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78% of state smokers tried to quit

10:54 PM 2/03/03
Brenda Ingersoll Wisconsin State Journal

A survey of more than 6,000 Wisconsin residents shows that 78 percent of current smokers have tried to quit, but more than 50 percent of them are still using the "cold turkey" method and most relapse within a week.

"We now have a number of medications and counseling strategies that can greatly increase quit rates - nicotine replacement therapies, Zyban, telephone counseling," said Dr. Mich Fiore, director of the Center for Tobacco Research and Intervention at the UW-Madison Medical School. "But many people are either unaware or cannot afford these treatments

Smokers are making multiple, unsuccessful attempts to quit, according to the 2001 How Smokers Are Quitting survey by the center, in cooperation with the UW Comprehensive Cancer Center and the Wisconsin Tobacco Control Board. Close to 70 percent of Wisconsin smokers have tried to quit between one and five times. By three months, 90 percent of smokers have relapsed to smoking, the survey found.

Among current smokers, the nicotine patch (14 percent) was the second-most common method of quitting after "cold turkey" (more than 50 percent), followed by cutting back (11 percent) in third place. The survey was taken before the Wisconsin Tobacco Quit Line had been in place for than a few months, and the hot line thus was not a factor.

Use of nicotine replacement therapies, including nicotine gum, the patch, and nasal spray of prescription drugs, can double or triple quit rates, Fiore said.

Almost 30 percent of smokers reported that they had not made a quit attempt in at least two years, possibly indicating that some are becoming discouraged because of numerous failures, Fiore said.

"This paper indicates that we need to increase awareness of more effective treatments, we need to promote free treatments and we need to conduct more research on specific populations so that we can help them quit smoking," Fiore said.

The survey shows that differences exist between income groups in their choice of stop smoking methods. Higher income people were twice as likely to use the prescription drugs Zyban or Wellbutrin as an aid to quit smoking, than people with low

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incomes.

Racial and ethnic differences were noted in the survey results. American Indians made more attempts, of shorter duration. The survey found that 91 percent of American Indian smokers have made a serious quit attempt, followed by Asian Americans at 74 percent, whites at 60 percent and Hispanics at 46 percent.

The Wisconsin Tobacco Quit Line (877) 270-7867, is a hot line staffed Monday through Thursday from 9 a.m. to 8 p.m., Friday from 9 a.m. to 5 p.m. and Saturday from 10 a.m. to 1 p.m.



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Two developments in Wisconsin in the last week are good news in the cause of educating the public about the harmful effects of smoking.

On Friday, Gov. Jim Doyle announced he was restoring \$2 million in cuts from the state's tobacco control grant program, which was implemented to help in cutting down on smoking in the state, which were part of his budget-repair bill for the rest of the fiscal year that ends June 30.

Instead of taking money from the grant program, the governor proposes taking the \$2 million from interest earned by the state's tobacco control fund. The control fund, which has existed for three years, was set up when Doyle, as attorney general, negotiated a 30-year, \$5.6 billion settlement with the tobacco industry.

The switch came at the suggestion of the state Tobacco Control Board, which also shows the Doyle administration is open to a good idea it doesn't come up with itself.

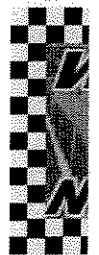
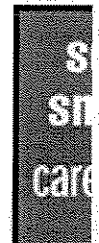
By saving the \$2 million, Doyle would rescue a sizable chunk of the board's budget, which already had been cut 43 percent in 2001, according to executive director David Gundersen. And he received kudos from the state chapters of the American Heart Association and the American Lung Association.

The proposal, as part of the budget-repair bill, is subject to legislative approval.

Earlier last week, Doyle also said he's looking into the state buying back payments of the tobacco-settlement money traded away for a lump sum in last year's fiscally irresponsible budget-repair bill.

In that bill, which the Legislature passed and then-Gov.

ADVI



Scott McCallum signed, the state traded what was left of the yearly tobacco payments for a one-time settlement of \$1.59 billion to plug the budget deficit at that time.

Under the Doyle administration's plan, the state would buy back the bonds it sold to underwriters in gaining the \$1.59 billion last year. To do it, the state would sell a new set of the bonds for the same principal amount, but at a lower interest rate than the first set of bonds.

The state would keep the difference in the interest, which would help fund the Tobacco Control Board's efforts. According to Department of Administration Secretary Marc Marotta, the state could gain \$2 million a year.

The proposal will be part of the 2003-05 budget Doyle will propose next week.

Both ideas are good examples of creative thinking to benefit a program that will pay off for Wisconsin in the long run.

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Doyle would cut tobacco board but keep funds

Backers pleased that millions would still go to anti-smoking efforts

By DENNIS CHAPTMAN
dchaptman@journalsentinel.com

Last Updated: Feb. 24, 2003

Madison - The Wisconsin Tobacco Control Board would be extinguished under Gov. Jim Doyle's proposed state budget, but \$15 million in annual funding for anti-tobacco efforts would be retained and shifted to another agency.

