EVALUATION OF THE ALASKA QUIT LINE

FINAL REPORT

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BACKGROUND

The Alaska Tobacco Prevention and Control Program currently implements a comprehensive, statewide program with primary goals that include prevention, cessation and reduction of secondhand smoke exposure among the State’s residents. A key element of the program is the provision of a statewide toll-free Quit Line (QL), where any Alaska resident may access trained nurses 24 hours a day for tobacco cessation support. Telephonic QLs are a common method that states have adopted to assist tobacco users in their efforts to quit tobacco, and have been recommended as a ‘best practice’ for population-based tobacco control (Hopkins, 2001).

In Alaska, there are approximately 116,000 adult tobacco users, and many have benefited from calling the QL since it was established in 2002 as a free statewide service. It is managed by the Providence Alaska Call Center. In 2005, free nicotine replacement therapy was made available to help Quit Line callers. Published studies show that using nicotine replacement therapy can as much as double quit rates (Cummings et al., 2006; Bauer JE et al., 2006; Hawk LW et al., 2006).

The purpose of this study is to evaluate 3-month caller quit rates and satisfaction with Alaska’s QL services using a telephone survey. This study examines differences in caller quit rates and satisfaction by race/ethnicity, education level, region (i.e., urban vs. non-urban), gender, age, and income.

METHODS

PARTICIPANTS AND PROCEDURES

This study included individuals, age 18 and older, who called the Alaska Tobacco Quit Line for the first time and set a quit date during the period October 15, 2005 through October 31, 2006. From October 15, 2005 to May 31, 2006 the study sample included all individuals who called the QL and set a quit date (a census); from June 1, 2006 through October 31, 2006 the sample consisted of a simple random sample of 50% of callers who identified themselves as non-Hispanic White to the QL and 100% of callers of all other races and ethnicities.

The Alaska QL staff provided a study dataset monthly to Program Design and Evaluation Services (PDES) staff containing information for contacting QL callers as well as information for sample selection and analysis. This dataset contained information on QL caller name, phone number, date of initial call to the QL, race, tobacco use status (smoke, chew, both), and a randomly generated study ID. PDES received this monthly data through a secure, password-protected server hosted by Providence Alaska Health System. PDES performed a data cleaning process to eliminate duplicates and prepare the data to send to the Alaska Survey Lab. Each month, the survey dataset was password protected and sent to the Alaska Survey Lab by registered surface mail.

The Alaska Survey Lab initiated calls approximately 3 months after the first call to the QL. For scheduling and staffing logistics, the Survey Lab initiated all calls on approximately the second Monday of each month, and the entire list of QL callers was called within a 1 to 2-day period. A procedure similar to the one used by the Behavior Risk Factor Surveillance Survey (BRFSS) was used to make the calls, i.e., final disposition of was given only after there was at least 5
calling occasions that consisted of no more than 3 call attempts at least one hour apart for a minimum of 15 call attempts. Of the 15 call attempts, there were at least 3 weekday calls, 3 weeknight calls, and 3 weekend calls. Calls were made over a 3-week period, and the final disposition code was assigned at the end of the 3rd week.

QL callers who were reached were included in the survey if they spoke English, agreed to participate after listening to the informed consent statement, and reported being at least 18 years old. The 3-month follow-up telephone survey included questions about participants' satisfaction with the QL, their quit behavior, and other tobacco-related issues (see Appendix A for survey instrument). The interview took about 15-20 minutes to complete.

Each month (or on the schedule described in the Data Transfer Protocol, see Appendix B), the Alaska Survey Lab sent a completed survey dataset to PDES via email that contained survey responses with only a study ID and no other identifying information. PDES staff converted the survey data to an SPSS format and aggregated the monthly files into a single dataset for analysis.

MEASURES

Overview. All measures were developed from the survey data, unless otherwise indicated. The survey instrument was developed in consultation with psychologists and epidemiologists, and with input from the Alaska Tobacco Control Program. The survey questions were based largely on existing instruments, primarily the Washington State Tobacco Prevention and Control Program's Quit Line Satisfaction survey. Other survey instruments from which items were obtained include Group Health Cooperative's survey evaluating QL effectiveness, the BRFSS, Multnomah County Health Care Satisfaction Survey, and surveys from Oregon Department of Human Services Tobacco Prevention and Education Program Evaluation Projects. We pilot-tested the survey instrument with 39 QL callers who called during October 15-31, 2005. Because survey administration procedures during the pilot test were identical to those of the full study, we chose to include the October 15-31 QL callers in the overall study analysis.

Demographics. The interviewer recorded gender of the participant. Region (urban versus non-urban) was defined by telephone prefix and cross-walked against a table provided by the Alaska Department of Health and Social Services that defines urbanicity by telephone prefix. Race/ethnicity, education level, and income were defined using survey questions taken from the BRFSS. We categorized race as White (non-Hispanic), Alaska Native (non-Hispanic), American Indian (non-Hispanic), Black or African American (non-Hispanic), Asian or Pacific Islander (non-Hispanic), Hispanic or Latino(a), and Other. For analysis, we combined Alaska Natives and American Indians into one group called ANAI. For all other survey respondents that reported multiple races or ethnicities, we categorized them according to their preference for the group that best represented their race. If no preference was given, we categorized them as Other.

We created three education categories (less than high school, high school, and more than high school) and four income categories (less than $25,000, $25,000 - $49,999, $50,000 - $74,999, and $75,000 and higher).

We also created three age groups (18 to 29 years old, 30 to 44 years old, and 45 years and older).

Quit measures.
**Cigarettes.** We defined the three-month cigarette quit rate based on two questions: “Do you now smoke cigarettes everyday, some days, or not at all?” and “What was the date you last smoked, even a single puff on a cigarette?” To be considered a quit at follow-up, participants had to report smoking “not at all” and a quit date at least 7 days before they were interviewed for the study. Only study participants who answered “yes” to the question “Have you smoked at least 100 cigarettes in your entire life?” were included in this calculation.

**Smokeless tobacco (SLT).** We defined the three-month smokeless tobacco quit rate based on two questions: “Do you now use smokeless tobacco products everyday, some days, or not at all?” and “What was the date you last used smokeless tobacco?” To be considered a quit at follow-up, participants had to report using smokeless tobacco “not at all” and a quit date at least 7 days before they were interviewed for the study. Only study participants who answered “yes” to the question “Have you ever used or tried any smokeless tobacco products, such as chew, dip, or snuff?” were included in this calculation.

**Satisfaction measures.** We examined several measures of satisfaction. Specifically, we asked participants:

- “How satisfied were you overall with the Quit Line Program? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?” We dichotomized responses into satisfied (i.e., very or somewhat satisfied) versus not.

- “Would you suggest the Quit Line to others if they wanted help in quitting tobacco? Would you say yes, for sure; yes, probably would; no probably would not; or no, never?” We dichotomized responses into would suggest (i.e., yes, for sure or probably would) versus not.

- “When you talked with a nurse from the Quit Line, you were asked a few questions about yourself to register. How did you feel about the registration process? Would you say it was fine, somewhat uncomfortable, or very uncomfortable?” We dichotomized responses into fine versus not.

- “How would you rate your experience with the Quit Line nurse? Were you very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?” We dichotomized responses into satisfied (i.e., very or somewhat satisfied) versus not.

- “Next, I’m going to ask about materials that the Quit Line may have mailed you after you called. Did you receive a ‘quit kit’ or trail guide to being tobacco free’ in the mail after calling the Quit Line?” If a participant responded “yes” to this question, we then asked, “How useful was the information in the ‘quit kit’? Was it very useful, somewhat useful, not too useful, or not at all useful?” We dichotomized responses into useful (i.e., very or somewhat useful) versus not.

**Reports of being treated respectfully.** We asked participants whether they agreed or disagreed with the following statement: “During your interactions with Quit Line nurse, you were always treated respectfully.” We dichotomized their responses into agree (i.e., strongly or somewhat agree) or disagree. For those who disagreed with this statement, we asked, “What did the nurse do to make you feel this way?” and recorded their comments.

All participants were asked a series of questions starting with, “Did you ever feel the Quit Line staff treated you with a lack of respect...” The issues we asked about included: “because of your race or ethnicity,” “because of your education level or income,” and “because of your gender.”
Questions for Alaska Natives. For participants who identified their race/ethnicity as Alaska Native, alone or in combination with other races and ethnicities, we asked a series of questions designed to evaluate their experience with the QL from the perspective of being an Alaska Native. First, Alaska Natives were asked, “Would you prefer to have had an Alaska Native nurse to talk with on the Quit Line?” We dichotomized their responses as preferred (i.e., strongly or somewhat preferred) or not preferred (i.e., would not have preferred or neither preferred nor not preferred). We also asked whether there were any questions that Alaska Native participants felt were too personal to be discussed on the phone and whether the pace of the questions was about right, too fast, or too slow. Lastly, we asked participants if they thought the Quit Line was appropriate for Alaska Natives. If any participant asked the interviewer why this question was asked, the interviewer had a prepared response which explained the Alaska Tobacco Program’s interest in providing services that meets the needs of Alaska Natives.

Missing data. If a participant responded, “Don’t know” to a question or refused to answer it, their data for that question was considered missing and not included in the analysis.

ANALYSIS METHODS

Computing Weights. We assigned a weight = “1” for all race/ethnicity groups other than non-Hispanic White. For Whites, we assigned a weight = “2” to all respondents from June 1, 2006 though October 31, 2006, during which time there was a 50% random sample of Whites.

Comparison of Those Surveyed and Those Not. We compared QL callers who were surveyed to those whom the Alaska Survey Lab had attempted to contact but were unable to survey. Specifically, we compared them with respect to baseline demographics from the QL study data.

Quit Rates. We calculated 7-day point prevalence quit rates at three months. For cigarette quit rates, we identified the number of cigarette users who had reported that they had “ever” smoked at least 100 cigarettes in their lifetimes, and among that group, we identified the number that reported that they had quit (i.e., answered “not at all” to the question “Do you now smoke cigarettes everyday, some days, or not at all?”). Among the cigarette quitters, there were 44 survey respondents with missing quit dates. Callers who had only a missing quit day (but supplied a quit month and year) were assigned a quit date of the last day of the month in which they quit. This methodology has been used in analysis of a QL satisfaction survey in another state (Maher 2006). Callers who had missing month and/or year were coded as missing if the threshold for 7-day point prevalence could not be determined.

Among the cigarette quitters with quit dates, there were 6 that had quit dates more than 30 days prior to their QL call; 28 had quit dates between 1 and 30 days prior to their QL call (the rest had quit dates after their QL call). Thirty days is considered a reasonable period of time in which to include quitters who are in the active process of quitting and using the QL for cessation support. Thus, the 28 individuals with quit dates within 30 days prior to their QL call were considered as quitters in the analysis.

Among the cigarette users with eligible quit dates, there were 2 with a recorded quit date that was post follow-up survey. Upon inspection, these were determined to be data entry errors and were eliminated from the quit rate calculation. Among the remaining eligible cigarette quitters, there were 12 that did not quit at least 7 days before the follow-up survey. Eliminating these leaves the numerator for the final calculation of cigarette quitters. The denominator for calculating cigarette quit rate is the number of cigarette users minus those with missing dates minus the data entry error exclusions.
SLT users' quit rates were calculated using the same methods. Among the SLT quitters, there were 122 missing quit dates and 29 with quit dates more than 30 days prior to their initial QL call. Among the remaining SLT quitters with eligible quit dates, 2 callers had quit dates that that were post follow up survey and were excluded. There were no SLT quitters that had not quit for at least 7 days.

We compared quit rates by race/ethnicity, education level, region, gender, age, and income. We used the Pearson Chi-Square test for bivariate comparisons and multivariate logistic regression to determine significant associations between quit rates and each demographic variable, simultaneously controlling for the effect of the other demographic characteristics.

Satisfaction. We compared satisfaction questions by race/ethnicity, education level, region, gender, age, and income. We used the Pearson Chi-Square test to determine significant associations between quit rates and each demographic variable.

