



North Carolina Health and Wellness Trust Fund



Quitline NC

Quitline NC Evaluation July 2007 — June 2008

Prepared for:
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A. EXECUTIVE SUMMARY

A.1. Overview

The North Carolina Tobacco Quitline (Quitline NC) is a telephone-based, tobacco cessation service that provides free support to all NC residents who want to quit their tobacco use. Research shows that quitlines are an effective and evidence-based approach to tobacco cessation. Proactive quitlines, like Quitline NC, have been shown to significantly increase quit rates compared to quitting without support.¹

Quitline NC started operations in North Carolina in 2005 and is jointly funded by the NC Health and Wellness Trust Fund (HWTF) and the NC Department of Health and Human Services (DHHS). The HWTF funds services for callers ages 24 years and younger, callers who are school or childcare employees, and callers who live with and/or are the primary caregiver of a child under 18 years old. DHHS funds all other callers. Based on Centers for Disease Control and Prevention (CDC) guidelines for state quitlines, Quitline NC aims to provide services for up to 2.0% of North Carolina's adult smoking population each year.²

The University of North Carolina School of Medicine Tobacco Prevention and Evaluation Program (UNC TPEP) evaluates the outcomes of the HWTF-funded portion of Quitline NC. A framework for this evaluation is outlined in the HWTF Quitline logic model developed by UNC TPEP in collaboration with the HWTF and DHHS and updated yearly as appropriate (Appendix A).

Quitline NC completed its first year of operation between November 2005 and October 2006 (Year 1). Due to changes in the HWTF's fiscal year for Quitline NC, the eight month period between November 2006 and June 2007 constituted Year 2. Year 3 of Quitline NC encompassed July 2007 through June 2008. This report summarizes findings from UNC TPEP's analysis of HWTF-funded caller data for Quitline NC Year 3.

The HWTF funded Quitline NC at \$3.02 million in Year 3 (approximately \$2.2 million was directed towards promotion, and approximately \$829,000 towards direct program services). Overall HWTF funding for Quitline NC increased 100% in Year 3 (compared to the first 20 months of operation in which \$2.03 million was allocated to the Quitline, and only \$430,000 on promotion).

In September 2007, the HWTF launched "Call it Quits," a multimedia, statewide Quitline NC promotional campaign targeted to young adults. The campaign combined TV, radio, print, and online Quitline NC promotions that featured simulated calls between a young adult smoker and a quitline coach. The "Call it Quits" campaign and a fax referral promotion were the only Quitline NC promotions run by the HWTF and other state agencies during Year 3.

The following section highlights key outcomes of the HWTF-funded portion of Quitline NC in Year 3 and makes recommendations for Year 4.

A.2. Summary of Key Findings and Outcomes

Quitline Operation and Call Volume

- In total, Quitline NC received 7,332 calls during Year 3, an average of 611 calls per month. Average monthly call volume in Year 3 increased by 56% compared to the first 20 months of operation (392 calls/month).
- The majority of calls (87%) to Quitline NC in Year 3 were from tobacco users (average 530 calls/month); other calls were from providers, family members, etc. Fifty-four percent (3,448) of callers who used tobacco were youth, young adults, or primary caregivers/school employees funded by the HWTF (average 287 calls/month). In Year 3, all HWTF funded callers were tobacco users.
- In Year 3, Quitline NC provided services to approximately 0.36% of North Carolina's adult smoking population. Quitline NC was successful in reaching a greater percentage of youth and young adult smokers in Year 3 compared with the first 20 months of operation.
- At least one HWTF-funded caller from every county in North Carolina called Quitline NC during Year 3.
- Quitline NC call volumes peaked and remained higher during the five months in which television and radio ads from the HWTF-funded "Call it Quits" promotional campaign were aired. Sixty-six percent of all HWTF calls were received during these months.

HWTF Target Populations

- Three percent (217) of all callers who use tobacco were youth (ages 12-17) and 22% (1,414) were young adults (ages 18-24). In Year 3, Quitline NC reached 0.22% of North Carolina high school aged smokers and 0.45% of North Carolina young adult smokers. Quitline NC's reach is calculated based on the number of unique high school and young adult callers to Quitline NC as a percentage of the total high school and young adult smoking populations of North Carolina.
- The total number of callers from HWTF target populations increased by 15% in Year 3. Youth calls increased by 31.5% and young adult calls increased by 63%.
- Young adult callers to Quitline NC came predominately from targeted, at risk populations. Most (63%) young adult callers did not attend school. Young adult callers who were not currently in college were more likely to report Hispanic ethnicity, have no health insurance, have Medicaid coverage, and use multiple forms of tobacco compared to young adult callers in college.
- Quitline NC also reached a substantial number of youth, young adults, and primary caregivers/school employees from populations that experience disparities in tobacco use, effects of tobacco-related diseases, and access to healthcare or other cessation resources.

- In Year 3, Quitline NC reached many adults who are caretakers and role models for children and youth in their home and school environments. Twenty-nine percent (1,817) of all callers who used tobacco were primary caregivers and/or childcare/school employees supported by HWTF funds.
- Six percent (218) of all female, HWTF-funded callers were either planning a pregnancy, pregnant, or breastfeeding (58% of these callers were young adults and 4% were youth).
- At registration, 64% of HWTF-funded callers enrolled in the Multi-Call Program and 33% enrolled in the One-Call Program.
- The majority of HWTF-funded callers (89%) were in the preparation stage of quitting, indicating they were ready to quit, and most (87%) smoked cigarettes each day, suggesting that Quitline NC successfully reached everyday smokers who are ready to quit in the next 30 days.

Promotion

- Call volumes for all HWTF-funded target populations increased during months in which “Call it Quits” ads aired, suggesting that the campaign reached its young adult target audience and also had spillover influence on youth and adult callers.
- HWTF-funded callers reported that they most frequently heard about Quitline NC via TV, radio, health professionals, and a family member or friend. Youth and young adults were more likely to hear about the quitline from a family member or friend than from a health professional. In the absence of TV and/or radio ads, youth call volume was low (fewer than 10 calls per month).

Fax Referral Service

- The HWTF promoted the fax referral service to physicians statewide that began sending mailed promotional items in March 2008 and continued mailing through the end of Year 3. The number of Quitline callers (both HWTF and DHHS-funded callers) who were referred by fax increased from 27 in March to 42 in April and remained at higher levels through the end of Year 3.
- Utilization of the fax referral service was relatively low, with a total of 265 (4%) of all tobacco-using callers referred by fax during Year 3. Among HWTF-funded callers, 122 (3.5%) were referred by fax, of whom 86% were primary caregivers or school employees.

Satisfaction and Quit Rates

- Analysis by Quitline NC vendor, Free & Clear, Inc., provides estimates of intent-to-treat 30-day quit rates, based on the number of callers who responded to a follow up survey and reported being tobacco free for 30 days. Among all HWTF-funded callers who responded to the survey (n=155), there was an estimated 10.8% intent-to-treat 30-day quit rate, comparable to the 11.1% quit rate reported for the first 20 months of operation.³ (Intent-to-treat quit rates assume that all survey non-respondents are continued smokers, and thus may underestimate the number of Quitline NC callers who quit tobacco).
- Estimated intent-to-treat 30-day quit rates were 7.5% for young adults (n=58) and 14.5% for youth (n=19) who responded to the follow up survey,³ compared to 13.2% and 10.3%, respectively, for the first 20 months of operation.
- Ninety percent of HWTF survey respondents reported satisfaction with Quitline NC services. Overall, 92% of young adults and 100% of youth reported satisfaction with Quitline NC services. Few youth callers completed the survey.³

A.3. Recommendations

With continued quitline promotion, increases in secondhand smoke policy adoption and legislation, new research in cessation agents, and hospital efforts to promote cessation, the demand for Quitline NC services will likely increase over the next few years. The following recommendations are offered to guide future planning and provision of Quitline NC services to HWTF target populations:

- Establish annual objectives for the target number of HWTF-funded callers and fax referrals to better link call volumes and program budgets.
- Build on the success of the “Call it Quits” campaign with ongoing promotional campaigns targeted to HWTF target populations to maintain steady call volumes from month to month.
- Continue targeted promotion to young adults who use tobacco through a variety of outlets to capture the large proportion of this population who are not enrolled in college.
- Continue to seek innovative ways to promote the quitline and its fax referral service to health professionals, who remain a top source of information about Quitline NC.
- Consider a more detailed evaluation of media and fax referral promotions to pinpoint campaign successes and identify ways to improve campaign effectiveness.
- Emphasize Quitline NC promotion as a part of the Teen Tobacco Use Prevention and Cessation and the Tobacco Free College Initiatives to build on the influence of family and friends as a top source of Quitline NC information for youth and young adults.
- Examine the cost-effectiveness of Quitline NC in terms of reach and success of its outcomes compared to other state quitlines.
- Examine reported 30-day quit rate data in more detail and work with Free & Clear to achieve survey response rates above 50% to more accurately measure the impact of Quitline NC services on smoking cessation.
- Explore possibilities for providing nicotine replacement therapies (e.g. gum or patch) as part of Quitline NC services to increase call volumes and improve caller quit rates.

B. BACKGROUND

Tobacco use continues to be the leading cause of preventable death and disability in North Carolina. Approximately 12,000 North Carolina adults die from smoking each year, and an estimated 193,000 youth currently under age 18 will die prematurely from smoking. Thousands more survive with chronic, tobacco-related illnesses. Each year, North Carolina spends \$2.5 billion in health care costs directly related to smoking and loses an estimated \$3.3 billion in smoking-caused productivity losses.⁴

In North Carolina, approximately 1.5 million (22.9%) adults over age 18 smoke;⁵ 19% of NC high school students smoke, and 4.5% of NC middle school students smoke.⁶ About 40% of youth live in homes where others smoke.⁶ Smoking rates are highest among young adults, ages 18-24 years old, at 27.8%.⁵ The need for policies and programs that encourage quitting and improve access to proven cessation resources has increased as declines in smoking rates have slowed in the past decade.

Helping tobacco users quit is a critical step to improving public health and reducing tobacco-related morbidity and mortality in North Carolina. More than half of all North Carolina youth, young adult, and adult smokers have attempted to quit in the past year.^{5,6} While many studies show that most tobacco users want to quit, many are unable to successfully quit without support.

B.1. The North Carolina Tobacco Quitline (Quitline NC)

In October 2005, the NC Health and Wellness Trust Fund and the NC Department of Health and Human Services jointly funded the NC Tobacco Quitline, or Quitline NC (1-800-QUIT-NOW). Quitline NC is a proactive telephone service that helps tobacco users quit their tobacco use by offering callers advice, support, and referrals to local cessation resources.

Research has shown that quitlines are an effective and evidence-based approach to tobacco cessation. A recent meta-analysis of 13 studies reported that proactive quitlines increase quit rates by 56% compared to quitting with no support.¹ Studies show higher quit rates for quitlines that offer pharmacotherapy in conjunction with telephone support services.^{2,7} Quitline NC does not provide pharmacotherapy as part of its cessation support services. Research has also shown that marketing campaigns promoting quitlines effectively increase utilization.^{2,8,9} One study reported that young adults respond to mass media quitline promotion, even when it does not target them.¹⁰ Recently updated clinical guidelines from the US Department of Health and Human Services highlight quitlines as an effective support in quitting.¹¹

Call volume varies widely among state quitlines. The expected number of calls, often referred to as the reach of a quitline, is associated with several factors including state population, tobacco prevalence rates, quitline resources, years in operation, and level of promotion. Recent data collected by researchers at the North American Quitline Consortium (NAQC) showed that the reach of quitlines to adult smokers averaged around 1% in the United States in 2005, with a range among quitlines from 0.01% to 4.28%.¹² This study included new state quitlines as well as quitlines that had been in operation for several years.

According to a 2007 study published in the *American Journal of Public Health*, quitlines are a viable means of reaching young adult smokers.¹⁰ The study showed that young adult smokers used the California Smoker's Helpline (one of the most established quitlines in the U.S.) in proportion to their numbers in the state. Young adults from populations that experience disparities in tobacco use, the effects of tobacco-related disease, and access to healthcare resources (e.g. racial and ethnic minorities, low income groups) were also well represented among young adult callers.

The effectiveness of quitlines for youth populations has not been established in the literature. However, empirical studies on youth-focused quitlines in Utah and California have shown promising results. An evaluation of the Utah Youth Tobacco Quitline demonstrated an overall 43%, 30-day smoking abstinence rate among youth callers who responded to a follow up survey.¹³ The 2008 Clinical Practice Guidelines identify the kind of support provided through quitlines as an appropriate resource for assisting youth smokers in quitting.¹¹

Quitline NC is the first state-funded quitline in North Carolina. Prior to the launch of Quitline NC in November 2005, North Carolina residents could access a national tobacco cessation quitline provided through the National Cancer Institute (NCI) at 1-800-44U-QUIT. Callers to Quitline NC are routed to Seattle-based quitline vendor, Free & Clear, Inc. for services. Free & Clear was selected through a national Request for Applications (RFA) process in the spring of 2005 to provide services for Quitline NC. The contract was officially awarded in July 2005.

Free & Clear is a national leader in phone-based tobacco dependence treatment. The company currently operates several state quitlines in the U.S. including Utah, Oregon, and South Carolina. Free & Clear has experience providing quitline services to youth and helping states build public-private partnerships. In 2005, Free & Clear analyzed over 95,000 tobacco users who were enrolled in their Multi-Call Program between 1993-2004. Among callers who responded to a follow-up survey, 34% reported being quit for more than 30 days.¹⁴ All quitlines included in this study offered only the Multi-Call Program; Quitline NC offers both a single and multi-call program. Quit rates for commercial quitlines (i.e. those sponsored by an employer) are typically higher than state quitlines due to differences in the types of callers and available services (i.e. pharmacotherapy).

The HWTF funds two statewide prevention and cessation initiatives targeting teens and college students in North Carolina: the Teen Tobacco Use Prevention and Cessation Initiative (begun in 2003) and the Tobacco-Free Colleges Initiative (begun in 2006). In an effort to supplement these initiatives, the HWTF funds Quitline NC research and provision of services to the following three populations:

- 1) All callers ages 24 years and younger
- 2) All callers who are identified as school or childcare employees
- 3) All callers who live with and/or are the primary caregiver of a child under the age of 18, and thus are a role model for children/youth

Services for all other Quitline NC callers are paid for through Centers for Disease Control and Prevention (CDC) and Blue Cross Blue Shield of NC (BCBS) funding received and administered through the NC DHHS, Division of Public Health, Tobacco Prevention and Control Branch. A DHHS priority is marketing Quitline NC services to at-risk populations and those who are least likely to have coverage for services (e.g. low

income populations). In fiscal year 2007-2008, HWTF provided one time funding for adult callers to match the BCBS contribution.

B.2. Quitline NC Services

Quitline NC was officially launched on November 1, 2005. All interested tobacco users, providers, and proxies (e.g. family members) are eligible for free telephone assistance from one of Free & Clear's expert tobacco treatment specialists, or quit coaches. Services are provided in English and Spanish (as well as many other languages), seven days a week between 8:00 am and midnight.

Callers may request information about quitting for themselves, a friend, or a family member. Tobacco users may choose to participate in One-Call or Multi-Call Programs, ask general questions, and/or receive self help materials. All interested callers receive printed cessation support materials and a referral to local programs.

Quitline NC is a proactive quitline service. As a proactive service, quit coaches can initiate calls to tobacco users to answer questions and offer program services. Following the first call of the Multi-Call Program, tobacco users are offered an additional three proactive calls. Research has demonstrated that quitline callers who participate in multi-call interventions are more likely to succeed at quitting than callers who participate in single-call interventions.¹

Quitline NC offers a customized youth program to serve callers 17 years of age and younger. Free & Clear's youth program involves specialized youth protocols including specialized call timing, "Youth Coaches," program incentives, and materials designed and tested for youth by the California Smokers' Helpline.

Quitline NC also offers a fax referral services. This service is designed to assist health professionals in connecting their patients to Quitline NC using a special fax referral form. When Quitline NC receives the fax referral, a quit coach initiates a call to the patient to assist them with their cessation needs. Information about Quitline NC and its fax referral service is accessible to the public via the internet at www.quitlinenc.com.

B.3. Evaluation

The UNC School of Medicine Tobacco Prevention and Evaluation Program (TPEP) conducts the outcomes evaluation for the HWTF-funded portion of Quitline NC. UNC TPEP responsibilities include logic model development and evaluation planning, analyzing Quitline NC data, providing recommendations, and disseminating results. The purpose of this report is to examine Quitline NC outcomes during the third year of operation (fiscal year 2007-2008), particularly in relation to the goal of reaching tobacco-using youth and young adult populations in North Carolina, and to comment on overall trends in quitline usage over the first three years of operation.

C. METHODS

In January 2006, UNC TPEP, in cooperation with the HWTF and DHHS, developed a logic model to guide the outcomes evaluation for the HWTF-funded portion of Quitline NC (Appendix A). This model outlines the resources, activities, outputs, and short-term, intermediate, and long-term outcomes for the HWTF-funded portion of Quitline NC, and is updated yearly as appropriate.

The Quitline NC vendor, Free & Clear, collects, cleans, and manages all Quitline NC caller intake data, call utilization data, and end-of-program survey data. Intake data collection includes Minimal Data Set (MDS) questions outlined by the North American Quitline Consortium. Additional custom questions were added based on recommendation of the HWTF, DHHS, and UNC TPEP to ensure that all data necessary for the evaluation are collected.

Free & Clear sends raw data extracts for each month to UNC TPEP. The extracts include data on callers, demographic information, tobacco use, and use of various quitline services. The data sets sent by Free & Clear contain information on every call made to the quitline; TPEP extracts records for each unique caller for analysis for this evaluation. TPEP analyzes data using SPSS with a specific focus on data for callers who use tobacco from populations supported by HWTF funding (i.e. youth, young adults, primary caregivers, and school/childcare employees). Analysis of program utilization data (i.e. how many callers who registered for the Multi-Call Program completed all calls) is not feasible with the existing data set structure.

D. SUMMARY OF FINDINGS

D.1. Call Volume

Quitline NC completed its third year of operation between July 1, 2007 and June 30, 2008. During this period, 7,332 people called Quitline NC (Table 1). The majority of callers (6,632, or 87%) were tobacco users. On average, 530 tobacco users called each month.

Callers from HWTF target populations accounted for 46% (3,448) of all Quitline NC callers and 54% (3,448) of all tobacco-using callers in Year 3. One hundred percent of all HWTF-funded callers were tobacco users. Seventy-five percent of DHHS-funded callers were tobacco users. Ninety-seven percent (6,145) of all tobacco users were adults (18 years old and older) and 3% (217) were youth (12-17 years old). Ninety-three percent (5,891) of all tobacco users smoked cigarettes exclusively or in conjunction with use of another tobacco product.