Anti-tobacco advocates, fearful that the projected \$3.2 billion budget deficit could wipe out Wisconsin's effort to combat tobacco use, were encouraged by Doyle's decision to eliminate the board but safeguard the funding.

The board was set up in 2001 to coordinate statewide efforts to fight tobacco use, especially among the young, and has been a frequent target of budget reduction efforts. Doyle's plan moves Wisconsin's anti-tobacco effort into the Department of Health and Family Services.

Doyle also moved the functions of the Adolescent Pregnancy Prevention Board into the agency, saying that "we can't afford to have two people doing the same job, no matter how important that job is."

The tobacco board shift came as a relief to some anti-tobacco groups because it would keep money in place to fund programs.

Studies have shown that tobacco prevention programs have helped reduce smoking by high-schoolers by 18% in the past three years, and Jeff Ranous of the American Cancer Society said he hopes not to lose

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that momentum.

"The recent success of Wisconsin's tobacco prevention program shows that we are moving in the right direction," Ranous said, emphasizing that continued efforts could help fight cancer and heart disease and the cost of those ailments to state taxpayers.

SmokeFree Wisconsin, a non-partisan organization of more than 100 health-related groups, is lobbying lawmakers in an effort to hang onto the \$15 million a year, said Maureen Busalacchi, the group's deputy director.

Busalacchi said the board was key in organizing a statewide anti-tobacco effort and it was "understandable under the pain of the current budget constraints that efficiencies need to be embraced."

David Gundersen, executive director of the Tobacco Control Board, who stands to lose his job if the Legislature adopts Doyle's proposal, also backs the move.

"The board has done its job, and this move offers opportunities for consolidation that could improve the anti-tobacco movement," he said. "The governor's proposal maintains funding for tobacco prevention, and that helps our goal of stopping kids from smoking and helping smokers quit."

Gundersen said the state's anti-tobacco efforts have shown results. Between 2001 and 2002, he said, there was a 5% decline in tobacco consumption statewide.

Doyle's proposal would eliminate four full-time jobs at the board.

"Minnesota's tobacco control office has 30 people, so we were pretty efficient already," Gundersen said, noting that most states' anti-smoking programs are housed in their health departments. "It's a smart move to consolidate tobacco control efforts and keep the funding in place."

A version of this story appeared in the Milwaukee Journal Sentinel on Feb. 25, 2003.

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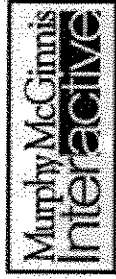
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Continuing prevention efforts important

A Daily Press editorial

The Daily Press
Last Updated: Thursday, February 27th, 2003 11:52:21 AM

Despite the elimination of the Wisconsin Tobacco Control Board in the Gov. Jim Doyle's proposed budget, the commitment to spend \$15 million annually on tobacco prevention efforts remains, now under the auspices of the Department of Health and Family Services.

If that move enables the state to keep up its progress in tobacco prevention, eliminating the board won't be devastating — the

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important thing is to keep the momentum going.

Doyle, who as attorney general encouraged Wisconsin's efforts to be one of the states who sued tobacco companies and was part of a multi-state settlement, is a vocal backer of prevention efforts. He has decried the sale of the tobacco settlement futures and would like to buy them back.

Tobacco control progress has been impressive. In the past three years, smoking by Wisconsin high schoolers has dropped by 18 percent and there has been a 5 percent reduction in tobacco use statewide. That's progress that shouldn't be lost.

In making the shift in how tobacco control efforts are coordinated, the money is important. But so are the board goals and the expertise of the control board staff who have helped anti-tobacco coalitions throughout the state.

In making the shift in how tobacco prevention is spearheaded, it shouldn't get shuffled to a backburner.

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Committee Co-Chairs:
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For Immediate Release

February 27, 2003

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**Joint Legislative Audit Chairs Review Tobacco Control Board Audit
Hearing Scheduled for April 1st**

(Madison) The Joint Legislative Audit Committee Co-Chairs announced the committee will hold a public hearing April 1st to discuss the Tobacco Control Board audit released today. The Legislative Audit Bureau report produced mixed results; some tobacco projects were more successful than others.

"We have scheduled a hearing for April 1st to solicit comments on the Audit Bureau's findings," Senator Carol Roessler (R-Oshkosh) said. "We are interested in hearing observations on the evaluation of the tobacco prevention and cessation grants that were audited."

A competitive grant process is required for most state and local tobacco control projects. Co-chairs Senator Roessler and Representative Suzanne Jeskewitz (R-Menomonee Falls) agreed that the Tobacco Control Board's grant process is well designed because it requires every grant recipient to have measurable goals and objectives. "The State's money must be delegated responsibly," stated Jeskewitz.

The Tobacco Control Board was created in the 1999 budget to administer a statewide tobacco control program. "It's not uncommon for programs in their infancy, such as these tobacco control programs, to have mixed results initially. Still, it is important to examine programs to determine if it is appropriate to reallocate funds," explained Jeskewitz. The Tobacco Control Board consists of seventeen volunteer members appointed by the Governor.