Reports of Being Treated Respectfully. We present information on participants who did not strongly or somewhat agree that they were always treated respectfully during their interactions with the QL. Also presented is information on those participants who responded, “Yes” when asked if they ever felt the QL nurses treated them with a lack of respect because of their race or ethnicity, because of their education level or income, or because of their gender. We used Pearson Chi-Square test to analyze respect responses by demographic categories.

Data manipulation was conducted using SPSS v. 15.0 and statistical analyses were conducted using Stata v. 9.2. For all statistical tests, we used the 0.05 level of significance.

RESULTS

COMPARISON OF THOSE SURVEYED AND THOSE NOT

Nineteen hundred forty-one QL callers were identified by the QL as participants in the quit line program with a quit date and eligible for the 3-month satisfaction survey. Of the 1,941 QL callers, 836 (43.1%) were reached by the Survey Lab and consented to the interview three months after the initial QL call. The top reason for not initiating the interview, as indicated by the disposition report from the Survey Lab, was “hang up or termination of call - unknown eligibility of respondent.” Nearly 15% of those called by the Survey Lab fell into this category. Other top reasons for not initiating the interview were non-working or disconnected telephone number (13.0%) and refusal (5%).

Only 796 of the 836 completed the eligibility screening, and 790 answered, “Yes” to the next question, “Do you remember calling the Quit Line?” There were 772 QL callers that completed the satisfaction survey, which represents 39.8% of all 1,941 QL callers during the study period.

A comparison of those surveyed and those not surveyed is limited to three characteristics provided by the QL: race/ethnicity, tobacco use status (smoke vs. chew), and rural vs. non-rural residence. Thirty-six percent of non-White (including Hispanic) QL callers completed the survey as compared to 41.5% non-Hispanic White QL callers (p=0.041). For tobacco use status, individuals that both smoke and chew were less likely to be surveyed (35.3%) than those that smoke only (39.7%) or chew only (43.1%), but this difference was not significant. There was
no significant difference in survey completion between rural (40.5%) and non-rural (39.9%) QL callers.

QUIT RATES AND SATISFACTION

Among all the participants combined, 38.9% had quit smoking at the three-month follow-up, 39.4% had quit smokeless tobacco, and 90.6% were satisfied overall with the QL program. In addition, 98.0% indicated that they would suggest the QL to others if they wanted help in quitting smoking, 96.6% felt the registration process was fine, and 94.0% were satisfied with the QL nurse. Among participants who reported having received a quit kit, 94.1% thought that the quit kit information was useful.

**Bivariate Analysis.** The demographic characteristics of study participants are shown in Table 1c. There were 772 participants that completed the survey. Quit rates and the satisfaction measures vary significantly by race/ethnicity (Table 2). Cigarette quit rates were lower among minority racial/ethnic groups, except Asian/Pacific Islanders, (22.2% for ANAIs, 23.1% for Hispanic/Latino group, 36.1% for African Americans, 41.2% for Whites, and 45.0% for Asian/Pacific Islanders). Overall satisfaction levels were high. About 90% of the White, non-Latino participants was satisfied overall with the QL program; eighty-three percent of ANAIs, eightyt-four percent of African Americans, eighty-nine percent of the Hispanic/Latinos, and 100% of the Asian/Pacific Island were satisfied overall. In addition, over 94% of participants in each racial ethnic group would suggest the QL to others, felt the registration process was fine. Eighty-nine percent of the ANAIs, Hispanic/Latinos, and African Americans were satisfied with the QL specialist. The satisfaction rate with the QL specialists was 95% for Whites, and 100% for Asian/Pacific Islanders. Over 90% of participants in each racial ethnic group thought that the quit kit information was useful.

Quit rates vary significantly by education (Table 3). Participants with less than high school education had lowest quit rates (25.2% vs 42.9% for high school graduates and 39.6% for those with some college education). The overall satisfaction measure did not vary significantly by education (Table 3), However, fewer participants with less than high school education reported being overall satisfied with the QL program and significantly fewer participants with less than high school education were satisfied with the quit line nurse.

There was a substantial amount of variation in quit rates and satisfaction by region (Table 4). Cigarette quit rates were significantly lower for participants in rural areas (30% vs. 41%), and significantly fewer participants in rural areas felt the registration process was fine, or were satisfied with the quit line nurse.

When we examined these measures by gender, we found that the cigarette quit rates were significantly lower for women (34.2% vs. 46%) and no significant difference in SLT quit rate between the genders (43.7% for women and 38.6% for men. The satisfaction levels were high for both sexes (Table 5).

Cigarette quit rates were significantly lower for individuals in the lowest income category (34.7%) relative to individuals in the highest income category (55.7%) (Table 6). There were no other significant differences on the SLT quit rate or satisfaction measures by income, except for the overall satisfaction measure, where a significantly higher proportion (99% vs. 89%) of the participants in one income category group ($50,000- $74,999) reported being satisfied overall with the quit line program.
Cigarette quit rates were lower for older smokers (32.9% for 45 years and older age group vs. 39.8% for the 18-29 age group and 44.1% for the 30-44 age group), but the differences were not statistically significant (Table 7).

**Multivariate Analysis.** When we conducted multivariate logistic regression to examine factors that were independently associated with smoking cessation, we found that women, Alaska Native and American Indians, older participants, and those with less than high school education were less likely to quit, and participants in the highest income category were more likely to quit smoking (Table 8).

**REPORTS OF BEING TREATED RESPECTFULLY**

Twenty-four of the 764 participants (3.1 %) that answered the respect question disagreed that they were always treated respectfully during their interactions with QL staff. Nineteen of these 24 participants were White, non-Hispanic, the other five were African American (2), ANAI (2) and Hispanic (1). Four had less than a high school education, whereas 12 had more than a high school education (the remaining seven were high school graduates). Nineteen were from urban areas, 20 were female, and 11 had incomes of less than $25,000. When asked about what QL staff did or said to make them feel this way, these 24 participants did not mention any issues related to their race/ethnicity, socioeconomic status, area of residence, or gender; rather, their comments were more general. For instance, some commented that they thought the QL staff was rude or inconsiderate.

When we specifically asked all participants if they ever felt the QL staff treated them with a lack of respect:

- Because of their race or ethnicity: Two non-Hispanic ANAI and two non-Hispanic White responded, “Yes.”

- Because of their education level or income: Two participants with less than a high school education, three with a high school education and one with at least some college responded, “Yes.” All five responded, “Yes’ were in the lowest income category.

- Because of their gender: One female and one male responded, “Yes.”

**ALASKA NATIVE-ONLY QUESTIONS**

The Alaska Native-only questions were asked of all participants who said they were Alaska Native, alone or in combination with other races. Eighty-five individuals responded to these questions. Thirteen individuals (15%) indicated they would have preferred to have an Alaska Native nurse to talk with on the QL. The 13 individuals who would have preferred an Alaska Native nurse were slightly more urban (9), female (10), high school or some college (10), and in the two lowest income categories (11).

Just three individuals responded that the questions were too personal to be discussed on the phone. These individuals were in the two lowest income and education categories. Sixteen individuals responded that the pace of the questions was too fast (3 responded “too slow”). Thirteen of these 16 were female, and 13 were in the two lowest income categories. Finally, among the 4 that responded “no” when asked whether the QL is appropriate for Alaska Natives, 3 were female and 3 were in the lowest income category.
SUMMARY OF KEY FINDINGS

Among all the participants combined, 38.9% had quit smoking at the three-month follow-up and 39.4% had quit smokeless tobacco. In addition, level of satisfaction was high based on the several measures examined. Specifically, 91% of participants were satisfied overall with the QL program, 98% indicated that they would suggest the QL to others if they wanted help in quitting smoking, 97% felt the registration process was fine, 94% were satisfied with the QL nurse, and 94% of those who reported receiving the quit kit thought that the information was useful. In addition, 97% of participants agreed that they were always treated respectfully during their interactions with QL staff.

The results of the logistic regression suggest that three-month cigarette quit rates were significantly lower for Alaska Native/American Indians, female smokers, those with less than high school education, and smokers 45 years and older, simultaneously controlling for other demographic factors in the model. Participants with household income at or below $25,000 and participants living in rural areas had lower quit rates in the bivariate analyses, but these factors were not statistically significant in the multivariate model when all variables were considered together.

Quit rates of smokeless tobacco and most satisfaction measures did not vary significantly by race/ethnicity, education, gender, age, region or income, but there were a few exceptions:

- Although the vast majority of participants with less than high school education were satisfied with the QL nurse (90%), this percentage was smaller than those for the participants with high school education.

- Although the vast majority of participants in rural areas felt the registration process was fine (91%), and were satisfied with the QL nurse (90%), these percentages were significantly smaller than those for the participants in urban areas.

The vast majority of Alaska Natives that answered the Alaska Native-only questions on the survey indicated that the QL was appropriate for Alaska Natives. Although 15% of Alaska Natives had a preference for having an Alaska Native nurse on the QL, there did not appear to be a problem with the personal nature of the questions or the pace at which they were asked.

LIMITATIONS

This study calculated quit rates based on self-reported smoking status of the 40% of QL participants that we were able to reach by phone 3 months after their initial contact with the Alaska QL and complete the survey. This is a standard approach for calculating quit rates, and has been used in other studies of tobacco quit lines (Cummings et al., 2006; Maher J 2006; Smith et al., 2004; Zhu et al., 2002). Another approach, referred to as “intent-to-treat,” assumes that all individuals who were not reached for the survey or refused to participate in the survey are still using tobacco and are therefore included in the denominator when calculating quit rates. We believe the intent-to-treat approach is too conservative (i.e., quit rate is too low) and does not accurately represent the number of unreachable QL participants that actually did quit using tobacco.
A second limitation of this study is that a small number (44) of quitters did not provide a complete quit date. For the quitters that provided a month or year, we were able to assign a quit date based on a methodology used by Maher (2006) for the Washington State QL study. The remaining quitters were excluded from the quit rate calculation if the threshold for 7-day point prevalence could not be determined. Because of this exclusion, the overall quit rate reported in this study is likely too conservative (although some of them would not have met the 7-day threshold). If the additional quitters had been included in both the numerator and denominator, then the quit rate would have been slightly higher.

Third, our measures of quit behavior are based on self-report, and it is possible that participants underreport cigarette use at the follow-up survey.

CONCLUSIONS

The Alaska QL appears to be effective and well received by callers from various specific populations. Overall, the 3-month cigarette quit rate is higher than the quit rate reported in other QL studies: in Washington State 30% of QL users quit cigarettes at 3 months (Oregon DHS 2006a); in Oregon 34% quit cigarettes at 6 months (Oregon DHS 2006b); and in New York 21% to 35% quit cigarettes at 4 months at various sites (Cummings et al., 2006).

Although a high percentage (83%) of Alaska Natives are satisfied overall with the program, cigarette quit rates are lowest for this group, compared to other racial and ethnic groups. This is further compounded by the high prevalence of smoking in this group. An in-depth exploration of the factors that contribute to poor success with quitting cigarettes in this population is warranted.
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* Excludes participants with missing quit dates and data entry errors.

** Based on information in QL data (not survey data).
Table 1b: Number of study participants by demographic characteristics (n=84) for calculation of 7-day point prevalence - smokeless tobacco*

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<td>18-29</td>
<td>20</td>
</tr>
<tr>
<td>30-44</td>
<td>23</td>
</tr>
<tr>
<td>45 and older</td>
<td>23</td>
</tr>
<tr>
<td>DK/Refused</td>
<td>18</td>
</tr>
</tbody>
</table>

* Excludes participants with missing quit dates and data entry errors.