Table 1. Total Callers by Type of Caller and Funding Source, Nov 05-Jun 07 (n=7332)

Type of Caller	Funding Source				Total	
	HWTF		DHHS			
	#	%	#	%	#	%
Tobacco User	3448	100.0	2914	75.2	6362	86.9
General Public	-	-	692	17.9	692	9.5
Proxy	-	-	151	3.9	151	2.1
Provider	-	-	117	3.0	117	1.6
Total	3448	100.0	3874	100.0	7322	100.0

Call Volume Increases During Year 3

Quitline NC provided services to more callers from HWTF-funded populations during Year 3 (3,448) than during the first 20 months of operation combined (2,988). An average of 287 HWTF-funded callers called Quitline NC per month during Year 3, a marked increase from an average of 214 HWTF-funded calls per month during Year 2. Young adults experienced the largest increase in average monthly call volume, from 69.1 calls per month in Year 2 to 117.8 calls per month in Year 3 (70.5% increase). Average monthly call volume for youth increased by 56%, from 11.6 calls per month in Year 2 to 18.1 calls per month in Year 3. Primary caregivers and school employee calls increased by 13.5%, from 133 calls per month in Year 2 to 151.4 calls per month in Year 3.

Figure 1 shows the total number of callers from HWTF-funded populations; figure 2 shows trends in monthly call volume since the inception of Quitline NC.

Figure 1. Number of HWTF Callers by Year 3 and First 20 Months (Tobacco Users Only, n=6436)

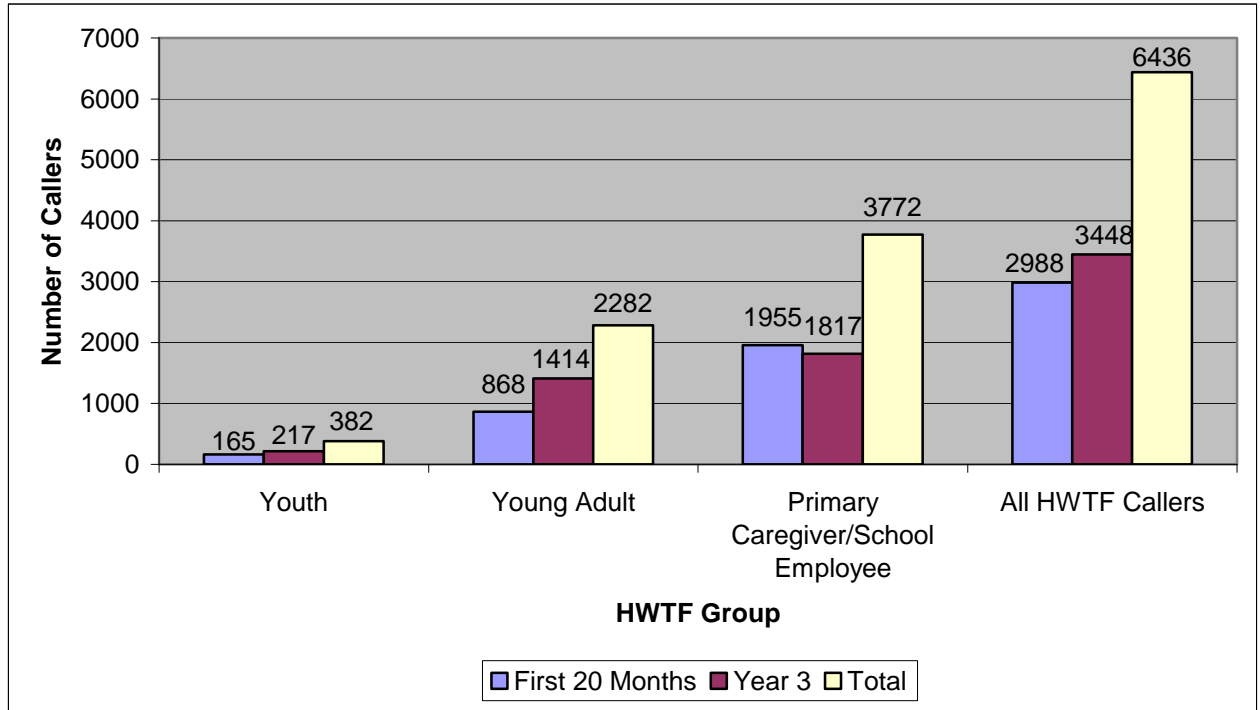


Figure 2. Total Monthly HWTF Call Volume, Year 1 – Year 3 (n=6436)

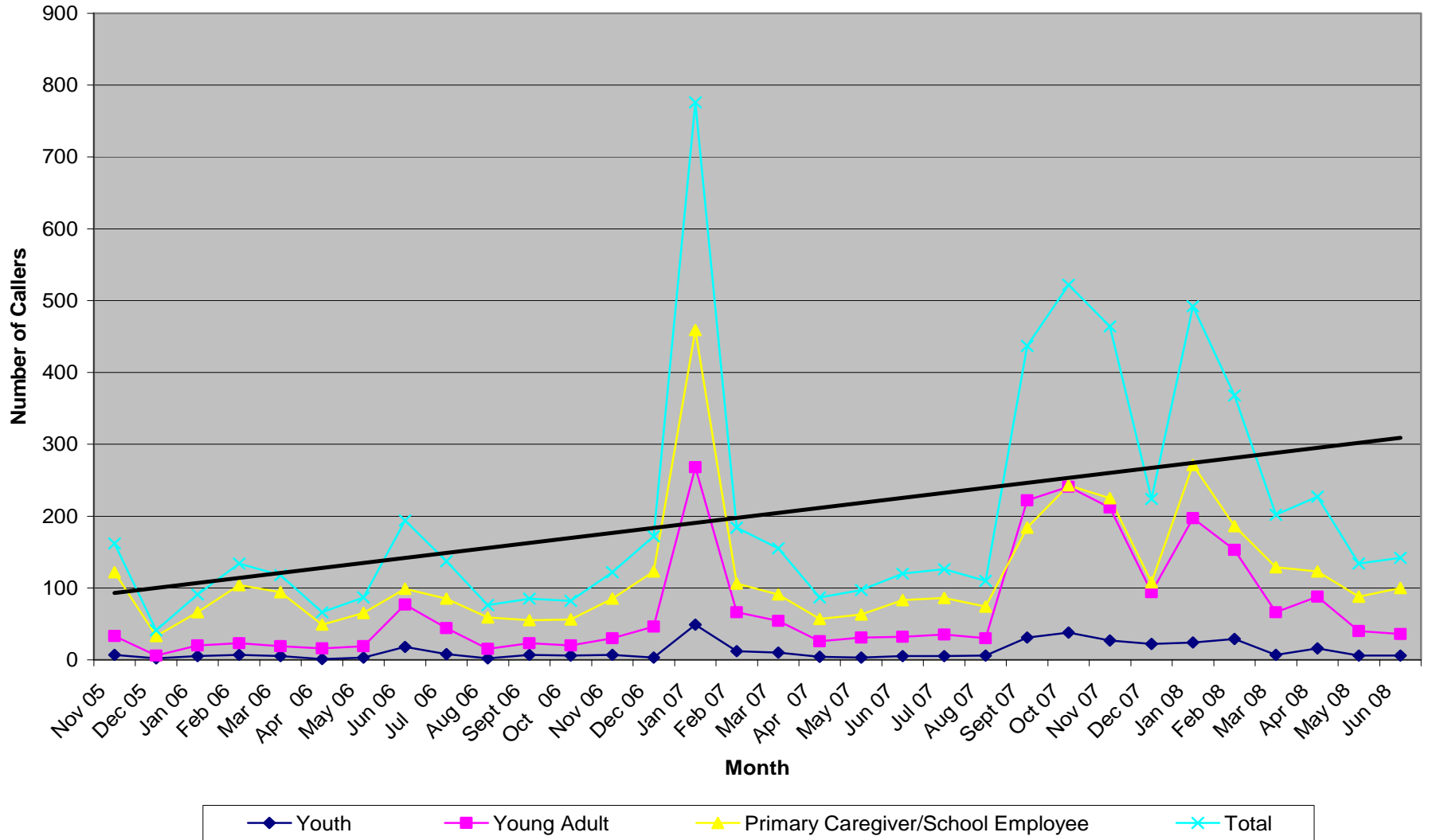


Figure 3 highlights the breakdown of HWTF-funded callers among all Quitline NC callers during Year 3. Overall, HWTF funded over half (54%) of all callers who use tobacco, 22% of whom were young adults and 3% of whom were youth. This was an increase from the first 20 months of quitline operation, during which HWTF funded callers accounted for 46% of all callers who used tobacco.

Figure 4 highlights the percentage of HWTF target populations (i.e., primary caregivers, school/childcare employees, young adults, and youth) among all HWTF-funded callers. The largest number of HWTF-funded callers were adult primary caregivers and school employees (1817 or 54%)*, followed by young adults (1,414 or 41%), and youth (217 or 6%). The proportion of HWTF-funded callers that were young adults increased from 29% in the first 20 months to 41% in Year 3.

Figure 3. Percentage of HWTF Callers Among All Callers, Year 3 (Tobacco Users Only, n=6362)

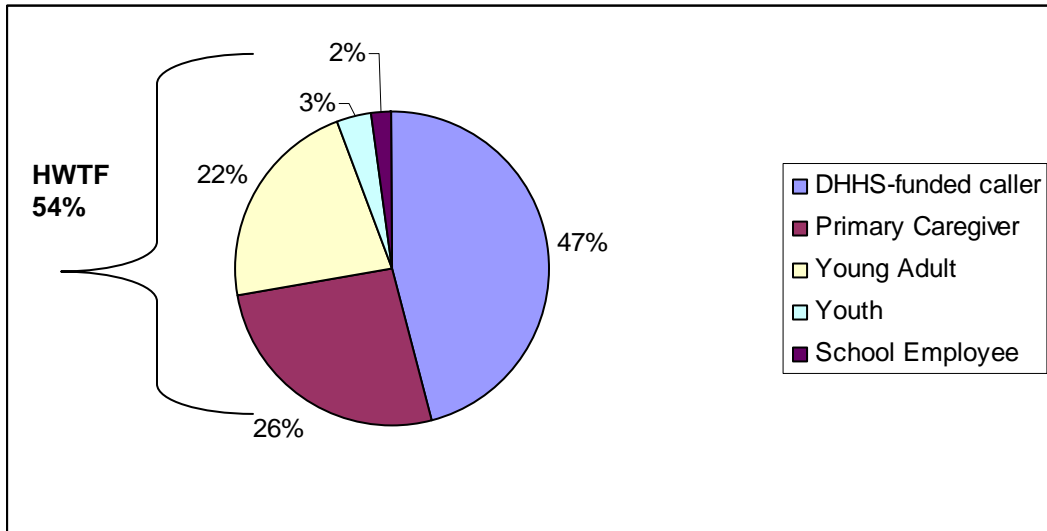
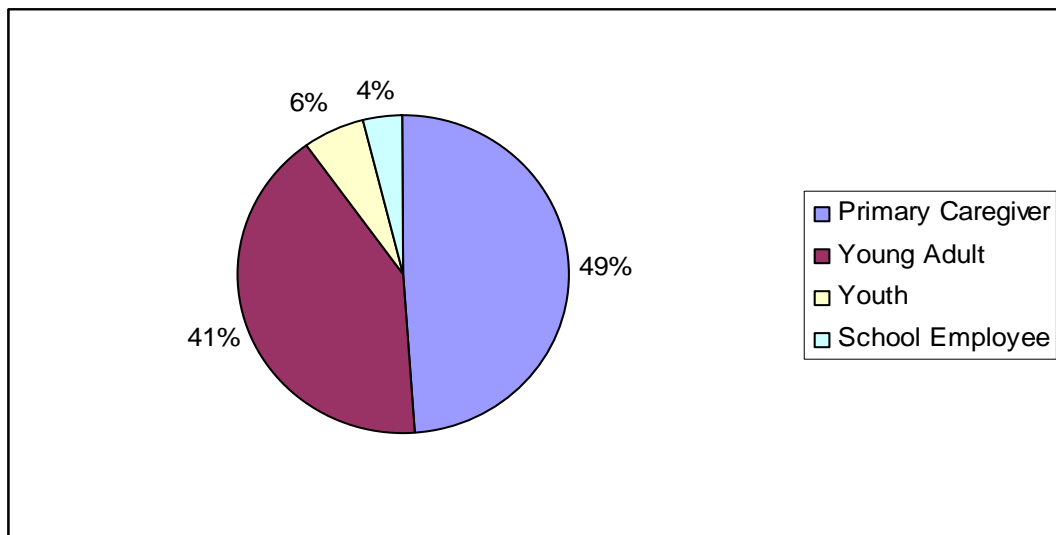


Figure 4. Percentage of Target Populations Among HWTF Callers, Year 3 (Tobacco Users Only, n=3448)

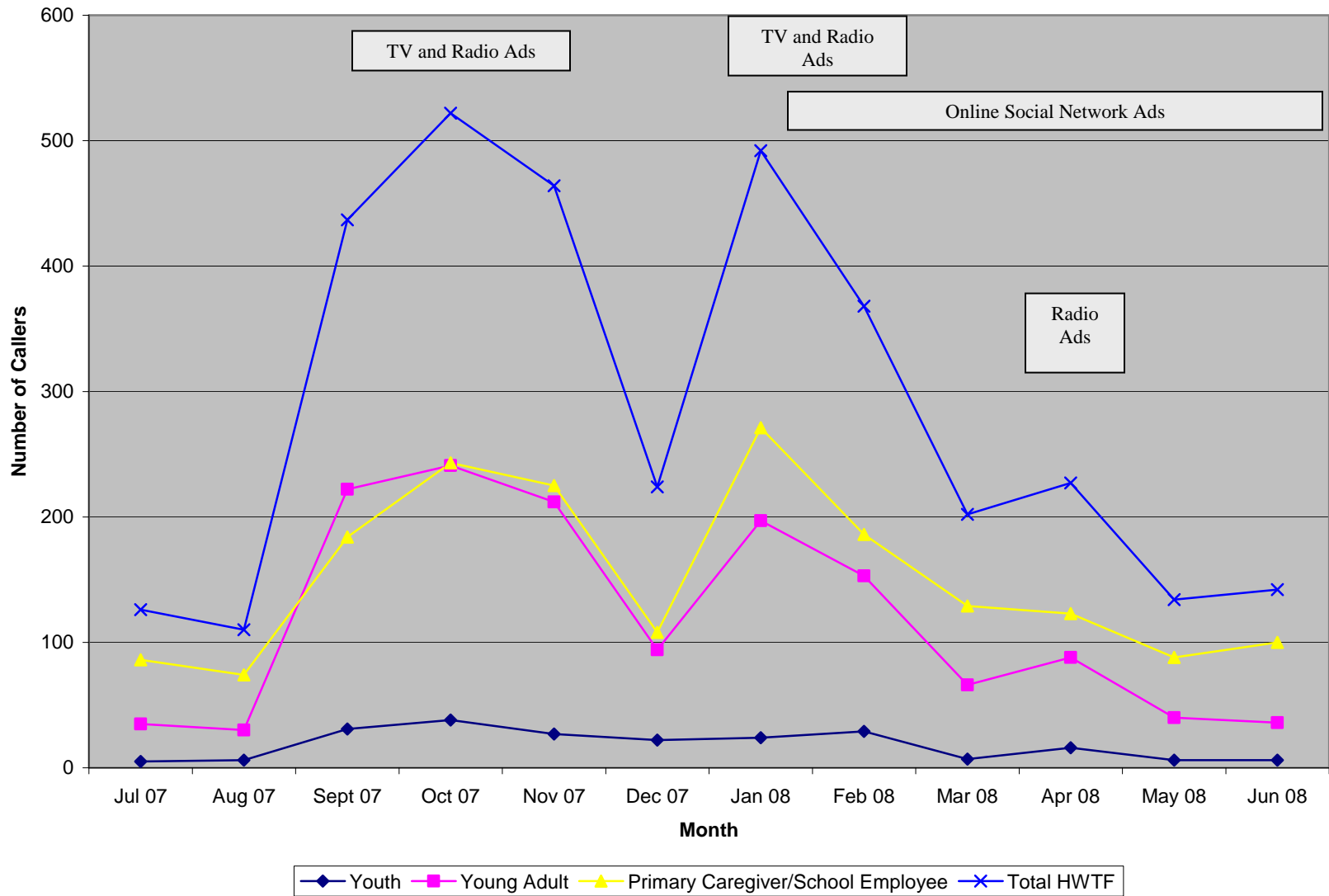


* 4.6% (159) of HWTF-funded, tobacco-using callers were both childcare/school employees and primary caregivers of children in their homes. For the purposes of this report, these callers are categorized as primary caregivers only

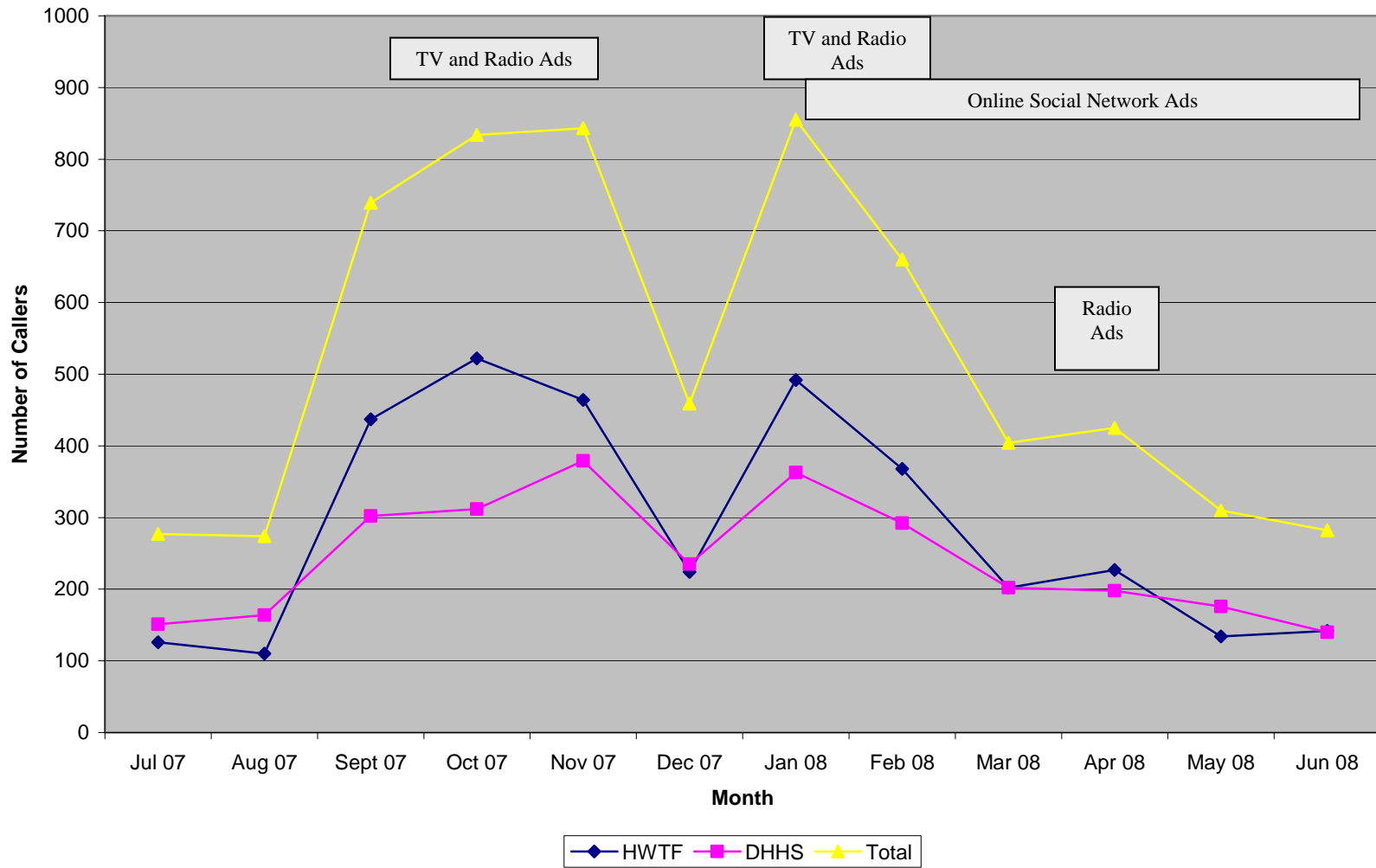
Quitline Promotion Drives Increased Calls

Figure 5 shows the total number of calls to Quitline NC by HWTF-funded callers during each month of Year 3. Figure 6 shows the total number of calls to Quitline NC by all tobacco using callers during Year 3. Call volumes peaked and remained higher during months in which both television and radio ads from the “Call it Quits” campaign were aired. Call volumes were not as high during months in which only radio ads and online promotion occurred. Section D.4 contains more detailed information about Quitline NC promotions and associated changes in call volume.

