Results from the 2011 NAQC Annual Survey of Quitlines

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July 2012
2011 Annual Survey Methods

Budget Survey fielded from August 15 to October 30, 2011

- Web-based survey with email and telephone follow-up:
  1) Quitline budgets
  2) Funding sources

Additional Survey Sections fielded from January 25 to March 31, 2012

- Web-based survey with email and telephone follow-up:
  1) General Information, hours, services offered
  2) Utilization
  3) Evaluation

Additional Information from CDC’s Quarterly Services Survey and NAQC quitline profiles also included in analysis
2011 Annual Survey Response Rates

Budget Survey:

- 65 quitline funders were asked to respond; 50 of 53 US quitlines responded (94%); 12 of 12 Canadian quitlines responded (100%)

Additional Survey Sections:

- 65 quitline funders and their service providers were asked to respond; 53 of 53 US quitlines responded (100%); 10 of 12 Canadian quitlines responded (83%)
BUDGET
Median and total (sum) quitline budgets have increased slightly in the U.S. from FY2010 to FY2011.
Median quitline budgets in Canada have decreased by over 50% from FY09 – FY11

<table>
<thead>
<tr>
<th>Year</th>
<th>Median Quitline Budget</th>
<th>Total Quitline Budget (sum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY05</td>
<td>$100,000</td>
<td>$50,000,000</td>
</tr>
<tr>
<td>FY06</td>
<td>$150,000</td>
<td>$60,000,000</td>
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<tr>
<td>FY08</td>
<td>$100,000</td>
<td>$70,000,000</td>
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<tr>
<td>FY09</td>
<td>$150,000</td>
<td>$80,000,000</td>
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<tr>
<td>FY10</td>
<td>$100,000</td>
<td>$50,000,000</td>
</tr>
<tr>
<td>FY11</td>
<td>$150,000</td>
<td>$60,000,000</td>
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</tbody>
</table>
US Spending per Smoker (services and medications), FY2008-FY2011 (goal $10.53)

- FY08: $1.71, N=45
- FY09: $1.78, N=50
- FY10: $1.93, N=49
- FY11: $2.03, N=50
Canada Spending per Smoker (services), FY2008-FY2011 (goal $10.53)

- FY08: $0.65, N=8
- FY09: $0.77, N=9
- FY10: $0.67, N=9
- FY11: $0.67, N=9
More US quitlines report receiving funds from CDC or MSA funds than any other source.
For US quitlines, the highest proportion of funds come from MSA, general funds, state tobacco taxes, and non-MSA tobacco settlement funds.
The majority of Canadian quitlines report receiving funds from provincial general funds and Health Canada.

- **State/provincial general funds**: 100% (Canada FY10), 82% (Canada FY11), 73% (Canada FY12)
- **Health Canada**: 60% (Canada FY10), 64% (Canada FY11), 55% (Canada FY12)
- **Non-governmental organization**: 20% (Canada FY10), 0% (Canada FY11), 0% (Canada FY12)
- **Charitable foundation**: 10% (Canada FY10), 27% (Canada FY11), 27% (Canada FY12)
- **Local government funds**: 0% (Canada FY10), 18% (Canada FY11), 9% (Canada FY12)
- **For-profit company**: 0% (Canada FY10), 0% (Canada FY11), 9% (Canada FY12)
For Canadian quitlines, the highest proportion of funds come from provincial general funds and Health Canada.

- FY 09 average proportion of funds among quitlines reporting each funding source:
  - Health Canada: 70%
  - Provincial general funds: 58%
  - Local government funds: 56%
  - NGO: 14%
  - 3rd party reimbursement: 5%
  - Charity: 0%
  - Other: 0%

- FY 10 average proportion of funds among quitlines reporting each funding source:
  - Health Canada: 69%
  - Provincial general funds: 56%
  - Local government funds: 56%
  - NGO: 17%
  - 3rd party reimbursement: 8%
  - Charity: 0%
  - Other: 0%

- FY 11 average proportion of funds among quitlines reporting each funding source:
  - Health Canada: 75%
  - Provincial general funds: 73%
  - Local government funds: 0%
  - NGO: 8%
  - 3rd party reimbursement: 0%
  - Charity: 0%
  - Other: 0%

- FY 12 average proportion of funds among quitlines reporting each funding source:
  - Health Canada: 75%
  - Provincial general funds: 73%
  - Local government funds: 9%
  - NGO: 8%
  - 3rd party reimbursement: 0%
  - Charity: 25%
  - Other: 9%
DESCRIPTION OF SERVICES
Most US and Canadian quitlines provide multiple proactive counseling sessions FY11

<table>
<thead>
<tr>
<th>Phone counseling services</th>
<th>US N = 53</th>
<th>CAN N = 10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% (n)</td>
<td>% (n)</td>
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<tr>
<td>Minimal/brief intervention—client-initiated —1-10 minutes</td>
<td>26% (14)</td>
<td>100% (10)</td>
</tr>
<tr>
<td>Single session counseling more than 10 minutes—client-initiated</td>
<td>64% (34)</td>
<td>100% (10)</td>
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<tr>
<td>Multiple sessions—client-initiated (i.e., reactive, client calls in for each follow up)</td>
<td>76% (40)</td>
<td>100% (10)</td>
</tr>
<tr>
<td>Multiple sessions—counselor-initiated (i.e., proactive, cessation specialist / counselor / coach calls client for follow up)</td>
<td>96% (51)</td>
<td>100% (10)</td>
</tr>
</tbody>
</table>
The number of US quitlines providing free medications has increased over time.