** Based on information in QL data (not survey data).
Table 1c: Number of study participants by demographic characteristics (n=772) for satisfaction questions

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino(a)</td>
<td>27</td>
</tr>
<tr>
<td>African American, non-Latino</td>
<td>37</td>
</tr>
<tr>
<td>Asian/Pacific Islander, non-Latino</td>
<td>22</td>
</tr>
<tr>
<td>American Indian/Al. Native, non-Latino</td>
<td>100</td>
</tr>
<tr>
<td>White, non-Latino</td>
<td>545</td>
</tr>
<tr>
<td>Other, non-Latino</td>
<td>25</td>
</tr>
<tr>
<td>DK/Refused</td>
<td>16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than High School</td>
<td>105</td>
</tr>
<tr>
<td>High School</td>
<td>276</td>
</tr>
<tr>
<td>More than High School</td>
<td>385</td>
</tr>
<tr>
<td>DK/Refused</td>
<td>6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region*</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>118</td>
</tr>
<tr>
<td>Urban</td>
<td>635</td>
</tr>
<tr>
<td>Not Available</td>
<td>19</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>450</td>
</tr>
<tr>
<td>Men</td>
<td>322</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $25,000</td>
<td>317</td>
</tr>
<tr>
<td>$25,000 - $49,999</td>
<td>218</td>
</tr>
<tr>
<td>$50,000 - $74,999</td>
<td>83</td>
</tr>
<tr>
<td>$75,000 or higher</td>
<td>70</td>
</tr>
<tr>
<td>DK/Refused</td>
<td>84</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-29</td>
<td>107</td>
</tr>
<tr>
<td>30-44</td>
<td>197</td>
</tr>
<tr>
<td>DK/Refused</td>
<td>151</td>
</tr>
</tbody>
</table>

* Based on information in QL data (not survey data).
Table 2: Quit rates and QL satisfaction by race/ethnicity

<table>
<thead>
<tr>
<th></th>
<th>Latino* % (n/n)**</th>
<th>African American % (n/n)**</th>
<th>Asian/PI % (n/n)**</th>
<th>Am. Ind./AN % (n/n)**</th>
<th>White % (n/n)**</th>
<th>ρ-value†</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-month cigarette 7-day quit rate‡ (n = 708)***</td>
<td>23.1% (6/26)</td>
<td>36.1% (13/36)</td>
<td>45.0% (9/20)</td>
<td>22.2% (20/90)</td>
<td>41.2% (214/512)</td>
<td>0.007</td>
</tr>
<tr>
<td>3-month SLT 7-day quit rate‡ (n = 84)***</td>
<td>0.0% (0/3)</td>
<td>50.0% (2/4)</td>
<td>33.3% (1/3)</td>
<td>26.7% (4/15)</td>
<td>43.6% (22/58)</td>
<td>0.502</td>
</tr>
<tr>
<td>Satisfied overall with QL program (n = 764)***</td>
<td>88.5% (23/26)</td>
<td>84.2% (32/38)</td>
<td>100.0% (23/23)</td>
<td>83.2% (84/101)</td>
<td>90.3% (496/551)</td>
<td>0.129</td>
</tr>
<tr>
<td>Would suggest QL to others (n = 761)***</td>
<td>96.2% (25/26)</td>
<td>100.0% (38/38)</td>
<td>95.7% (22/23)</td>
<td>97.0% (97/100)</td>
<td>98.1% (538/549)</td>
<td>0.329</td>
</tr>
<tr>
<td>Felt registration process was fine (n = 762)***</td>
<td>100.0% (27/27)</td>
<td>97.4% (37/38)</td>
<td>95.7% (22/23)</td>
<td>94.0% (94/100)</td>
<td>96.8% (531/549)</td>
<td>0.554</td>
</tr>
<tr>
<td>Satisfied with QL nurse (n = 754)***</td>
<td>88.5% (23/26)</td>
<td>89.2% (33/37)</td>
<td>100.0% (22/22)</td>
<td>88.9% (88/99)</td>
<td>94.9% (515/545)</td>
<td>0.081</td>
</tr>
<tr>
<td>Thought Quit Kit info. useful¶ (n = 688)***</td>
<td>91.7% (22/24)</td>
<td>97.1% (33/34)</td>
<td>95.0% (19/20)</td>
<td>93.3% (83/89)</td>
<td>94.0% (467/498)</td>
<td>0.804</td>
</tr>
</tbody>
</table>

* Latinos excluded from other racial/ethnic groups.

** Numerator represents participants who answered affirmatively to survey items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† ρ-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

‡ 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

¶ Limited to participants who reported receiving the Quit Kit and answered the question.
Table 3: Quit rates and QL satisfaction by education level

<table>
<thead>
<tr>
<th></th>
<th>&lt; High School % (n/n)**</th>
<th>High School % (n/n)**</th>
<th>&gt; High School % (n/n)**</th>
<th>p-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-month cigarette quit rate†</td>
<td>25.2% (24/96)</td>
<td>42.9% (104/250)</td>
<td>39.6% (143/356)</td>
<td>0.017</td>
</tr>
<tr>
<td>(n = 702)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-month SLT quit rate†</td>
<td>30.0% (3/10)</td>
<td>55.6% (11/22)</td>
<td>34.3% (15/52)</td>
<td>0.193</td>
</tr>
<tr>
<td>(n = 84)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied overall with QL program‡</td>
<td>84.2% (86/104)</td>
<td>91.4% (248/273)</td>
<td>89.8% (342/381)</td>
<td>0.143</td>
</tr>
<tr>
<td>(n = 758)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Would suggest QL to others</td>
<td>98.5% (101/103)</td>
<td>97.4% (263/270)</td>
<td>97.9% (373/382)</td>
<td>0.790</td>
</tr>
<tr>
<td>(n = 755)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Felt registration process was fine</td>
<td>94.7% (99/104)</td>
<td>96.5% (262/272)</td>
<td>97.5% (370/380)</td>
<td>0.404</td>
</tr>
<tr>
<td>(n = 756)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied with QL nurse</td>
<td>90.1% (91/103)</td>
<td>96.5% (258/268)</td>
<td>93.6% (352/378)</td>
<td>0.053</td>
</tr>
<tr>
<td>(n = 749)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Felt Quit Kit info. useful‡</td>
<td>93.3% (86/94)</td>
<td>95.2% (235/246)</td>
<td>94.0% (322/343)</td>
<td>0.737</td>
</tr>
<tr>
<td>(n = 683)***</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* p-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

** Numerator represents participants who answered affirmatively to items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

‡ Limited to participants who reported receiving the Quit Kit and answered the question.
### Table 4: Quit rates and QL satisfaction by region

<table>
<thead>
<tr>
<th></th>
<th>Rural %</th>
<th>Urban %</th>
<th>p-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(n/n)**</td>
<td>(n/n)**</td>
<td></td>
</tr>
<tr>
<td>3-month cigarette quit rate†</td>
<td>30.1%</td>
<td>41.0%</td>
<td>0.045</td>
</tr>
<tr>
<td>(n = 693)***</td>
<td>(31/113)</td>
<td>(239/580)</td>
<td></td>
</tr>
<tr>
<td>3-month SLT quit rate†</td>
<td>42.9%</td>
<td>41.0%</td>
<td>0.897</td>
</tr>
<tr>
<td>(n = 80)***</td>
<td>(7/18)</td>
<td>(22/62)</td>
<td></td>
</tr>
<tr>
<td>Satisfied overall with QL program</td>
<td>85.8%</td>
<td>90.2%</td>
<td>0.151</td>
</tr>
<tr>
<td>(n = 745)***</td>
<td>(98/117)</td>
<td>(566/628)</td>
<td></td>
</tr>
<tr>
<td>Would suggest QL to others</td>
<td>97.3%</td>
<td>97.8%</td>
<td>0.707</td>
</tr>
<tr>
<td>(n = 742)***</td>
<td>(113/117)</td>
<td>(611/625)</td>
<td></td>
</tr>
<tr>
<td>Felt registration process was fine</td>
<td>91.2%</td>
<td>97.6%</td>
<td>0.001</td>
</tr>
<tr>
<td>(n = 743)***</td>
<td>(107/116)</td>
<td>(610/627)</td>
<td></td>
</tr>
<tr>
<td>Satisfied with QL nurse</td>
<td>89.8%</td>
<td>94.8%</td>
<td>0.036</td>
</tr>
<tr>
<td>(n = 736)***</td>
<td>(102/116)</td>
<td>(586/620)</td>
<td></td>
</tr>
<tr>
<td>Felt Quit Kit info. useful‡</td>
<td>91.8%</td>
<td>94.4%</td>
<td>0.303</td>
</tr>
<tr>
<td>(n = 673)***</td>
<td>(96/106)</td>
<td>(536/567)</td>
<td></td>
</tr>
</tbody>
</table>

* p-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

** Numerator represents participants who answered affirmatively to items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

‡ Limited to participants who reported receiving the Quit Kit and answered the question.
Table 5: Quit rates and QL satisfaction by gender

<table>
<thead>
<tr>
<th></th>
<th>Women (n/n)**</th>
<th>Men (n/n)**</th>
<th>p-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-month cigarette quit rate†</td>
<td>34.2% (149/426)</td>
<td>46.0% (125/282)</td>
<td>0.003</td>
</tr>
<tr>
<td>(n = 708)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-month SLT quit rate†</td>
<td>43.8% (6/15)</td>
<td>38.6% (23/69)</td>
<td>0.728</td>
</tr>
<tr>
<td>(n = 84)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied overall with QL program</td>
<td>90.1% (399/446)</td>
<td>88.9% (282/318)</td>
<td>0.620</td>
</tr>
<tr>
<td>(n = 764)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Would suggest QL to others</td>
<td>98.3% (436/445)</td>
<td>97.1% (307/316)</td>
<td>0.293</td>
</tr>
<tr>
<td>(n = 761)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Felt registration process was fine</td>
<td>96.6% (431/447)</td>
<td>96.9% (305/315)</td>
<td>0.822</td>
</tr>
<tr>
<td>(n = 762)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied with QL nurse</td>
<td>94.3% (413/441)</td>
<td>93.8% (292/313)</td>
<td>0.780</td>
</tr>
<tr>
<td>(n = 754)***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Felt Quit Kit info. useful‡</td>
<td>96.2% (384/403)</td>
<td>91.3% (263/285)</td>
<td>0.007</td>
</tr>
<tr>
<td>(n = 688)***</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* p-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

** Numerator represents participants who answered affirmatively to items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

‡ Limited to participants who reported receiving the Quit Kit and answered the question.
### Table 6: Quit rates and QL satisfaction by income

<table>
<thead>
<tr>
<th></th>
<th>&lt;$25K (n/n)**</th>
<th>$25K - $49.9K (n/n)**</th>
<th>$50K - $74.9K (n/n)**</th>
<th>$75K + (n/n)**</th>
<th>p-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-month cigarette quit rate†</td>
<td>34.7% (97/298)</td>
<td>41.5% (89/208)</td>
<td>48.4% (34/70)</td>
<td>55.7% (36/63)</td>
<td>0.014</td>
</tr>
<tr>
<td></td>
<td>3-month SLT quit rate†</td>
<td>33.3% (7/22)</td>
<td>47.4% (12/31)</td>
<td>6.7% (1/12)</td>
<td>50.0% (4/9)</td>
</tr>
<tr>
<td>Satisfied overall with QL program</td>
<td>89.7% (280/313)</td>
<td>89.4% (191/216)</td>
<td>99.1% (82/83)</td>
<td>89.7% (63/70)</td>
<td>0.039</td>
</tr>
<tr>
<td>Would suggest QL to others</td>
<td>97.1% (301/311)</td>
<td>98.6% (214/217)</td>
<td>100.0 (83/83)</td>
<td>97.7% (68/70)</td>
<td>0.311</td>
</tr>
<tr>
<td>Felt registration process was fine</td>
<td>95.9% (298/311)</td>
<td>97.5% (211/217)</td>
<td>99.1% (82/83)</td>
<td>98.9% (69/70)</td>
<td>0.222</td>
</tr>
<tr>
<td>Satisfied with QL nurse</td>
<td>94.4% (290/310)</td>
<td>92.8% (197/213)</td>
<td>96.5% (80/83)</td>
<td>95.4% (66/70)</td>
<td>0.611</td>
</tr>
<tr>
<td>Thought Quit Kit info. useful‡</td>
<td>94.6% (257/275)</td>
<td>95.4% (189/198)</td>
<td>95.3% (74/78)</td>
<td>90.0% (60/65)</td>
<td>0.482</td>
</tr>
</tbody>
</table>

