Fall 2004/Winter 2005

HelplineWire

The Newsletter of the California Smokers' Helpline

California Smokers' Helpline
1-800-NO-BUTTS

Expanding Opportunities at the Helpline

New Staff Member Please join us in welcoming Walter Silverman, the Helpline's new Partner Development Coordinator. Walter will act as a liaison with health care systems, advising them on increasing utilization of effective tobacco cessation treatments, including Helpline services. Walter brings a strong background in the field, having held a similar position with Free and Clear, Inc., a leading national provider of tobacco quitline services.

Recent Grants A new National Institutes of Health grant supports Helpline research testing interventions for smokers in three Asian-language populations: Chinese, Korean, and Vietnamese. Recruitment of participants began in August for a large randomized, controlled trial testing the efficacy of the Helpline's Asian counseling protocols. To support this study, the Helpline has convened an Asian Language Services Community Advisory Board (CAB) to ensure that our services are accessible and meet community needs. The CAB's wide representation draws from media, statewide programs, and community-based organizations. The first meeting, on August 24, 2004, generated a spirited and creative exchange of ideas and feedback. The Helpline and the Asian communities served will benefit greatly from these leaders' invaluable insight and expertise.

A grant received from California's Tobacco-Related Disease Research Program allows us to research the possibility of teaching non-smoking callers to provide tobacco cessation interventions to their family members who smoke. We will compare results across ethnicities and language preferences to examine the role of culture in tobacco cessation approaches.

First 5 California The Helpline is pleased to announce the extension of our partnership with First 5 California through June 2008. We look forward to our ongoing work with First 5 to promote a healthy, smoke-free environment for California children and families.

National Initiative Enhances Services On November 10, 2004, U. S. Health and Human Services Secretary Tommy G. Thompson announced initiatives to establish a national quitline network and enhance existing state quitlines. Aided by these initiatives, the Helpline will partner with the California Diabetes Prevention and Control Program (CDPCP). We are looking forward to working with CDPCP to expand our outreach to persons with diabetes and to the health care professionals who serve them.

CURRENT PERSPECTIVES

Telephone Counseling for Teen Smokers

By Gary Tedeschi, Ph.D.

Most teens who smoke want to quit, but only a few succeed. How can service providers help? In a soon-to-be-published article in the *Journal of Counseling & Development*, the Helpline presents its teen telephone counseling protocol, shown to significantly increase teen callers' quit rate. This column summarizes points from the article.

Compared to adult smokers, teens are more dependent on family, limited in life experience and maturity, strongly influenced by peers, and fluid in identity. These differences call for a specialized approach. After reviewing the literature, consulting with our counseling staff, and eliciting feedback from our young callers, we identified seven areas of emphasis for delivering cessation services to teens.

1. Counselor Characteristics Is it true that teens prefer peer counselors? Our counselors are adults, and we find that a counselor's age matters less to teens than skill and enthusiasm. Key qualifications include ease in developing rapport with teens, a high tolerance for inconsistency in client behaviors, and creativity in implementing the protocol.

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CALLER PROFILE

Here's a sobering statistic: the smoking prevalence rate for Californians of low socioeconomic status (SES) is almost double that for the general population of California adults. Low SES populations include those with low incomes, those with fewer than 12 years of education, the medically underserved, the unemployed, and the working poor.* The table and bar graphs to the right show that the Helpline is reaching these at-risk groups. The table and graphs use health insurance coverage as an indicator of SES, since most low SES callers either have coverage through Medi-Cal or have no coverage at all. The data profile all Helpline callers (212,741 total) from January 1, 1999 through October 31, 2004. Of the total, 64% represented low SES populations (26% had no health insurance coverage, and 38% had coverage through Medi-Cal).

