

Pennsylvania Prevention and Cessation Works

Tobacco is the leading cause of death in this country. Through the use of Master Settlement Agreement funds, the Commonwealth of Pennsylvania is making an important investment in programs that help people quit smoking and prevent youth from ever starting to smoke. The purpose of this publication is to document the proven effectiveness of programs, based on scientific research and evaluation, that are offered in the state by a variety of healthcare and community providers.

In Allegheny County, smoking cessation and prevention programs are administered by a new nonprofit organization, Tobacco Free Allegheny. Its mission? To greatly reduce rates of youth and adult smoking through programs, like those profiled here, that are based on the state's comprehensive plan and the Center for Disease Control's Best Practices for Comprehensive Tobacco Control Programs.

In addition to these proven programs, some promising new programs are also being executed. As sufficient documentation becomes available, these efforts will be reported.

Twenty-Three Churches and Over 100 Leaders Produce 42% Quit Rate

"This is what happens on a local level when you engage a community and get them empowered around these issues."

Judy Ochs, Division Director of Tobacco Prevention and Control

Donald Trent Sr. had smoked since his early teens. Once he hit 50, he felt it was too late to quit. Then he entered the Center for Healthy Hearts and Souls Fresh Start program in Pittsburgh's Lincoln-Lemington area, where they convinced him it's never too late to stop smoking. Two and a half years ago, he finally did.

"I'm a religious person and used a lot of prayer and determination and I got a lot of help through Healthy Hearts," said Don, now 55. "They really encouraged me and told me this was something I could do if I got serious and honest with myself." *continued on next page*

Prevention Key Data

- "It is a pandemic that has its roots in adolescence. Almost 90 percent of adult smokers began at or before age 18." *U.S. Dept. of Health and Human Services, Preventing Tobacco Use Among Young People: A Report of the Surgeon General, 1994*
- More than 2,000 kids become smokers every day. Approximately three million are current smokers. *Campaign for Tobacco-Free Kids*
- 38,100 Pennsylvania youth under 18 become new daily smokers each year. *Campaign for Tobacco-Free Kids*
- Twenty-five percent of the general population in Pittsburgh smokes. *PA Dept. of Health—2001: Behavioral Risks of Pennsylvania Adults*



- Success is possible. Model programs, such as those profiled here, have helped many long-term smokers quit. Youth programs help convince teens to never start or to quit while they easily can. Maternal smoking cessation programs help pregnant women, who derive the most benefits from quitting, to stop smoking. ■

"Life Skills Training" Helps Youth Resist Tobacco A Proven Program Expanded Here

"There is a substantial body of scientific evidence showing that comprehensive prevention approaches, such as Life Skills Training (LST), taught to teens in junior high school, can produce significant and meaningful reductions in smoking. Life Skills Training has been extensively tested in over a dozen federally-funded studies and found to consistently cut tobacco, alcohol, and illicit drug use by up to 87%."

U.S. Dept. of Health and Human Services (www.samhsa.gov)

In the Borough of Braddock after-school centers, 54 elementary school students are involved in a program to improve themselves. They're assessing their strengths and weaknesses. They're taking lessons in how to make good decisions. They're learning how media can influence their behavior and how tobacco companies target them.

The goal? To make the students less likely to try tobacco, alcohol, and drugs. Research shows that students who develop skills in three areas—drug resistance, self-management, and general social skills—are less likely to end up smoking or trying illegal substances. *continued on next page*

Twenty-Three Churches and Over 100 Leaders Produce 42% Quit Rate (cont'd.)

The Center for Healthy Hearts and Souls was started in 1998 as a partnership between the faith and medical communities, "a must for African American communities," said Director Mattie Woods. A total of 23 churches and more than 100 community leaders (including the 23 pastors) have joined forces with dozens of medical professionals to address health issues such as tobacco prevention and cessation.

When they surveyed the community, they found that 75 percent of respondents said they were negatively affected by smoking—either their own smoking or a family member's smoking.

In response, residents of the community were trained by the American Cancer Society *Fresh Start Plus* Program to conduct the program in their community. The program, which is based on group support, is tailored to the philosophy of the faith-based center, with church and community leader involvement. In four one-hour group sessions participants develop the skills they need to become nonsmokers while benefiting from the encouragement and support from the group and community and church leaders. Topics for group discussion include stress

management, approaches to quitting, physiological effects of smoking, and staying smoke-free.

