Generating Quitline Calls During Kentucky’s Media Campaign: Effects of Television Advertisement on Call Volumes

Dennis Peyton, MPH, CCRP, Kentucky Department for Public Health

Abstract

Previous studies have shown that quitlines are an effective method to deliver behavioral support for tobacco cessation, and can potentially increase access to cessation services (Fiore et al., 2008). Despite support from the current evidence base, the population reach of quitlines has been very low. A further review of the literature suggests that, in general, television advertising is the most cost-effective means of generating calls to quitlines (Erbas et al., 2006; Wilson et al., 2005). Evidence of a relationship between television advertising and call volume has been reported by many research studies. Findings also suggest that television advertising increases calls to quitlines for both smokers as well as smokeless tobacco users.

The U.S. Centers for Disease Control and Prevention (CDC) recently launched a national tobacco education campaign, titled Tips From Former Smokers (CDC, 2012). This campaign features a variety of individuals, many of whom started smoking in their early teens, who are suffering from tobacco-related illnesses. The educational campaign hoped to prevent youth initiation and to encourage current smokers to quit through promotion of the national quitline number 1-800-QUIT-NOW. The Tips advertisement campaign began running nationally, for 12 weeks, on March 19th 2012, and included television, radio, billboard, magazine, newspaper, theater, and online placements.

According to results from the 2010 Behavioral Risk Factor Surveillance System (BRFSS), a population based survey instrument used to track health conditions and risk behaviors in the United States since 1994, respondents from Kentucky showed the second highest smoking prevalence in the U.S. at 24.8 percent. Given previous research, tobacco quitlines, when supported by sustained media campaigns, could potentially provide Kentucky with a cost-effective cessation method for current tobacco users.

Objectives

To determine the effects of the CDC Tips from Former Smokers education media campaign on call volume to Kentucky’s tobacco quitline. This study will provide an evaluation of secondary quitline surveillance data.

Methods

Secondary analysis was performed using de-identified data from the 2011-2012 Kentucky Quitline callers database. Call volume from 2011 was compared to 2012, with particular scrutiny dedicated to the Tips From Former Smokers campaign period of March 19th – June 4th. At the time of this study, quitline reporting was available through the month of June 2012. As a result, this study was unable to assess call volume post media campaign at this time.

In addition to comparing call volumes by weekly, monthly, and yearly rates, this study also stratified callers by demographics: including race, gender, educational attainment, veteran status, marital status, and insurance coverage.

Quitline callers eligible for this study met the following inclusion criteria: (1) unique caller to Kentucky’s Quitline from January 1, 2011 – June 30, 2012, (2) a Kentucky resident at the time of their call, and (3) reported as a current tobacco user. Calls were excluded under the following circumstances: (1) individuals who were under the age of 18, (2) reported calling the quitline for a friend or relative, and (3) callers that were not unique, or had previously called the quitline within the study period.

Calls directed to the quitline through the Tips From Former Smokers media campaign were identified through an intake question compliant with the Minimal Data Set as approved by the CDC and the North American Quitline Consortium (NAQC).

—In the past three months, did you hear about 1-800-QUIT-NOW from any advertisements with smokers telling personal stories and tips about living with health problems?

Results

From March 2012 to June 2012, amidst the Tips From Former Smokers Campaign, Kentucky’s tobacco quitline experienced significant increases in call volume. In March alone, Kentucky’s quitline experienced a nearly threefold increase in inbound calls at 982, up from 359 in March of 2011. In April, the first full month of the Tips campaign, calls to the quitline reached a historic high at 1257 inquiries.

Every demographic category experienced an increase in terms of call volume during the Tips From Former Smokers media campaign. Both male and female callers increased significantly, with males rising from 232 in 2011, to 556 in 2012. Female callers to the quitline doubled, jumping from 419 in 2011, to 943 in 2012. African American smokers increased from 60 in 2011, to 242 in 2012. Although data from 2011 is unavailable, statistics on the large number of interested callers during the media campaign are encouraging.

Methods

Secondary analysis was performed using de-identified data from the 2011-2012 Kentucky Quitline callers database. Call volume from 2011 was compared to 2012, with particular scrutiny dedicated to the Tips From Former Smokers campaign period of March 19th – June 4th. At the time of this study, quitline reporting was available through the month of June 2012. As a result, this study was unable to assess call volume post media campaign at this time.

In addition to comparing call volumes by weekly, monthly, and yearly rates, this study also stratified callers by demographics: including race, gender, educational attainment, veteran status, marital status, and insurance coverage.

Quitline callers eligible for this study met the following inclusion criteria: (1) unique caller to Kentucky’s Quitline from January 1, 2011 – June 30, 2012, (2) a Kentucky resident at the time of their call, and (3) reported as a current tobacco user. Calls were excluded under the following circumstances: (1) individuals who were under the age of 18, (2) reported calling the quitline for a friend or relative, and (3) callers that were not unique, or had previously called the quitline within the study period.

Calls directed to the quitline through the Tips From Former Smokers media campaign were identified through an intake question compliant with the Minimal Data Set as approved by the CDC and the North American Quitline Consortium (NAQC).

—In the past three months, did you hear about 1-800-QUIT-NOW from any advertisements with smokers telling personal stories and tips about living with health problems?

A snapshot of the first three weeks of the Tips From Former Smokers media campaign clearly demonstrates the effect of media on Kentucky’s Quitline call volume. In comparison to 2011, call volume from 3/19/12-4/8/12 increased by a daily average of 438%. At the height of call volume in April of 2012, daily variations in call volume are higher than those shown above. In June of 2012, upon conclusion of the Tips campaign, call volumes remained higher than those found in 2011, as June is historically a low volume month.

Figure 1. Kentucky Quitline Call Volume by Total Inbound Calls and Intakes Only (January 2011 – June 2012)

Figure 2. Kentucky’s Quitline Caller Demographics (March-June 2011 & 2012)

Figure 3. Kentucky’s Quitline Daily Call Volumes (3/19/12 – 4/8/12 versus 3/19/11 – 4/8/11)

Figure 4. Percent of Kentucky’s Quitline Calls that reported hearing about the quitline through the Tips campaign (March 2012 - June 2012)

Limitations

• Long-term follow-up data post media campaign is currently unavailable.
• While many callers responded to intake questions about how they were referred to the quitline, respondents could be subject to recall bias.
• Quitline data could be subject to non-response bias and self-report bias.

Conclusion

• Early statistics from Kentucky’s Quitline show significant increases in call volume during the Tips media campaign. Furthermore, when solicited during intake, many callers cited the campaign as their referral source.
• While more research is needed to better understand the relationship between media placements and call volume, Kentucky’s success with call volume during the Tips campaign can provide a model to build upon.
• Further research is necessary to determine the impact of short-term media campaigns.
• The next decade will be measured a success if tobacco use continues to decrease, exposure to secondhand smoke is a rare event, and all continuing tobacco users have access to the assistance they need to quit.

References