quit* (www.naquitline.org). ♦

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