**Figure 5. HWTF Call Volume Over Time (n=3448)
July 2007 – June 2008**



**Figure 6. HWTF and DHHS Call Volume Over Time (Tobacco users only, n =6362)
July 2007 –June 2008**



Quitline Reaches More Youth and Young Adult Smokers

Based on CDC guidelines, Quitline NC ultimately aims to provide services to 2% of NC tobacco users each year.² The most recent data in the literature indicates that, on average, state quitlines reach approximately 1% of smokers in their state.⁹ Quitline NC's reach is calculated based on the number of unique callers to Quitline NC as a percentage of the total smoking population of North Carolina. (Smoking data are used as overall tobacco-use prevalence rates are not available.)

In Year 3, Quitline NC served approximately 0.36% of North Carolina's adult smoking population, 0.45% of NC young adult smokers, and 0.22% of NC youth smokers. Year 3 showed marked success in increasing the reach of Quitline NC to both young adult and youth smokers. The percentage of young adult smokers ages 18-24 served by Quitline NC increased from 0.31% in the first 20 months to 0.45% during Year 3. Youth ages 14-17 served by Quitline NC increased from 0.15% in the first 20 months to 0.22% during Year 3. Quitline NC reach to adult smokers in Year 3 was similar to its reach (0.39%) in the first 20 months of operation.

Figure 7 highlights the cumulative percentage of NC adult, young adult, and youth smokers reached by Quitline NC over time in Year 3.

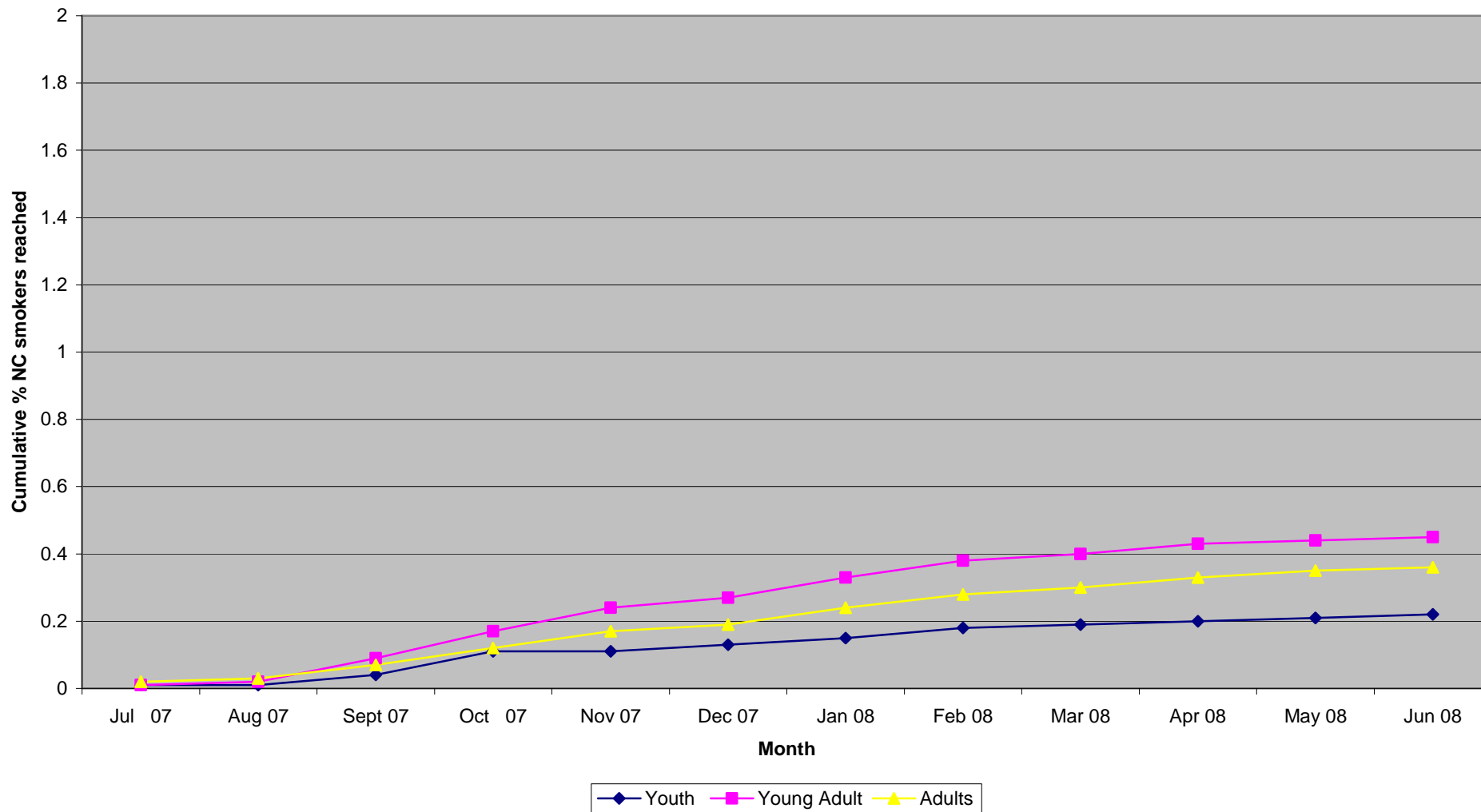
Table 2. Cumulative Percentage of NC Smokers Reached by Quitline NC, July 07 – June 08

NC Population*	Prevalence of Current Smoking**	# of Callers Who Smoke	% Cumulative Reach	Target % Annual Reach
Adults, 18 & older (6,668,948)	22.9% (1,567,127)	5,684	0.36	2.0
Young Adults, 18-24 (918,787)	31.3% (295,581)	1,334	0.45	--
High School Aged Youth, 14-17 (483,189)	19.0% (93,865)	204	0.22	--

* US Census Bureau (2007) and NC State Data Center (2007); ** BRFSS (2007) and NC YTS (2007).

Note: Targets for youth and young adult smokers have not yet been established.

Figure 7. Cumulative Percentage of North Carolina Smokers Reached by Quitline NC, July 07 – June 08



D.2. Characteristics of HWTF Callers

The following section highlights the characteristics of tobacco users from HWTF supported populations that called Quitline NC between July 2007 and June 2008. During Year 3, the HWTF-funded portion of Quitline NC reached a substantial number of callers from populations who experience disparities in tobacco use, effects of tobacco-related diseases, and limited access to healthcare or other cessation resources (e.g., racial and ethnic minority groups, people with low socio-economic status).

Table 3 shows selected demographic characteristics, tobacco-use behaviors, and Quitline use for each of the three HWTF target populations. Sections D.2.a through D.2.c describe each population in greater detail. Additional data tables to accompany this section are included in Appendix B.

Table 3. Selected Characteristics of HWTF-Funded Callers (n=3448)*

Demographic & Tobacco-Use Information		Youth (% of total, n=217)	Young Adult (% of total, n=1414)	Primary Caregiver/School Employee (% of total, n=1817)
Gender	Female	47.0	48.9	65.9
	Male	53.0	51.1	34.1
Language	English	99.5	96.7	95.0
	Spanish	0.5	3.3	5.0
Ethnicity	Non-Hispanic	88.5	88.7	90.1
	Hispanic	7.4	7.1	7.9
Race	White	65.0	57.6	48.3
	Black/African American	22.1	26.2	35.8
	American Indian	1.8	1.9	2.6
	Other Race	6.4	9.8	8.8
Health Insurance	Commercial Insurance	0.0	19.0	32.5
	Medicaid	0.9	15.0	16.3
	Medicare	0.0	1.0	4.4
	No Insurance	0.0	48.0	31.8
Pregnancy Status (% of female callers)	Planning Pregnancy	2.9	6.2	1.8
	Currently Pregnant	5.9	11.3	2.1
	Breastfeeding	0.0	0.9	0.6
Tobacco Use	Cigarettes Exclusively	80.6	85.1	94.0
	Smokeless	2.3	1.3	1.8
	Cigar	0.0	0.8	0.8
	Multiple	13.4	9.3	2.1
Stage of Change	Preparation	90.3	88.4	88.9
	Action	2.8	4.4	7.2
Method of Entry to Quitline NC	Inbound English Call	97.2	96.1	89.0
	Inbound Spanish Call	0.0	2.0	3.6
	Fax Referral	1.4	1.0	5.8
Type of Intervention Requested	One-Call Program	29.5	35.4	31.8
	Multi-Call Program	67.3	59.8	66.0
	General Questions	3.2	3.7	1.5
	Materials Only	0.0	0.8	0.3

* Information on callers who did not provide information and selected categories with very few respondents are not reported, thus percentages do not sum to 100%.

D.2.a. Primary Caregivers and School/Childcare Employees (25 years and older)

The majority (72%) of all Quitline NC callers who used tobacco were adults 25 years or older. Forty percent (1,817) of all Quitline NC callers were primary caregivers of youth and/or school or childcare employees whose services were funded by the HWTF. Primary caregivers/school employees made up 53% of all callers who were supported by HWTF funding.

Most primary caregiver/school employee callers (73% or 1,323) were between the ages of 25-44. About two-thirds (1,197) were female. Among female primary caregivers/school employees, 7% (82) were either pregnant, planning a pregnancy, or breastfeeding.

Nearly half (48%) of all primary caregiver/school employee callers reported their race as white, and over one-third (36%) reported their race as black or African American. About 7% of primary caregivers/school employee callers reported Hispanic ethnicity. Ninety-five percent of callers in this group completed calls in English and 5% completed calls in Spanish.

About two-thirds of all primary caregiver/school employee callers had achieved a GED certificate, high school degree, or had some college education (but no degree). Nineteen percent had a college degree. Sixteen percent had a level of education less than grade nine or had completed some high school but not earned a high school degree.

Nearly one-third (32% or 577) of all primary caregiver/school employee callers had no health insurance coverage. Sixteen percent had Medicaid coverage and 4% had Medicare coverage. Thirty percent of primary caregivers/school employees had some type of commercial insurance. Seventeen percent of all primary caregiver/school employee callers had chronic asthma, 11% had diabetes, 9% had chronic obstructive pulmonary disease (COPD), and 5% had coronary artery disease. Twelve percent had more than one of these conditions.

Primary caregiver/school employees from 98 out of North Carolina's 100 counties called Quitline NC during Year 3. Counties with the highest number of primary caregiver/school employee callers include Mecklenburg (181 callers), Wake (160), and Guilford (99). Cumberland, Durham, and Forsyth counties each had over 50 callers from this group.

The majority (94%) of primary caregiver/school employee callers smoked cigarettes exclusively. Ninety-one percent smoked every day. Two percent of primary caregivers/school employees used smokeless tobacco, 1% used cigars, and 2% used multiple forms of tobacco. Most (92%) callers who used multiple forms of tobacco smoked cigarettes in conjunction with the use of other tobacco products.

The majority (89%) of all primary caregiver/school employee callers were in the preparation stage of quitting, indicating they were ready to quit in the next 30 days. Seven percent were in the action stage (i.e., had already quit in the last six months).

Most (89%) of primary caregiver/school employee callers entered Quitline NC via an inbound English call. Six percent (105) were referred by fax. Two-thirds of primary caregiver/school employee callers enrolled in the Multi-Call Program and 32% enrolled in the One-Call Program at the time of intake.

See Figures 10-12 for visual highlights of primary caregiver/school employee callers.

Figure 10. Primary Caregiver/School Employee Age (n=1817)

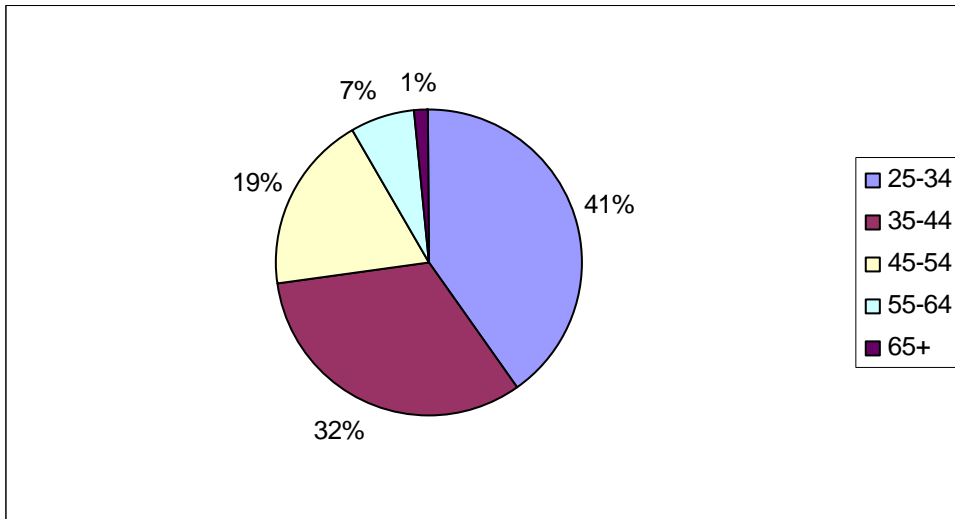


Figure 11. Primary Caregiver/School Employee Education (n=1817)

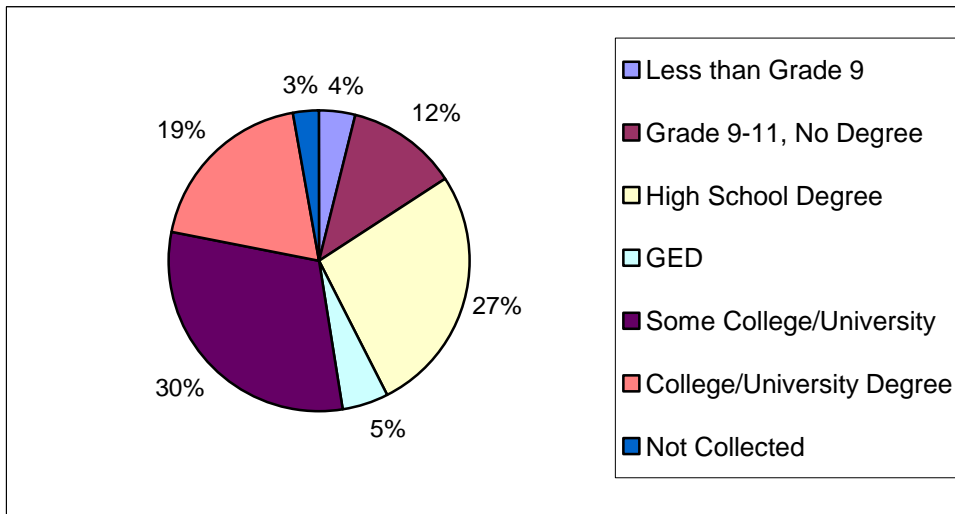
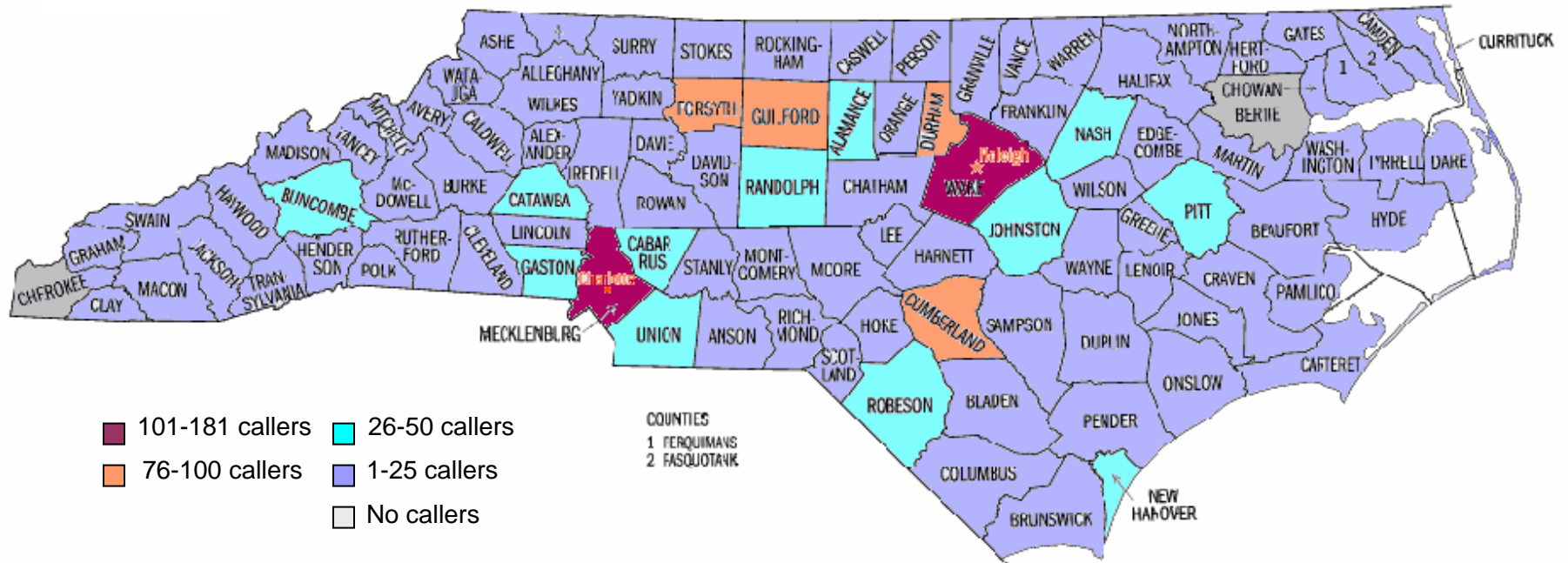


Figure 12. Primary Caregiver/School Employee Call Volume by County of Residence (n=1817)



D.2.b. Young Adults (18 to 24 years old)

Young adults, ages 18-24, continue to have the highest prevalence of smoking among all age groups in North Carolina, with 31% identified as current smokers. Nearly 60% of NC young adult smokers have made quit attempts in the last year.⁴

In Year 3, young adults accounted for 22% (1,414) of all Quitline NC callers who used tobacco. Young adult callers were 41% of all HWTF-funded callers during Year 3.

