

Quit Success among PA Free Quitline Callers in Poor Mental Health

National Conference on Tobacco or Health
Austin, TX

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Presentation Overview

- Background
- Utilization of the PA Free Quitline by tobacco users in poor mental health
- Quit success of Quitline callers in poor mental health vs. those in good mental health
- Conclusions
- Next Steps
- Questions and Discussion



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Background

- In the US, approximately 36% of adults with mental illness smoke cigarettes, compared to 21% of adults without mental illness who smoke cigarettes.
- Smoking among this population may be exacerbated or sustained in part by relaxed smoking regulations or tobacco use acceptance social norms in mental health facilities.
- CDC and other experts recommend treatments be available and tailored as needed to address the cessation needs of adults with mental illness.

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PA Free Quitline

- The PA Free Quitline is a phone and web-based program available 24 hours a day/ 7 days a week
 - NRT (patch, gum, lozenge) is available to medically eligible adults
- Questions regarding mental health were added to intake in January 2010
 - New questions to identify specific mental health issues are currently being piloted

QUITLOGIX

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▶ Data Analyzed in this Presentation

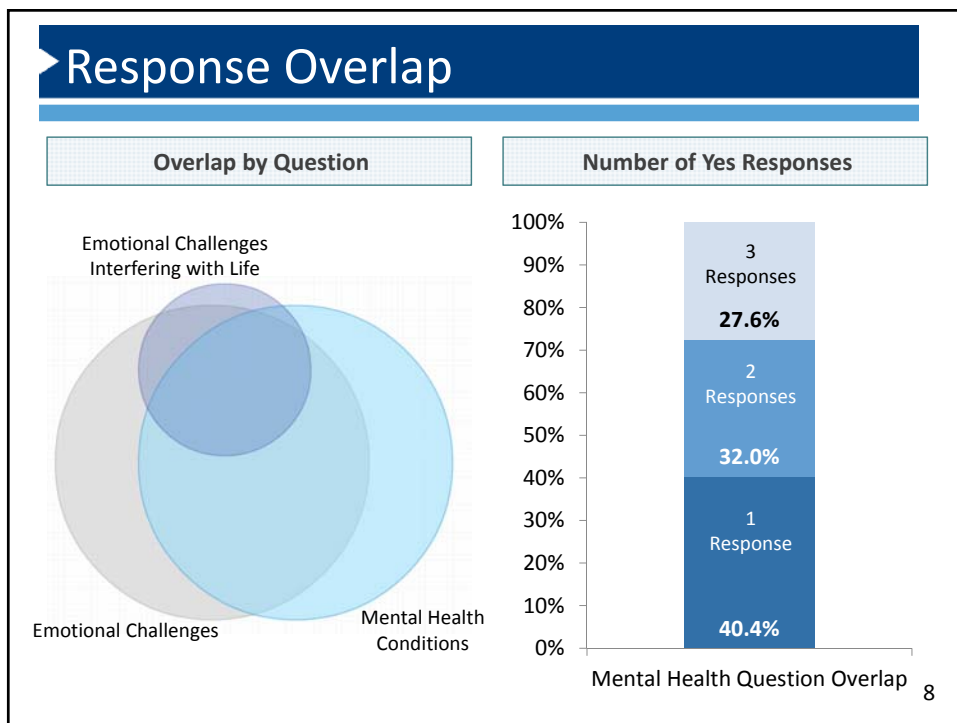
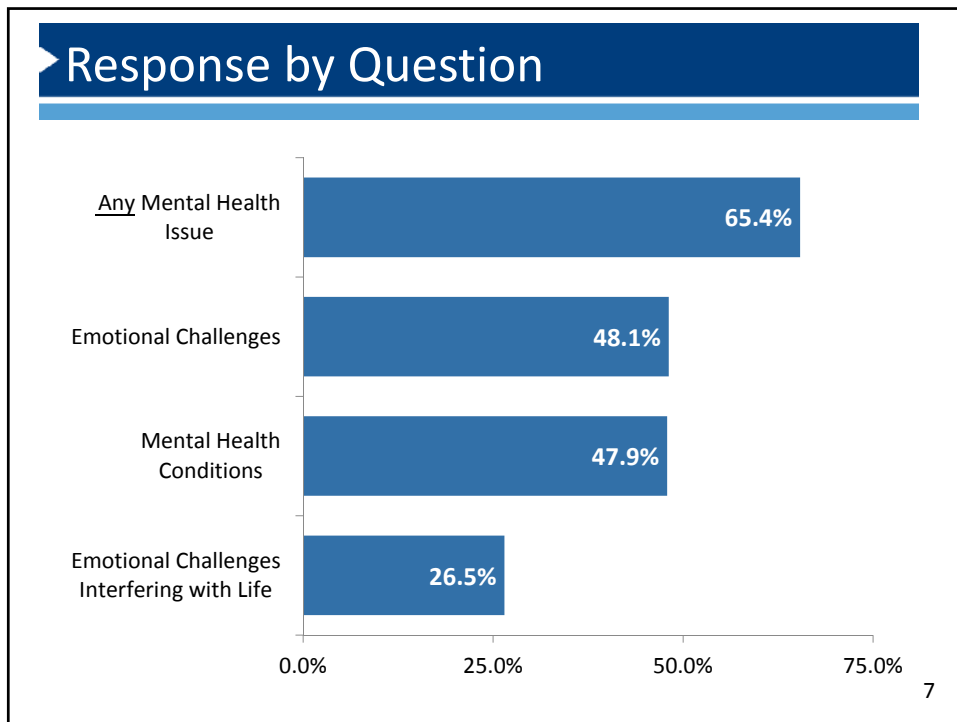
- PA Free Quitline Intake
 - Collects demographic and tobacco use characteristics from tobacco users interested in receiving Quitline services
- PA Free Quitline Service Use
 - Tracks the amount of counseling calls and NRT provided by the Quitline
- PA Free Quitline Follow-up
 - Conducted at 3, 6, and 12 months with Quitline callers who completed intake regardless of enrollment status