* p-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

** Numerator represents participants who answered affirmatively to items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

‡ Limited to participants who reported receiving the Quit Kit and answered the question.
<table>
<thead>
<tr>
<th>Age Group</th>
<th>18-29 % (n/n)**</th>
<th>30-44 % (n/n)**</th>
<th>45 and older % (n/n)**</th>
<th>p-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-month cigarette quit rate† (n = 622)***</td>
<td>39.8% (35/98)</td>
<td>44.1% (79/183)</td>
<td>32.9% (97/294)</td>
<td>0.058</td>
</tr>
<tr>
<td>3-month SLT quit rate† (n = 66)***</td>
<td>42.3% (7/20)</td>
<td>30.0% (5/23)</td>
<td>40.0% (8/23)</td>
<td>0.718</td>
</tr>
<tr>
<td>Satisfied overall with QL program# (n = 616)***</td>
<td>87.7% (93/107)</td>
<td>89.1% (176/196)</td>
<td>90.1% (278/313)</td>
<td>0.796</td>
</tr>
<tr>
<td>Would suggest QL to others (n = 613)***</td>
<td>97.8% (103/106)</td>
<td>98.6% (193/196)</td>
<td>97.5% (303/311)</td>
<td>0.702</td>
</tr>
<tr>
<td>Felt registration process was fine (n = 614)***</td>
<td>97.8% (103/106)</td>
<td>96.4% (189/196)</td>
<td>96.8% (302/312)</td>
<td>0.786</td>
</tr>
<tr>
<td>Satisfied with QL nurse (n = 608)***</td>
<td>92.7% (96/106)</td>
<td>93.8% (181/193)</td>
<td>94.5% (290/309)</td>
<td>0.769</td>
</tr>
<tr>
<td>Felt Quit Kit info. useful‡ (n = 558)***</td>
<td>95.9% (92/96)</td>
<td>92.5% (168/182)</td>
<td>94.0% (262/280)</td>
<td>0.562</td>
</tr>
</tbody>
</table>

* p-value based on Pearson Chi-Square test; significance tests unreliable for small cell sizes with 5 or fewer observations.

** Numerator represents participants who answered affirmatively to items in Col.1; denominator represents total eligible and who answered the question within each category (column).

*** The total eligible and total that answered the question; this is a sum of the denominators across the columns.

† 7-day point prevalence, excludes participants with missing quit dates and data entry errors.

‡ Limited to participants who reported receiving the Quit Kit and answered the question.
Table 8. Factors associated with cigarette 7-day quit status—logistic regression

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Adjusted OR (95% CI) 1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race/ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>White, non-Latino</td>
<td>1.0</td>
</tr>
<tr>
<td>African American, non-Latino</td>
<td>0.42 (0.14-1.26)</td>
</tr>
<tr>
<td>Asian/Pacific Islander, non-</td>
<td>1.19 (0.44-3.22)</td>
</tr>
<tr>
<td>Latino</td>
<td></td>
</tr>
<tr>
<td>American Indian/Al. Native,</td>
<td>0.42 (0.21-0.84)</td>
</tr>
<tr>
<td>non-Latino</td>
<td></td>
</tr>
<tr>
<td>Other, non-Latino</td>
<td>0.80 (0.26-2.46)</td>
</tr>
<tr>
<td>Hispanic/Latino(a)</td>
<td>0.40 (0.13-1.28)</td>
</tr>
<tr>
<td><strong>Age group</strong></td>
<td></td>
</tr>
<tr>
<td>45 and older and older</td>
<td>1.0</td>
</tr>
<tr>
<td>18-29</td>
<td>1.83 (1.04-3.23)</td>
</tr>
<tr>
<td>30-44</td>
<td>1.89 (1.20-2.98)</td>
</tr>
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<td><strong>Gender</strong></td>
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<td>$25,000 - $49,999</td>
<td>1.30 (0.82-2.08)</td>
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<td>$50,000 - $74,999</td>
<td>1.35 (0.72-2.55)</td>
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<td>2.10 (0.97-4.55)</td>
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<td>Rural</td>
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1 ORs and 95% CIs based on logistic regression model with all factors in the table as independent variables.
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APPENDICES

Appendix A - Survey instrument
Appendix B - Data transfer protocol
Appendix C - Response frequencies to all survey questions
Evaluating the Alaska Tobacco Quit Line

Three-Month Follow-up Survey
(2/28/06)

Throughout the survey, the interviewer is not to read the headings, the words in italics, or the numeric coding for the responses.
Introduction

Hello. May I please speak with [NAME]?

**IF NOT AVAILABLE:** I’m ______ calling from the Alaska Department of Health and Social Services. Can you suggest a convenient time when I could reach (him/her)?
   If person asks to take a message, say “please have [NAME] call me at 1-800-??-???.”

**IF PERSON NO LONGER LIVES THERE:** I’m ______ calling from the Alaska Department of Health and Social Services. Is there a telephone number where I could reach (him/her) directly?
   **IF YES:** Interviewer, record phone number and ask if there is a best day/time to reach him/her.
   **IF NO:** Thank you very much for your time.

**MESSAGE FOR ANSWERING MACHINE:**
I’m calling for [NAME] from the Alaska Department of Health and Social Services about a health study. I would greatly appreciate it if you would call us toll-free at 1-800-??-????. Thank you.

**WHEN RESPONDENT ON LINE:** Hello. I’m ______ calling from the Alaska Department of Health and Social Services and we are conducting a survey to evaluate the Alaska Tobacco Quit Line. May I take a few moments of your time to tell you a little bit about the survey?
   **IF YES:** **SKIP TO CONSENT**

   **IF NOT A GOOD TIME, ASK:** When would be a convenient time for me to call back? **ARRANGE CALLBACK TIME**

   **IF NO,** thank and terminate for hard refusal.

---

**CONSENT**
As I mentioned, we’re doing a survey to evaluate the Alaska Tobacco Quit Line. You called the Quit Line in [MONTH], and your opinion is
important to us. If you agree to participate in this survey, we will ask you some questions about your experience with the Quit Line, your current use of tobacco products, and some other questions related to tobacco use. This survey will take about 15-20 minutes and our conversation may be monitored for quality assurance purposes. Your answers will be kept confidential. You don’t have to do this survey if you don’t want to, and you can stop at any time. Your decision about participating won’t change any services you get from the Quit Line and your Quit Line nurse won’t be told your answers. Also, if there is any question you do not want to answer, just tell me and we can skip over it.

May I ask you the questions right now?
1 = Yes
2 = No (determine a better time to call)
999 = No (thank and terminate for hard refusal)

Great. Thank you.

Confirm eligibility
Before we start, I want to make sure that you are eligible for this study.

Elig1. What is your age?
Record age in years _____ ->
   If >= 18 years, skip to Study ID section.
   If < 18 years, ineligible
   777 = Don’t know
   999 = Refused
   If ineligible, say “We are only interviewing people who are at least 18 years old. Thank you very much for your time.”

Elig2. Are you 18 years of age or older?
1 = Yes
2 = No → ineligible
777 = Don’t know -> ineligible
999 = Refused -> ineligible
If ineligible, say “We are only interviewing people who are at least 18 years old. Thank you very much for your time.”

Study ID of Potential Participant__________________________
Date of Interview ______________ (mm/dd/yyyy)

Part A. Satisfaction with Quit Line Services
Ok, you are eligible, so let’s get started. First, I’m going to ask you some questions about your experience with the Alaska Tobacco Quit Line when you called about three months ago.

A1. Do you remember calling the Quit Line?
   1 = Yes
   2 = No \(\rightarrow\) In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you. \(\rightarrow\) skip to F1
   77 = Don’t know \(\rightarrow\) In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you. \(\rightarrow\) skip to F1
   99 = Refused \(\rightarrow\) In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you. \(\rightarrow\) skip to F1

A2. When you called the Quit Line did you speak with a Quit Line nurse right away?
   1 = Yes \(\rightarrow\) skip to A3
   2 = No
   77 = Don’t know \(\rightarrow\) skip to A3
   99 = Refused \(\rightarrow\) skip to A3

   A2a. Did you leave a message on the Quit Line voice mail, or did something else happen?
      1 = Leave a message on the Quit Line voice mail
      2 = Something else (Specify) \(\rightarrow\) skip to A3
      77 = Don’t know \(\rightarrow\) skip to A3
      99 = Refused \(\rightarrow\) skip to A3

   A2b. How soon did the Quit Line get back with you?
      1 = In less than 1 hour
      2 = In more than 1 hour but less than 1 day
      3 = In 1-2 days
      4 = In 3 or more days
      5 = I never heard back from them \(\rightarrow\) In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you. \(\rightarrow\) skip to F1
      6 = I never heard back from them and had to call the Quit Line again and finally spoke with someone
      77 = Don’t know
      99 = Refused

A3. When you talked with a nurse from the Quit Line, you were asked a few questions about yourself to register. How did you feel about the registration process? Would you say it...
   1 = Was fine
   2 = Somewhat uncomfortable
   3 = Very uncomfortable
   77 = Don’t know
   99 = Refused
After registration, you may have spoken with the nurse about quitting tobacco. The next set of questions asks about your experience talking with that person. When I refer to quitting tobacco or using tobacco, I mean smoking cigarettes, or using smokeless tobacco, such as chew, dip, or snuff.

A4. How helpful was the nurse in talking to you about ways to help you quit tobacco? Would you say…(If needed say “such as dealing with urges, or specific methods for quitting)

1 = Very helpful
2 = Somewhat helpful
3 = Not too helpful
4 = Not at all helpful
66 = Did not talk about it
77 = Don’t know
99 = Refused

A5. How helpful was the nurse in providing information about medications for quitting tobacco such as the nicotine patch and Zyban? (If needed read the response categories)

1 = Very helpful
2 = Somewhat helpful
3 = Not too helpful
4 = Not at all helpful
66 = Did not talk about it
77 = Don’t know
99 = Refused

A6. How would you rate your experience with the Quit Line nurse? Were you…?

1 = Very satisfied
2 = Somewhat satisfied
3 = Somewhat dissatisfied
4 = Very dissatisfied
77 = Don’t know
99 = Refused

A7. Over the past 3 months, about how many times did you talk with a Quit Line nurse?

1 = 0 or 1 times
2 = 2-5 times
3 = 6 or more times
77 = Don’t know
99 = Refused

Part B. Satisfaction with Quit Line Materials

Next, I am going to ask about materials that the Quit Line may have mailed you after you called.

B1. Did you receive a “quit kit or trail guide to being tobacco free” in the mail after calling the Quit Line?

1 = Yes
2 = No → skip to B4
77 = Don’t know → skip to B4
B2. HOW EASY WAS IT TO UNDERSTAND THE INFORMATION IN THE “QUIT KIT OR TRAIL GUIDE?” WOULD YOU SAY...
   1 = Very easy
   2 = Somewhat easy
   3 = Not too easy
   4 = Not at all easy
   77 = Don’t know
   99 = Refused

B3. How useful was the information in the “quit kit?” Was it...
   1 = Very useful
   2 = Somewhat useful
   3 = Not too useful
   4 = Not at all useful
   77 = Don’t know
   99 = Refused

B4. When you called the Quit Line, the staff may have mentioned the availability of free nicotine replacement patches to help you quit tobacco. Were you eligible for the free nicotine patches offered by the Quit Line?
   1 = Yes
   2 = No → skip to Part C
   77 = Don’t know → skip to Part C
   99 = Refused → skip to Part C

B5. Did you accept the offer of free nicotine patches from the Quit Line?
   1 = Yes → skip to Part C
   2 = No
   77 = Don’t know → skip to Part C
   99 = Refused → skip to Part C

B5a. Why did you choose not to accept the patches?
     record response

Part C: Local Program Participation

The following questions ask about other programs or services you may have used since you called the Quit Line.