The Tobacco Control Board is responsible for distributing \$11.5 million in grants to programs for tobacco cessation and prevention. In addition to the competitive grant programs awarded money, the board is statutorily required to distribute \$2 million to the Thomas T. Melvin Youth Tobacco Prevention and Education Program, \$1 million to the University of Wisconsin Madison Center for Tobacco Research and Intervention, and \$500,000 to the Medical College of Wisconsin. In the audit released today, the Legislative Audit Bureau reviewed how all the grant projects as well as the statutorily required projects used the funds.

In the Governor's proposed budget, he recommends eliminating the board entirely, moving the duties to the Department of Health and Family Services. "The results of this audit are very timely in light of the Governor's budget announcement. I look forward to hearing the testimony at the hearing," concluded Roessler.

###

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FOR IMMEDIATE RELEASE
February 27, 2002

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Robson: Audit Shows Success of Fledgling Tobacco Control Programs

An audit of state tobacco control spending highlights the creative strategies that are being used to reduce tobacco use, Sen. Judy Robson said today.

“The audit points out the success of tobacco control programs and areas where there is room for improvement,” Robson said. “Overall, I think it shows that we can create effective programs that help people quit smoking, such as the UW-Oshkosh project that reduced the smoking rate of students by 29 percent. We can create effective programs that prevent people from starting to smoke in the first place. This will result in long-term savings of reduced health care costs and reduced Medicaid costs.”

“The tobacco control board has been operational for less than three years while big tobacco companies have had decades of success in hooking young people into a lifetime of addiction and poor health,” Robson said. “Smoking rates in Wisconsin still remain high, so there is still more work to do.”

Robson noted that Gov. Doyle has proposed eliminating the Tobacco Control Board and transferring its functions to the Department of Health and Family Services.

“The comments made by the auditors will help the Department of Health and Family Services build upon the successful programs and fine-tune the programs where results are mixed,” Robson said. “Because the tobacco control program is so new, we are still feeling our way to determine what works and what doesn’t work.”

Robson said that the \$15 million which Doyle proposed spending annually for tobacco control is only half of the level that the Centers for Disease Control and Prevention recommends for an effective tobacco control program.

Robson news

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“With the belt-tightening that must occur in all areas of state government, the tobacco control program will have to make do with less,” Robson said. “The audit points out ways that these limited funds can best be used to reduce the scourge of tobacco in our state.”



For Immediate Release:
February 27, 2003

Contact: Carrie Sullivan
(608) 286-2620

Tobacco Control Board Audit Supports Governor's Proposal **Future Successes of Tobacco Control Efforts Lie Within Consolidation**

(February 27, 2003—Madison, Wis.) Both tight budget times, and today's report from the Legislative Audit Bureau (LAB) point to the need for consolidating tobacco control activities into a single, well coordinated and highly accountable tobacco control program within the Department of Health and Family Services (DHFS) as proposed by Governor Doyle's budget plan. This is the conclusion of the state's leading anti-tobacco groups.

The LAB report discusses the operations of the tobacco programs from July 1999 through June 2002. The Report points to a number of key successes, including:

- A comparative 5% decline in cigarettes consumption in from 2001 to 2002. Notably, national, consumption fell by only 1%.
- In 2002, smoking by eight graders fell by 30% and tenth graders by 22% compared to 2000.

Governor Doyle's recent announcement to consolidate tobacco control programs into a single-entity is consistent with the recommendations of the Legislative Audit Bureau (LAB) report on the state's anti-tobacco efforts. By consolidating programs within DHFS, the Governor's proposal will help address certain deficiencies, including the lack of coordination and duplication of anti-tobacco efforts.

"We are encouraged by the Governor's commitment to ensure funding for tobacco control efforts," said Carrie Sullivan, executive director of SmokeFree Wisconsin. "Creating efficiencies will help pay dividends in reducing tobacco consumption, further enhancing the successful programs highlighted by the LAB report."

The Tobacco Control Board was formed in May of 2000 with the charge of creating a plan to reduce and prevent tobacco use. "These volunteers, from all walks of life and all across the state, should be very proud of their service to the citizens of Wisconsin. They built a program that is already saving lives, and their plan gives DHFS a solid foundation to build upon as they create a more coordinated tobacco control infrastructure," Sullivan said.

"With budget deliberations beginning, SmokeFree Wisconsin will work with the legislature to protect the \$15 million in funding proposed by Governor Doyle," Sullivan explained. "As well encouraging the formation of a department within DHFS that can effectively build upon the early successes of the TCB."



Wisconsin Tobacco Control Board

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David Gundersen
Executive Director
Wisconsin Tobacco Control Board

Tobacco Board embraces Audit Bureau report

February 27th, 2003
FOR IMMEDIATE RELEASE

Contact: David Gundersen
(608) 267-0944

MADISON – A newly released audit that identifies early successes but is also critical of Wisconsin's anti-tobacco efforts is welcome news and will improve the state's tobacco control efforts, the Wisconsin Tobacco Control Board said Thursday.

