



Tobacco Cessation Program Evaluation: 2003

North Dakota State University

North Dakota State Data Center at
North Dakota State University
Fargo, North Dakota

FORWARD

The research presented in this report is part of a larger research effort focused on tobacco use on the campus of North Dakota State University. There were three phases to the project. First, surveys were sent to students, faculty, administration and staff on the campus of North Dakota State University to assess their tobacco use and their opinions of issues regarding tobacco and secondhand smoke. The findings from these studies are reported in the following documents:

Student Tobacco and Secondhand Smoke Survey: 2002
Tobacco and Secondhand Smoke Survey of Administration, Faculty, and Staff: 2002

Second, a media campaign was launched on campus to increase the campus community's awareness of tobacco use and its consequences. In addition, information was distributed about a tobacco cessation program, sponsored by the Student Health Service and Wellness Education. Follow-up surveys of students, faculty, administration and staff on the campus of North Dakota State University were conducted to determine how successful the media campaign was in disseminating information to the campus community. The findings from these studies are reported in the following documents:

Student Tobacco Awareness Campaign Evaluation: 2003
Tobacco Awareness Campaign Evaluation for Administration, Faculty, and Staff: 2003

The final phase of the project centered on an evaluation of participants of the cessation program and the findings are presented in this document. The cessation program was conducted by staff at Fargo Cass Public Health. Since the cessation program just started in late spring, these results must be viewed as preliminary. Nonetheless, they do provide insight into the early stages of the program.

Acknowledgments

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INTRODUCTION

After receiving Tobacco Settlement Dollars, Fargo Cass Public Health approached the Student Health Service and Wellness Education at North Dakota State University (NDSU) about funding a program on campus in 2002-2003. The program had three main components: an assessment of tobacco use and opinions of issues regarding tobacco and secondhand smoke, a counter-marketing campaign, and a tobacco cessation program. This report is a preliminary overview of the success of the tobacco cessation program which began in March 2003. As such, the findings of this report offer insight into participants who have been with the program for less than two months. Other evaluations of this program are expected to follow as it is an on-going effort.

Study Objective

The objective of this report is to gain insight into the preliminary success of the aforementioned tobacco cessation program and enable decision-makers to determine how to tailor the program to the needs of the campus community. This program has been an exciting joint effort between the staff at the Student Health Service and Wellness Education at NDSU and the tobacco prevention staff at Fargo Cass Public Health.

Methodology

The media campaign launched at NDSU exposed the campus community to the tobacco cessation program sponsored by the Student Health Service and Wellness Education on campus. Members of the campus community who used tobacco and desired to stop were encouraged to participate and contact the Student Health Service and Wellness Education staff.

The tobacco cessation program undertaken at NDSU was based on the Mayo Model of Cessation. It typically consists of five counseling sessions which are conducted by a cessation counselor from Fargo Cass Public Health. This study is a preliminary examination of the early participants in the tobacco cessation program. Data from 54 campus participants are included in this report. The relapse status of 12 participants was not reported which may impact conclusions drawn from Tables 12 through 20. It is important to recognize that the results should be viewed as a preliminary glimpse into a long-term process. Conclusions drawn from these results should be used with those limitations in mind.

History of Tobacco Use

- ▶ More than 46 percent of program participants were less than 18 years old when they started using tobacco. More than one-third of program participants were 18 to 20 years old when they started using tobacco (35.2 percent) (Table 1).

Table 1. Program Participants by Age They Started Using Tobacco

Age program participant started using tobacco	Program participants	
	Number	Percent
Less than 18 years old	25	46.3
18 to 20 years old	19	35.2
21 years or older	6	11.1
Do not know	4	7.4
Total	54	100.0

- ▶ Approximately 93 percent of program participants indicated they smoke cigarettes as opposed to using other forms of tobacco (Table 2).