C1. Do you recall the Quit Line nurse discussing other resources in your community to help you with your quit process?
C1a. Did the nurse offer you a referral for other resources in your community to help you with your quit process?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

C2. After calling the Quit Line, did you participate in any local programs or counseling support to help you quit tobacco – either those you heard about from the Quit Line or those you found yourself?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

**Part D: Overall Experience and Satisfaction**

Now I will ask how you felt overall about the Quit Line. This means everything that happened when you called, including the nurse and the materials, or anything that happened because of your call.

D1. How satisfied were you overall with the Quit Line program? Would you say...
   1 = Very satisfied
   2 = Somewhat satisfied
   3 = Somewhat dissatisfied
   4 = Very dissatisfied
   77 = Don’t know
   99 = Refused

D2. What, if anything, would improve your satisfaction with the Alaska Tobacco Quit Line? *(Do not read responses. Select all that apply. After respondent has answered, use probe: “Anything else?”)*
   1 = Free nicotine replacement gum or inhaler
   2 = Zyban or Wellbutrin
   3 = Availability of more follow-up calls
   4 = Better Quit Line nurses
   5 = More time to talk with the Quit Line nurse
   6 = Better/more resources available in your community to help you with your quit process
   7 = Better/more resources available through your health plan to help you...
with your quit process
8 = Better/different items in the Quit Kit
9 = Being called back by the Quit Line sooner for your first counseling session
10 = Successfully quitting
11 = More free patches
12 = Other (Specify) ________________________________
13 = Nothing in particular
77 = Don’t know
99 = Refused

D3. Would you suggest the Quit Line to others if they wanted help in quitting tobacco? Would you say....
1 = Yes, for sure
2 = Yes, I probably would
3 = No, I probably would not
4 = No, never
77 = Don’t know
99 = Refused

As you think about your experience with the Quit Line, please tell me if you agree or disagree with each of the following statements:

Randomize order of questions D4-D9.

D4. The Quit Line was helpful in getting you ready to quit tobacco (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
     1 = Strongly agree
     2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
     4 = Strongly disagree
     3 = Somewhat disagree
    77 = Don’t know
    99 = Refused

D5. You were able to talk to someone as quickly as you wanted to (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
     1 = Strongly agree
     2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
     4 = Strongly disagree
     3 = Somewhat disagree
    77 = Don’t know
    99 = Refused

D6. The Quit Line nurse spent enough time with you (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
     1 = Strongly agree
2 = Somewhat agree
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know
99 = Refused

D7. In your opinion, the Quit Line nurse knew what s/he was talking about  (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree
2 = Somewhat agree
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know
99 = Refused

D8. The Quit Line nurse was supportive and encouraging in your attempt to quit  (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree
2 = Somewhat agree
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know
99 = Refused

D9. The Quit Line nurse understood your needs (if needed say “do you agree or disagree”)
Agree → Do you strongly agree or somewhat agree?
1 = Strongly agree
2 = Somewhat agree
Disagree → Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know
99 = Refused

D10. During your interactions with the Quit Line nurse, you were always treated respectfully (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree -> skip to D11
2 = Somewhat agree -> skip to D11
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know → skip to D11
99 = Refused → skip to D11
D10a. What did the nurse do to make you feel this way?

Record response
77 = Don’t know
99 = Refused

Now I’m going to ask you some specific questions about how you were treated by the Quit Line nurse. You might have already mentioned some of these things.

D11. Did you ever feel the Quit Line nurse treated you with a lack of respect….[Randomize D11a-D11e]

D11a: … because of the kinds of questions you asked?
    1 = Yes
    2 = No
    77 = Don’t know
    99 = Refused

D11b: … because of the type of help you needed?
    1 = Yes
    2 = No
    77 = Don’t know
    99 = Refused

D11c: … because of your race or ethnicity?
    1 = Yes
    2 = No
    77 = Don’t know
    99 = Refused

D11d: … because of your gender?
    1 = Yes
    2 = No
    77 = Don’t know
    99 = Refused

D11e: … because of your education level or income?
    1 = Yes
    2 = No
    77 = Don’t know
    99 = Refused

D11f: … for any other reason?
    1 = Yes (specify; prompt, if needed: “What was the reason?”)
    2 = No
    77 = Don’t know
    99 = Refused

PART E. OTHER PEOPLE’S PERCEPTION OF THE QUIT LINE

Next, I’m going to ask how you think other people you know might view the Quit Line. Please indicate if you agree or disagree with each of the following statements:

[RANDOMIZE E1-E6] (If needed say “just give your best guess”)
E1. People don’t know about the Quit Line. *(If needed say “do you agree or disagree”)*
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree
   2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree
   3 = Somewhat disagree
   77 = Don’t know
   99 = Refused

E2. People think the Quit Line is not needed because people should quit tobacco on their own. *(If needed say “do you agree or disagree”)*
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree
   2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree
   3 = Somewhat disagree
   77 = Don’t know
   99 = Refused

E3. People think the Quit Line would not be helpful to them in quitting tobacco. *(If needed say “do you agree or disagree”)*
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree
   2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree
   3 = Somewhat disagree
   77 = Don’t know
   99 = Refused

E4. People think that the Quit Line nurses would not treat them with respect. *(If needed say “do you agree or disagree”)*
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree
   2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree
   3 = Somewhat disagree
   77 = Don’t know
   99 = Refused

E5. People think that Quit Line nurses would be judgmental. *(If needed say “do you agree or disagree”)*
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree
   2 = Somewhat agree
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree
E6. People think that Quit Line nurses would not be culturally sensitive. *(If needed say “do you agree or disagree”) (if needed say “by culturally sensitive we mean the Quit Line nurses would understand and appreciate people with differing backgrounds, cultures, or beliefs. For example, Quit Line nurses would understand and respect persons from different racial/ethnic groups.” Re-read question after providing if needed statement)*

Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree
2 = Somewhat agree

Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree
3 = Somewhat disagree
77 = Don’t know
99 = Refused

We’re over half-way through.

**Part F: Current Tobacco Use and Quitting**

Now I am going to ask you about your use of tobacco products and quit attempts.

F1. Have you smoked at least 100 cigarettes in your entire life? *(5 packs = 100 cigarettes)*
1 = Yes
2 = No -> skip to F7
77 = Don’t know
99 = Refused

F2. Do you now smoke cigarettes everyday, some days, or not at all?
1 = Everyday -> skip to F4
2 = Some days -> skip to F4
3 = Not at all
77 = Don’t know
99 = Refused

F3. What was the date you last smoked, even a single puff on a cigarette? *(If necessary, probe for month, not day)*

Record date _____________
mm/dd/yyyy
77/77/7777 = Don’t know
99/99/9999 = Refused

F4. Thinking back to when you first called the Quit Line 3 months ago, on the days that you smoked, about how many cigarettes per day did you smoke? *(Note: 1 pack = 20 cigarettes)*

Record number of cigarettes_________
77 = Don’t know/Not Sure
99 = Refused
(If F2=3, person is not a current tobacco user, skip to F7)

F5. On average, about how many cigarettes per day do you now smoke, on the days that you do smoke? (Note: 1 pack = 20 cigarettes)

Record number of cigarettes________
77 = Don’t know/Not Sure
99 = Refused

F6. In the past three months, have you stopped smoking for one day or more because you were trying to quit?
1 = Yes
2 = No
77 = Don’t know
99 = Refused

F7. Have you ever used or tried any smokeless tobacco products, such as chew, dip, or snuff?
1 = Yes
2 = No → skip to F11
77 = Don’t know
99 = Refused

F8. Do you now use smokeless tobacco everyday, some days, or not at all?
1 = Everyday → skip to F10
2 = Some days → skip to F10
3 = Not at all
77 = Don’t know
99 = Refused → skip to F11

F9. What was the date you last used smokeless tobacco?
Record date________________ → skip to F11
77 = Don’t know → skip to F11
99 = Refused → skip to F11

F10. In the past three months, have you stopped using smokeless tobacco for one day or more because you were trying to quit?
1 = Yes
2 = No
77 = Don’t know
99 = Refused

F11. In the past three months, have you tried using nicotine replacement patches?
1 = Yes
2 = No
77 = Don’t know
99 = Refused

F12. In the past three months, have you tried using nicotine replacement gum or inhalers?
F13. In the past three months, have you tried using medications such as Zyban or Wellbutrin to help you quit tobacco?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

((If F1 =2 or F2 = 3) and (F7 = 2 or F8 = 3) then person is not a current tobacco user, skip to G2)

F14. Are you seriously considering quitting tobacco within the next six months?
   1 = Yes
   2 = No → Skip to F16
   77 = Don’t know
   99 = Refused

F15. Do you plan to quit tobacco within the next 30 days?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

F16. How likely is it that you would call the Alaska Tobacco Quit Line again? Would you say…
   1 = Very likely
   2 = Somewhat likely
   3 = Not at all likely
   77 = Don’t know
   99 = Refused

Part G: Barriers and Enablers to Quitting, and Household Smoking

G1. People experience different barriers to quitting tobacco. What are the three hardest things about quitting for you? (Do not read responses. If respondent does not answer, probe with: “Take a few seconds to think about it.” If respondent answers with only one or two barriers, probe with: “Anything else?”)
G1a  Barrier #1:

1= OTHER USERS--Being around other people who use tobacco

2= COST--Paying the high price of the patch, nicotine gum, or other nicotine replacements

3= FEAR OF FAILURE--Worrying about past failures in quitting or worrying that I would start using tobacco again

4= STRESS--Having stress in your life

5= ALCOHOL--Being in a situation where I would want to drink an alcoholic beverage

6= ADDICTION--Physical or psychological addiction- including tobacco use being a habit, feeling a lack of will power, using for a long time, having cravings, and having withdrawal symptoms such as moodiness/irritability, and jitters

7= WEIGHT--Gaining weight/overeating

8= ASSOCIATED WITH ACTIVITIES--Tobacco use being associated with everyday activities- such as eating, drinking coffee, taking work breaks, driving

9= DEPRESSION/LONELINESS--Dealing with depression or loneliness

10= Other (Specify) __________________

11= No barriers → skip to G3

77 = Don’t know → skip to G3

99 = Refused → skip to G3

G1b  Barrier #2:
Same response categories as G1a, with slight change in response 11: “No other barriers.” Same skip patterns as G1a.

G1c  Barrier #3:
Same response categories as G1a, with slight change in response 11: “No other barriers.” All responses skip to G3.

G2. People have different things that help them quit tobacco and stay quit. What three things do you think were the most helpful to you in quitting? (Do not read responses. If respondent does not answer, probe with: “Take a few seconds to think about it.” If respondent answers with only one or two barriers, probe with: “Anything else?”)

G2a  Quit Aid #1:

1= NICOTINE REPLACEMENT--Using the nicotine patch, gum, or an inhaler

2= MEDICATIONS--Using Wellbutrin/Zyban

3= REPLACEMENT BEHAVIORS--Replacing tobacco use with other behaviors, like chewing gum or holding a pencil in your hand

4= SUPPORT GROUPS--Attending a support group or classes for users trying to quit

5= FAMILY/FRIEND SUPPORT--Getting support from family or friends in your quit attempt, or people around you quit

6= EXERCISE--Doing physical exercise

7= STAYING BUSY

8= PRINTED INFO--Getting printed information about what helps when quitting
9= QUIT LINE--Getting telephone counseling through the Quit Line
10= AVOIDING--Staying away from situations that make you want to use tobacco
11= HEALTH PROVIDER--Getting quitting advice from your health provider
12= NON-USERS--Being with people who do not use tobacco
13= HOMEOPATHY--Taking herbs, acupuncture, hypnosis
14= LESS STRESS
15= COST--High price of tobacco
16= Other (Specify) ______________________
17= No reasons
77 = Don’t know
99 = Refused

G2b  Quit Aid #2:
Same response categories as G2a, with slight change in response 17:
“No other reasons.”

G2c  Quit Aid #3:
Same response categories as G2a, with slight change in response 17:
“*No other reasons.