Approximately half of young adult callers were female (49%). Of all female young adult callers, 18% (127) were planning a pregnancy, currently pregnant, or breastfeeding. Young adult females accounted for 45% (127 of 280) of all female Quitline NC callers who used tobacco and reported being in one of these three pregnancy stages.

Over half (58%) of young adult callers reported their race as white, 26% as black or African American, and 2% as American Indian or Alaskan Native. Less than 1% reported their race as Asian (8) or Native Hawaiian/Other Pacific Islander (6). Nine percent reported their race as "other." Seven percent of young adult callers reported Hispanic ethnicity, and 2% completed calls in Spanish.

Only one-third (32% or 451) of young adult callers reported that they currently attended school. Among those who were not currently in school (63% or 897), most (67%) reported finishing high school, attending some college, or completing a college degree. Sixteen percent (146) of young adult callers not enrolled in school had a level of education less than a high school degree.

Compared to adult callers over 25, young adult callers were slightly more likely to not have health insurance. About two-thirds (64%) of young adult callers either had no health insurance coverage (49% or 689) or had Medicaid (15% or 214). About 19% of young adult callers had health insurance coverage through a commercial provider. Sixteen percent of young adult callers had chronic asthma. Twenty-one (2%) young adult callers had diabetes; 11 had COPD; and 4 had coronary artery disease. Twenty-two (2%) had multiple chronic diseases.

Young adults from 93 of North Carolina's 100 counties called Quitline NC during Year 3. Counties with the highest number of calls include Mecklenburg (163), Guilford (117), and Wake (88). Cumberland, Forsyth, Durham, and New Hanover counties all had between 40 and 60 young adult callers. Nine of the top 10 counties have college campuses with either direct or indirect support from a HWTF Tobacco-Free Colleges Initiative grantee. College grantees work to promote Quitline NC to young adults and healthcare professionals on NC college campuses.

Most (94%) young adult callers smoked cigarettes. Ninety-two percent smoked every day. About 9% used multiple forms of tobacco; 1% used smokeless tobacco, and less than 1% used either cigars or pipes. Most (99%) of young adult callers who used multiple forms of tobacco smoked cigarettes in conjunction with use of other tobacco products. The majority (88%) of young adult callers were in the preparation stage of quitting tobacco; 4% were in the action stage; 3% were in the contemplation stage; and less than 1% were in either the precontemplation or maintenance stage.

The majority (96%) of young adult callers entered Quitline NC via an inbound English call. Fourteen callers (1%) were referred by fax. Sixty percent of young adult callers accepted participation in the Multi-Call Program and 35% accepted the One-Call program at intake.

Figures 13-14 provide visual highlights of young adult callers.

Figure 13. Young Adult Age (n=1414)

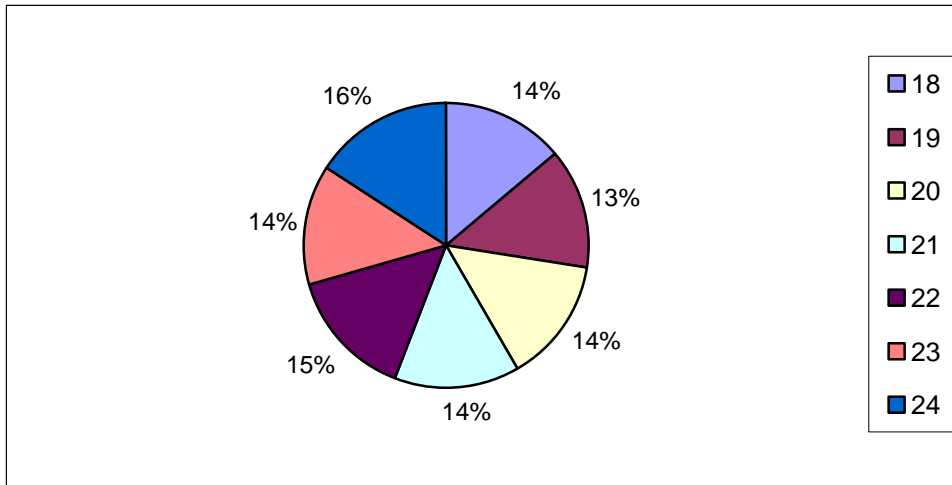


Figure 14. Young Adult Call Volume by County of Residence (n=1414)

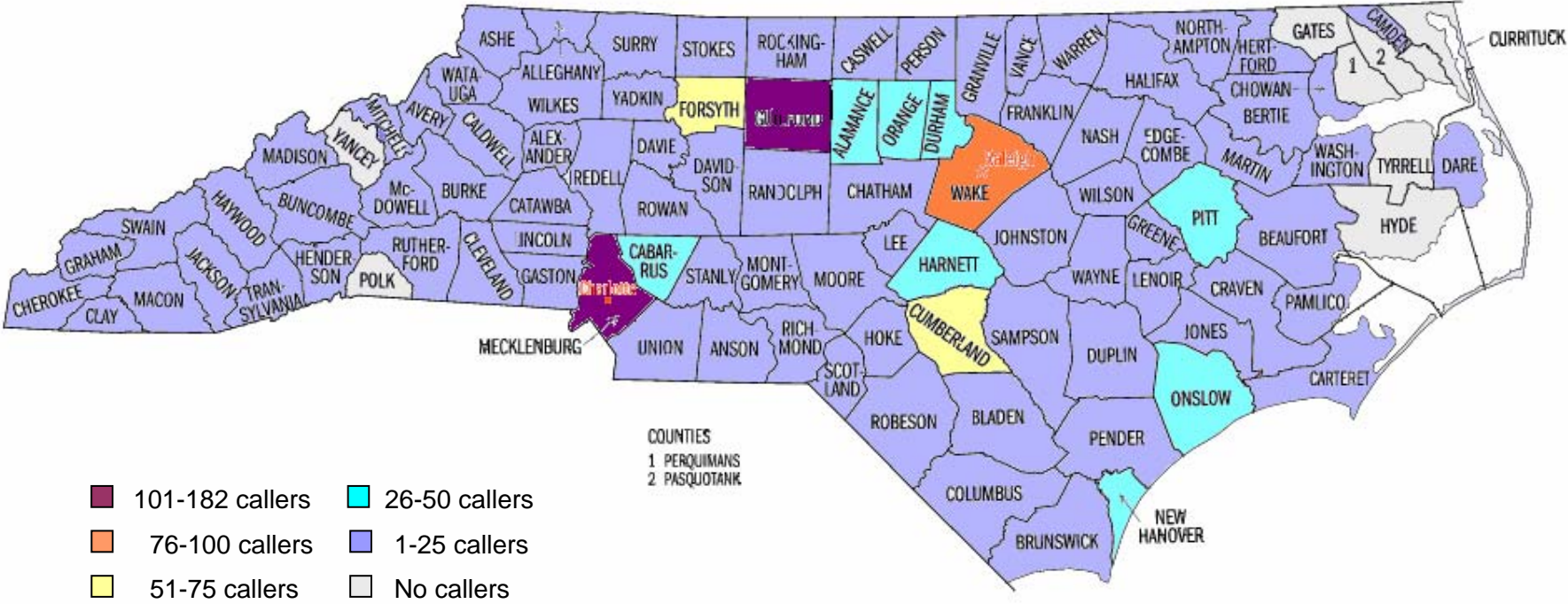


Figure 15 highlights the current employment status of young adult callers. Fifty-eight percent (824) of all young adult callers reported they were currently employed. Of those who were currently working, 70.5% worked full-time and 29.5% worked part-time. Thirty-six percent of young adult callers said they were not currently working. Six percent were missing information about their work status.

Figure 15. Young Adult Employment Status (n=1414)

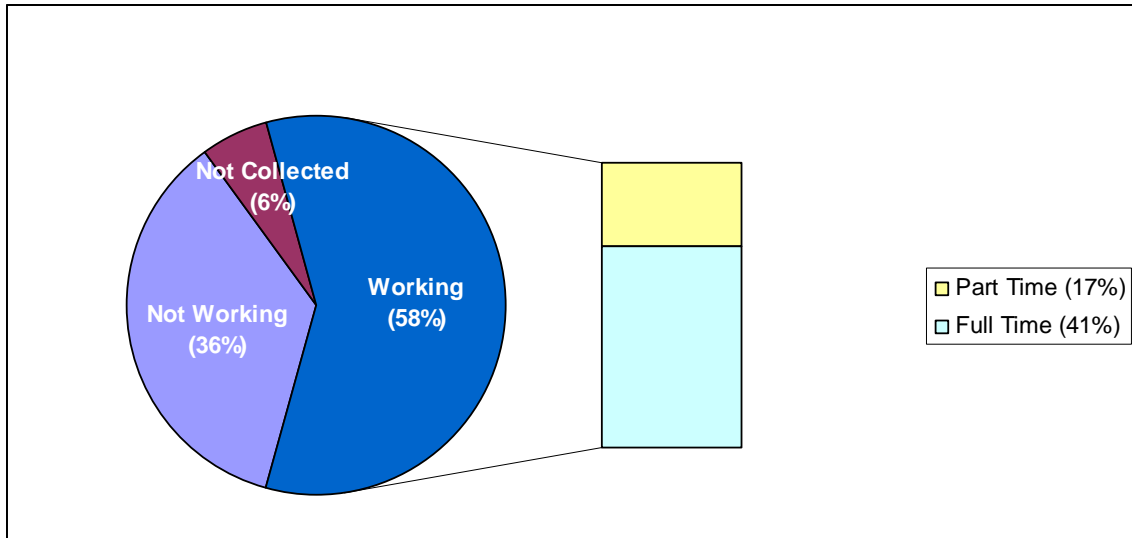


Figure 16 illustrates the current school status of young adults who have called Quitline NC. The majority of young adult callers (63% or 897) reported that they were not currently attending school. Thirty-two percent (451) reported currently attending school. Data on school attendance were missing for 5% (66) of all young adult callers. Among young adults who reported current school attendance, most (74% or 332) were in college, 24% (109) were in high school. Figure 17 highlights the highest level of education achieved by those young adult callers not currently attending school.

Figure 16. Young Adult School Status (n=1414)

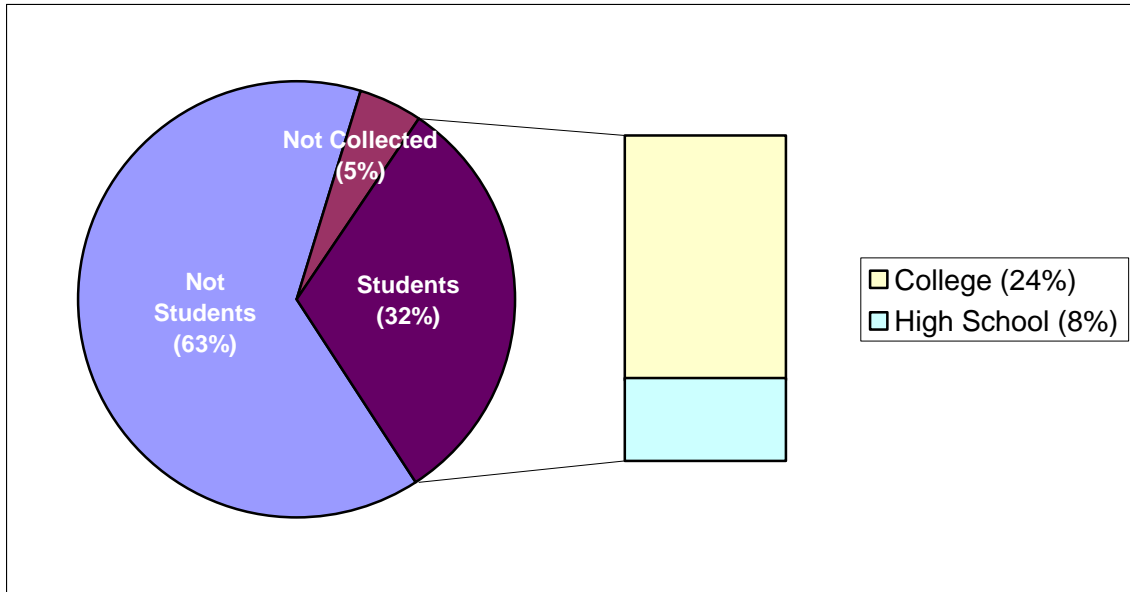


Figure 17. Young Adult Highest Education Completed (Young Adults not currently in school, n=897)

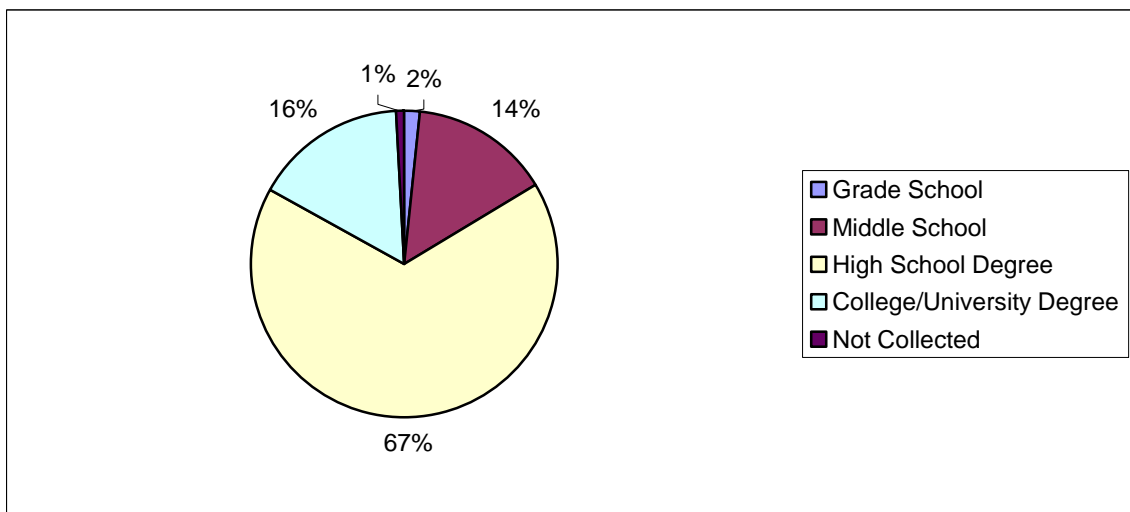


Table 4 compares characteristics of young adult callers who currently attend college with young adult callers who do not currently attend school (i.e., non-college students). Slightly more female college students called than male college students, while slightly more male non-college students called than female non-college students. Female non-college students were more likely to be in a stage of pregnancy than female college students. Female non-college students in this age group made up 34% (95 of 280) of all female callers who reported that they were either planning a pregnancy, pregnant, or breastfeeding (female college students made up 7% of the same group). A greater percentage of non-college students reported Hispanic ethnicity, having no health insurance, or using Medicaid. Non-college students were slightly more likely to use multiple forms of tobacco than college students. Non-college students were also more likely to work full time than were college students.

Table 4. Demographic Comparison of College and Non-College Students

Characteristic	College Students* (n=332)		Non-College Students** (n=897)	
	#	%	#	%
Gender				
Female	178	53.6	423	47.2
Male	154	46.4	474	52.8
Age				
18	50	15.1	88	9.8
19	59	17.8	101	11.3
20	50	15.1	134	14.9
21	48	14.5	131	14.6
22	47	14.1	140	15.6
23	38	11.4	139	15.5
24	40	12.0	164	18.3
Race/Ethnicity				
White	199	59.9	547	61.0
Black/African American	99	29.8	228	25.4
Hispanic	12	3.6	84	9.4
American Indian/Alaskan Native	4	1.2	18	2.0
Pregnancy Status (Females, n=178 and n=423)				
Breastfeeding	0	0	5	1.2
Planning Pregnancy	10	5.6	25	5.9
Pregnant	9	5.1	65	15.4
Health Plan				
Uninsured	121	36.4	493	55.0
Medicaid	37	11.1	147	16.4
Commercial Insurance	91	27.4	135	15.1
Tobacco Use[†]				
Cigarettes	296	89.2	785	87.5
Cigars	7	2.1	4	0.4
Smokeless Tobacco	2	0.6	12	1.3
Multiple	27	8.1	90	10.1
Currently Working				
Yes	194	58.4	568	63.3
<i>Full Time</i>	94	28.3	110	51.1
<i>Part Time</i>	100	30.1	110	12.3

*18-24 year old callers who currently attend school and reported college as the school level

**18-24 year old callers who report that they do not currently attend school

† Callers who used cigarettes and some other form of tobacco are classified as multiple tobacco users only

D.2.c. Youth (12 to 17 years old)

In Year 3, youth ages 12 to 17 accounted for 3% (217) of all Quitline NC callers who used tobacco. Youth were 6% of all callers supported by HWTF funding.

Over three-quarters (79%) of youth callers were 16 to 17 years old. Only 3% were middle school age (12-13 years old). Slightly more male youth called than did female youth (53% vs. 47%). Nine youth (9% of all female youth) were either pregnant or planning a pregnancy. Youth made up 3% of all Quitline NC female callers who used tobacco and reported being pregnant, planning a pregnancy, or breastfeeding.

The majority (65%) of youth callers reported their race as white; 22% as black or African American youth; 2% as American Indian or Alaskan Native; and 1% as Asian. About 6% of youth reported their race as "other." Seven percent (16) of youth callers reported Hispanic ethnicity, and one youth caller completed calls in Spanish.

Information about health insurance was not collected for most (98%) youth callers. Seventeen percent (35) of all youth callers reported having chronic asthma.

Youth from 61 of NC's 100 counties called Quitline NC during Year 3. Counties with the highest number of youth callers included Mecklenburg (18), Cumberland (14), Guilford (12), and Wake (12). Six counties had between 5 and 8 callers; the remaining counties each had fewer than 5 callers. Nine of the top ten counties for youth callers received direct support from a HWTF Teen Tobacco Use Prevention and Cessation Initiative Community/School grantee. Community/School grantees work to promote tobacco-free policy adoption and cessation among youth in local schools and communities across the state and include information about Quitline NC in some of their activities.

Most youth callers (94%) smoked cigarettes. Among all youth callers who used cigarettes, 89% smoked every day and 9% smoked some days. Twenty-nine youth callers (13%) reported using multiple forms of tobacco and five callers (2.3%) reported using smokeless tobacco. All youth callers who reported using multiple forms of tobacco smoked cigarettes in conjunction with use of other tobacco products. The majority (90%) of youth callers were in the preparation stage of quitting. Three percent were in the action stage and 2% were in the contemplation stage.

The majority of youth callers entered Quitline NC via an inbound English call. Less than 2% (3 callers) were referred by fax. Over two-thirds (67%) of youth callers enrolled in the Multi-Call Program and 30% accepted the One-Call Program at intake. Three percent called with general questions.

Figures 18 -19 provide visual highlights for youth callers.