"The report identifies our successes our challenges over the first 18 months," said David Gundersen, Executive Director of the Tobacco Control Board. "We agree with the Audit Bureau's recommendations to improve coordination of anti-tobacco efforts. They'll result in changes that will make the program even more successful."

The Audit Bureau report, which reviews the board's activities through June of last year, reported the program achieved significant successes in its first 18 months. Since the board began its efforts in January of 2001, smoking by Wisconsin high school students has dropped 18% -- and smoking throughout the state has dropped 5% compared to 1% nationally.

The report recommends improving coordination between anti-tobacco efforts to make them more effective. Gundersen said that's exactly what's needed – and is already underway with Gov. Jim Doyle's proposal to consolidate the Board into the Department of Health and Family Services. "It's not often that a Board gets eliminated, and that Board agrees with the decision," he said. "We think the Governor's decision is the right one, and the Audit reports supports the belief that this consolidation could help more smokers quit and keep more kids from starting."

"The Board's number one priority has always been and will continue to be reducing the death and disease caused by tobacco, even if that means our own elimination," said Gundersen.

However, Gundersen made it clear that Wisconsin can only win with continued funding for tobacco control efforts. Tobacco-related diseases kill over 7,300 Wisconsin citizens every year and cost the state over \$1.6 billion in health care expenditures, \$422 million to the Medicaid program alone.

Funding effective efforts mean lives and dollars saved. "Massachusetts was able to save \$3 for every \$1 dollar it spent on its anti-tobacco programs," he said. "The Audit Bureau report makes it clear we've had early successes and that with improved coordination and continued program monitoring, we will save lives and money in the long term."

For more information on the Board and its programs, see the Board's 2002 Annual Report or Executive Summary at www.wtcb.state.wi.us.

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Local News

Audit: some tobacco board projects duplicate efforts

(Published Friday, February 28, 2003 09:19:38 AM CST)

Associated Press

MADISON, Wis. -- The Wisconsin Tobacco Control Board has had mixed success in curbing smoking and some of its efforts are being duplicated by other state programs, according to a state audit released Thursday.

The board is responsible for distributing \$11.5 million in grants to tobacco cessation and prevention programs.

The Legislative Audit Bureau said the board's most successful program has been the Wisconsin Tobacco Quit Line, which provides information and counseling to help smokers quit. The hot line received more than 24,000 calls in its first year.

The board also has employed outreach specialists to help health care providers, schools and community organizations implement strategies for cutting smoking. But some of the board's projects did not meet their objectives because they were unable to recruit enough participants, the audit said.

The report also said more coordination is needed with other tobacco prevention programs, including the University of Wisconsin-Madison Center for Tobacco Research and the Medical College of Wisconsin, to avoid duplication.

Gov. Jim Doyle's budget proposal for the two-year period ending June 30, 2005, would eliminate the board and incorporate its work into the state Department of Health and Family Services. The board was set up in 2001 to coordinate statewide efforts to fight tobacco use, especially among the young.

Doyle would retain \$15 million a year in funding for anti-tobacco efforts.

David Gundersen, executive director of the Tobacco Control Board, supports Doyle's proposal, even though he would lose his job.

"The audit report supports the belief that this consolidation could help more smokers quit and keep more kids from

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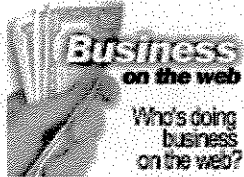
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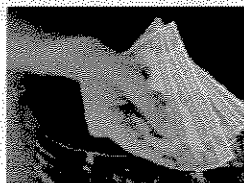
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starting," he said.

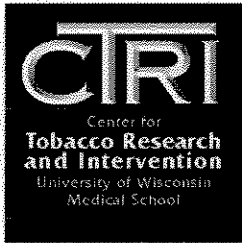
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What UW-CTRI does to reduce tobacco use



The University of Wisconsin Center for Tobacco Research and Intervention is dedicated to: helping smokers quit and reducing the burden of tobacco use in Wisconsin.

UW-CTRI reduces tobacco use through two programs:

The Wisconsin Tobacco Quit Line which provides smokers with a planned program for quitting, helps them through the process and calls them back to offer support and advice.

- Since its inception in 2001, the Quit Line has received over 29,000 calls.
- 85% of callers are satisfied with the service.
- Smokers are three times more likely to quit using the Quit Line
- It has contributed to a 5% reduction in smoking in Wisconsin

The UW-CTRI Education and Outreach Program has six Outreach Specialists who provide training and technical assistance to healthcare providers to help them help smokers quit.

- Over 70% of Wisconsin smokers have tried to quit and want to quit.
- 70% of Wisconsin residents visit the doctor at least once a year.
- Treatments now exist which can double or triple a smoker's chance of quitting successfully.
- Healthcare providers have a golden opportunity to help smokers quit.

In 2002, the UW-CTRI Outreach Specialists have provided information and training to over **8000** individuals in Wisconsin regarding tobacco use, including:

Hospitals and clinics	2860
Health Departments	756
Communities	2019
Schools	603
Worksites	423
Local Coalitions	1060

In 2001, the six Outreach Specialists made 9,900 contacts and conducted 319 training sessions.