Table 2. Program Participants by Type of Tobacco Used

Type of tobacco used	Program participants	
	Number	Percent
Cigarette	50	92.6
Chewing tobacco	3	5.6
Cigarette/chewing tobacco	1	1.9
Total	54	100.0

- ▶ A majority of cigarette smokers (54.9 percent) reported they smoke more than one pack of cigarettes a day (Table 3).

Table 3. Cigarette Smokers by Number of Packs of Cigarettes Smoked Per Day

Number of packs smoked per day (One pack=20 cigarettes)	Cigarette smokers	
	Number	Percent
Less than one pack a day	23	45.1
More than one pack a day	28	54.9
Total	51	100.0

- ▶ Only three program participants reported that chewing tobacco was the only form of tobacco they used (Table 4).

Table 4. Chewing Tobacco Users by Number of Cans Used Per Week

Number of cans used per week	Chewing tobacco users	
	Number	Percent
2 cans per week	1	33.3
7 cans per week	1	33.3
10 cans per week	1	33.3
Total	3	100.0

- ▶ The majority of program participants reported they have used tobacco for 20 years or less (55.1 percent). Nearly 45 percent of program participants reported they have used tobacco for more than 20 years (Table 5).

Table 5. Program Participants by Number of Years Tobacco Has Been Used

Number of years tobacco has been used	Program participants	
	Number	Percent
1 to 10 years	18	36.7
11 to 20 years	9	18.4
21 to 30 years	10	20.4
More than 30 years	12	24.5
Total	49	100.0

- ▶ The vast majority of program participants have attempted to quit using tobacco at least once (90.7 percent). Approximately one in five program participants have attempted to quit using tobacco at least 11 times (22.2 percent). (Table 6).

Table 6. Program Participants by Number of Attempts to Quit Using Tobacco

Number of attempts to quit	Program participants	
	Number	Percent
Never	5	9.3
1 to 10 attempts	37	68.5
More than 10 attempts	12	22.2
Total	54	100.0

- ▶ Two-thirds of program participants reported they had used the patch as a method to stop using tobacco while approximately one-third reported using either Zyban or gum (33.3 percent and 31.5 percent, respectively) (Table 7).

Table 7. Program Participants by Method Used to Quit Using Tobacco

Method used to quit	Program participants	
	Number	Percent*
Patch	36	66.7
Zyban	18	33.3
Gum	17	31.5
Lozenge	3	5.6
Nasal spray	2	3.7
Inhaler	0	0.0

*Percents do not add to 100.0 due to multiple responses.

- ▶ More than 44 percent of program participants reported they had relapsed since they quit using tobacco. However, one-third of program participants indicated they had not relapsed (Table 8).

Table 8. Program Participants by Whether They Experienced a Relapse

Whether program participant experienced a relapse	Program participants	
	Number	Percent
Yes	24	44.4
No	18	33.3
Do not know/No information available	12	22.2
Total	54	100.0

Demographics of Program Participants

- ▶ Approximately 43 percent of program participants are less than 30 years old (Table 9).

Table 9. Program Participants by Age

Program participants by age	Program participants	
	Number	Percent
Less than 30 years old	23	42.6
30 to 49 years old	17	31.5
50 years or older	14	25.9
Total	54	100.0

- ▶ A majority of program participants are male (57.4 percent) (Table 10).

Table 10. Program Participants by Gender

Program participants by gender	Program participants	
	Number	Percent
Male	31	57.4
Female	23	42.6
Total	54	100.0

- ▶ A majority of program participants are faculty or staff (53.7 percent) (Table 11).

Table 11. Program Participants by Classification

Program participants by classification	Program participants	
	Number	Percent
Student	25	46.3
Faculty or staff	29	53.7
Total	54	100.0

Characteristics of Program Participants by Whether They Experienced a Relapse

- Program participants ages 30 to 49 were less likely to have experienced a relapse than program participants less than 30 years old and 50 years or older (35.3 percent, 43.5 percent, and 57.1 percent, respectively). (Table 12).