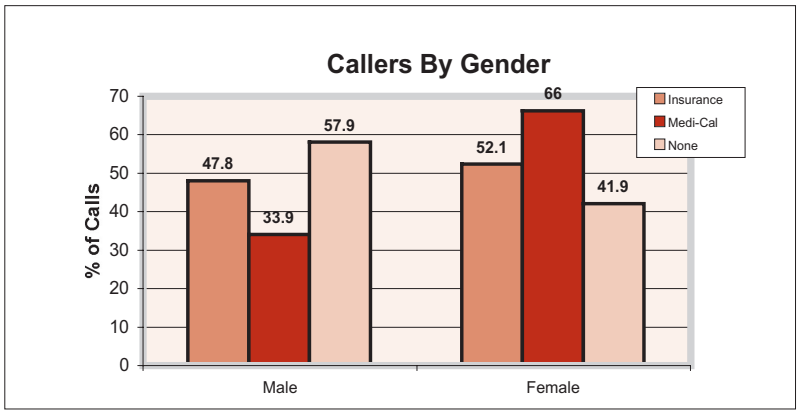
The table (top right) addresses callers' ethnicity and education. The bar graphs address callers' gender, age, and sources of referral. The data show that:

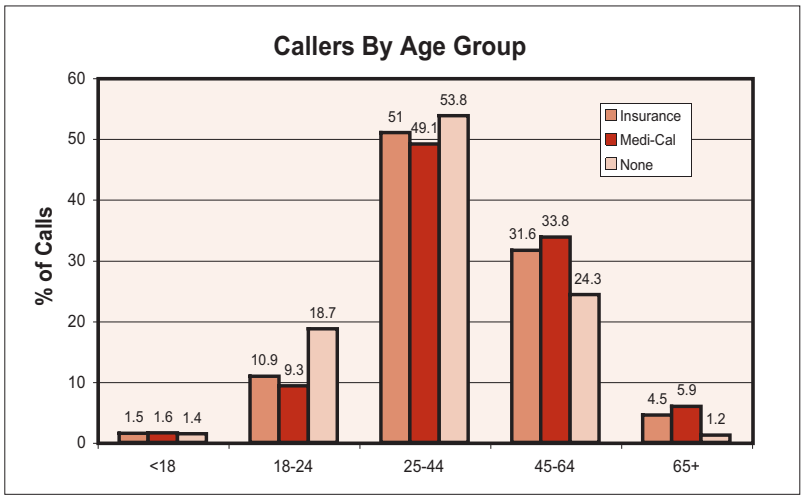
- Health care providers were the main referral source for Medi-Cal callers.
- Mass media were the main referral source for uninsured and privately insured callers.
- Regardless of SES, 25-44-year-olds were most likely to call.
- 61.5% of all Medi-Cal callers had only a high-school education or less.
- 66% of all Medi-Cal callers were female.

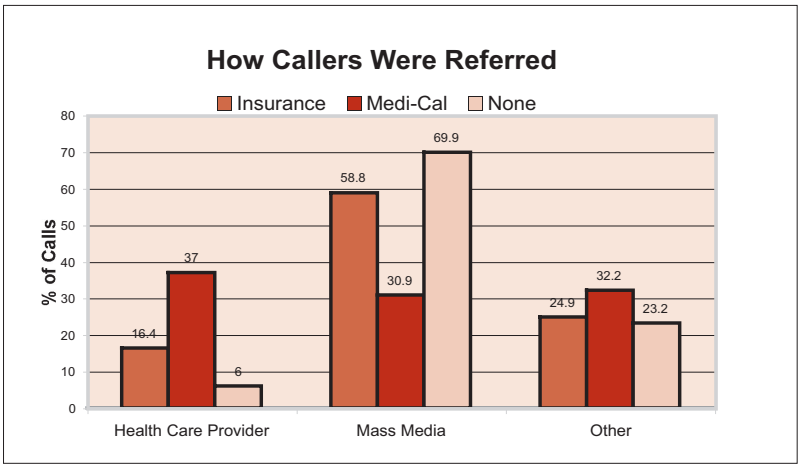
These data can help to guide future program decisions impacting the smoking prevalence of low SES populations. For more details about the data, please contact Judi Mills at **(858) 300-1012** or **jamills@ucsd.edu.**