Figure 18. Youth Age (n=217)

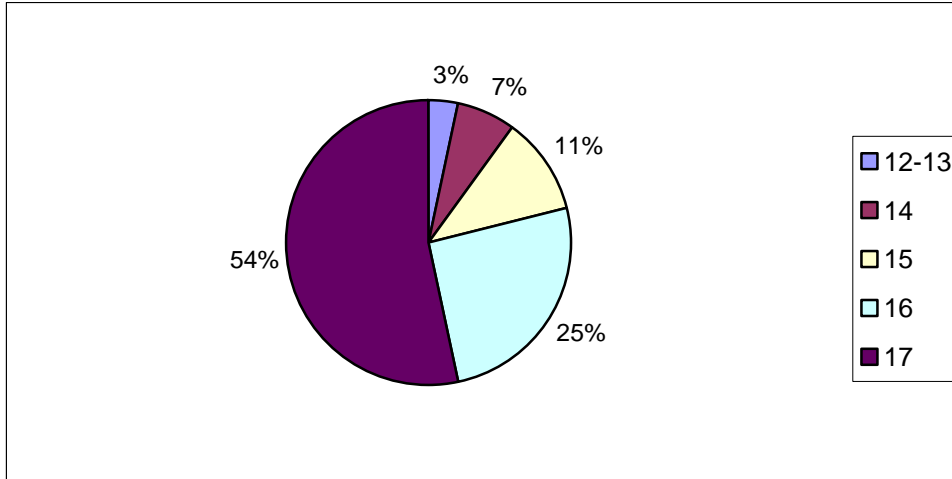
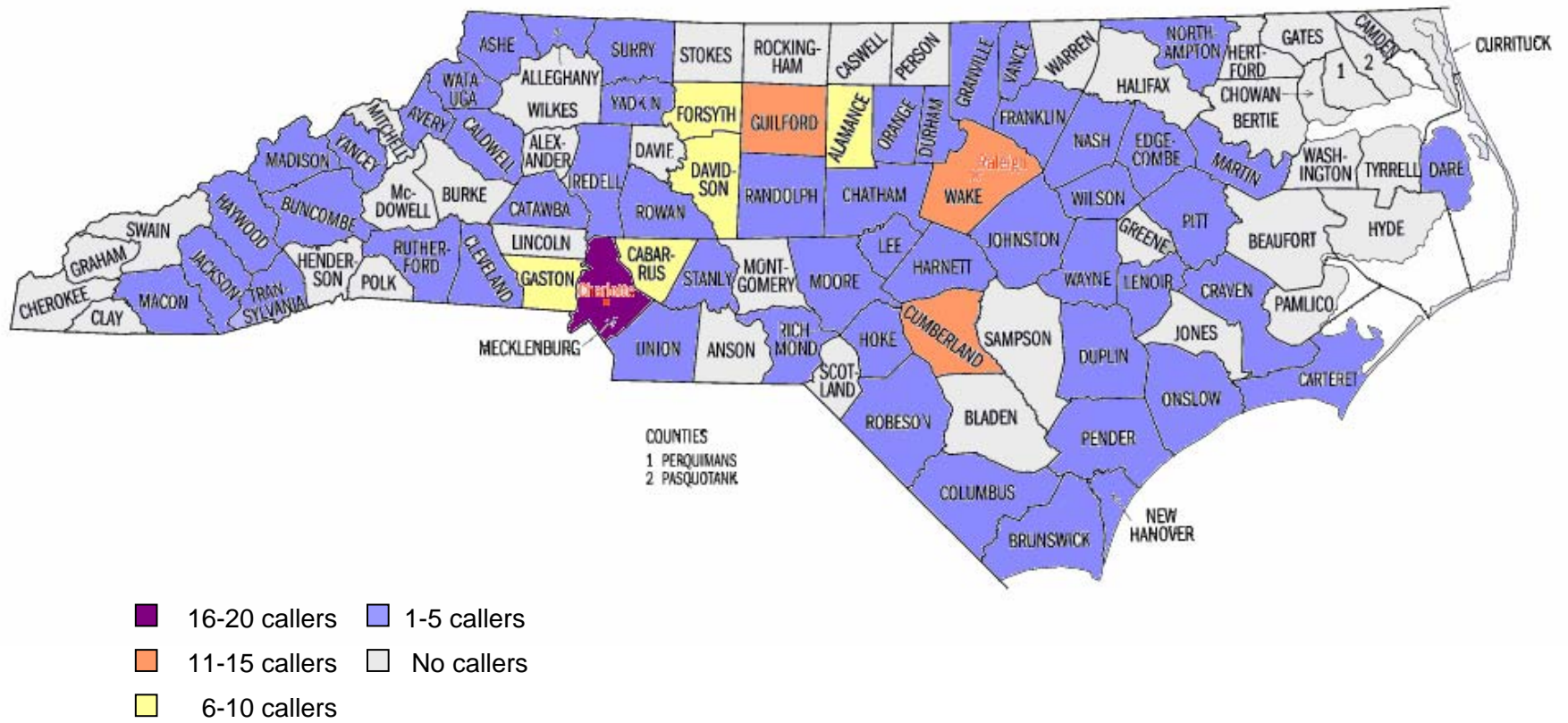
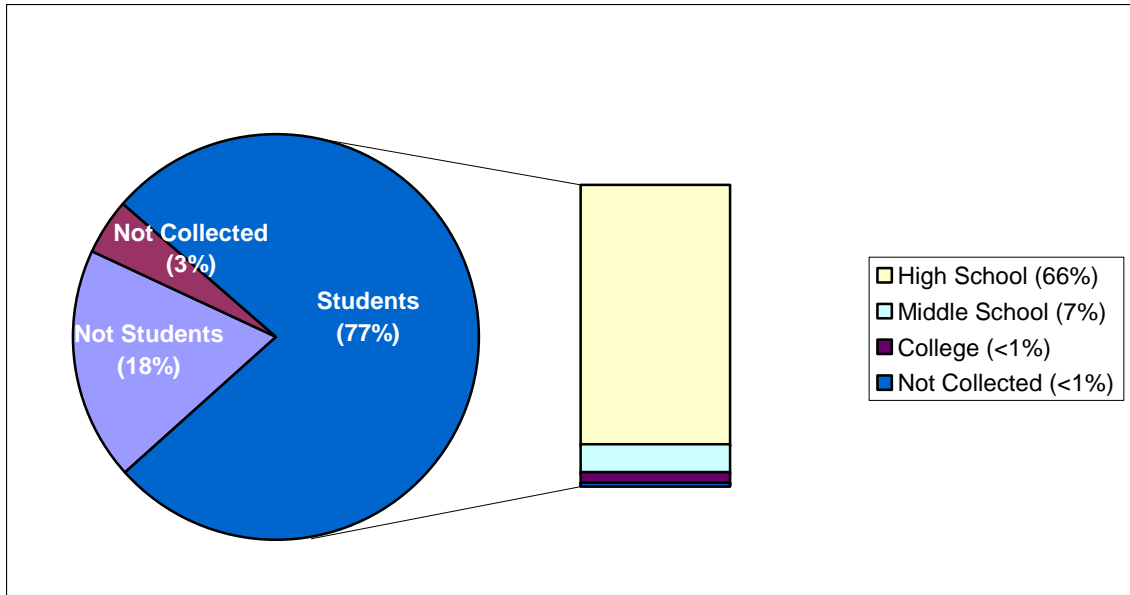


Figure 19. Youth Call Volume by County of Residence



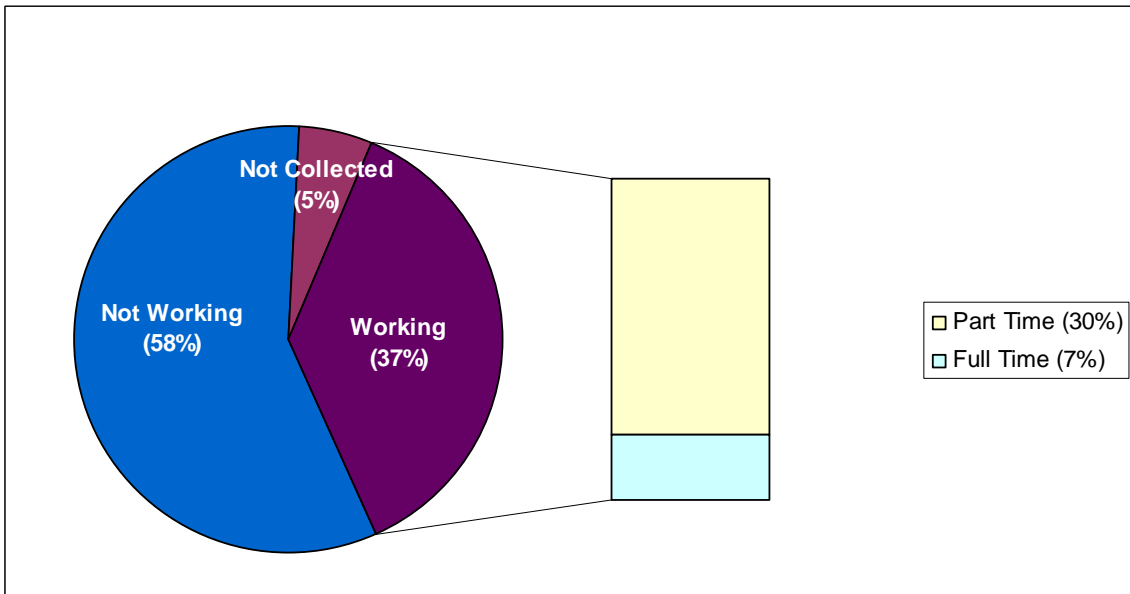
Most youth callers (77% or 167) reported that they currently attended school (Figure 20). Among youth currently attending school, 86% (144) were in high school; 9% (15) were in middle school; and less than 1% were in college (6).

Figure 20. Youth School Status (n=217)



Over one-third (37% or 80) of youth callers reported that they were currently employed (Figure 21). Of those who reported working, most (80% or 64) worked part time and 20% (16) worked full time.

Figure 21. Youth Employment Status (n=217)



D.3. Fax Referral Service

The fax referral service is a special feature of Quitline NC designed to assist health professionals in connecting their patients to the quitline. The fax referral program allows physicians and medical staff to directly refer patients who sign a waiver form and are ready to quit within 30 days. After the referral form is faxed to the quitline, a Quitline NC coach initiates an intake call to the patient to offer assistance with cessation.

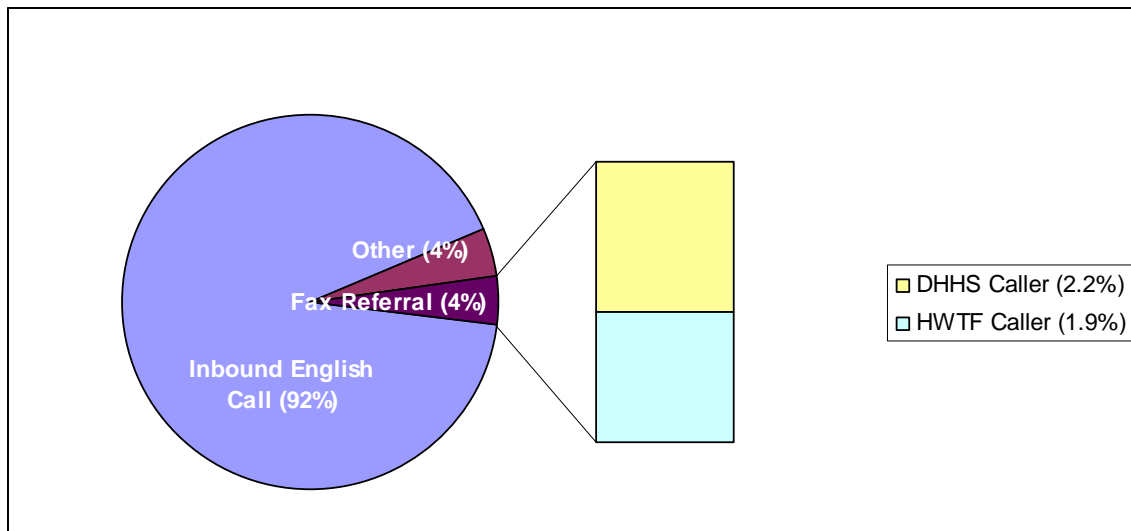
In total, 4.2% (265) of all tobacco users who called Quitline NC during Year 3 entered via the fax referral service (Figure 22). Forty-six percent (122) of all callers who entered the quitline via fax referral were supported by HWTF funding. Most (92%) callers who used tobacco entered the quitline via an inbound English call. Two percent of tobacco users entered the quitline via an inbound Spanish call.

The number of HWTF-funded fax referrals declined slightly during the first three months of Year 3, then increased steadily over the next nine months (Figure 23). The majority (86%) of HWTF-funded fax referral calls were for primary caregivers and school employees. Fax referrals for youth and young adults fluctuated throughout Year 3 and did not exceed five referrals per month.

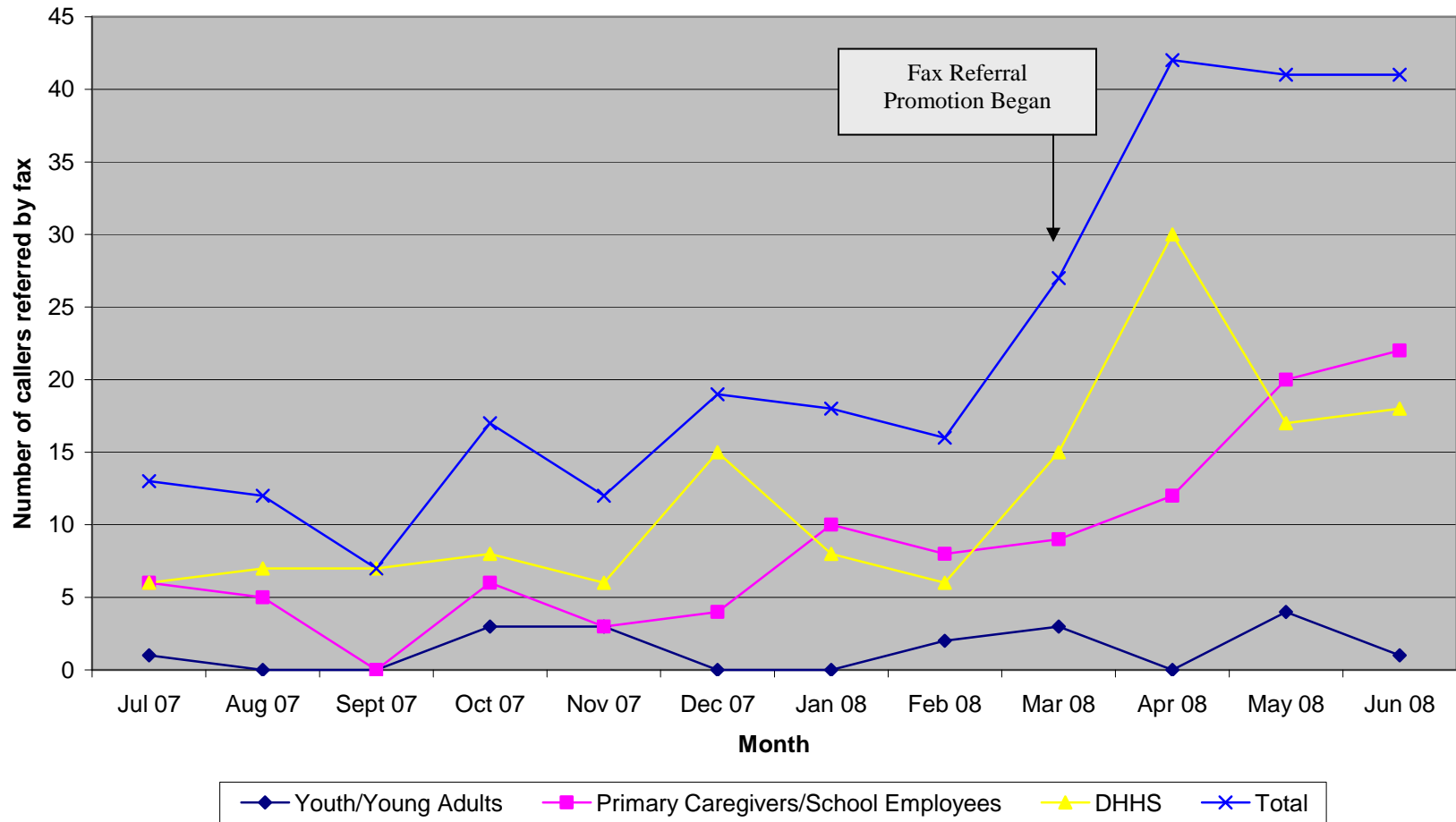
During Year 3, the HWTF led an effort to promote Quitline NC and the fax referral service to health professionals. Over 10,000 North Carolina physicians received fax referral promotional items as well as Quitline NC items to distribute to their patients who use tobacco. Materials were mailed to physicians beginning in March 2008 and continued through the end of Year 3 in June. Fax referrals for adult callers increased sharply in March and remained higher through the end of Year 3, compared with the months before the promotion began.

The majority (82% or 100) of HWTF-funded callers who entered the quitline via fax referral were in the preparation stage of quitting, indicating they were ready to quit in the next 30 days. This is slightly lower than the 89% of HWTF-funded callers entering the quitline via an inbound English call who were in the preparation stage.

Figure 22. Entry Method for All Quitline NC Callers, Year 3 (Tobacco Users Only, n=6362)



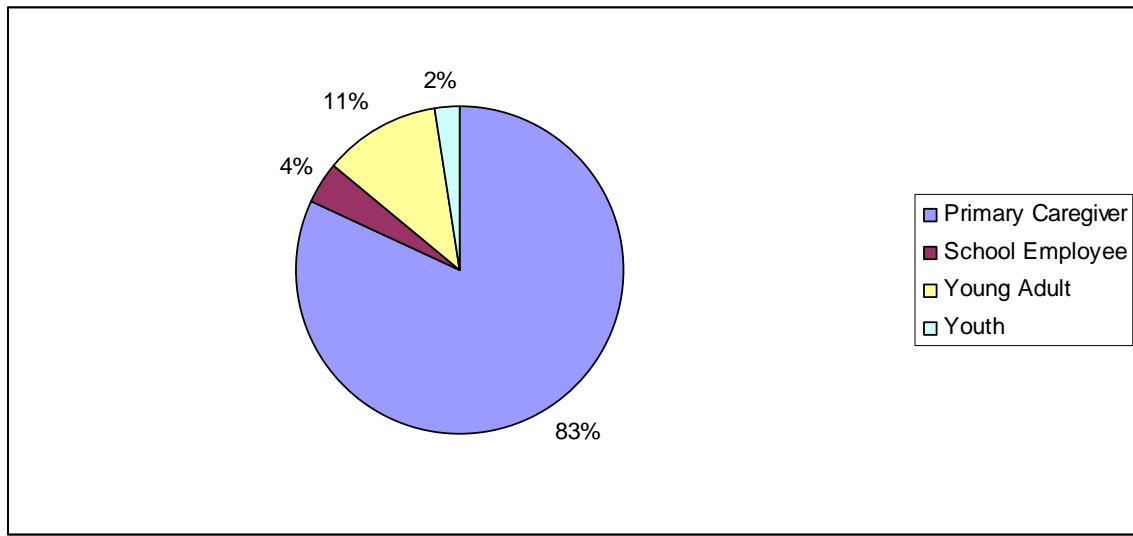
**Figure 23. Number of Fax Referrals Over Time (Tobacco users only, n=6362)
July 2007 – June 2008**



Overall, the number of fax referrals for HWTF-funded callers remains relatively low. During Year 3, 3.5% of all HWTF-funded callers were referred by fax (average of 10.2 HWTF callers referred by fax each month). Most (86%) of these callers were primary caregivers or school employees (Figure 24). Young adult callers accounted for 11.5% of HWTF fax referrals, and youth callers accounted for 2.5% of HWTF fax referrals.