Table 12. Program Participants by Whether They Experienced a Relapse by Age

Age of program participant	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Less than 30 years old	10	43.5	8	34.8	5	21.7	23	100.0
30 to 49 years old	6	35.3	5	29.4	6	35.3	17	100.0
50 years or older	8	57.1	5	35.7	1	7.1	14	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- Similar proportions of male and female program participants experienced a relapse (45.2 percent and 43.5 percent, respectively). However, it is important to keep in mind that females were much more likely to not report whether they experienced a relapse (Table 13).

Table 13. Program Participants by Whether They Experienced a Relapse by Gender

Gender of program participant	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Male	14	45.2	12	38.7	5	16.1	31	100.0
Female	10	43.5	6	26.1	7	30.4	23	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- Similar proportions of students and faculty or staff experienced a relapse (44.0 percent and 44.8 percent, respectively) (Table 14).

Table 14. Program Participants by Whether They Experienced a Relapse by Classification

Classification of program participant	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Student	11	44.0	9	36.0	5	20.0	25	100.0
Faculty or staff	13	44.8	9	31.0	7	24.1	29	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- ▶ Approximately one-half of program participants who were 18 to 20 years old or 21 or older when they began using tobacco indicated they experienced a relapse (52.6 percent and 50.0 percent, respectively). A slightly smaller proportion of program participants who were less than 18 years old when they began using tobacco experienced a relapse (40.0 percent) (Table 15).

Table 15. Program Participants by Whether They Experienced a Relapse by Age Program Participant Started Using Tobacco

Age program participant started using tobacco	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Less than 18 years old	10	40.0	9	36.0	6	24.0	25	100.0
18 to 20 years old	10	52.6	6	31.6	3	15.8	19	100.0
21 years or older	3	50.0	2	33.3	1	16.7	6	100.0
Do not know	1	25.0	1	25.0	2	50.0	4	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- ▶ Forty-two percent of program participants who smoked only cigarettes indicated they experienced a relapse. All three program participants who used chewing tobacco only, indicated they experienced a relapse (Table 16).

Table 16. Program Participants by Whether They Experienced a Relapse by Type of Tobacco Used

Type of tobacco used	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Cigarettes	21	42.0	17	34.0	12	24.0	50	100.0
Chewing tobacco	3	100.0	0	0.0	0	0.0	3	100.0
Cigarettes/chewing tobacco	0	0.0	1	100.0	0	0.0	1	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- ▶ More than 46 percent of program participants who smoked one pack of cigarettes a day or more indicated they experienced a relapse. Approximately 35 percent of program participants who smoked less than one pack of cigarettes a day indicated they experienced a relapse (Table 17).

Table 17. Cigarette Smokers by Whether They Experienced a Relapse by Number of Packs of Cigarettes Smoked Per Day

Number of packs smoked per day (One pack=20 cigarettes)	Cigarette smokers by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Less than one pack a day	8	34.8	9	39.1	6	26.1	23	100.0
One pack a day or more	13	46.4	9	32.1	6	21.4	28	100.0
Total	21	41.2	18	35.3	12	23.5	51	100.0

- ▶ The majority of program participants who have been using tobacco for one to 10 years or more than 30 years experienced a relapse (55.6 percent and 50.0 percent, respectively). A smaller proportion of program participants who have been using tobacco for 11 to 20 years or 21 to 30 years experienced a relapse (33.3 percent and 40.0 percent, respectively) (Table 18).

Table 18. Program Participants by Whether They Experienced a Relapse by Number of Years Tobacco Has Been Used

Number of years tobacco has been used	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
1 to 10 years	10	55.6	4	22.2	4	22.2	18	100.0
11 to 20 years	3	33.3	5	55.6	1	11.1	9	100.0
21 to 30 years	4	40.0	4	40.0	2	20.0	10	100.0
More than 30 years	6	50.0	4	33.3	2	16.7	12	100.0
Not Reported	1	20.0	1	20.0	3	60.0	5	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- ▶ Approximately 46 percent of program participants who had made between 1 and 10 attempts to quit using tobacco experienced a relapse. Similar proportions of program participants who had either never attempted to quit or had made more than 10 attempts to quit using tobacco experienced a relapse (40.0 percent and 41.7 percent, respectively) (Table 19).