*National Network on Tobacco Prevention and Poverty Website, **www.nntpp.org**

	Insurance	Medi-Cal	None
	N=77146	N=80221	N=55374
Ethnicity			
American Indian	2	4.3	2
Asian/Pacific Islander	6.7	3.2	9.4
Black/African American	12.1	14.9	11
Hispanic	11.9	10.7	26.2
Other	1.4	1.4	1.3
White/Caucasian	64.4	64.4	48.5
Education			
<=12 years	38.8	61.5	51.1
>12 years	57.8	36.1	42.4
Blank	3.4	2.5	6.5







Don't Miss the Next Edition of the Helpline Wire

Send Us Your Email Address

In an effort to save trees and money, the Helpline Wire is transitioning to an electronic version of the newsletter. To continue or start receiving the Helpline Wire, simply send your email address to **cshoutreach@ucsd.edu.**

THANK YOU!

CURIOUS QUERIES

Q: I would like to order "No Smoking in Entryways" signs or decals. Where are they available for purchase?

A:The signage shown below and other No Smoking signage is available for purchase through the Tobacco Education Clearinghouse of California (TECC) at:

TECC website:
www.tecc.org/public
or
TECC Customer Service at
831-438-4822 x230 or **103**

Item # J647

Item # J674

Item # J675

This signage is designed to support California's smoke-free entryway law. This law originated as Assembly Bill (AB846) and amends California Government Code Sections 7596-7598 to prohibit smoking within 20 feet of a main entrance, exit and operable windows of all public buildings (buildings owned, leased or occupied by state, county or city), as well as buildings on the campuses of University of California (UC), California State University (CSU) and California Community Colleges, effective January 1, 2004. For the law to be effective, a sign must be posted describing the no smoking prohibition. For more information about AB846, please visit the following resources:

BREATH - The California Smoke-Free Bars, Workplaces and Communities Program
www.breath-ala.org or **800-622-2829** (CA only) or **916-739-8925**

For college campus information contact:
California Youth Advocacy Network (CYAN),
Kim Homer, **youthnet@softcom.net**
www.cyanonline.org or **916-339-3424**

ADDRESSING DISPARITIES IN HEALTH

RESPECT Is New Prop 99 Project Addressing Tobacco Use Among Low Socioeconomic Status Californians

By Dian Kiser, Ph.D.
and Theresa Boschert J.D.

Do you know the difference between generational poverty and situational poverty? Do you know anyone who is a member of the "working poor"? What is meant by "low socioeconomic status" (SES)? What are the smoking prevalence rates for low SES individuals? These questions and many others will be explored and answered by RESPECT (Resources and Education Supporting People Everywhere Controlling Tobacco), a statewide project of the American Lung Association of the East Bay.

Project RESPECT is a competitive grantee of the California Department of Health Services Tobacco Control Section (TCS) and is the first statewide project in the nation to address the tobacco control needs of smokers and their families by taking into account the impact of economic realities on smoking behaviors.

The project's working definition of "low socioeconomic status" includes Californians who have low income levels, low education levels and low opportunity for economic advancement.

The 2002 California Adult Smoking Prevalence Survey revealed that smoking prevalence rates among this group hover around 30%, compared to a rate of less than 17% for the general population of California adults. For example, among non-Hispanic white males, the smoking prevalence rate for those with low income and education was 34.1%, while high income white males had a smoking rate of only 8.5%. The survey of California adults showed similar smoking prevalence rates occurred in all ethnic groups as income and education levels fell.

This project will coordinate with the California Smokers' Helpline in many ways to help promote the Helpline among low SES Californians and to identify current practices for tracking and providing cessation services to low SES callers.

RESPECT also will offer technical assistance, training services along with "respectful and relevant" educational materials to increase the capacity of Prop 99-funded agencies to work successfully with low SES Californians. Special attention will be paid to accessing low SES smokers through health service providers, owners and managers of multi-unit housing complexes, and trade and technical training schools that serve low-income populations.

Finally, RESPECT will provide support to TCS through participation in the Tobacco Education Clearinghouse materials review, TCS media development and Statewide Workgroups.