G3. Not including yourself, is there anyone in your home who smokes?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

G4. Thinking back to just before you called the Quit Line about 3 months ago, which of the
    following best described the rules about smoking inside your home?
   1 = No one was allowed to smoke anywhere inside your home
   2 = Smoking was allowed in some places or at some times
   3 = Smoking was allowed anywhere inside your home
       77 = Don’t know
       99 = Refused

G5. Which of the following best describes the rules about smoking inside your home now?
    1 = No one is allowed to smoke anywhere inside your home
    2 = Smoking is allowed in some places or at some times
    3 = Smoking is allowed anywhere inside your home
       77 = Don’t know
       99 = Refused

Part H. Subject Demographics

We’re almost done. I’m going to just ask a few questions about you. Remember that your
information is confidential.

H1. Record gender (do not ask)
   1 = Male
2 = Female

H2. Are you Hispanic or Latino/a?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

H3. Which one or more of the following would you say is your race? Would you say:
White, Black or African American, Asian or Pacific Islander, American Indian, Alaska
Native, or something else? (Mark all that apply.)
   1 = White
   2 = Black or African American
   3 = Asian or Pacific Islander
   4 = American Indian
   5 = Alaska Native
   6 = Other (specify; prompt if needed “What would you say is your
       race?”)__________
   77 = Don’t know
   99 = Refused

(If only one response AND H3 = 3, skip to H5)
(If only one response AND H3 ≠ 3, then skip to H6)

H4. Which one of these groups would you say best represents your race?
   1 = White→skip to H6
   2 = Black or African American→skip to H6
   3 = Asian or Pacific Islander
   4 = American Indian→skip to H6
   5 = Alaska Native→skip to H6
   6 = Other (specify)__________→skip to H6
   77 = Don’t know→skip to H6
   99 = Refused→skip to H6

H5. Which of the following best describes your Asian or Pacific Islander heritage? (If
respondent cuts you off, finish reading list by saying: “So you’re not (finish reading list)….?”)
   1 = Native Hawaiian
   2 = Chinese
   3 = Japanese
   4 = Korean
   5 = Filipino
   6 = Vietnamese
   7 = Laotian
   8 = Cambodian
   9 = Asian Indian
   10 = Samoan
   11 = Guamanian/Chamorro
   12 = Something else (specify)__________
77 = Don’t know
99 = Refused

H6. What is the highest grade of school you have completed?
1 = Never attended school or only attended kindergarten
2 = Grades 1-8 (elementary)
3 = Grades 9-11 (some high school)
4 = Grade 12 or GED (high school graduate)
5 = College 1-3 years (some college, technical school, comm college/AA)
6 = College graduate (4 years)
7 = Don’t know
8 = Beyond college
9 = Refused

H7. Do you work outside the home?
1 = Yes
2 = No
77 = Don’t know
99 = Refused

H8. Do you have any kind of health care coverage, including private health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health or the Native Alaska Health Service?
1 = Yes
2 = No
77 = Don’t know
99 = Refused

H9. Is your annual household income from all sources.... (if needed, explain we mean annual household income before taxes)

(If respondent refuses at ANY income level, code ‘99 Refused’)
4 = Less than $25,000 → If “no,” ask 5; if “yes,” ask 3
($20,000 to less than $25,000)
3 = Less than $20,000 → If “no,” code 4; if “yes,” ask 2
($15,000 to less than $20,000)
2 = Less than $15,000 → If “no,” code 3; if “yes,” ask 1
($10,000 to less than $15,000)
1 = Less than $10,000 → If “no,” code 2
5 = Less than $35,000 → If “no,” ask 6
($25,000 to less than $35,000)
6 = Less than $50,000 → If “no,” ask 7
($35,000 to less than $50,000)
7 = Less than $75,000 → If “no,” code 8
($50,000 to less than $75,000)
8 = $75,000 or more
77 = Don’t know
99 = Refused

H10. Do you have children under the age of 18 living in your household?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

Part I: Questions for Alaska Natives Only (If H4 = 5)
You just told me that you are an Alaska Native. Now I’m going to ask you a few questions about your experience with the Quit Line that might be important to you and other Alaska Natives who call the Quit Line.

I1. Would you have preferred to have an Alaska Native nurse to talk with on the Quit Line?
   1 = Would not have preferred
   2 = Neither preferred nor not preferred
   Preferred -> ask
   3 = Strongly preferred
   4 = Somewhat preferred

   77 = Don’t know
   99 = Refused

I2. Were there any questions that you felt were too personal to be discussed on the phone with the Quit Line nurse?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

I3. During your conversations with the Quit Line nurse, did you feel the pace of the questions and advice were
   1 = About right
   2 = A little fast
   3 = A little slow
   77 = Don’t know/don’t remember
   99 = Refused

I4. Do you think the Alaska Tobacco Quit Line is appropriate for Alaska Natives? By appropriate we mean the Quit Line nurses would understand and appreciate people with different backgrounds and be sensitive to the ways that Alaska Natives communicate and share information
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused
**Conclusion**
That was the last question. Thank you so much for helping us out. If you need any more help or information about quitting tobacco, you can call the Quit Line again. Would you like that number? *(If needed, provide respondent with the Quit Line number 888-842-QUIT (7848))* Also, if you have any questions about this survey, you may call the person in charge of it at the Department of Health and Social Services. Would you like that number? *(If needed, give the following name and number: Tari O’Connor at 1-907-269-8895).* Thanks again.
Overview: The purpose of this study is to evaluate satisfaction and quit rates for callers of Alaska’s Tobacco Quit Line at three months following their initial call to the Quit Line. The study will evaluate Quit Line callers who made their initial call to the Quit Line during the period November 1, 2005 through October 31, 2006. The survey will continue through January (or early February) 2007.

Description of the Quit Line: The Alaska Quit Line serves the people in Alaska who want help in quitting tobacco use. The Quit Line is operated by the Providence Health System Nurse Advice Call Center under contract with Alaska Department of Health and Social Services.

Study Methods:
List of potential survey participants: Every 2 weeks, the Alaska Quit Line will transfer to Program Design and Evaluation Services a password protected file (or copies of paper forms) via certified mail that contains:
1) Caller’s name (last and first)
2) Caller’s primary phone number
3) Caller’s secondary phone number
4) Date of initial call to the Quit Line
5) Race
6) Ethnicity
7) Tobacco Use Status
8) Quit Line ID

PDES will verify the completeness of the data, perform sampling procedures (after the 3rd month), and within no fewer than 3-5 business days send a password-protected file to the Alaska Survey Lab. The file for the Survey Lab will contain the same data as described above, except a Project ID will be substituted for the Quit Line ID.

Survey procedures:
- Survey Lab staff will attempt to reach potential participants 90 days from the initial call to the Quit Line.
- The first time an answering machine is reached, a message is left for the potential participant. A total of two messages should be left on answering machines. After a message is left, no calling should take place for two days to allow for the potential participant to call back the Survey Lab.
- Procedures similar to BRFSS should be used for making the calls. That is, a final disposition should only be given after at least 5 calling occasions (consisting of no more than 3 attempts at least one hour apart) for a minimum of 15 call attempts. Of the 15 call attempts, there should be at least 3 weekday calls, 3 weeknight calls, and 3 weekend calls. Calls should be made over 3 different weeks, and the final disposition code should be given at the end of the 3rd week (this procedure is different from BRFSS). Therefore, no calls should be made after the 3rd week, unless an interview is already scheduled.
- Institutionalized individuals (e.g., in jail or prison) should not be interviewed.

Disposition reports:
- Disposition reports should be provided to Myde Boles monthly.
- Those with final disposition codes should be reported separately from those still pending.

Confidentiality:
• Study data should be transferred among Alaska Quit Line, PDES, and Alaska Survey Lab on a password-protected CD or diskette via certified mail.
• Data and identifiers will be destroyed at the Alaska Survey Lab within one year after completion of the interviews. Before the identifiers are destroyed, project staff will maintain electronic data with identifiers in password-protected files to which only project staff will have access, and they will keep any paper documents with identifiers in a locked file cabinet. The members of the project team have signed a confidentiality agreement and are well acquainted with the importance of handling data to maintain confidentiality.

**Preliminary Datasets:** Alaska Survey Lab should transfer the following survey datasets to Myde Boles at PDES on password-protected CDs or diskettes via certified mail:

• After the pilot surveys are completed.
• In the fourth week of March 2006. This dataset should contain data on interviews completed through February 2006.
• In the fourth week of April 2006. This dataset should contain data on interviews completed through March 2006.
• In the fourth week of May 2006. This dataset should contain data on interviews completed through April 2006.
• After May, this cycle expands to 3-month intervals and continues through early 2007. For example, in the fourth week of August 2006, the dataset should contain data on interviews completed through July 2006; in the fourth week of November 2006, the dataset should contain data on interviews completed through October 2006, etc. The last dataset should contain data on interviews completed through January (or early February) 2007.
• These datasets should not contain any personal identifiers (e.g., name, address, phone #). Use Project ID (named ProjectID on the datasets that Myde sends to Survey Lab) as the unique identifier.

**Address for Certified Mail:**
Myde Boles, Ph.D.
Program Design and Evaluation Services
800 NE Oregon Street, Suite 550
Portland, OR 97232

Phone: 971-673-0595
APPENDIX C - RESPONSE FREQUENCIES
Evaluating the Alaska Tobacco Quit Line

Three-Month Follow-up Survey

RESPONSE FREQUENCIES*

*All respondents, not just survey completers
Introduction

Hello. May I please speak with [NAME]?

**IF NOT AVAILABLE:** I’m ______ calling from the Alaska Department of Health and Social Services. Can you suggest a convenient time when I could reach (him/her)?

*If person asks to take a message, say “please have [NAME] call me at 1-800-???-????.”*

**IF PERSON NO LONGER LIVES THERE:** I’m ______ calling from the Alaska Department of Health and Social Services. Is there a telephone number where I could reach (him/her) directly?

*IF YES:* Interviewer, record phone number and ask if there is a best day/time to reach him/her.

*IF NO:* Thank you very much for your time.

**MESSAGE FOR ANSWERING MACHINE:**
I’m calling for [NAME] from the Alaska Department of Health and Social Services about a health study. I would greatly appreciate it if you would call us toll-free at 1-800-???-????. Thank you.

**WHEN RESPONDENT ON LINE:** Hello. I’m ______ calling from the Alaska Department of Health and Social Services and we are conducting a survey to evaluate the Alaska Tobacco Quit Line. May I take a few moments of your time to tell you a little bit about the survey?

*IF YES: SKIP TO CONSENT*

**IF NOT A GOOD TIME, ASK:** When would be a convenient time for me to call back? **ARRANGE CALLBACK TIME**

*IF NO, thank and terminate for hard refusal.*
CONSENT

As I mentioned, we’re doing a survey to evaluate the Alaska Tobacco Quit Line. You called the Quit Line in [MONTH], and your opinion is important to us. If you agree to participate in this survey, we will ask you some questions about your experience with the Quit Line, your current use of tobacco products, and some other questions related to tobacco use. This survey will take about 15-20 minutes and our conversation may be monitored for quality assurance purposes. Your answers will be kept confidential. You don’t have to do this survey if you don’t want to, and you can stop at any time. Your decision about participating won’t change any services you get from the Quit Line and your Quit Line nurse won’t be told your answers. Also, if there is any question you do not want to answer, just tell me and we can skip over it.

May I ask you the questions right now?

1 = Yes  836
2 = No (determine a better time to call)  1105
999 = No (thank and terminate for hard refusal)

Great. Thank you.

Confirm eligibility

Before we start, I want to make sure that you are eligible for this study.

Elig1. What is your age?  644
   Record age in years _____ ->
   If >= 18 years, skip to Study ID section.
   If < 18 years, ineligible 8

777 = Don’t know  1
999 = Refused  2
   If ineligible, say “We are only interviewing people who are at least 18 years old. Thank you very much for your time.”  796

Elig2. Are you 18 years of age or older?