Table 19. Program Participants by Whether They Experienced a Relapse by Number of Attempts to Quit Using Tobacco

Number of attempts to quit	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Never	2	40.0	2	40.0	1	20.0	5	100.0
1 to 10 attempts	17	45.9	13	35.1	7	18.9	37	100.0
More than 10 attempts	5	41.7	3	25.0	4	33.3	12	100.0
Total	24	44.4	18	33.3	12	22.2	54	100.0

- ▶ More than 66 percent of program participants who used lozenges (n=3) experienced a relapse. Less than one-fourth of program participants who used Zyban indicated they experienced a relapse (22.2 percent). Gum and the patch were slightly less effective methods of quitting tobacco use. Nearly 30 percent of program participants using gum and approximately 39 percent using the patch experienced a relapse. Those program participants who used nasal spray (n=2) reported they had not experienced a relapse (Table 20).

Table 20. Program Participants by Whether They Experienced a Relapse by Method Used to Quit Using Tobacco

Method used	Program participants by whether they experienced a relapse							
	Yes		No		Not Reported		Total*	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Zyban	4	22.2	8	44.4	6	33.3	18	100.0
Patch	14	38.9	13	36.1	9	25.0	36	100.0
Gum	5	29.4	8	47.1	4	23.5	17	100.0
Lozenge	2	66.7	0	0.0	1	33.3	3	100.0
Nasal Spray	0	0.0	2	100.0	0	0.0	2	100.0
Inhaler	0	0.0	0	0.0	0	0.0	0	0.0
Total	25	33.8	29	39.2	20	27.0	74	100.0

*Total number does not add to 54 due to multiple responses.

**FARGO CASS PUBLIC HEALTH
Break Away from Nicotine Program Intake Form**

Last Name,	First Name,	Middle Initial	Social Security Number
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Address	City	County	State	Zip Code	Date of Birth	Female 0 Male 0
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Home Telephone Number	Cell Telephone Number	Email Address
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Contact Information:
 Can we leave a message if you're not in? NO 0 YES 0
 Where and When is the best time to reach you? _____
 If unable to contact you who can we leave a message with? _____
Name _____ Number _____

Tobacco Product:
 Cigarette Cigar Pipe Chew Snuff
 Other _____
 Usage amount per day? _____ (Packs) _____ (Cans/Tins/Pouches)
Have you tried to STOP BEFORE? NO 0 or YES 0 Number of times: _____
 Method(s): _____
 Side Effects: _____
 Reason for Relapse: _____
 Does anyone in your household use tobacco: NO 0 YES 0 Who: _____

Comments:

How did you hear about the Fargo Cass Public Health Cessation Program (BAN)?
 Telephone Call Walk-in Web-Site Event _____
 Agency _____ Provider _____

Complete the following: The charges for services may be discounted based on income and household size. Payment is requested at time of visit; however if full payment cannot be made please make arrangements for unpaid balance. Proof of income is required within 30 days to be considered for discounted services. If financial information is not provided, services will be charged at full cost.

Wage Earner	Rate/Hour	Hours/Week	Total Weekly Wages		Wages/Month	Months/Year	Total Yearly Wages
Self)	=	OR		X	=
Others (include spouse or partner if living together))	=			X	=

List amount from other sources of income: Social Security \$ _____ Spousal Support/Child Support \$ _____ Unemployment \$ _____ Other \$ _____ Total number of household members depending on this income: _____ Do you receive Medical Assistance through a social service agency? 0 Yes 0 No ID # _____ State _____	Office Use Only Income Verification Initials _____
GROSS ANNUAL INCOME \$ _____	

_____ I (please initial) authorize the release of medical information necessary to process an insurance claim and payment of medical insurance benefits to Fargo Cass Public Health.

Insurance Company	Company Address
Contract Number	Name of Policy Holder & Relationship to You

My answers to the above questions are true and complete to the best of my knowledge.