With approximately 700 people served since 1998, the success rate for their Fresh Start program is 42% quitting at program completion and 34% after a year, reported Woods. One reason for the high rate of success is the fact that the 20 certified facilitators are part of the African American community. They are neighbors and leaders, and that's a distinction that makes a big difference, Woods asserted. Based on their success, other communities such as Oakland, Rankin, and South Side are interested in offering a similar community-based program.

"It is a replicable model," said Woods. "Fifty-seven churches are now on the waiting list." With additional funding from Tobacco Free Allegheny, the Center will be able to offer the program to more people in other communities.

For those who want to quit on their own, the Center offers a program called Pathways to Freedom and another, Smart Start, for telephone counseling on cessation. ■

"In the fight against tobacco use and addiction, prevention is the top priority and the key to promoting healthy lifestyles."

Association of Maternal and Child Health Programs, the national organization representing state public health leaders to improve the health of women, children, and youth

The PA Quit Line: Doubling the Chances of Success

Help Is Only a Phone Call Away

For those who are trying to quit smoking, help is only a phone call away. Since July 2002, the PA Quit Line has been available to anyone interested in trying to quit smoking. More than 8,000 different callers have since used its services.

The quit line serves as a support as well as a resource, linking callers to cessation programs they can join in their area. As many smokers have discovered, when it comes to quitting, having support is easier than going it alone. The Quit Line is available with or without another program. Based on research and best practices, a smoker is typically entitled to five personalized phone calls of varying support, based on their needs. If they fail to quit by then but want to continue trying, they can re-enroll in the Quit Line program for as many times as is necessary. The goal is to stop smoking.

"We at least double someone's chances of successfully quitting, based on research the past three years," said Joanne Pike, spokesperson for the American Cancer Society's Quitline.* In Pennsylvania, the ACS has partnered with the PA Department of Health to provide the Quit Line. Currently 33 states have a Quit Line in partnership with the American Cancer Society.

In Pennsylvania, the number of callers varies per month, from 300 to 500. Recently, ads were placed in all major medical journals to reach every dentist, doctor, nurse practitioner, and pharmacist in the state, said John Lenox of the American Cancer Society. The purpose is to leverage the influence of the medical community in urging patients to quit smoking.

Campaigns and advertising are vital to the success of the phone line. "Any kind of advertising increases volume of calls," said Pike. "Now, we're getting a lot of calls from healthcare providers for quitting information so they can pass it on to their patients." ■

1-877-724-1090

* In a study of a similar quit line in California by the University of California, San Diego, researchers found that people who sought help from a voice over the phone had three times the success rate as those who tried to do it alone. *New England Journal of Medicine*, October 2002

"Life Skills Training" Helps Youth Resist Tobacco (cont'd.)

Now with additional funding from Tobacco Free Allegheny, the lauded program will be implemented in nine more elementary schools in four school districts. With teacher training planned soon, it will also be part of the curriculum in middle schools.

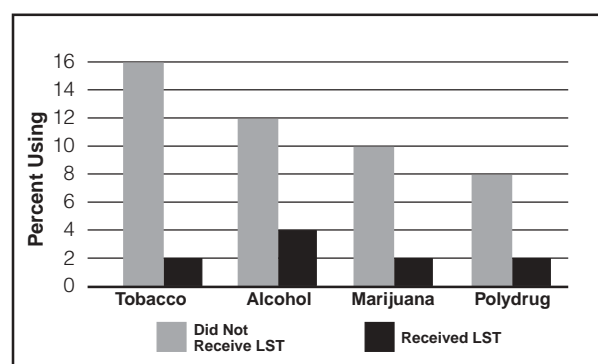
Through weekly activities, LST is designed to bolster a child's autonomy and build a strong image of self. For example, to set goals for self improvement, kids are asked to consider their strengths and weaknesses and what they'd like to change about themselves.

Lessons on decision-making make the youths less likely to be influenced by outside sources like peers or the media.