85

February 10, 2003

Wisconsin State Legislature Members
To Whom It May Concern:

I just wanted to drop you a note to describe some of the value added activities that our partners from the Center for Tobacco Research and Intervention have performed as we work together to address the tobacco addiction problem in Wisconsin.

Since October of 2001, the CTRI regional outreach specialists have provided numerous educational offerings for providers and staff at our clinics and hospitals. They are always available to support a best practice smoking cessation model, and will be where we need them during and after normal business hours. Roger Dier, in particular, has been very accommodating, as is evidenced by his willingness to be a member of our regional smoking cessation team. If Roger was unavailable for an educational intervention in the past, a specialist from the Milwaukee area would make the trip north to help us out. Quite frankly, without the committed support of our CTRI partners, we would be hard pressed to provide high quality education to our physicians and staff to the degree necessary to make a dent in the tobacco addiction problem.

In addition, both Dr. Michael Fiore and Dr. Douglas Jorenby came to our region and Dr. Fiore has been to our metro region as well to deliver the best practice message to our Physicians, Nurse Practitioners and others. Since they helped to shape the national guideline, we felt very fortunate that they were willing to give of their time to help us in our efforts.

Behind the scenes, CTRI has helped us to measure how we are doing. Working with Amy Brewer, I was able to set up a schedule to receive Zip Code specific volumes data so that we can track calls to the Wisconsin Tobacco Quit Line, as well as Quarterly Volumes by County. **We at Aurora have incorporated the Wisconsin Tobacco Quit Line into our patient support procedures and we believe that patients derive great benefit from this service. Funding to support this service is critical if we are to maintain a supportive infrastructure for our patients willing to make a tobacco quit attempt.**

Sincerely,

A handwritten signature in cursive script that reads "Jeff S. Stephenson".

Jeff Stephenson
Director Care Management, Central Region

Memo

Date: February 10, 2003
To: Joint Finance Committee
From: Mary Kay Lingeman, RN, MBA
Quality Coordinator
C:
Re: CTRI

Aurora Health Care's 13 hospitals, 78 clinics and 125 pharmacies serve more than one million people in Wisconsin annually. Over the past 15 months, Aurora has partnered with CTRI, the Center for Tobacco Research and Intervention, to help implement a tobacco dependence treatment strategy for the people we serve. Our Care Management philosophy embraces the implementation of proven best practice wherever care is delivered - thus we've chosen to partner with an organization whose actions are scientifically proven to work.

The CTRI outreach specialists and staff (Roger Dier in particular) have done a tremendous job in assisting Aurora with educating providers and staff about the clinic practice guideline, *Treating Tobacco Use and Dependence*. We plan to continue to work closely with Roger and other CTRI staff in 2003. Dr. Michael Fiore and Dr. Doug Jorenby have also shared their expertise with Aurora physicians on several occasions.

Smoking is the #1 preventable cause of death in the U.S. The burden of tobacco in Wisconsin is great. Sixteen percent of all Wisconsin deaths are attributable to smoking. We are fortunate to have nationally recognized tobacco dependence leaders in Wisconsin. CTRI needs continued support from the Joint Finance Committee and legislature to effectively eliminate this tobacco burden.

Feel free to contact me for additional information at 414-647-3043. Thank you.

February 10, 2003

I'm pleased to let you know that your presentation to our staff in Counseling and Health at UWGB was very favorably received. The booklets and handouts have been very helpful in directing students to the Wisconsin Quit Line and making it easier for all staff to counsel students in smoking cessation.

It's very difficult to measure the success of any tobacco cessation program because it may take as many as seven attempts or more for a person to quit smoking. As a former smoker, I know that I took information from many sources to make my cessation efforts a success. I think the information you provided was sound and the support by the Quit Line very helpful.

Thank you for your continued support,

Fran Carman, R.N.
Counseling and Health
University of Wisconsin Green Bay

Sharon E. Kelley
1209 Baitinger Court
Sun Prairie, WI 53590

February 10, 2003

Dear Joint Finance Committee:

I started buying cigarettes when I was 13 years old. I smoked my last cigarette on June 7, 2001 and have been smoke free since then. If it weren't for the support that I received from the Wisconsin Quit Line, I can't say for certain that I'd be making this statement today.

The assistance that I received from the Quit Line helped me through that dreadful period between nicotine dependency and freedom.

When I was quitting, I knew that the staff of the Quit Line was in my corner. The printed materials they provided helped me learn ways to cope with the discomfort of nicotine withdrawal. They were a handy reference during my transition.

The Quit Line staff helped me to feel that the effort I was making was important – important enough for them to take the time to regularly check up on me by telephone. Smokers often live with a lot of shame about their habit. It's not easy to garner support from friends and loved ones who've watched our efforts fail before. With each failure we become more afraid to ask for support. We lose our nerve to quit again.

The members of the Quit Line staff established an unconditionally supportive relationship with the smokers they assist. This relationship enables smokers to courageously face the unpleasant transition that quitting entails. It made all the difference to me.