RESPECT staff members include Dian Kiser, Ph.D., Theresa Boschert, J.D. and Inelva Carvajal, who have worked for many years on BREATH, the California Smoke-free Bars, Workplaces and Communities Program. They will be joined by statewide consultants Carolyn Martin, Steve Layton, Carlene Henriques, and Statice Wilmore.

Dian Kiser, Ph.D., CFRE (Certified Fundraising Executive), and Theresa Boschert, JD are Co-Directors of RESPECT and BREATH, projects of the American Lung Association of the East Bay. Collectively, Ms. Kiser and Ms. Boschert have been involved in tobacco control for the past 25 years. For more information, contact the authors at **breath@jps.net** or visit the BREATH web site, **www.breath-ala.org** or call **916-739-8925.**

Looking Ahead

Below are cessation related activities. Take advantage of these observances to promote tobacco cessation in your community.

February

American Heart Month
www.americanheart.org
Cardiac Rehabilitation Week Feb 13-19
www.aacvpr.org
Lose the Chew Week Feb 20-26

March

Pulmonary Rehabilitation Week
Mar 13-19
www.aacvpr.org

April

Cancer Control Month, www.cancer.org
National Public Health Week Apr 4-10
www.apha.org/nphw
Kick Butts Day April 13
www.kickbuttsday.org
National Minority Cancer Awareness Week
Apr 17-23, **www.cancer.org**

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2. Parent Involvement Despite teens' focus on peer group values, parents' attitudes play a major role in adolescent smoking and quitting. Helpline policy is to attempt to obtain parental consent for clients under eighteen. Far from objecting, most of our teen clients (88%) are surprisingly willing. Our brief parent contact includes information about supporting quit attempts (ask teens what kind of help they want, have a smoke-free environment, provide healthy substitutes for cigarettes, and understand withdrawal and relapse), and minimizing potential sabotage (avoid nagging or smoking in front of the teen, etc.).

3. Flexibility Teens may chafe at rigid structure. Helpline counselors use a structured but flexible protocol that specifies topics to be covered but leaves to the counselor the order and emphasis. There is room for teen interests such as music, movies, video games, and sports. This flexibility enhances counselor responsiveness to teens and strengthens connection.

4. Health issues Conventional wisdom holds that health concerns do not motivate teens. Teens tend to feel invulnerable to danger, including the dangers of smoking. However, a number of our teen clients are motivated by health concerns. These include respiratory problems (asthma, bronchitis), vanity-related hygiene issues (bad breath, stained teeth, clothing odor, premature wrinkling), and sports performance issues (shortness of breath, lack of endurance). If teens do not bring up these concerns, Helpline counselors do.

5. Directiveness Teens need to feel in control of their own lives and treatment. When they do, they are more likely to try new behaviors. Yet most teens need at least some direction, due to their lack of life experience. Helpline counselors address both needs. They direct the teen to set a quit date but let the teen choose the date. They direct the teen to develop strategies but let the teen decide which ones to use. In the process, counselors introduce a wide variety of cognitive and behavioral options and may engage teens in role-playing or other techniques.

6. Planning Teens are less inclined than adults to plan courses of action, and planning is crucial for preventing relapse. Therefore, the Helpline teen protocol stresses planning. Counselors guide teens in building detailed, specific plans before quitting and help teens evaluate and refine their plans on and after the quit date.

7. Identity Adolescence involves striving toward maturity, attempting to shape an emerging identity. Teens seek out behaviors that they associate with adulthood. For many teens, smoking is among those behaviors. Helpline counselors attempt to leverage teens' developmental process by framing quitting, rather than smoking, as the adult thing to do. They point out that teens who are quitting are advanced for their age, doing something that their peers—and many adults—haven't attempted yet.

Over 10,000 teens have called the Helpline. In a recent study, over half of all teens calling for information enrolled in cessation counseling and participated in at least two counseling calls. Given the challenges that teens face in quitting smoking, results like these show that telephone quitlines present a viable and promising way to help.

Gary Tedeschi, Ph.D. is a licensed psychologist and Clinical Director of the California Smokers' Helpline.

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