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▶ Identifying Callers in Poor Mental Health

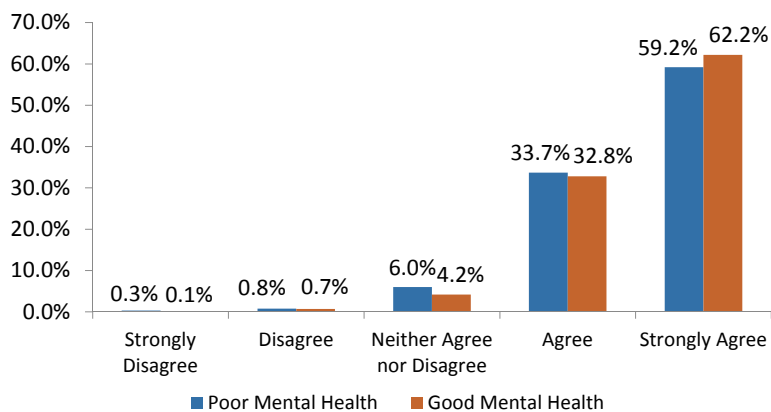
- Do you have any mental health conditions, such as an anxiety disorder, depression disorder, bipolar disorder, alcohol/drug abuse, or schizophrenia?
- OR**
- During the past two weeks, have you experienced any emotional challenges such as excessive stress, feeling depressed or anxious?
- OR**
- During the past two weeks, have you experienced any emotional challenges that have interfered with your work, family life, or social activities?