I'm writing this letter to express my enthusiastic support for the Wisconsin Quit Line. Thank you for your continued support. The gift of being smoke free is priceless!

Best Regards,
Sharon E. Kelley

February 10, 2003

To Whom It May Concern:

I can't believe the WI Tobacco Quit Line is in jeopardy! As a health care provider, we have been referring so many people to this service.

It is so very important to have a cessation resource where people can talk confidentially about their tobacco use and receive assistance. From the patients I have talked with who have called the Quit Line, they have stated it has helped them. Quitting smoking is the single most important thing people can do for their health and the health of others. I feel that if we could get more people to quit smoking we could have less ill children and adults from asthma, pneumonia, bronchitis etc. Which in the long run would save Wisconsin and insurance companies money.

We really need to keep the quit line for the support and the information that we give patients. Please reconsider your decision about cutting funds for this important resource.

Thank you,
Katie Olson
Nurse Manager
Neceedah Family Medical Center
Wheelihan Dr.
Neceedah, WI 54646

February 10, 2003

To Whom It May Concern:

I am writing to support the work/function of CTRI in our cultural revolution to end tobacco dependence. ThedaCare Health System utilized the publications, tools and resources from CTRI to develop and pilot a smoking cessation program for 100 of our employees who smoke. With the clinical practice guideline as our model we launched our program in January 2002. Our 6 month quit rate is 32%. Our program model and success became known in the community and we are now in the process of offering this program to other employer groups. We must continue all efforts to eradicate tobacco use and CTRI is a driving force in this effort.

Karen Schaefer RN MSN
ThedaCare At Work: Health and Productivity
(920) 380-4966
2009 South Memorial Drive
Appleton, WI 54915
karen.schaefer@thedacare.org

February 10, 2003

Dear Joint Finance Committee,

The work that CTRI is doing is vitally important to the health of people living in the state of Wisconsin, now and in our future. As healthcare providers, we are well aware of the devastating and costly outcomes associated with tobacco use in our patients and its effects on their families. Yet, many healthcare providers find it difficult to address this issue with patients in the course of the office visit for a variety of reasons. We have utilized the services of the CTRI outreach specialists (Tyler Roberts and Mary Cywinski) to provide training to our physician and patient care staff at Advanced Healthcare over the past year and we continue to offer these educational sessions. The training focuses on helping healthcare providers understand their important role in helping patients overcome this addiction. Simple tools and resources are made available by CTRI to make it easy for physicians to incorporate these recommendations into their already busy practices. This approach helps to remove many of the barriers that may prevent the issue of tobacco use from being addressed with the patient. The expertise and availability of the CTRI outreach specialists, and the resources they provide, have greatly enhanced our ability to assess and effectively care for patients dependent on tobacco.

Vicki Fehrenbach RN, BSN
Disease Management Coordinator
Advanced Healthcare, SC
262-532-6896

2/6/03

Dear members of the Joint Committee,

I am writing to support the efforts of the Center for Tobacco Research and Intervention in the State of Wisconsin. Neas is an Employee Assistance Program servicing a number of Companies in the State of Wisconsin. Our Corporate office is based in Pewaukee WI.

As an Employee Assistance Counselor, my role is to assess the needs of employees and their families. The importance of utilizing a holistic assessment including both physical and mental health is of great importance to our organization and clients. Over the years, more and more individuals are beginning to understand the dangers of smoking. Pro- Active Companies are offering incentives to those Employees whom do not smoke and often times are initiating a Drug Free Workplace Policy. Our organization has made a commitment to help address these concerns in the State of Wisconsin and abroad.

Neas has developed a Pilot Program to address Smoking Cessation. We would not have been able to launch this program without the guidance and training provided by Tyler Roberts from the Center for Tobacco Research and Intervention.

The training provided by Mr. Roberts has been instrumental in our program development. His agency provided evidence -based tobacco cessation practices and strategies which will be a valuable part of our program. Partnered with the supportive efforts of the Quit Line, Neas is committed to helping our clients achieve one of the most important goals of their lives... Quitting Smoking.

Please continue to support this valuable organization through their efforts to ensure all Wisconsin residents have the professional assistance of the Center for Tobacco Research and Intervention. The services provided by this organization are detrimental if we are to ensure healthier. Longer lives for our Wisconsin citizens.

Sincerely,

Jodie Loomans, CRC, CEAP, EAP Counselor II
NEAS, InC. WorkLife Company
1-800-634-6433

2-10-03

To Whom It May Concern:

Having been a 4 pack a day smoker living in Chicago, I was appalled when I moved to Wisconsin, to see so many people smoking; especially at such a young age. One of the reason I believe that I was able to quit, is that smoking became a very negative thing to do at work and in public places.

As I look at the young people around me (I am in my 60s), I feel the work of the WI Tobacco Quit Line is crucial. Education and support for those interested in quitting is a very small thing to offer our young people with a very big payoff.