- FY 2006: 46%
- FY 2008: 70%
- FY 2009: 70%
- FY 2010: 75%
- FY 2011: 83%
UTILIZATION
Demand for Quitline Services is Rising

Total and median calls received by US Quitlines

- Total calls received
- Median number of calls received

--- | --- | --- | --- | --- | ---
340,000 | 600,000 | 800,000 | 1,000,000 | 900,000 | 1,400,000

Moving quitlines forward.
Demand for Quitline Services is Rising

1-800-QUIT-NOW Annual Call Attempt Totals

1-800-QUIT-NOW Annual call attempt totals  projected additional call volume for 2012
April 1, 2009: Federal tobacco tax increase

March – May 2012: CDC’s National Tobacco Education Campaign

1-800-QUIT-NOW call attempts

NORTH AMERICAN QUITLINE CONSORTIUM

Moving quitlines forward.
Total and median calls received by Canadian quitlines

- **Total calls (sum)**
  - FY2006: N=6
  - FY2008: N=10
  - FY2009: N=10
  - FY2010: N=9
  - FY2011: N=9

- **Median calls**

Graph showing the trend of total calls and median calls from FY2006 to FY2011.
Ontario Collaborative

Outcomes: Reactive Volume Nov – July: Baseline vs. Year 1
British Columbia

Outcomes:

– During NRT introduction received 100-200% increase in calls and a 200% increase in web registrations

– This volume has been steady through the introduction graphic health warnings
US Promotional Reach
FY 2005-2010

Reach (unique tobacco users calling divided by estimated number of smokers in the state or territory using 2005-2010 BRFSS)
Canada Promotional Reach
FY 2005-2010

[Bar chart showing Reach (unique tobacco users calling divided by estimated number of smokers in the state) for FY 2005-2010]

Number of tobacco users calling:
- FY05: N=3
- FY06: N=8
- FY08: N=9
- FY09: N=10
- FY10: N=8
- FY11: N=9

Reach:
- FY05: 0.00%
- FY06: 0.20%
- FY08: 0.40%
- FY09: 0.60%
- FY10: 0.80%
- FY11: 1.00%
U.S. Treatment Reach FY2009-11

Number served (sum)  Treatment reach

FY2009: N=46
FY2010: N=50
FY2011: N=51
Canada Treatment Reach FY2009-11

Number served (sum)  Treatment reach

N=3  N=9  N=11

FY2009  FY2010  FY2011
Spending on Services is Linked to Quitline Reach (U.S.) FY2011

The Relationship Between Spending per Smoker and Treatment Reach*

*Treatment reach = number of tobacco users receiving counseling or medications divided by number of tobacco users in the state or territory (2010 BRFSS)

R = +0.84
The Relationship Between Spending per Smoker and Treatment Reach*

- Treatment Reach* = number of tobacco users receiving counseling or medications divided by number of tobacco users in the province or territory (2010 CTUMS)

R = +0.89
### Number of U.S. Quitlines Reaching NAQC Strategic Goals FY2009-11

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<thead>
<tr>
<th></th>
<th>FY 2009</th>
<th>FY 2010</th>
<th>FY 2011</th>
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<td># quitlines &gt;= $10.53 per smoker</td>
<td>3</td>
<td>5</td>
<td>5</td>
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<tr>
<td># quitlines &gt; $5 per smoker investment</td>
<td>12</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td># quitlines &gt;= 6% treatment reach</td>
<td>3</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td># quitlines &gt; 3% treatment reach</td>
<td>9</td>
<td>10</td>
<td>7</td>
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## Number of Canadian Quitlines Reaching NAQC Strategic Goals FY2009-11

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<th># quitlines &gt; 3% treatment reach</th>
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<th>FY 2011</th>
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NAQC Standard Quit Rates Remain Steady FY2010-FY2011

- All U.S. Quitlines: N=30, FY2010 = 29.6%, FY2011 = 28.9%
- U.S. Quitlines reporting quit rates in both years (n=28): N=43, FY2010 = 29.4%, FY2011 = 29.5%
Questions For You

• What has NAQC done well, and how could we improve:
  • Reporting survey results back to members
  • Making survey results available publicly (profiles and other reporting mechanisms)
  • Responding to requests for data from researchers and others
  • Collecting data from quitlines (time, clarity, data interface, frequency)
For more information on the survey or on NAQC’s data request and review process, please contact:

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