

### African American Callers

While the overall smoking prevalence among African Americans has traditionally been lower than that of other populations of interest, recent epidemiologic data suggest smoking is on the rise, especially in young African Americans. African Americans suffer disproportionately from smoking-related diseases, are more likely to smoke menthol cigarettes, and are less likely to have successful quit attempts. Data from the Oklahoma Tobacco Helpline, however, indicate that African American tobacco users will utilize the telephone-based cessation service, are satisfied with the help they get, and are just as successful in their quit attempts as compared to others.

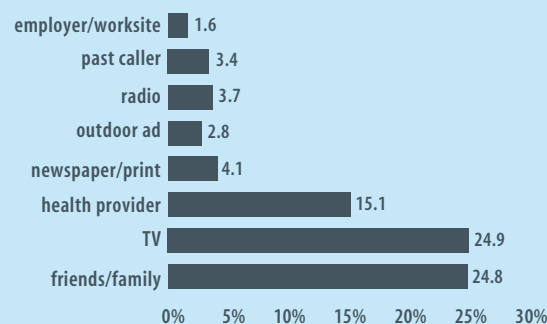
This fact sheet includes tobacco users who called the Oklahoma Tobacco Helpline between July 1, 2005 and December 31, 2008 and reported their race as Black or African American. During this time period, nearly 5,000 African American tobacco users received services (n=4954) representing about 8% of all tobacco users who called the Helpline during this time.

Two-thirds of the African American tobacco users registering with the Helpline were female (67%); the median age of registrants was 43 years; and 81% had at least a high school degree or GED. Almost half reported having no health insurance (47%), and 71% had an annual income of less than \$20,000.

Although African American registrants with the Helpline might be characterized as long-term smokers, with over half reporting smoking 20 or more years (59%) and another 33% smoking 6 to 19 years, most would be considered "light" smokers, with 54% smoking less than one pack of cigarettes per day.

African American tobacco users were most likely to hear about the Helpline from a friend/family member or from TV (Figure 1).

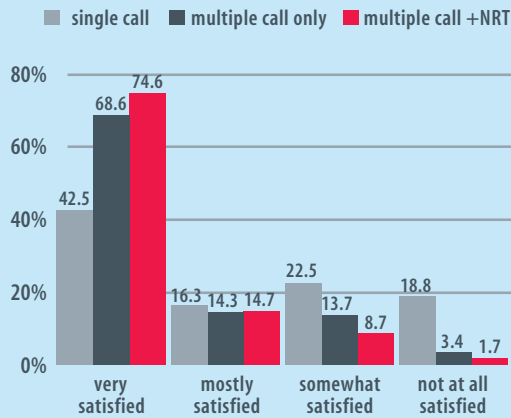
Figure 1: How do African American tobacco users hear about the Helpline?



About three fourths (76%) of African American callers were enrolled in the multiple call cessation program. Of those, 62% received 8 weeks of nicotine replacement therapy (NRT) plus counseling from the Helpline, and 12% received 2 weeks of NRT plus counseling from the Helpline.

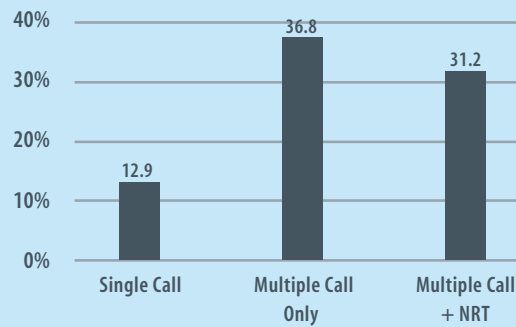
Satisfaction with the Helpline services among African American participants varied by the type of intervention received (Figure 2). It is important to note that both the single-call and multiple-call interventions are available to all callers, and tobacco users choose the level of intervention they wish to receive. Among the 610 African American Helpline participants who participated in the follow-up evaluation, single-call participants were least likely to be satisfied with the services they received from the Helpline (81% at least somewhat satisfied). Furthermore, those in the multiple-call program who also received NRT from the Helpline were most likely to say they were at least somewhat satisfied (98%).

Figure 2: Satisfaction with Services, by Intervention



One measure of the effectiveness of the Oklahoma Tobacco Helpline is 30-day abstinence at the 7-month follow-up. Seven months after contacting the Helpline participants are asked, “Have you had a cigarette, even a puff, in the past 30 days?” As expected, abstinence proportions varied by intervention received, with abstinence proportions more than twice as high among those receiving the multiple call intervention compared to single call (Figure 3). An unexpected finding is that NRT with the multiple call program did not boost quit rates among African Americans as is seen with other populations using the Oklahoma Tobacco Helpline during this time period. Further examination of the 7-month quit rates revealed that the difference between those who received the multiple call program plus NRT (31.2%) and those receiving only the multiple call program (36.8%) was not statistically significant. The quit rates observed for African American participants in the Oklahoma Tobacco Helpline, regardless of intervention received, far exceed the quit rates for “cold turkey” (approximately 5%).

Figure 3: 30-day Abstinence at the 7-month Follow-up, by Intervention



### Conclusions

These utilization and follow-up data demonstrate that African American tobacco users will call the Oklahoma Tobacco Helpline, and they are satisfied with the services they receive. African American tobacco users are most likely to hear about the Helpline from friends and family or the TV. These data may have implications for future promotion of the Helpline. African American participants report high levels of satisfaction with services, and many are successful in their quit attempts. Some studies have suggested that African American smokers are less likely to use NRT; thus, our unexpected finding of somewhat lower quit rates among NRT users should be further explored to evaluate the acceptability and utilization of NRT provided by the Helpline, and what, if any, obstacles to its effective use might be present.

The Oklahoma Tobacco Helpline is available at 1-800-QUIT-NOW, seven days a week. The Oklahoma Tobacco Helpline is funded by the Oklahoma Tobacco Settlement Endowment Trust, Oklahoma State Department of Health, and the Centers for Disease Control and Prevention. Services are provided at no charge to participants.



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