Marge McInlay, CICSW
Social Worker
Social Services Dept.
Mile Bluff Medical Center
1050 Division St.
Mauston, WI 53948

To whom it may concern:

As a Healthcare provider and Coordinator of Pulmonary Rehabilitation at St. Mary's Hospital Medical Center. The Quit Line has been a very vital piece in the process that we use to assist our patients in smoking cessation. The team of individuals that run the Quit Line are WONDERFUL councilors, and Resource individuals that make the cessation process so much more feasible.

Smoking Cessation is a very difficult addiction for many individuals to Conquer. The Quit Line is a much-needed resource for these struggling Individuals.

Thank you,

Mary Wichern, RRT
Pulmonary Rehabilitation Coordinator
St Mary's Hospital Medical Center
Phone: 608-258-6470
Fax: 608-258-6176
E-mail: Mary_S_Wichern@ssmhc.com

February 9, 2003

As the lung care coordinator of ProHealth Care (Waukesha Memorial Hospital and Oconomowoc Memorial Hospital) in Waukesha, I want you to know how integral continued funding for Wisconsin tobacco cessation programs is for our system. ProHealth Care has recently launched a system-wide tobacco cessation initiative in which we rely on the Center for Tobacco Research and Intervention (CTRI) and the Wisconsin Tobacco Quit Line for assistance with implementing such a comprehensive endeavor. I am impressed that the Quit Line, which is supported by tobacco control money, has helped 12,000 people quit smoking. Moreover, people who call the Quit Line are three times more likely to quit than those who try on their own. This is outstanding. ProHealth Care has over 600,000 patient visits each year and therefore, we will be providing many people with the tools to quit smoking. We simply cannot do this alone. Having the help of CTRI and the Wisconsin Tobacco Quit Line makes the initiative possible and manageable.

I ask that you please support tobacco control funding.

Sincerely,

Annette Schmocker
Lung Care Coordinator
Regional Cancer Center
ProHealth Care, Inc.
725 American Avenue
Waukesha WI 53188
262-928-7719



THE UNIVERSITY
of
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Lisa Maroney
Assistant Director, State Relations
For Health Sciences
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FAX: 608/265-8011
lmaroney@bascom.wisc.edu
www.state-relations.wisc.edu

Michael Fiore, MD 262-7539

C For Tob. Res CTRI - impact in Sen. district

- 1.
- 2.
- 3.

lead campus - tobacco

a little more than 10 yrs.

reduce tobacco

8,000 adults killed from depend tobacco

1. help quit

2. kids not start

1. WI Tobacco Quit Line

GOVT asked to prevent

kids starting

18 mos > 30,000 calls

10,000 people quit

2. outreach effort

60 people

Lax, EC, Rh, SB, milw.

clinic by clinic, Dr by Dr

A h.c. presented

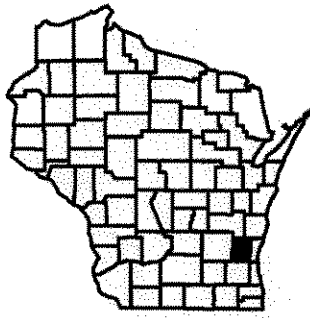
evidence based treatment

ins. cov.

leading ctr.

on air 6 extra 6 days

any questions



The Burden of Tobacco in Washington County

Population 117,493

The Burden of Tobacco is a collaborative report of the Wisconsin Division of Public Health, the American Cancer Society, the University of Wisconsin Comprehensive Cancer Center, and the Wisconsin Tobacco Control Board

Smokers in Wisconsin and Washington County

	Wisconsin		Washington County	
	# of Smokers	Percent Smokers	# of Smokers	Percent Smokers
Total Number of Smokers	1,088,000		21,870	
Adult (18+) ^{1,2}	959,000	24%	18,960	22%
High School Youth ^{3,2}	107,000	33%	2,410	33% ⁺
Middle School Youth ^{4,2}	22,000	9%	500	9% ⁺
Smoking During Pregnancy ^{5,2}	11,000	16%	190	13%

Health Impact of Cigarette Smoking

Cause of Death ^{6,7}	Wisconsin		Washington County		
	Total Deaths	Due to Smoking	Average Annual Deaths	Due to Smoking	% Due to Smoking
Lung Cancer	2,655	2,150	43	37	86%
Other Tobacco-Related Cancers	1,546	580	27	8	30%
Heart Disease and Stroke	18,298	2,680	331	46	14%
Respiratory Disease	3,397	1,940	53	28	52%
Other Deaths Not Related To Smoking	20,509	0	320	0	0%
All Causes	46,405	7,350	776*	118*	15%

Years of Potential Life Lost

Cause of death ⁶	Wisconsin	Washington County
Smoking-Related Cancers	41,000 years	710 years
Heart Disease	35,000 years	590 years
Respiratory disease	20,000 years	290 years
All Causes	96,000 years	1,590 years*