Life Skills Training is a model program for the U.S. Dept. of Health and Human Services that has been proven successful nationwide. Since January of 2003, the staff of Turtle Creek has conducted the program for 54 students in after-school centers in the Upper Mon Valley. With the recent addition of funding from Tobacco Free Allegheny, the comprehensive program will now be delivered by the staff to nine elementary schools in three additional school districts. Children will receive the Life Skills Training for three years in elementary school and

then continue the same life skills training on a higher developmental level, in middle school. ■

Follow-up Results from Four Published Studies
(8th Grade Drug Use and 12th Grade Polydrug Use)



Life Skills training reduced initiation of cigarette smoking by 75% and, three months after program completion, by 67%.

"I believe it is vital that we wisely use and invest our tobacco funds and resist the temptation to solve today's budget problems at the expense of tomorrow's public health."

PA Attorney General Mike Fisher
March 20, 2003

Youth Anti-Smoking Efforts Badly Needed

- Nearly 27 percent of Pennsylvania high school students smoke.
- If current trends continue, more than five million teens now under age 18 will ultimately die of tobacco-related illnesses.
- Kids think they can easily quit on their own. Yet 73 percent of teen smokers who plan to quit are still smoking five years later.
- Teens smoke 900 million packs of cigarettes annually, producing \$1.5 billion in revenue for tobacco companies. ■

Campaign for Tobacco-Free Kids



Pennsylvania Takes Action

“People are always concerned that prevention programs just don’t work. The proof is finally surfacing and Pennsylvania is now positioned to replicate the long-term successes of other states: for example, California has had a program in existence for a dozen years and has significantly reduced the rates of lung cancer.

We have 51 primary contractors or lead agencies building comprehensive tobacco control programs in each of our 67 counties.

Our goal is to improve the health of all Pennsylvanians by changing the community norms and to make it unusual to see, use, or be affected by tobacco or tobacco smoke pollution.

We know it takes a comprehensive program at a community level to make a difference. We also know it’s cost-effective: for every dollar spent for prevention, we’re saving two to three dollars in health expenses.”

Judy Ochs

Division Director of Tobacco Prevention and Control
Pennsylvania Department of Health

Maternal Smoking: Pittsburgh Ranks Worst

Pittsburgh ranks worst of all major U.S. cities surveyed in a 2003 study of maternal smoking rates, and in the same annual study for the past decade. In Pittsburgh, 23.6% of pregnant women smoke. That’s far above the national 13% average.

Smoking during pregnancy is the single most preventable cause of numerous adverse health problems such as low birth weight, growth retardation, and infant mortality. Maternal smoking endangers child health and development as well.

Local Program Successful in Putting a STOP to Maternal Smoking

“As a smoker, my baby could be premature or at a low birth weight or *even dead*,” said Jennifer Wright, who is 31 weeks pregnant. Since enrolling in the University of Pittsburgh’s and Magee-Womens Hospital’s STOP program, the 24-year-old knows a lot more about the dangers of smoking—to herself and her baby. Until she had the carbon monoxide level in her body measured, Jennifer had no idea how high it was, or how dangerous it was.

Now, with the help of weekly visits to her STOP counselor, Jennifer has quit smoking Monday through Friday. On weekends, when she’s around her mom and sister, both of whom smoke, she has cut back to five to 10 cigarettes. Her goal is to stop altogether.

In the two and a half years since the program started, STOP (Stop Tobacco in Pregnancy) has helped 150 mostly low-income pregnant women attempt to quit smoking, maintain quitting, or cut down. In that time, said Program Director Patricia Cluss, PhD, they have focused on two communities—the city’s Hill District and the

county’s Braddock neighborhood—to increase rates of smoking cessation. Cluss, who is a clinical health psychologist, took the lead in creating the STOP program. It is based on best practices of maternal smoking cessation programs, and tailored to low-income women. The program is conducted in partnership with the University of Pittsburgh Medical Center, its original funder, and Magee-Womens Hospital of Pittsburgh.

“The goal is to quit,” said Cluss, “but good research shows that if you can’t quit, cutting down does bring health benefits to the baby. If they’re not prepared to quit, we work with women to cut down. Sometimes if they do, then they can quit.”