 Signature _____
 Date

Office Use Only

 Chart Number _____/_____%
 Income Code 9/17/02

FARGO CASS PUBLIC HEALTH

Break Away from Nicotine Program

PATIENT TELEPHONE FOLLOW UP SCRIPT

Name: _____ Age: _____ Counselor: _____

Quit Date: _____ Age: _____ SMOKER CHEWER Current time: AM PM

TWO WEEKS		ONE MONTH		THREE MONTHS		SIX MONTHS	
Hi, may I speak to Mr./Mrs./Ms. _____		Hi, may I speak to Mr./Mrs./Ms. _____		Hi, may I speak to Mr./Mrs./Ms. _____		Hi, may I speak to Mr./Mrs./Ms. _____	
Hello, this is _____, I am calling from the Break Away from Nicotine Program at Fargo Cass Public Health. Do you have time for a few questions?		Hello, this is _____, I am calling from the Break Away from Nicotine Program at Fargo Cass Public Health. Do you have time for a few questions?		Hello, this is _____, I am calling from the Break Away from Nicotine Program at Fargo Cass Public Health. Do you have time for a few questions?		Hello, this is _____, I am calling from the Break Away from Nicotine Program at Fargo Cass Public Health. Do you have time for a few questions?	
Have you smoked/or used tobacco at all in the last seven days? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you smoked/or used tobacco at all in the last seven days? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you smoked/or used tobacco at all in the last seven days? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you smoked/or used tobacco at all in the last seven days? YES <input type="checkbox"/> NO <input type="checkbox"/>	
How much are you smoking/using per day? _____		How much are you smoking/using per day? _____		How much are you smoking/using per day? _____		How much are you smoking/using per day? _____	
Have you made any stop attempts since our last contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you made any stop attempts since our last contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you made any stop attempts since our last contact? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you made any stop attempts since our last contact? YES <input type="checkbox"/> NO <input type="checkbox"/>	
How long has it been since you last smoked/or used tobacco? _____		How long has it been since you last smoked/or used tobacco? _____		How long has it been since you last smoked/or used tobacco? _____		How long has it been since you last smoked/or used tobacco? _____	
Have you set a stop date? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you set a stop date? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you set a stop date? YES <input type="checkbox"/> NO <input type="checkbox"/>		Have you set a stop date? YES <input type="checkbox"/> NO <input type="checkbox"/>	
When: _____		When: _____		When: _____		When: _____	
Are you having any problems with the medication? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you having any problems with the medication? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you having any problems with the medication? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you having any problems with the medication? YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONGRATULATIONS Have you discussed these problems with your physician? – OR – Please call your counselor to discuss the problem.		CONGRATULATIONS Have you discussed these problems with your physician? – OR – Please call your counselor to discuss the problem.		CONGRATULATIONS Have you discussed these problems with your physician? – OR – Please call your counselor to discuss the problem.		CONGRATULATIONS Have you discussed these problems with your physician? – OR – Please call your counselor to discuss the problem.	
Would you like a follow-up appointment? YES <input type="checkbox"/> Set up appointment. NO <input type="checkbox"/>		Would you like a follow-up appointment? YES <input type="checkbox"/> Set up appointment. NO <input type="checkbox"/>		Would you like a follow-up appointment? YES <input type="checkbox"/> Set up appointment. NO <input type="checkbox"/>		Would you like a follow-up appointment? YES <input type="checkbox"/> Set up appointment. NO <input type="checkbox"/>	
Thank you for your time. Remember if you have questions or concerns, please call 241-1360 during the workday or Seek 235-SEEK after hours.		Thank you for your time. Remember if you have questions or concerns, please call 241-1360 during the workday or Seek 235-SEEK after hours.		Thank you for your time. Remember if you have questions or concerns, please call 241-1360 during the workday or Seek 235-SEEK after hours.		Thank you for your time. Remember if you have questions or concerns, please call 241-1360 during the workday or Seek 235-SEEK after hours.	

11/19/02

LABEL