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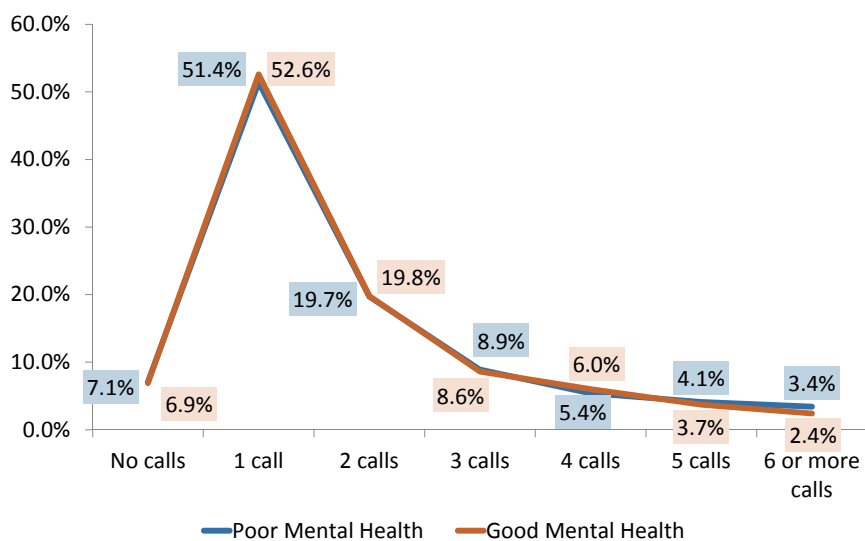
Confidence in Present Quit Attempt

- At intake, callers in poor mental health are significantly less confident that this quit attempt will be their last



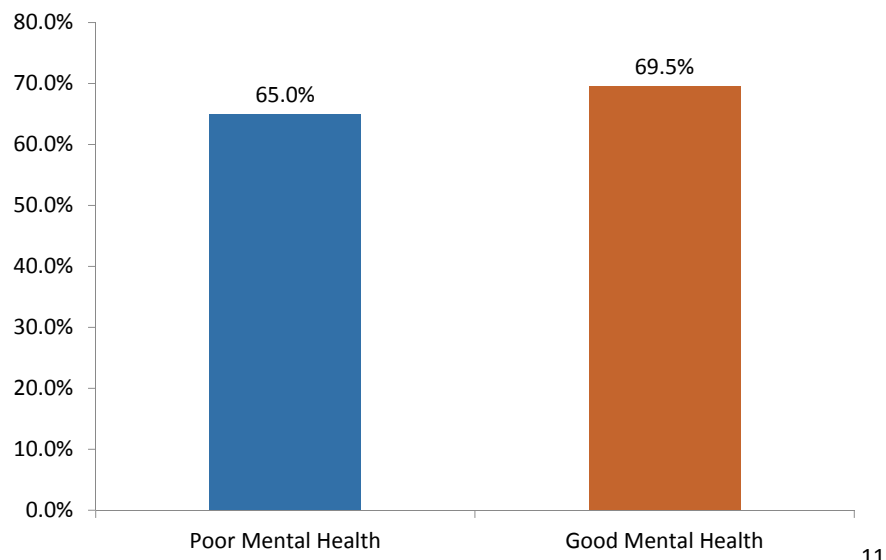
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Counseling Calls Completed



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Received NRT from PA Free Quitline



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PA Free Quitline Client Quit Rates

	3 Months	6 Months	12 Months
Poor Mental Health Response Rate	55.8% (N=2,417)	53.8% (N=1,802)	51.1% (N=1,277)
Poor Mental Health RR Quit Rate	31.1%*** (n=743)	30.4%*** (n=538)	27.5%** (n=350)
Good Mental Health RR Quit Rate	42.1% (n=547)	40.5% (n=380)	34.9% (n=237)
Overall RR Quit Rate	34.9% (n=1,290)	33.9% (n=918)	30.1% (n=589)