1 = Yes  152
2 = No -> ineligible

777 = Don’t know -> ineligible  1789
999 = Refused -> ineligible
   If ineligible, say “We are only interviewing people who are at least 18 years old. Thank you very much for your time.”

Study ID of Potential Participant ____________________
Date of Interview ______________ (mm/dd/yyyy)
Part A. Satisfaction with Quit Line Services

Ok, you are eligible, so let’s get started. First, I’m going to ask you some questions about your experience with the Alaska Tobacco Quit Line when you called about three months ago.

A1. Do you remember calling the Quit Line?
   1 = Yes  790
   2 = No  In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you.  → skip to F1  4
   77 = Don’t know  In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you.  → skip to F1  2
   99 = Refused  In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you.  → skip to F1  0

A2. When you called the Quit Line did you speak with a Quit Line nurse right away?
   1 = Yes  → skip to A3  540
   2 = No  221
   77 = Don’t know  → skip to A3  29
   99 = Refused  → skip to A3  0

A2a. Did you leave a message on the Quit Line voice mail, or did something else happen?

   1 = Leave a message on the Quit Line voice mail  205
   2 = Something else (Specify)  → skip to A3  14
   77 = Don’t know  → skip to A3  2
   99 = Refused  → skip to A3  0

A2b. How soon did the Quit Line get back with you?
   1 = In less than 1 hour  59
   2 = In more than 1 hour but less than 1 day  76
   3 = In 1-2 days  44
   4 = In 3 or more days  14
   5 = I never heard back from them  In that case, I won’t ask you any questions about the Quit Line, but I’ll just ask a few questions about you.  → skip to F1  0
   6 = I never heard back from them and had to call the Quit Line again and finally spoke with someone  9
   77 = Don’t know  3
   99 = Refused  0

A3. When you talked with a nurse from the Quit Line, you were asked a few questions about yourself to register. How did you feel about the registration process? Would you say it...
   1 = Was fine  756
   2 = Somewhat uncomfortable  26
After registration, you may have spoken with the nurse about quitting tobacco. The next set of questions asks about your experience talking with that person. When I refer to quitting tobacco or using tobacco, I mean smoking cigarettes, or using smokeless tobacco, such as chew, dip, or snuff.

A4. How helpful was the nurse in talking to you about ways to help you quit tobacco? Would you say...(If needed say “such as dealing with urges, or specific methods for quitting)
   1 = Very helpful 603
   2 = Somewhat helpful 149
   3 = Not too helpful 16
   4 = Not at all helpful 12
   66 = Did not talk about it 4
   77 = Don’t know 3
   99 = Refused 0

A5. How helpful was the nurse in providing information about medications for quitting tobacco such as the nicotine patch and Zyban? (If needed read the response categories)
   1 = Very helpful 586
   2 = Somewhat helpful 141
   3 = Not too helpful 23
   4 = Not at all helpful 13
   66 = Did not talk about it 10
   77 = Don’t know 12
   99 = Refused 1

A6. How would you rate your experience with the Quit Line nurse? Were you…?
   1 = Very satisfied 599
   2 = Somewhat satisfied 124
   3 = Somewhat dissatisfied 39
   4 = Very dissatisfied 10
   77 = Don’t know 12
   99 = Refused 1

A7. Over the past 3 months, about how many times did you talk with a Quit Line nurse?
   1 = 0 or 1 times 102
   2 = 2-5 times 457
   3 = 6 or more times 214
   77 = Don’t know 12
   99 = Refused 0

**Part B. Satisfaction with Quit Line Materials**

Next, I am going to ask about materials that the Quit Line may have mailed you after you called.
B1. Did you receive a “quit kit or trail guide to being tobacco free” in the mail after calling the Quit Line?
   1 = Yes 727
   2 = No → skip to B4 39
   77 = Don’t know → skip to B4 18
   99 = Refused → skip to B4 0

B2. How easy was it to understand the information in the “quit kit or trail guide?” Would you say...
   1 = Very easy 587
   2 = Somewhat easy 92
   3 = Not too easy 11
   4 = Not at all easy 3
   77 = Don’t know 33
   99 = Refused 1

B3. How useful was the information in the “quit kit?” Was it...
   1 = Very useful 392
   2 = Somewhat useful 264
   3 = Not too useful 26
   4 = Not at all useful 17
   77 = Don’t know 26
   99 = Refused 2

B4. When you called the Quit Line, the staff may have mentioned the availability of free nicotine replacement patches to help you quit tobacco. Were you eligible for the free nicotine patches offered by the Quit Line?
   1 = Yes 737
   2 = No → skip to Part C 25
   77 = Don’t know → skip to Part C 22
   99 = Refused → skip to Part C 0

B5. Did you accept the offer of free nicotine patches from the Quit Line?
   1 = Yes → skip to Part C 697
   2 = No 36
   77 = Don’t know → skip to Part C 4
   99 = Refused → skip to Part C 0

B5a. Why did you choose not to accept the patches?
 record response
Part C: Local Program Participation

The following questions ask about other programs or services you may have used since you called the Quit Line.

C1. Do you recall the Quit Line nurse discussing other resources in your community to help you with your quit process?
   1 = Yes  280
   2 = No → Skip to C2  458
   77 = Don’t know → Skip to C2  46
   99 = Refused → Skip to C2  0

   C1a. Did the nurse offer you a referral for other resources in your community to help you with your quit process?
      1 = Yes  156
      2 = No  74
      77 = Don’t know  49
      99 = Refused  0

C2. After calling the Quit Line, did you participate in any local programs or counseling support to help you quit tobacco – either those you heard about from the Quit Line or those you found yourself?
   1 = Yes  79
   2 = No  696
   77 = Don’t know  8
   99 = Refused  0

Part D: Overall Experience and Satisfaction

Now I will ask how you felt overall about the Quit Line. This means everything that happened when you called, including the nurse and the materials, or anything that happened because of your call.

D1. How satisfied were you overall with the Quit Line program? Would you say...
   1 = Very satisfied  547
   2 = Somewhat satisfied  147
   3 = Somewhat dissatisfied  65
   4 = Very dissatisfied  21
   77 = Don’t know  3
   99 = Refused  0
D2. What, if anything, would improve your satisfaction with the Alaska Tobacco Quit Line? (Do not read responses. Select all that apply. After respondent has answered, use probe: “Anything else?”)

1 = Free nicotine replacement gum or inhaler [Multiple responses allowed]
2 = Zyban or Wellbutrin
3 = Availability of more follow-up calls
4 = Better Quit Line nurses
5 = More time to talk with the Quit Line nurse
6 = Better/more resources available in your community to help you with your quit process
7 = Better/more resources available through your health plan to help you with your quit process
8 = Better/different items in the Quit Kit
9 = Being called back by the Quit Line sooner for your first counseling session
10 = Successfully quitting
11 = More free patches
12 = Other (Specify) ____________________________________________
13 = Nothing in particular
77 = Don’t know
99 = Refused

D3. Would you suggest the Quit Line to others if they wanted help in quitting tobacco? Would you say....

1 = Yes, for sure 645
2 = Yes, I probably would 113
3 = No, I probably would not 16
4 = No, never 3
77 = Don’t know 4
99 = Refused 1

As you think about your experience with the Quit Line, please tell me if you agree or disagree with each of the following statements:

Randomize order of questions D4-D9.

D4. The Quit Line was helpful in getting you ready to quit tobacco (If needed say “do you agree or disagree”)

Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 561
2 = Somewhat agree 135

Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 25
3 = Somewhat disagree 42
77 = Don’t know 10
99 = Refused 5

D5. You were able to talk to someone as quickly as you wanted to (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 516
2 = Somewhat agree 123
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 48
3 = Somewhat disagree 74
77 = Don't know 15
99 = Refused 2

D6. The Quit Line nurse spent enough time with you (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 618
2 = Somewhat agree 93
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 25
3 = Somewhat disagree 37
77 = Don't know 5
99 = Refused 1

D7. In your opinion, the Quit Line nurse knew what s/he was talking about  (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 653
2 = Somewhat agree 93
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 2
3 = Somewhat disagree 16
77 = Don’t know 10
99 = Refused 4

D8. The Quit Line nurse was supportive and encouraging in your attempt to quit (If needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 677
2 = Somewhat agree 82
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 7
3 = Somewhat disagree 9
77 = Don’t know 5
99 = Refused 0

D9. The Quit Line nurse understood your needs (if needed say “do you agree or disagree”)
Agree -> Do you strongly agree or somewhat agree?
1 = Strongly agree 597
2 = Somewhat agree 113
Disagree -> Do you strongly disagree or somewhat disagree?
4 = Strongly disagree 19
3 = Somewhat disagree 36
77 = Don’t know 11
99 = Refused 1
D10. During your interactions with the Quit Line nurse, you were always treated respectfully. *(If needed say “do you agree or disagree”)*

Agree -> Do you strongly agree or somewhat agree?

1 = Strongly agree -> skip to D11 715
2 = Somewhat agree -> skip to D11 35

Disagree -> Do you strongly disagree or somewhat disagree?

4 = Strongly disagree 11
3 = Somewhat disagree 14
77 = Don’t know → skip to D11 3
99 = Refused → skip to D11 0

D10a. What did the nurse do to make you feel this way?

Record response
77 = Don’t know 0
99 = Refused 0

Now I’m going to ask you some specific questions about how you were treated by the Quit Line nurse. You might have already mentioned some of these things.

D11. Did you ever feel the Quit Line nurse treated you with a lack of respect…?[Randomize D11a-D11e]

D11a: … because of the kinds of questions you asked?

1 = Yes 23
2 = No 746
77 = Don’t know 6
99 = Refused 0

D11b: … because of the type of help you needed?

1 = Yes 22
2 = No 748
77 = Don’t know 5
99 = Refused 0

D11c: … because of your race or ethnicity?

1 = Yes 5
2 = No 769
77 = Don’t know 3
99 = Refused 0

D11d: … because of your gender?

1 = Yes 2
2 = No 767
77 = Don’t know 6
99 = Refused 0

D11e: … because of your education level or income?

1 = Yes 7
2 = No 762
77 = Don’t know 7
99 = Refused 1

D11f: … for any other reason?

1 = Yes *(specify; prompt, if needed: “What was the reason?”)* 31
2 = No 739
PART E. OTHER PEOPLE’S PERCEPTION OF THE QUIT LINE

Next, I’m going to ask how you think other people you know might view the Quit Line. Please indicate if you agree or disagree with each of the following statements: [RANDOMIZE E1-E6] (If needed say “just give your best guess”)

E1. People don't know about the Quit Line. (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree  268
   2 = Somewhat agree  230
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree  134
   3 = Somewhat disagree  105
   77 = Don’t know  32
   99 = Refused  2

E2. People think the Quit Line is not needed because people should quit tobacco on their own. (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree  54
   2 = Somewhat agree  55
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree  528
   3 = Somewhat disagree  91
   77 = Don’t know  37
   99 = Refused  5

E3. People think the Quit Line would not be helpful to them in quitting tobacco. (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree  81
   2 = Somewhat agree  118
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree  359
   3 = Somewhat disagree  134
   77 = Don’t know  75
   99 = Refused  5

E4. People think that the Quit Line nurses would not treat them with respect. (If needed say “do you agree or disagree”)
   Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree  24
   2 = Somewhat agree  40
   Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree  544
E5. People think that Quit Line nurses would be judgmental. *(If needed say “do you agree or disagree”)*

Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree 36
   2 = Somewhat agree 56

Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree 506
   3 = Somewhat disagree 105
   77 = Don’t know 63
   99 = Refused 7

E6. People think that Quit Line nurses would not be culturally sensitive. *(If needed say “do you agree or disagree”) (if needed say “by culturally sensitive we mean the Quit Line nurses would understand and appreciate people with differing backgrounds, cultures, or beliefs. For example, Quit Line nurses would understand and respect persons from different racial/ethnic groups.” Re-read question after providing if needed statement)*

Agree -> Do you strongly agree or somewhat agree?
   1 = Strongly agree 39
   2 = Somewhat agree 35

Disagree -> Do you strongly disagree or somewhat disagree?
   4 = Strongly disagree 517
   3 = Somewhat disagree 94
   77 = Don’t know 77
   99 = Refused 7

We’re over half-way through.