Additional data tables to accompany this section are included in Appendix C.

Figure 24. Type of HWTF Callers Referred by Fax, Year 3 (n=122)



D.4. Promotion

Research indicates that targeted quitline promotional campaigns are effective at driving callers to the quitline.^{2,8-10} During the first 20 months of operation, the HWTF and the DHHS ran several small-scale, statewide and local promotions for Quitline NC. During this period the HWTF also invested in market research and the development of a new paid media campaign targeted to young adult tobacco users.

During Year 3, the HWTF launched “Call it Quits,” a multimedia quitline promotional campaign targeted to young adults. The “Call it Quits” campaign began in September 2007, making North Carolina one of the first states in the country to use a multimedia promotion targeting young adults. The campaign used television, radio, and print advertisements that featured simulated calls between young adult smokers and a Quitline NC coach. Online components of the campaign featured a redesigned Quitline NC website (www.QuitlineNC.com) using the same theme as the TV and print ads. The HWTF also targeted young adults through online ads on the social networking website Facebook www.facebook.com. “Call it Quits” was the primary focus of promotional activities by HWTF during the first six months of Year 3.

Table 5 outlines the components of the “Call it Quits” campaign. During Year 3, no other paid Quitline promotional media campaigns were run by the HWTF, DHHS, or other state level organizations.

Table 5. HWTF-funded “Call it Quits” Quitline NC Media Promotion

Type of Media	Market	Time Period
TV	Six regional television markets across the state	September 07 October 07 November 07 January 08 February 08
Radio	Six regional radio markets across the state	September 07 October 07 November 07 December 07 January 08 February 08 April 08
Hispanic Radio	Three regional radio markets across the state	November 07 December 07
Newspaper	Statewide specialty newspaper	September 07 (statewide specialty newspaper)
Online	Social networking site facebook.com	January 08 February 08 March 08 April 08 June 08

HWTF Teen and College Initiative Grantee Promotions

The HWTF currently funds two statewide tobacco initiatives targeted to youth and young adults: the Teen Tobacco Use Prevention and Cessation Initiative and the Tobacco-Free Colleges Initiative. In addition to policy advocacy, grantees are encouraged to promote Quitline NC to youth and young adults in their communities, schools, and college campuses through the use of media (e.g., TV interviews, school newspapers), publicity at community events, college class presentations, and meetings with student health services. College Initiative grantees reported 372 Quitline NC promotions between July 2007 and June 2008; Quitline NC promotional activities are not tracked as an indicator for the Teen Initiative.

How Callers Heard About Quitline NC

TV, radio, health professionals, and family/friends were the four most frequently reported ways HWTF callers heard about Quitline NC during Year 3. TV and radio promotions included both commercials (i.e., paid media like the “Call it Quits” campaign) and news broadcasts (i.e., earned media). Overall, more HWTF callers reported hearing about the quitline from TV commercials (40%) than TV news reports (1%). Other frequent sources of information about the quitline included brochures/newsletters/flyers, websites, health insurance, or other sources not listed on the caller intake form. Three percent of HWTF callers reported being a past caller as their primary means of hearing about Quitline NC. Figure 25 shows how all HWTF-funded callers heard about Quitline NC in Year 3.

Figures 26 – 28 show the top ten promotions for each group of HWTF callers. Each age group reported the same top four sources of information about the quitline: TV, radio, family/friend, and health professional. Youth and young adult callers were more likely to hear about the quitline from a family member or friend than a health professional. Conversely, adult callers were more likely to hear about the quitline from a health professional than a family member or friend.

TV and radio ads from the “Call it Quits” campaign had the greatest impact on young adult call volume. Seventy-five percent of young adult callers reported that they heard about the quitline from TV or radio, compared to 65% of youth callers and 51% of primary caregiver/school employee callers. The proportion of young adult callers who reported TV and radio ads as their primary source of information about the quitline, and the spikes in young adult call volume during months in which these ads aired suggest that the “Call it Quits” media promotion was successful in reaching young adults.

The majority of HWTF callers who heard about Quitline NC from TV, radio, or health professionals were in the preparation stage of quitting (90%, 89%, and 86%, respectively). This implies that the top three methods of promotion are reaching the quitline’s target audience of tobacco users who want to quit in the next 30 days.

Additional data tables to accompany this section are included in Appendix C.

**Figure 25. How HWTF Callers Heard About Quitline NC (Tobacco users only, n=3448)
July 2007 – June 2008**

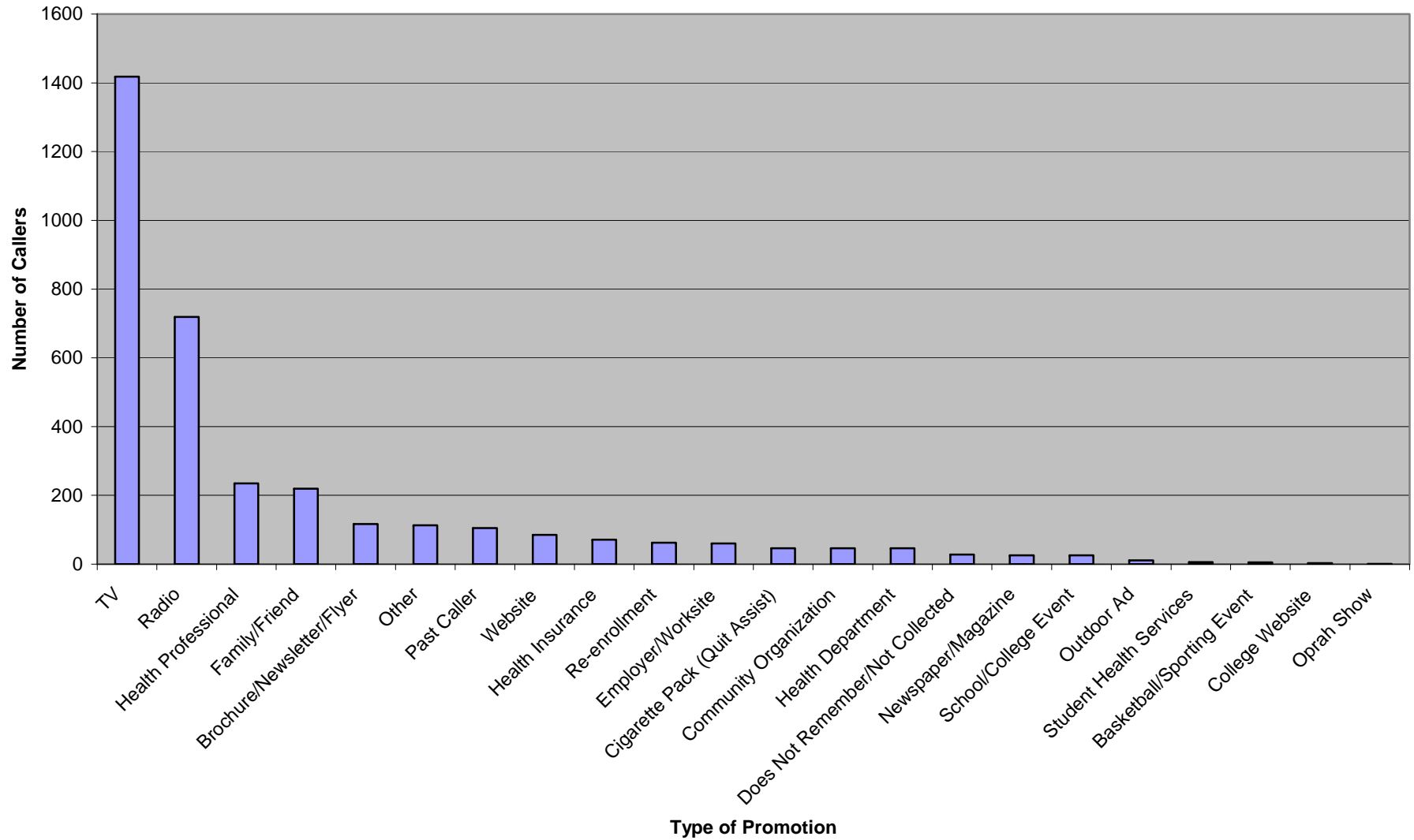


Figure 26. Top Ten “How Heard About” Responses for Primary Caregiver/School Employee Callers (n=1817)

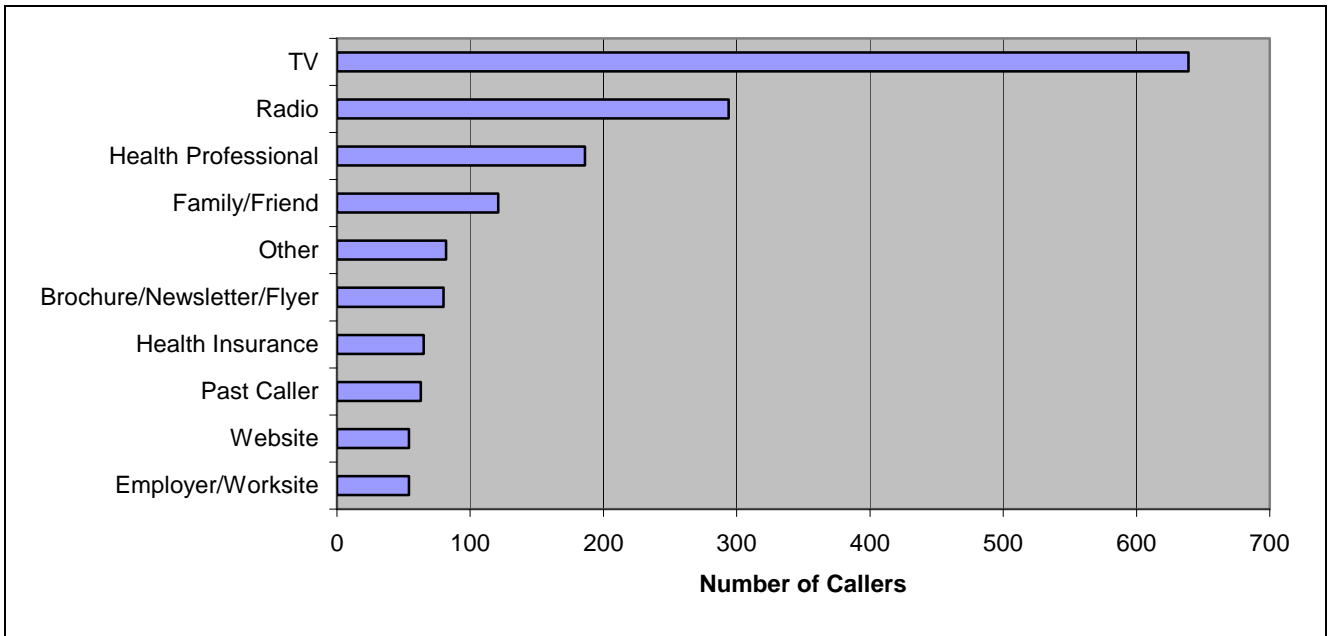


Figure 27. Top Ten “How Heard About” Responses for Young Adult Callers (n=1414)

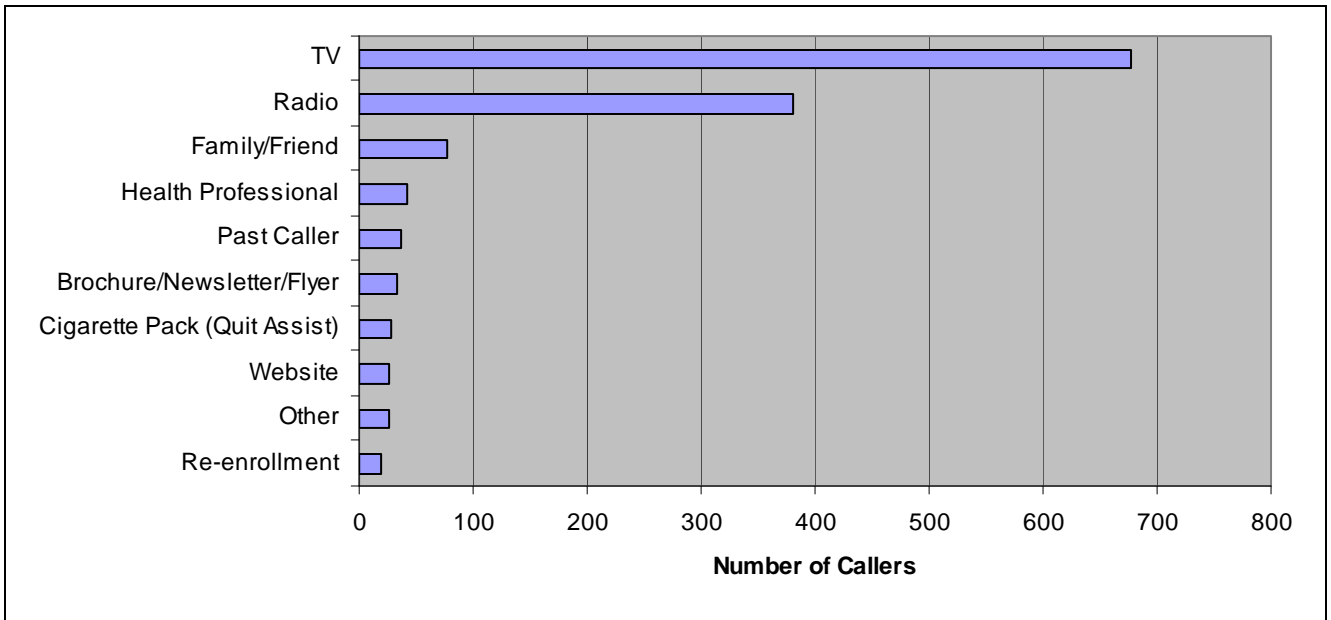
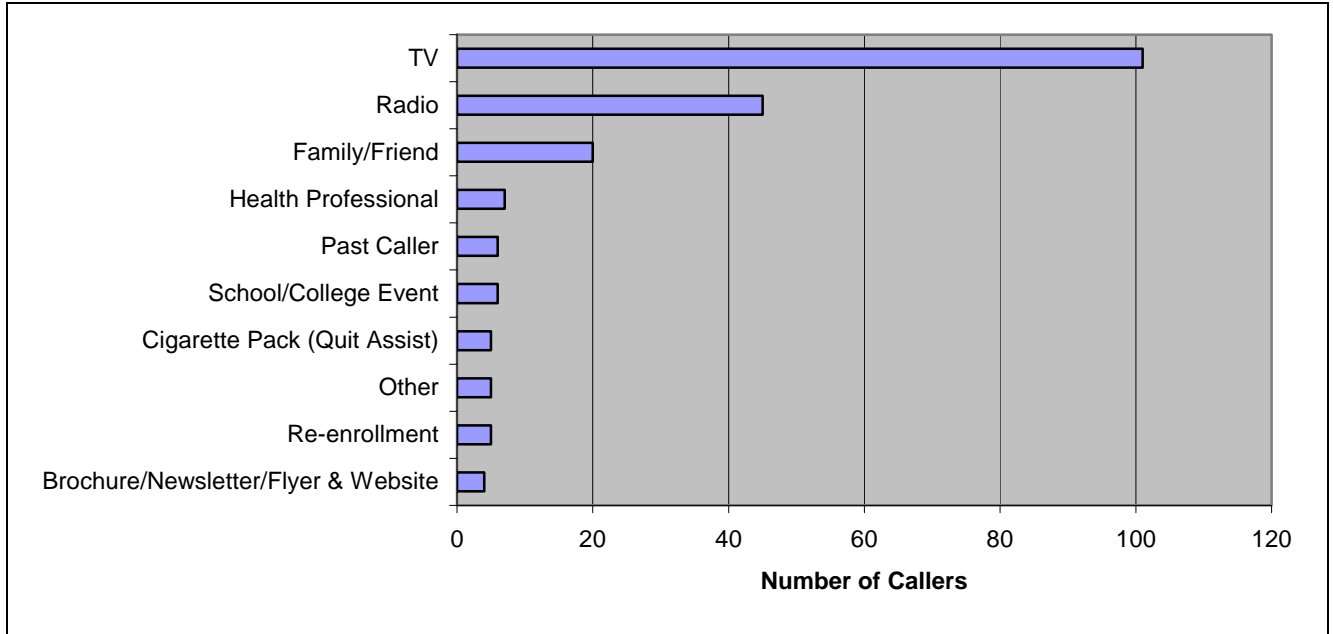


Figure 28. Top Ten “How Heard About” Responses for Youth Callers (n=217)



Figures 29 – 31 show trends in the number of HWTF callers who reported hearing about Quitline NC from one of the top three Quitline NC promotions (i.e., TV, radio, health professionals) during Year 3.

Television: Television ads from the “Call it Quits” campaign were aired across the state for one or two week segments in the months of September - November of 2007 and January and February of 2008. Higher numbers of callers reported hearing about the quitline from TV during these months. While the campaign targeted young adults, increases in callers reporting hearing about the quitline via TV occurred for all age groups during this month, suggesting that the campaign had some spillover influence to youth and adult callers. The number of callers who heard about the quitline via TV increased more substantially during the first three months of the TV promotions than during the final two months

Radio: Radio ads were aired across the state in one or two week segments in the months of September - December of 2007 and in January, February, and April of 2008. The number of HWTF callers who heard about the quitline via radio peaked in January, one of the months in which radio ads from the “Call it Quits” campaign aired. Higher numbers of young adult and primary caregiver/school employee callers reported hearing about the quitline via radio during the months in which “Call it Quits” radio ads aired compared to months in which ads did not air. Like the TV ads, the “Call it Quits” radio ads were targeted to young adults and appeared to have similar spillover influence on youth and adult callers, as evidenced by increased numbers of callers who heard about Quitline NC via radio during months in which radio ads aired.

Health Professionals: During Year 3, the HWTF led an effort to promote Quitline NC and the fax referral system to health professionals. Over 10,000 North Carolina physicians received fax referral promotional items as well as Quitline promotional items to distribute to their patients who smoke. Distribution of these items began in March 2008 and continued through the end of Year 3 in June 2008. HWTF Tobacco-Free Colleges grantees reported 38 meetings with campus healthcare providers to promote Quitline NC and the fax referral system during Year 3. Numbers of callers who heard about the quitline via health professionals increased sharply after the fax referral promotion began.