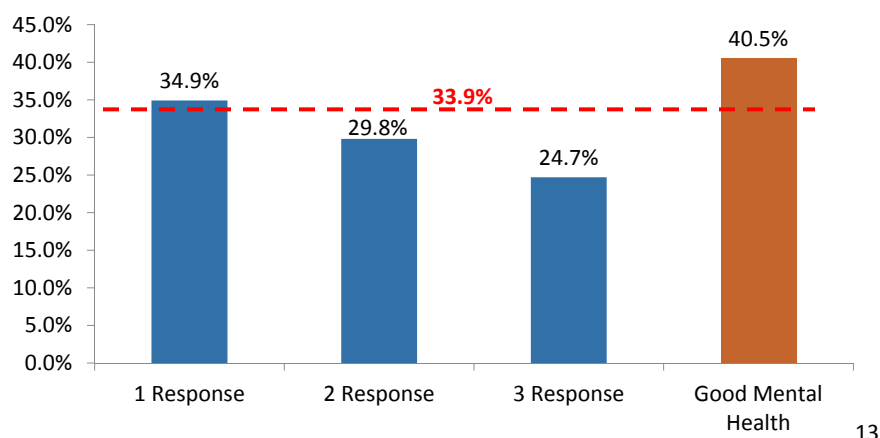
Notes: Response includes completed interviews, early terminations, refusals (permanent and at this time). Responder Rate (RR) Quit Rate is number quit/number of follow-up survey respondents.

Statistical significance: * $p < .05$; ** $p < .01$; *** $p < .001$

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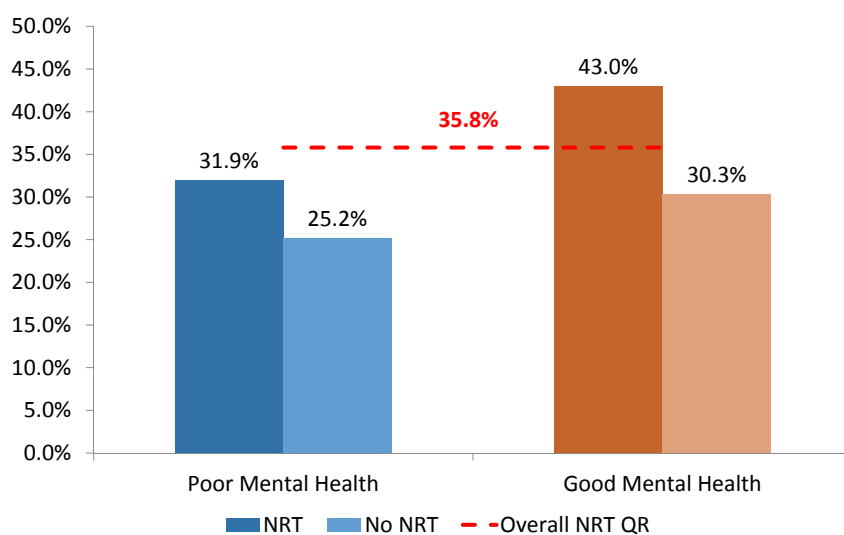
Six Month Quit Rates by Response Overlap

The more mental health questions that a caller responds affirmatively to at intake, the less likely that caller is to have successfully quit at six month follow-up.