**Part F: Current Tobacco Use and Quitting**

Now I am going to ask you about your use of tobacco products and quit attempts.

F1. Have you smoked at least 100 cigarettes in your entire life? *(5 packs = 100 cigarettes)*
   1 = Yes 755
   2 = No -> skip to F7 16
   77 = Don’t know 2
   99 = Refused 0

F2. Do you now smoke cigarettes everyday, some days, or not at all?
   1 = Everyday -> skip to F4 252
   2 = Some days -> skip to F4 165
   3 = Not at all 340
   77 = Don’t know 0
   99 = Refused 0

F3. What was the date you last smoked, even a single puff on a cigarette? *(If necessary, probe for month, not day)*
F4. Thinking back to when you first called the Quit Line 3 months ago, on the days that you smoked, about how many cigarettes per day did you smoke? (Note: 1 pack = 20 cigarettes)
   Record number of cigarettes ________ 735
   77 = Don’t know/Not Sure  4
   99 = Refused  3
   88 =  15
   (If F2=3, person is not a current tobacco user, skip to F7)

F5. On average, about how many cigarettes per day do you now smoke, on the days that you do smoke? (Note: 1 pack = 20 cigarettes)
   Record number of cigarettes ________ 411
   77 = Don’t know/Not Sure  2
   99 = Refused  2
   88 =  2

F6. In the past three months, have you stopped smoking for one day or more because you were trying to quit?
   1 = Yes  344
   2 = No  73
   77 = Don’t know  0
   99 = Refused  0

F7. Have you ever used or tried any smokeless tobacco products, such as chew, dip, or snuff?
   1 = Yes  208
   2 = No → skip to F11  565
   77 = Don’t know  0
   99 = Refused  0

F8. Do you now use smokeless tobacco everyday, some days, or not at all?
   1 = Everyday → skip to F10  12
   2 = Some days → skip to F10  14
   3 = Not at all  182
   77 = Don’t know  0
   99 = Refused → skip to F11  0

F9. What was the date you last used smokeless tobacco?
   Record date ______________ → skip to F11  38
   77 = Don’t know → skip to F11  143
   99 = Refused → skip to F11  1

F10. In the past three months, have you stopped using smokeless tobacco for one day or more because you were trying to quit?
   1 = Yes  40
2 = No  20
77 = Don't know  9
99 = Refused  4

F11. In the past three months, have you tried using nicotine replacement patches?
1 = Yes  598
2 = No  172
77 = Don't know  3
99 = Refused  0

F12. In the past three months, have you tried using nicotine replacement gum or inhalers?
1 = Yes  123
2 = No  650
77 = Don't know  0
99 = Refused  0

F13. In the past three months, have you tried using medications such as Zyban or Wellbutrin to help you quit tobacco?
1 = Yes  83
2 = No  688
77 = Don't know  2
99 = Refused  0

((If F1 =2 or F2 = 3) and (F7 = 2 or F8 = 3) then person is not a current tobacco user, skip to G2)

F14. Are you seriously considering quitting tobacco within the next six months?
1 = Yes  399
2 = No \(\rightarrow\) Skip to F16  14
77 = Don't know  15
99 = Refused  0

F15. Do you plan to quit tobacco within the next 30 days?
1 = Yes  248
2 = No  111
77 = Don't know  55
99 = Refused  0

F16. How likely is it that you would call the Alaska Tobacco Quit Line again? Would you say...
1 = Very likely  261
2 = Somewhat likely  92
3 = Not at all likely  69
77 = Don't know  6
99 = Refused  0
Part G: Barriers and Enablers to Quitting, and Household Smoking

G1. People experience different barriers to quitting tobacco. What are the three hardest things about quitting for you? (Do not read responses. If respondent does not answer, probe with: “Take a few seconds to think about it.” If respondent answers with only one or two barriers, probe with: “Anything else?”)

G1a Barrier #1: [Multiple Responses Allowed]
1= OTHER USERS--Being around other people who use tobacco
2= COST--Paying the high price of the patch, nicotine gum, or other nicotine replacements
3= FEAR OF FAILURE--Worrying about past failures in quitting or worrying that I would start using tobacco again
4= STRESS--Having stress in your life
5= ALCOHOL--Being in a situation where I would want to drink an alcoholic beverage
6= ADDICTION--Physical or psychological addiction- including tobacco use being a habit, feeling a lack of will power, using for a long time, having cravings, and having withdrawal symptoms such as moodiness/irritability, and jitters
7= WEIGHT--Gaining weight/overeating
8= ASSOCIATED WITH ACTIVITIES--Tobacco use being associated with everyday activities- such as eating, drinking coffee, taking work breaks, driving
9= DEPRESSION/LONELINESS--Dealing with depression or loneliness
10= Other (Specify) __________________
11= No barriers → skip to G3
77 = Don’t know → skip to G3
99 = Refused → skip to G3

G1b Barrier #2: [Multiple Responses Allowed]
Same response categories as G1a, with slight change in response 11: “No other barriers.”
Same skip patterns as G1a.

G1c Barrier #3: [Multiple Responses Allowed]
Same response categories as G1a, with slight change in response 11: “No other barriers.” All responses skip to G3.

G2. People have different things that help them quit tobacco and stay quit. What three things do you think were the most helpful to you in quitting? (Do not read responses. If respondent does
not answer, probe with: “Take a few seconds to think about it.” If respondent answers with only one or two barriers, probe with: “Anything else?”

G2a Quit Aid #1:  [Multiple Responses Allowed]

1 = NICOTINE REPLACEMENT--Using the nicotine patch, gum, or an inhaler
2 = MEDICATIONS--Using Wellbutrin/Zyban
3 = REPLACEMENT BEHAVIORS--Replacing tobacco use with other behaviors, like chewing gum or holding a pencil in your hand
4 = SUPPORT GROUPS--Attending a support group or classes for users trying to quit
5 = FAMILY/FRIEND SUPPORT--Getting support from family or friends in your quit attempt, or people around you quit
6 = EXERCISE--Doing physical exercise
7 = STAYING BUSY
8 = PRINTED INFO--Getting printed information about what helps when quitting
9 = QUIT LINE--Getting telephone counseling through the Quit Line
10 = AVOIDING--Staying away from situations that make you want to use tobacco
11 = HEALTH PROVIDER--Getting quitting advice from your health provider
12 = NON-USERS--Being with people who do not use tobacco
13 = HOMEOPATHY--Taking herbs, acupuncture, hypnosis
14 = LESS STRESS
15 = COST--High price of tobacco
16 = Other (Specify) ____________________
17 = No reasons
77 = Don’t know
99 = Refused

G2b Quit Aid #2:  [Multiple Responses Allowed]

Same response categories as G2a, with slight change in response 17: “No other reasons.”

G2c Quit Aid #3:  [Multiple Responses Allowed]

Same response categories as G2a, with slight change in response 17: “No other reasons.

G3. Not including yourself, is there anyone in your home who smokes?

1 = Yes  265
2 = No  507
77 = Don’t know  1
99 = Refused  0

G4. Thinking back to just before you called the Quit Line about 3 months ago, which of the following best described the rules about smoking inside your home?

1 = No one was allowed to smoke anywhere inside your home  404
2 = Smoking was allowed in some places or at some times  146
3 = Smoking was allowed anywhere inside your home  217
G5. Which of the following best describes the rules about smoking inside your home now?
   1 = No one is allowed to smoke anywhere inside your home
   2 = Smoking is allowed in some places or at some times
   3 = Smoking is allowed anywhere inside your home
   77 = Don’t know
   99 = Refused

Part H. Subject Demographics

We’re almost done. I’m going to just ask a few questions about you. Remember that your information is confidential.

H1. Record gender (do not ask)
   1 = Male
   2 = Female

H2. Are you Hispanic or Latino/a?
   1 = Yes
   2 = No
   77 = Don’t know
   99 = Refused

H3. Which one or more of the following would you say is your race? Would you say:
White, Black or African American, Asian or Pacific Islander, American Indian, Alaska Native, or something else? (Mark all that apply.)
   1 = White
   2 = Black or African American
   3 = Asian or Pacific Islander
   4 = American Indian
   5 = Alaska Native
   6 = Other (specify; prompt if needed “What would you say is your race?”)
   77 = Don’t know
   99 = Refused

(If only one response AND H3 = 3, skip to H5)
(If only one response AND H3 ≠ 3, then skip to H6)

H4. Which one of these groups would you say best represents your race?
   1 = White
   2 = Black or African American
   3 = Asian or Pacific Islander
   4 = American Indian
5 = Alaska Native → skip to H6  8
6 = Other (specify) ——→ skip to H6  0
77 = Don’t know → skip to H6  4
99 = Refused → skip to H6  3

H5. Which of the following best describes your Asian or Pacific Islander heritage? (If respondent cuts you off, finish reading list by saying: “So you’re not (finish reading list)….?”)
   1 = Native Hawaiian  6
   2 = Chinese  4
   3 = Japanese  1
   4 = Korean  2
   5 = Filipino  5
   6 = Vietnamese  1
   7 = Laotian  0
   8 = Cambodian  0
   9 = Asian Indian  0
  10 = Samoan  4
  11 = Guamanian/Chamorro  1
  12 = Something else (specify) Laos  1
77 = Don’t know  0
99 = Refused  0

H6. What is the highest grade of school you have completed?
   1 = Never attended school or only attended kindergarten  0
   2 = Grades 1 - 8 (elementary)  8
   3 = Grades 9 - 11 (some high school)  97
   4 = Grade 12 or GED (high school graduate)  276
   5 = College 1 - 3 years (some college, technical school, comm college/AA)  271
   6 = College graduate (4 years)  113
   7 = Don’t know  0
   8 = Beyond college  1
  9 = Refused  6

H7. Do you work outside the home?
   1 = Yes  474
   2 = No  297
77 = Don’t know  0
99 = Refused  1

H8. Do you have any kind of health care coverage, including private health insurance, prepaid plans such as HMOs, government plans such as Medicare, or Indian Health or the Native Alaska Health Service?
   1 = Yes  533
   2 = No  232
77 = Don’t know  3
99 = Refused  4

H9. Is your annual household income from all sources…. (if needed, explain we mean annual household income before taxes)
Part I: Questions for Alaska Natives Only (If H4 = 5)
You just told me that you are an Alaska Native. Now I'm going to ask you a few questions about your experience with the Quit Line that might be important to you and other Alaska Natives who call the Quit Line.

I1. Would you have preferred to have an Alaska Native nurse to talk with on the Quit Line?

1 = Would not have preferred 45
2 = Neither preferred nor not preferred 27

Preferred -> ask
3 = Strongly preferred 7
4 = Somewhat preferred 6

77 = Don’t know 0
99 = Refused 0

I2. Were there any questions that you felt were too personal to be discussed on the phone with the Quit Line nurse?

1 = Yes 3
2 = No 79
I3. During your conversations with the Quit Line nurse, did you feel the pace of the questions and advice were

- 1 = About right  
- 2 = A little fast  
- 3 = A little slow  
- 77 = Don’t know/don’t remember  
- 99 = Refused  

I4. Do you think the Alaska Tobacco Quit Line is appropriate for Alaska Natives? By appropriate we mean the Quit Line nurses would understand and appreciate people with different backgrounds and be sensitive to the ways that Alaska Natives communicate and share information

- 1 = Yes  
- 2 = No  
- 77 = Don’t know  
- 99 = Refused  

**Conclusion**
That was the last question. Thank you so much for helping us out. If you need any more help or information about quitting tobacco, you can call the Quit Line again. Would you like that number? *(If needed, provide respondent with the Quit Line number 888-842-QUIT (7848))* Also, if you have any questions about this survey, you may call the person in charge of it at the Department of Health and Social Services. Would you like that number? *(If needed, give the following name and number: Tari O’Connor at 1-907-269-8895).* Thanks again.