Figure 29. HWTF Callers Who Heard About Quitline NC via TV (n=1418)

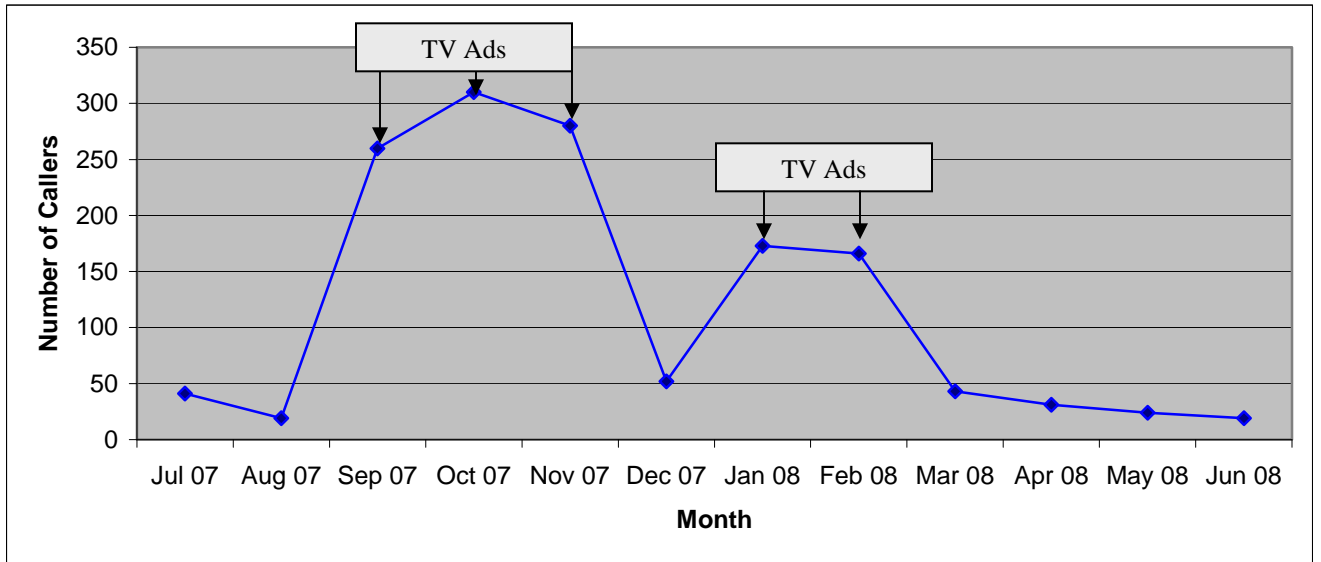


Figure 30. HWTF Callers Who Heard About Quitline NC via Radio (n=719)

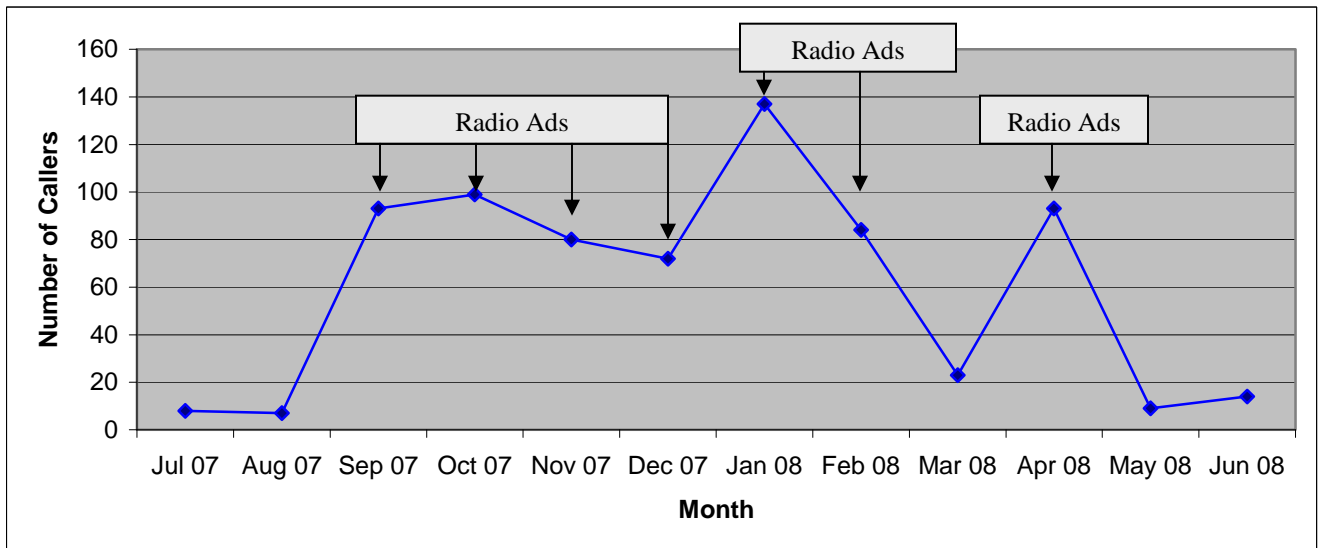
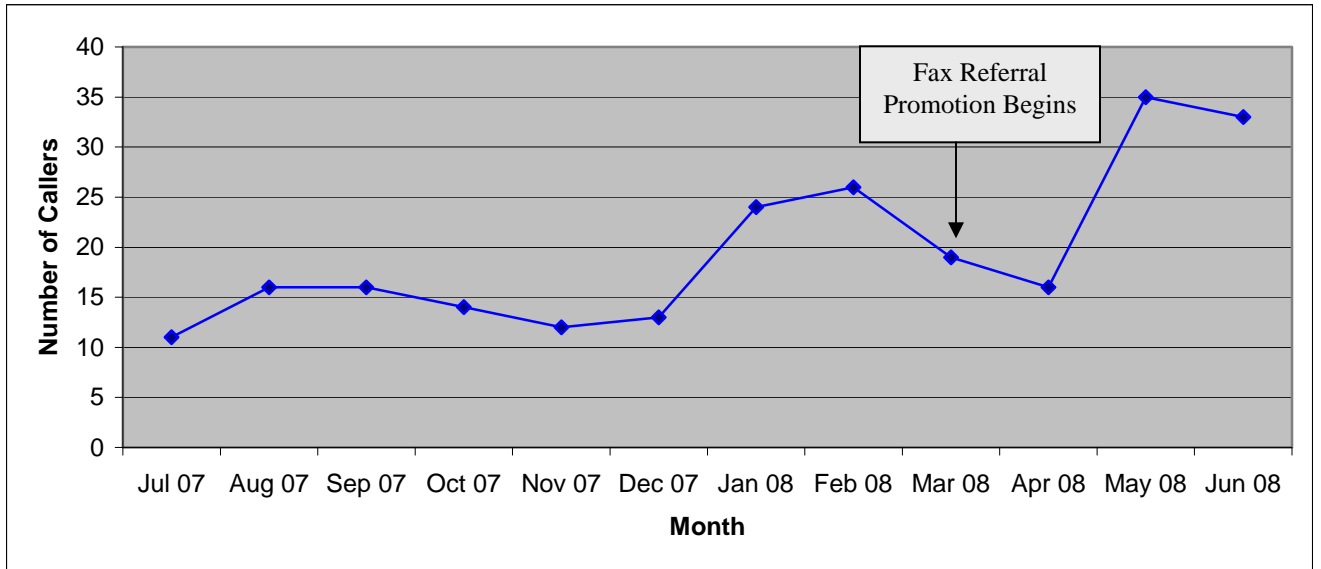


Figure 31. HWTF Callers Who Heard about Quitline NC via Health Professionals (n=235)



D.5. Satisfaction and Quit Rates

The Quitline NC vendor, Free & Clear, assesses Quitline NC callers' success with quitting and satisfaction with quitline services through an End-Of-Program (EOP) survey administered to a group of callers seven months post-registration. The survey is administered via telephone to a randomly selected sample of Quitline NC callers.

Quit rate and satisfaction results for Year 3 callers were summarized in the North Carolina Tobacco Use Quit Line Evaluation Report Year 03 published by Free & Clear in August 2007. UNC TPEP did not complete any additional analyses on EOP survey data. The following section summarizes results for HWTF callers documented in Free & Clear's Report.

For this evaluation, Free & Clear attempted to survey 1000 individuals who called Quitline NC between April 1, 2007 and October 31, 2007. Three hundred ninety-two callers (39%) completed the survey, 155 (39.5%) of whom were from HWTF-funded populations. In total, 83 youth were sampled with 19 (23%) completing the survey; 199 young adults were sampled with 58 (29%) completing the survey; and 200 primary caregivers/school employees were sampled with 78 (39%) completing the survey.

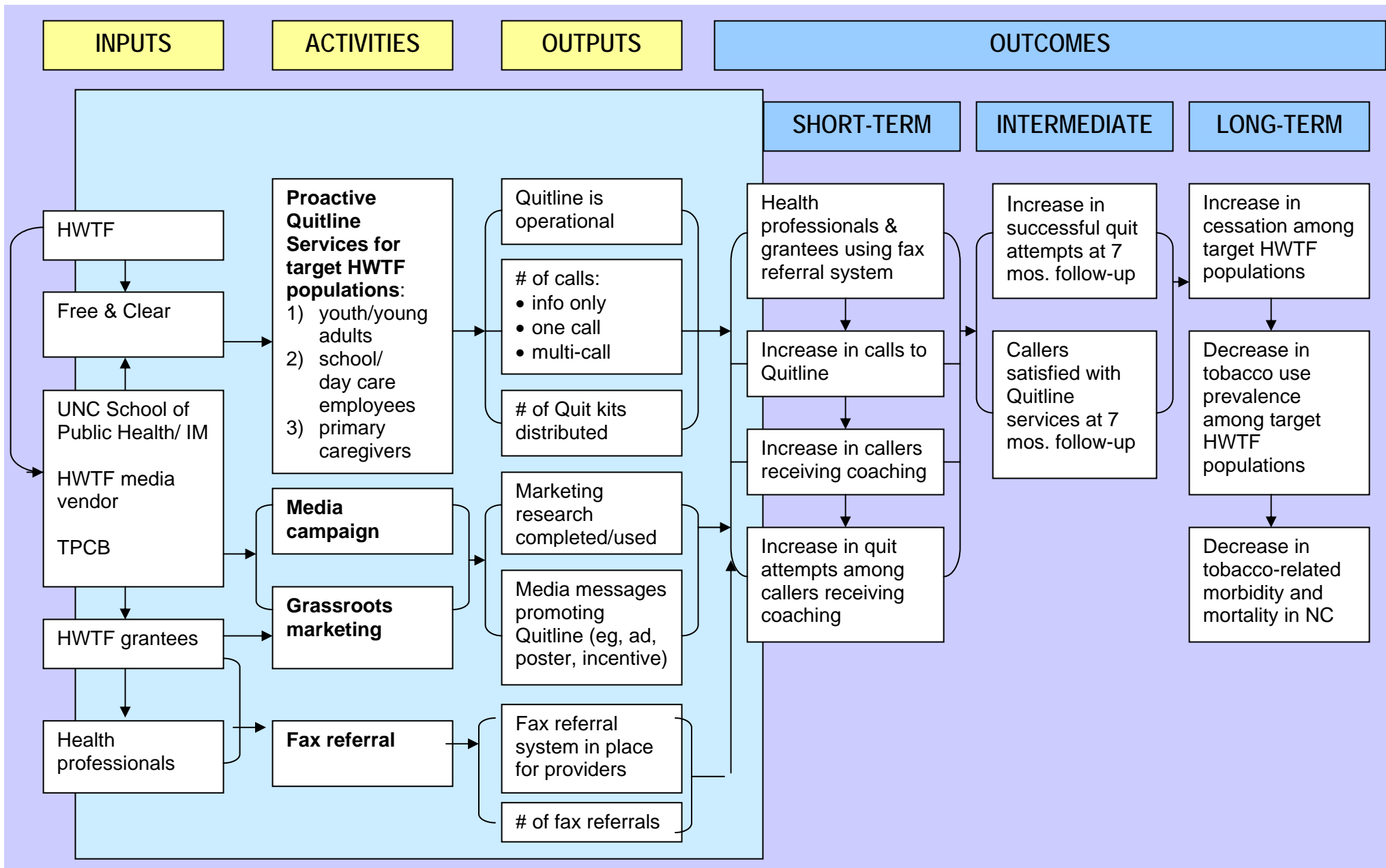
Table 6 summarizes satisfaction and quit rate data for HWTF-funded callers for Year 3. *Respondent quit rates* are calculated by dividing the number of respondents who report quitting by the total number of respondents to the EOP survey. *Intent-to-treat quit rates* are calculated by dividing the number of respondents who reported quitting by the total number of survey respondents and non-respondents (i.e. those in the sample who did not complete the survey), and are thus a more conservative estimate. Intent-to-treat analysis treats all non-respondents as current smokers. The overall satisfaction rate is defined as being "somewhat" to "very" satisfied with Quitline NC services.

Table 6. Summary of Satisfaction and Quit Rates for HWTF Callers from Free & Clear Report* (n=155)

	All HWTF Callers (n=155)		Youth (n=19)		Young Adults (n=58)		Primary Caregivers/ School Employees (n=78)	
	N	%	N	%	N	%	N	%
Satisfaction Rate								
Satisfied	132	94.3	17	100.0	47	92.2	68	94.4
Not Satisfied	8	5.7	0	0.0	4	7.8	4	5.6
Number of Serious Quit Attempts Lasting >24 hours								
0 time	13	10.4	0	0.0	4	8.9	9	13.6
1 time	26	20.8	4	28.6	10	22.2	12	18.2
2 times	39	31.2	4	28.6	15	33.3	20	30.3
3 times	24	19.2	5	35.7	7	15.6	12	18.2
4 or more	23	18.4	1	7.1	9	20.0	13	19.7
7-Day Point Prevalence Tobacco Abstinence Rates								
Respondent 7-Day Quit Rate	57	36.8	12	63.2	18	31.0	27	34.6
Intent-to-treat 7-Day Quit Rate	57	11.8	12	14.5	18	9.0	27	13.5
30-Day Point Prevalence Tobacco Abstinence Rates								
Respondent 30-Day Quit Rate	52	33.5	12	63.2	15	25.9	25	32.1
Intent-to-treat 30-Day Quit Rate	52	10.8	12	14.5	15	7.5	25	12.5

* Some respondents did not answer all questions. Free & Clear reports percentages calculated based on the number of respondents to each question.

Appendix A
Logic Model for the HWTF-funded Portion of Quitline NC (2006)



Appendix B
Data Tables for Characteristics of Callers

Table B-1. Callers by Age (Tobacco Users Only, n=6155)*

Age	Funding Source				Total	
	HWTF		DHHS			
	#	%	#	%	#	%
0 to 17 years old	217	6.3	0	0.0	217	3.5
18 to 24 years old	1414	41.0	0	0.0	1414	23.0
25 to 34 years old	734	21.3	626	23.1	1359	22.1
35 to 44 years old	590	17.1	477	17.6	1067	17.3
45 to 54 years old	343	9.9	773	28.6	1116	18.1
55 to 64 years old	126	3.7	570	21.1	696	11.3
65 years and older	24	0.7	261	9.6	285	4.6
Total	3448	100.0	2707	100.0	6155	100.0

* 208 DHHS callers missing age data

Table B-2. Callers by Gender (Tobacco Users Only, n=6362)

Gender	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Female	102	47.0	691	48.9	1091	64.7	106	80.3	1556	53.4	3546	55.7
Male	115	53.0	723	51.1	593	35.2	26	19.7	1272	43.7	2729	42.9
Other*	0	0.0	0	0.0	1	0.1	0	0.0	1	0.0	1	0.0
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Refused or not collected.

Table B-3. Callers by Pregnancy Status (Female Tobacco Users Only, n=3546)

Pregnancy Group	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Not Asked	93	91.2	564	81.6	1010	92.6	105	99.1	1494	96.0	3266	92.1
Planning Pregnancy	3	2.9	43	6.2	31	2.8	1	0.9	31	2.0	109	3.1
Pregnant	6	5.9	78	11.3	38	3.5	0	0.0	31	2.0	153	4.3
Breast Feeding	0	0.0	6	0.9	12	1.1	0	0.0	0	0.0	18	0.5
Total	102	100.0	691	100.0	1091	100.0	106	100.0	1556	100.0	3546	100.0

Table B-4. Callers by Ethnicity (Tobacco Users Only, n=6362)

Ethnicity	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Hispanic	16	7.4	101	7.1	133	7.9	0	0.0	139	4.8	389	6.1
Non-Hispanic	192	88.5	1254	88.7	1509	89.6	128	97.0	2486	85.3	5569	87.5
Other*	9	4.1	59	4.2	43	2.6	4	3.0	289	9.9	404	6.4
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Refused, does not know, or not collected.

Table B-5. Callers by Race (Tobacco Users Only, n=6362)

Race	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
White	141	65.0	814	57.6	810	49.9	67	50.8	1638	56.2	3500	55.0
Black or African American	48	22.1	370	26.2	597	35.4	53	40.2	745	25.6	1813	28.5
Other Race	12	5.5	125	8.8	143	8.5	4	3.0	159	5.5	443	7.0
American Indian or Alaskan Native	4	1.8	27	1.9	44	2.6	3	2.3	62	2.1	140	2.2
Asian	2	0.9	8	0.6	6	0.4	0	0.0	14	0.5	30	0.5
Native Hawaiian/Other Pacific Islander	0	0.0	6	0.4	5	0.3	1	0.8	2	0.1	14	0.2
Other*	10	4.6	94	4.5	50	3.0	4	3.0	294	10.1	422	6.6
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Refused, does not know, or not collected.