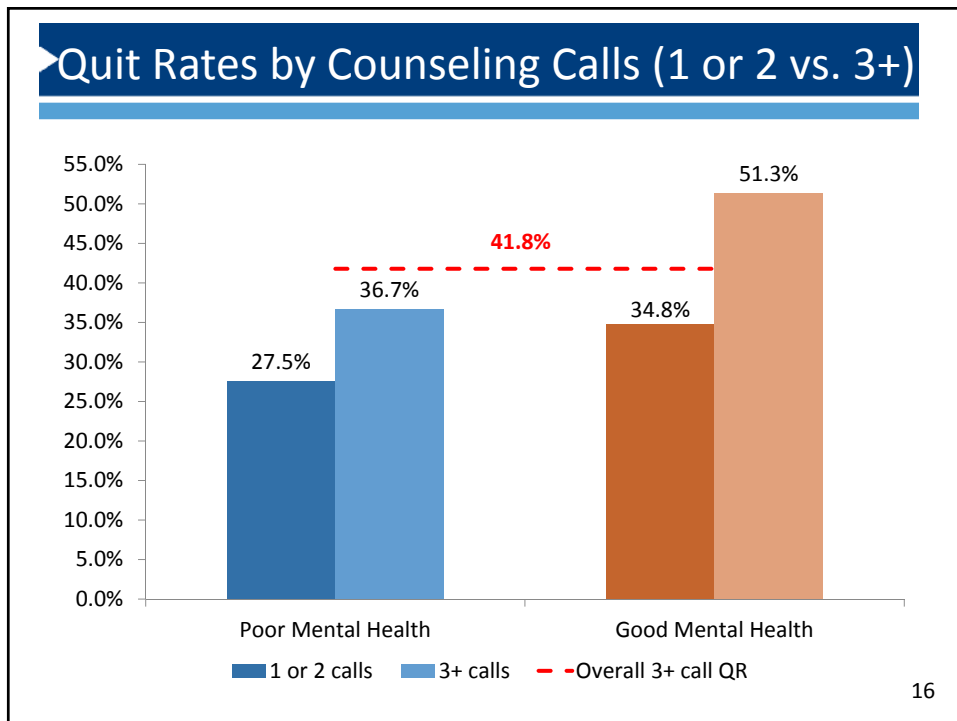
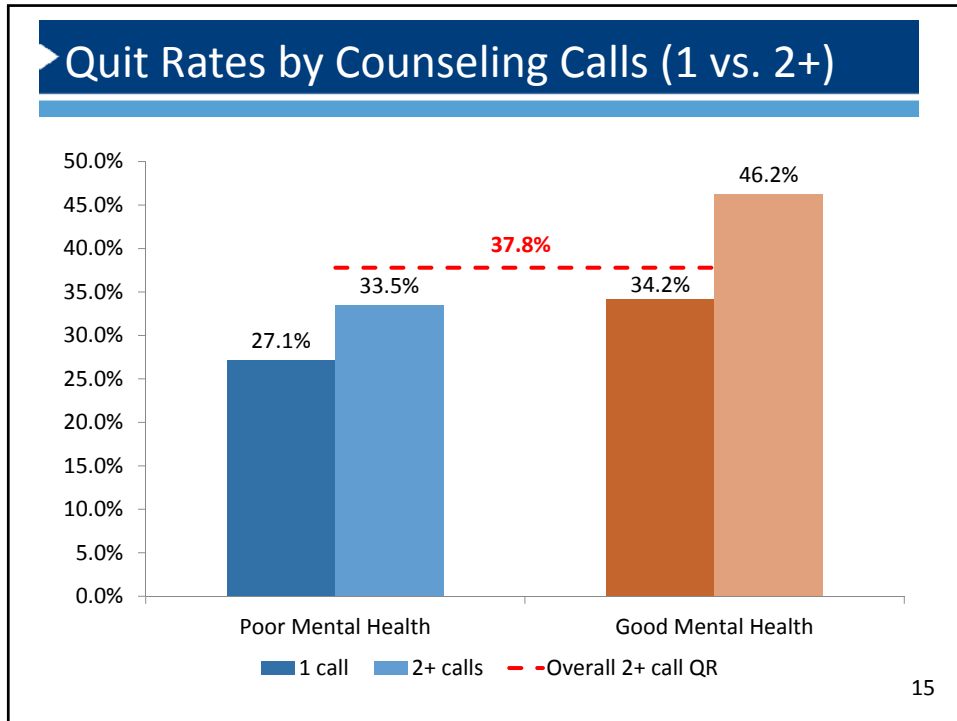


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Quit Rates by NRT Use



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Conclusions

- Nearly two-thirds of PA Free Quitline callers report being in poor mental health at intake.
- The majority of callers who answer affirmatively to one of the three mental health questions at intake answer “yes” to more than one question.
- Callers in poor mental health are equally as likely to receive services as callers in good mental health, but are less likely to receive NRT.
- Yet quit success at 6 month follow-up is still significantly lower for those in poor mental health.
 - The chances of quit success are negatively impacted by the number of mental health questions to which a caller responds affirmatively.

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Next Steps in PA

- Explore new strategies to retain callers in poor mental health and encourage them to utilize the free NRT made available by the Quitline.
- Program partners are currently working to support mental health facilities across the state to adopt best practices related to tobacco cessation:
 - Establishing comprehensive clean air policies
 - Developing cessation referral pathways
 - Discussing possibilities for individual or group cessation counseling on-site
 - Educating staff on the use and benefits of NRT

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Any Questions?

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