Since receiving funding from Tobacco Free Allegheny in December of 2001, the program is expanding, said Cluss. “We can really reach many more geographic areas in the community and hopefully continue to improve our ‘quit rates’ and ultimately the birth outcome data in the county. We’re focusing on communities with a high number of births per year and a high rate of women who smoke,” said Cluss.

To maximize chances of success, a STOP counselor meets with women individually to assess their needs and goals and then suggests methods of support.

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“Whenever possible, pregnant women should be offered extended and augmented psychosocial interventions that exceed minimal advice to quit.”

U.S. Surgeon General, June 2002



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New Organization Fights Tobacco Use

Tobacco Free Allegheny is a nonprofit organization formed in 2002 with funding by tobacco settlement money through the Allegheny County Department of Health. Their mission is to change the social norm of tobacco use and greatly reduce rates of adult and youth smoking in the county. In 2003, Tobacco Free Allegheny awarded over \$6 million to 31 agencies, including the Allegheny Intermediate Unit, University of Pittsburgh Graduate School of Public Health, Turtle Creek Valley MH/MR, and the Family Health Council. The bulk of the money goes to areas with the highest mortality rate due to tobacco-related illnesses. The contracts will be monitored for program effectiveness and continue through March 2005 pending satisfactory performance and fiscal management.

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Maternal Smoking: Pittsburgh Ranks Worst (cont'd.)

That can include meeting with them weekly throughout pregnancy, said Cluss.

The program has achieved high success rates. For women who enter the program as smokers, “the quit rate through delivery is about 48%,” said Cluss, who explained that the numbers are conservative, based on those they know for sure have quit. “About one-third of women who smoke quit when they find out they’re pregnant,” Cluss explained. “But the relapse rate is high. That’s why many women who have already quit enter the program to ‘stay quit.’ The success rate for these women is 60 percent.”

STOP uses a hand-held carbon monoxide monitor, a plastic device that women exhale into, which then allows them to measure the amount of carbon dioxide in their bodies. “It’s a good measure of smoking of the last 48 hours, and a good motivator, since it tracks scores,” Cluss said. “We also use incentives. They can earn small gifts for babies such as clothing, hats, and toys just for coming to appointments. If they can demonstrate they haven’t smoked, they get additional gifts for themselves. It has helped us to maintain an 18% dropout rate, which is very low for these kinds of programs,” she added.

Birth data is also analyzed, showing that smokers not only have their babies earlier than nonsmokers but they also have babies with lower birth weight. ■

New Study Shows Support for Raising Tobacco Taxes in PA

Pennsylvania residents support increasing the cigarette tax and adding a tax to cigars and smokeless tobacco as a way to raise \$570 million for the state’s budget, according to a study by the Pennsylvania Alliance to Control Tobacco (PACT). As quoted in the *Pittsburgh Post-Gazette*, PACT spokesperson Don Schumaker said, “People find increasing the cigarette tax much more desirable than some of the other things proposed, and here’s the poll that supports that.”

Increasing the cigarette tax by an additional 75 cents would generate \$520 million. Schumaker was surprised that Governor Ed Rendell’s proposed budget did not include any tobacco tax increase. “It was an easy thing to do. It’s not just raising a tax. It helps with health as well. And we see it as a great way to reduce smoking among youth.”

Pennsylvania, along with Virginia and Kentucky, are the only states that do not tax cigars and smokeless tobacco.

Last year Pennsylvania increased the cigarette tax from 31 cents to \$1, a boost that increased the revenue from the tax from \$267 million in the 2000-2001 budget to almost \$845 million this year.

PACT’s argument is that increased taxes result in a decrease in tobacco consumption.

“This poll shows that Pennsylvanians get it,” said Diane Phillips, head of PACT’s board. “They want lawmakers to raise these taxes and they recognize the threat tobacco poses to our young people.”

According to the study, 70 percent of those polled support a 50-cent or 75-cent increase in the cigarette tax and 84 percent support a new tax on cigars or smokeless tobacco.

(The study was conducted by Susquehanna Polling and Research Inc. and was a random survey of 726 voters.)

“Recent evidence suggests youth are up to three times more sensitive to price increases than adults.”

F. Chaloupka and H. Fishbein,
Effects of Policy on Youth Smoking:
Fourth National Conference on
Tobacco & Health, 1998

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www.pitt.edu/~ocdweb