Table B-6. Callers by Language (Tobacco Users Only, n=6362)

Language	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
English	216	99.5	1367	96.7	1595	94.7	132	100.0	2820	96.8	6130	96.4
Spanish	1	0.5	47	3.3	88	5.2	0	0.0	93	3.2	229	3.6
Other	0	0.0	0	0.0	2	0.1	0	0.0	1	0.0	3	0.0
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

Table B-7. Callers by Highest Level of Education Attained (Tobacco Users Only, n=6362) *

Highest Level of Education	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Less than grade 9	0	0.0	1392	98.4	69	4.1	2	1.5	135	4.6	206	3.2
Grade 9-11, no degree	0	0.0	6	0.4	214	12.7	4	3.0	344	11.8	568	8.9
High School degree	0	0.0	6	0.4	452	26.8	33	25.0	687	23.6	1178	18.5
GED	0	0.0	0	0.0	86	5.1	5	3.8	118	4.0	209	3.3
Some College or Univ.	0	0.0	6	0.4	516	30.6	36	27.3	786	27.0	1344	21.1
College or Univ degree	0	0.0	4	0.3	301	17.9	47	35.6	541	18.6	893	14.0
Other**	217	100.0	1392	98.4	47	2.8	5	3.8	303	10.4	1964	30.9
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* From Intake Question asked primarily to callers age 25 and older. See Sections D.2.b and D.2.c for accurate young adult and youth data

**Refused or not collected.

Table B-8. Callers Responding Yes to Having a Chronic Condition* (Tobacco Users Only, n=6069) *

Chronic Condition	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Asthma	35	16.7	220	16.0	148	8.9	10	7.7	177	6.6	590	9.7
Chronic Obstructive Pulmonary Disease	1	0.5	11	0.8	66	4.0	6	4.6	186	6.9	270	4.4
Coronary Artery Disease	4	1.9	4	0.3	29	1.7	4	3.1	102	3.8	143	2.4
Diabetes	0	0.0	21	1.5	80	4.8	8	6.2	177	6.6	286	4.7
Multiple Diseases	1	0.5	22	1.6	127	7.6	6	4.6	390	14.5	546	9.0
None	168	80.4	1082	78.9	1203	72.2	96	73.8	1636	60.8	4185	69.0
Not Collected	0	0.0	11	0.8	13	0.8	0	0.0	25	0.9	49	0.8
Total	209	100.0	1371	100.0	1666	100.0	130	100.0	2693	100.0	6069	100.0

* 293 Callers Missing Information

Table B-9. Callers by Type of Health Insurance (Tobacco Users Only, n=6362)

NC Health Plan	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Uninsured	0	0.0	689	48.7	559	33.2	18	13.6	810	27.8	2076	32.6
Medicaid	2	0.9	214	15.1	294	17.4	2	1.5	393	13.5	905	14.2
Blue Cross/Blue Shield	0	0.0	142	10.0	173	10.3	4	3.0	282	9.7	601	9.4
Other Health Plan	1	0.5	163	11.5	216	12.8	9	6.8	338	11.6	727	11.4
Medicare	0	0.0	10	0.7	76	4.5	4	3.0	375	12.9	465	7.3
United Health Care	0	0.0	29	2.1	48	2.8	2	1.5	61	2.1	140	2.2
Cigna	0	0.0	21	1.5	48	2.8	1	0.8	52	1.8	122	1.9
State Employees Plan	0	0.0	50	3.5	167	9.9	91	68.9	283	9.7	591	9.3
Aetna	0	0.0	16	1.1	43	2.6	0	0.0	26	0.9	85	1.3
Well Path	0	0.0	3	0.2	13	0.8	0	0.0	10	0.3	26	0.4
First Carolina Care	0	0.0	1	0.1	0	0.0	0	0.0	3	0.1	4	0.1
Other*	214	98.6	76	5.4	48	2.8	1	0.8	281	9.6	620	9.7
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Refused, does not know, or not collected.

Table B-10. Callers by NC County (Tobacco Users Only, n=6362)

County	HWTF Status				DHHS	Total	
	Youth	Young Adults	Primary Caregivers	School Employees		#	%
ALAMANCE	6	27	28	1	49	111	1.7
ALEXANDER	0	7	8	0	9	24	0.4
ALLEGHANY	2	1	4	0	3	10	0.2
ANSON	0	7	6	0	9	22	0.3
ASHE	1	6	2	1	4	14	0.2
AVERY	1	4	1	0	7	13	0.2
BEAUFORT	0	6	11	0	13	30	0.5
BERTIE	0	1	0	0	4	5	0.1
BLADEN	0	1	9	1	12	23	0.4
BRUNSWICK	2	7	22	0	27	58	0.9
BUNCOMBE	2	16	24	3	67	112	1.8
BURKE	0	9	11	1	34	55	0.9
CABARRUS	6	26	30	3	54	119	1.9
CALDWELL	1	3	12	1	20	37	0.6
CAMDEN	0	1	4	0	0	5	0.1
CARTERET	1	5	15	0	33	54	0.8
CASWELL	0	3	6	1	8	18	0.3
CATAWBA	4	16	33	0	38	91	1.4
CHATHAM	2	5	10	2	25	44	0.7
CHEROKEE	0	1	0	0	4	5	0.1
CHOWAN	0	2	7	1	5	15	0.2
CLAY	0	1	1	0	2	4	0.1
CLEVELAND	3	17	11	3	21	55	0.9
COLUMBUS	2	6	11	0	18	37	0.6
CRAVEN	4	16	19	3	37	79	1.2
CUMBERLAND	14	58	72	4	72	220	3.5
CURRITUCK	0	0	1	2	6	9	0.1
DARE	1	2	4	0	6	13	0.2
DAVIDSON	8	22	20	2	29	81	1.3
DAVIE	0	3	2	0	10	15	0.2
DUPLIN	4	7	7	0	9	27	0.4
DURHAM	1	44	70	8	104	227	3.6
EDGECOMBE	2	10	13	1	20	46	0.7
FORSYTH	6	55	75	11	113	260	4.1
FRANKLIN	2	7	13	0	17	39	0.6
GASTON	6	25	31	1	46	109	1.7
GATES	0	0	1	0	2	3	0.0
GRAHAM	0	1	1	0	2	4	0.1
GRANVILLE	2	7	6	1	16	32	0.5
GREENE	0	2	4	0	6	12	0.2
GUILFORD	12	117	93	6	160	388	6.1
HALIFAX	0	8	13	2	25	48	0.0

Table B-10 contd.	HWTF Status				DHHS	Total	
	Youth	Young Adults	Primary Caregivers	School Employees		#	%
HARNETT	3	31	19	0	28	81	1.3
HAYWOOD	1	8	3	0	17	29	0.5
HENDERSON	0	9	9	1	16	35	0.6
HERTFORD	0	2	4	0	9	15	0.2
HOKE	1	5	5	1	7	19	0.3
HYDE	0	0	3	0	2	5	0.1
IREDELL	3	22	17	1	36	79	1.2
JACKSON	1	2	9	1	9	22	0.3
JOHNSTON	3	19	37	2	44	105	1.7
JONES	0	3	1	0	1	5	0.1
LEE	2	11	10	1	21	45	0.7
LENOIR	1	7	24	0	30	62	1.0
LINCOLN	0	12	14	0	17	43	0.7
MACON	1	2	5	0	1	9	0.1
MADISON	1	1	2	0	3	7	0.1
MARTIN	1	3	7	1	11	23	0.4
MCDOWELL	0	4	5	0	15	24	0.4
MECKLENBURG	18	163	170	11	299	661	10.4
MITCHELL	0	1	3	3	0	7	0.1
MONTGOMERY	0	7	7	0	7	21	0.3
MOORE	2	8	17	0	19	46	0.7
NASH	2	16	23	4	20	65	1.0
NEW HANOVER	2	41	26	8	74	151	2.4
NORTHAMPTON	1	2	1	0	4	8	0.1
ONSLow	2	29	18	3	37	89	1.4
ORANGE	3	30	24	0	43	100	1.6
PAMLICO	0	2	2	0	4	8	0.1
PASQUOTANK	0	0	1	1	3	5	0.1
PENDER	1	13	5	1	7	27	0.4
PERQUIMANS	0	0	2	0	2	4	0.1
PERSON	0	6	10	0	24	40	0.6
PITT	4	33	29	2	63	131	2.1
POLK	0	0	1	0	9	10	0.2
RANDOLPH	4	18	25	1	29	77	1.2
RICHMOND	2	3	10	1	16	32	0.5
ROBESON	3	9	31	2	27	72	1.1
ROCKINGHAM	0	10	16	0	21	47	0.7
ROWAN	5	24	22	3	37	91	1.4
RUTHERFORD	2	11	6	5	21	45	0.7
SAMPSON	0	9	14	3	17	43	0.7
SCOTLAND	0	6	5	0	9	20	0.3
STANLY	2	12	14	1	11	40	0.6
STOKES	0	3	9	0	18	30	0.5
SURRY	2	7	12	3	16	40	0.6

Table B-10 contd.	HWTF Status				DHHS	Total	
	Youth	Young Adults	Primary Caregivers	School Employees		#	%
SWAIN	0	2	2	0	1	5	0.1
TRANSYLVANIA	1	2	3	0	4	10	0.2
TYRRELL	0	0	1	0	5	6	0.1
UNION	3	19	39	1	19	81	1.3
VANCE	1	4	10	0	21	36	0.6
WAKE	12	88	150	10	258	518	8.1
WARREN	0	2	3	0	7	12	0.2
WASHINGTON	0	3	2	0	5	10	0.2
WATAUGA	1	9	2	0	13	25	0.4
WAYNE	3	21	24	0	34	82	1.3
WILKES	0	10	10	0	20	40	0.6
WILSON	2	9	14	1	25	51	0.8
YADKIN	2	5	7	0	18	32	0.5
YANCEY	1	0	2	0	2	5	0.1
Unknown	23	73	28	1	234	359	5.6
Total	217	1414	1685	132	2914	6362	100.0

Table B-11. Callers by Age Started Using Tobacco (Tobacco Users Only, n=6054)*

Start Age	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees		#	%	#	%
	#	%	#	%	#	%	#	%	#	%	#	%
0-11 years old	42	20.0	110	8.1	116	7.0	2	1.5	163	6.1	433	7.2
12-17 years old	167	79.5	972	71.3	972	58.4	53	40.8	1445	53.8	3609	59.6
18-24 years old	0	0.0	272	20.0	450	27.1	50	38.5	775	28.8	1547	25.6
25 years old or older	0	0.0	1	0.1	116	7.0	24	18.5	264	9.8	405	6.7
Other*	1	0.5	8	0.6	9	0.5	1	0.8	41	1.5	60	1.0
Total	210	100.0	1363	100.0	1663	100.0	130	100.0	2688	100.0	6054	100.0

* 308 callers missing data

** Refused or not collected.

Table B-12. Callers by Type of Tobacco Use (Tobacco Users Only, n=6362)

Type of Tobacco Use	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Cigarette	175	80.6	1204	85.1	1584	94.0	124	93.9	2515	86.3	5602	88.1
Multiple*	29	13.4	131	9.3	36	2.1	2	1.5	95	3.3	293	4.6
Smokeless	5	2.3	18	1.3	29	1.7	3	2.3	46	1.6	101	1.6
Cigar	0	0.0	12	0.8	15	0.9	0	0.0	24	0.8	51	0.8
Other type of tobacco	0	0.0	0	0.0	0	0.0	0	0.0	3	0.1	3	0.0
Unknown	8	3.7	48	3.4	21	1.2	3	2.3	223	7.7	303	4.8
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Callers who reported using cigarettes and some other form of tobacco were categorized as multiple tobacco users only.

Table B-13. Callers by Cigarette Frequency (Cigarette Users Only, n=5891)

Cigarette Use Frequency	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Every day	181	88.7	1230	92.2	1474	91.2	114	90.5	2259	86.6	5258	89.3
Some days	18	8.8	46	3.4	50	3.1	8	6.3	119	4.6	241	4.1
Other*	5	2.5	58	4.3	93	5.8	4	3.2	232	8.9	392	6.7
Total	204	100.0	1334	100.0	1617	100.0	126	100.0	2610	100.0	5891	100.0

*Refused, not collected, and not at all responses.

Table B-14. Callers by Stage of Readiness to Change (Tobacco Users Only, n=6362)

Stage	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Precontemplation	2	0.9	7	0.5	2	0.1	0	0.0	10	0.3	21	0.3
Contemplation	5	2.3	38	2.7	31	1.8	1	0.8	69	2.4	144	2.3
Preparation	196	90.3	1250	88.4	1492	88.5	124	93.9	2328	79.9	5390	84.7
Action	6	2.8	62	4.4	128	7.6	3	2.3	253	8.7	452	7.1
Maintenance	0	0.0	1	0.1	4	0.2	1	0.8	21	0.7	27	0.4
Unknown	8	3.7	56	4.0	28	1.7	3	2.3	233	8.0	328	5.2
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

Table B-15. Callers by Type of Service Requested (Tobacco Users Only, n=6362)

Call Program	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
One-Call Program	64	29.5	500	35.4	533	31.6	44	33.3	883	30.3	2024	31.8
Multi-Call Program	146	67.3	846	59.8	1116	66.2	84	63.6	1767	60.6	3959	62.2
General Questions	7	3.2	53	3.7	24	1.4	3	2.3	225	7.7	312	4.9
Materials Only	0	0.0	12	0.8	5	0.3	1	0.8	35	1.2	53	0.8
All Transfer Types	0	0.0	3	0.2	7	0.4	0	0.0	4	0.1	14	0.2
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

Table B-16. Callers by First Call to Quitline NC in 12 Months (Tobacco Users Only, n=6362)

Stage	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Yes	205	94.5	1321	93.4	1521	90.3	121	91.7	2531	86.9	5699	89.6
No	12	5.5	88	6.2	116	6.9	7	5.3	317	10.9	540	8.5
Not Collected	0	0.0	5	0.4	48	2.8	4	3.0	66	2.3	123	1.9
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

Table B-17. Youth and Young Adult Callers Who Currently Attend School (Tobacco Users Only, n=1631)

Currently Attending School?	HWTF Status				Total	
	Youth		Young Adults			
	#	%	#	%	#	%
Yes	167	77.0	451	31.9	618	37.9
No	40	18.4	897	63.4	937	57.4
Other*	10	4.6	66	4.7	76	4.7
Total	217	100.0	1414	100.0	1631	100.0

* Refused and not collected.

Table B-18. Current School Attended by Youth and Young Adult Callers (Tobacco Users Only, n=618)*

Current School Level	HWTF Status				Total	
	Youth		Young Adults			
	#	%	#	%	#	%
College	6	3.6	332	73.6	338	54.7
High School	144	86.2	109	24.2	253	40.9
Middle School	15	9.0	4	0.9	19	3.1
Grade School	1	0.6	4	0.9	5	0.8
Refused	1	0.6	2	0.4	1	0.5
Total	167	100.0	451	100.0	618	100.0

* Includes callers under 24 years old responding "Yes" to "Are you Currently Attending School?"

Table B-19. Youth and Young Adult Callers Who Are Currently Working (Tobacco Users Only, n=1631)

Currently Working?	HWTF Status				Total	
	Youth		Young Adults			
	#	%	#	%	#	%
Yes	80	36.9	824	58.3	904	55.4
No	125	57.6	505	35.7	630	38.6
Other*	12	5.5	85	6.0	97	5.9
Total	217	100.0	1414	100.0	1631	100.0

Unknown, does not know, refused, and not collected.

*

Table B-20. Type of Employment for Youth and Young Adult Callers (Tobacco Users Only, n=904)*

Current Type of Employment	HWTF Status				Total	
	Youth		Young Adults			
	#	%	#	%	#	%
Part Time	64	80.0	243	29.5	307	34.0
Full Time	16	20.0	581	70.5	597	66.0
Total	80	100.0	824	100.0	904	100.0

* Includes callers under 24 years old responding "Yes" to "Are you Currently Working?"

Appendix C
Data Tables for Fax Referral Service

Table C-1. How Callers Entered the Quitline (Tobacco Users Only, n=6362)

	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Fax Referral	3	1.4	14	1.0	100	5.9	5	3.8	143	4.9	265	4.2
Inbound English Phone Call	211	97.2	1359	96.1	1496	88.8	127	96.2	2641	90.6	5834	91.7
Inbound Spanish Phone Call	0	0.0	28	2.0	61	3.6	0	0.0	55	1.9	144	2.3
Registration Short Form	0	0.0	3	0.2	2	0.1	0	0.0	8	0.3	13	0.2
Client Services	1	0.5	3	0.2	5	0.3	0	0.0	5	0.2	14	0.2
Evaluation Call Transfer	0	0.0	2	0.1	6	0.4	0	0.0	7	0.2	15	0.2
Re-enrollment	2	0.9	4	0.3	9	0.5	0	0.0	26	0.9	41	0.6
Warm Transfer from Partner	0	0.0	1	0.1	5	0.3	0	0.0	25	0.9	31	0.5
Program Lookup Tool	0	0.0	0	0.0	0	0.0	0	0.0	3	0.1	3	0.0
Not Asked	0	0.0	0	0.0	1	0.1	0	0.0	1	0.0	2	0.0
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

Table C-2. Number of Fax Referrals by Month and Funding Source (Tobacco Users Only, n=265)

Month	Funding Source				Total	
	HWTF		DHHS			
	#	%	#	%	#	%
JUL 07	7	5.7	6	4.2	13	4.9
AUG 07	5	4.1	7	4.9	12	4.5
SEP 07	0	0.0	7	4.9	7	2.6
OCT 07	9	7.4	8	5.6	17	6.4
NOV 07	6	4.9	6	4.2	12	4.5
DEC 07	4	3.3	15	10.5	19	7.2
JAN 08	10	8.2	8	5.6	18	6.8
FEB 08	10	8.2	6	4.2	16	6.0
MAR 08	12	9.8	15	10.5	27	10.2
APR 08	12	9.8	30	21.0	42	15.8
MAY 08	24	19.7	17	11.9	41	15.5
JUN 08	23	18.9	18	12.6	41	15.5
Total	122	100.0	143	100.0	265	100.0

Appendix D
Data Tables for Promotion

Table D-1. How Year 1 Callers Heard About Quitline NC (Tobacco Users Only, n=6362)

How Heard About Quitline	HWTF Status								DHHS		Total	
	Youth		Young Adults		Primary Caregivers		School Employees					
	#	%	#	%	#	%	#	%	#	%	#	%
Basketball/sporting event	0	0.0	0	0.0	4	0.2	1	0.8	3	0.1	8	0.1
Brochure/Newsletter/Flyer	4	1.8	33	2.3	61	3.6	19	14.4	142	4.9	259	4.1
Cigarette Pack (Quit Assist)	5	2.3	28	2.0	13	0.8	0	0.0	36	1.2	82	1.3
College Website	0	0.0	2	0.1	1	0.1	0	0.0	6	0.2	9	0.1
Community Organization	1	0.5	12	0.8	28	1.7	5	3.8	106	3.6	152	2.4
Employer/Worksite	0	0.0	6	0.4	43	2.6	11	8.3	60	2.1	120	1.9
Family/Friend	20	9.2	78	5.5	117	6.9	4	3.0	176	6.0	395	6.2
Health Department	2	0.9	9	0.6	30	1.8	5	3.8	60	2.1	106	1.7
Health Insurance	1	0.5	5	0.4	41	2.4	24	18.2	110	3.8	181	2.8
Health Professional	7	3.2	42	3.0	177	10.5	9	6.8	355	12.2	590	9.3
Newspaper/Magazine	1	0.5	12	0.8	11	0.7	2	1.5	48	1.6	74	1.2
Oprah Show	0	0.0	0	0.0	1	0.1	0	0.0	1	0.0	2	0.0
Other Type of Promotion	5	2.3	26	1.8	73	4.3	9	6.8	148	5.1	261	4.1
Outdoor Ad	1	0.5	3	0.2	7	0.4	0	0.0	13	0.4	24	0.4
Past Caller	6	2.8	36	2.5	60	3.6	3	2.3	188	6.5	293	4.6
Radio	45	20.7	380	26.9	289	17.2	5	3.8	298	10.2	1017	16.0
Re-enrollment	5	2.3	20	1.4	33	2.0	4	3.0	88	3.0	150	2.4
School/College Event	6	2.8	6	0.4	13	0.8	1	0.8	21	0.7	47	0.7
Student Health Services	1	0.5	1	0.1	3	0.2	1	0.8	3	0.1	9	0.1
TV/Commercial	97	44.7	663	46.9	600	35.6	19	14.4	819	28.1	2198	34.5
TV/News	4	1.8	15	1.1	18	1.1	2	1.5	33	1.1	72	1.1
Website	4	1.8	27	1.9	48	2.8	6	4.5	74	2.5	159	2.5
Other*	2	0.9	10	0.7	14	0.8	2	1.5	126	4.3	153	2.4
Total	217	100.0	1414	100.0	1685	100.0	132	100.0	2914	100.0	6362	100.0

* Refused, does not remember, and not collected.

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