- In 2000, over 7,300 people died from smoking-related illnesses in Wisconsin. In Washington County, approximately 118 residents die annually of smoking-related illnesses.^{6,7}
- Each year, approximately 15% of all deaths in Washington County are attributable to smoking. Cigarette smoking causes 86% of all lung cancer deaths and 14% of all deaths from heart disease in Washington County.^{6,7}
- In Wisconsin, approximately 96,000 years were lost from the potential lifespan of those who died of smoking-related illnesses in 2000. In Washington County, approximately 1,590 years are lost annually from the effects of smoking.⁶
- Secondhand smoke is estimated to cause as many as 1,200 additional lung cancer and heart disease deaths in Wisconsin. Household fires in Wisconsin caused by cigarettes killed an estimated 20 people in 2000.^{8,9}

+ Statewide youth smoking prevalence estimates were used for county youth prevalence data

*Totals may not add up due to rounding

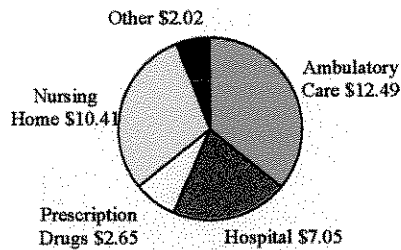
note: Wisconsin Health Impact and Years of Potential Life Lost data are based on 2000 Wisconsin mortality data. County Health Impact and Years of Potential Life Lost data are based on an annual average of 1996-2000 county mortality data.

The Burden of Tobacco in Washington County

Economic Impact of Cigarette Smoking in Wisconsin and Washington County

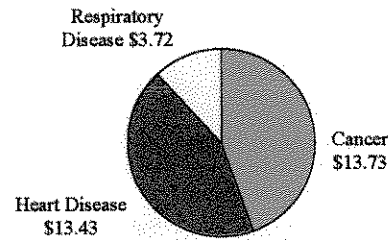
	Wisconsin	Washington County
Health Care Costs ^{6,10}	\$1,580,000,000	\$34,610,000
Lost Productivity ⁶	\$1,400,000,000	\$30,670,000
Total Costs	\$2,980,000,000	\$65,280,000

Smoking Attributable Health Care Costs in Washington County, 1998^{6,10}
(In millions of dollars)



Total: \$34.6 Million*

Cost of Productivity Lost Due to Smoking in Washington County, 1998⁶
(In millions of dollars)



Total: \$30.7 Million*

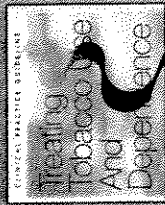
- In 2000, there were over 426 million packs of cigarettes sold in Wisconsin. Residents of Washington County spent approximately \$29.2 million on 9,340,000 packs of cigarettes in 2000.¹¹
- In 1998, an estimated \$1.6 billion in health care costs were paid in Wisconsin as a result of diseases caused by smoking, with \$34.6 million paid in Washington County.^{6,10}
- In 1998, estimated health care costs of cigarette smoking were \$300 for every man, woman and child in Washington County.^{6,10}
- Wisconsin lost \$1.4 billion, including \$30.7 million in Washington County, in productivity costs because of illness and premature death from smoking-related illnesses.⁶

Technical notes:

This report estimates the burden of cigarette smoking using the most current version of the Centers for Disease Control and Prevention's Smoking Attributable Mortality, Morbidity and Economic Costs (SAMMEC) software program. The analysis used combined 1996-2000 sex-specific current and former adult smoking prevalence estimates for those over 35 years old and previously published relative risk estimates for smoking-related diseases to calculate a smoking attributable fraction for 18 specific diseases. To obtain the number of smoking-related deaths in Wisconsin, the smoking attributable fraction was multiplied by Wisconsin's 2000 mortality data (persons 35 years and older for adult deaths). To obtain the number of smoking-related deaths in a county, the smoking attributable fraction was multiplied by the county's 1996-2000 mortality data (persons 35 years and older). County mortality data were divided by five to obtain an average annual number of overall deaths and deaths due to smoking.

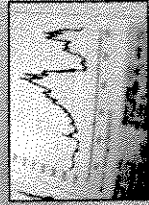
The SAMMEC model calculates the economic costs of smoking using 1998 state health expenditure data provided by the Center for Medicaid and Medicare Services. To obtain county-specific economic cost data, state personal health expenditure and productivity data were both divided by the county population. Direct cost estimates include hospitalizations, outpatient care, physician and health professional services, prescription drugs, and nursing homes. Mortality-related productivity costs are the estimated costs of lost future earnings from paid market and unpaid household labor resulting from premature death due to smoking-related diseases. Finally, the SAMMEC model calculates years of potential life lost based on the potential life expectancy of those who died.

*Totals may not add up due to rounding



Tools for healthcare providers

- Training tools for the U.S. Public Health Service Clinical Practice Guideline: *Treating Tobacco Use and Dependence* (downloadable)
- A link to a free, web-based CME Guideline training program
- A Guideline packet for use in clinics and healthcare systems (downloadable)



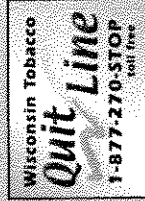
Information for researchers

- Recent CTRI reports — Why People Smoke, Smoking and Pregnancy, others
- Information on ongoing UW Transdisciplinary Tobacco Use Research Center (TTURC) research
- Links to CTRI research articles
- Links to Addressing Tobacco and Managed Care information



Help for smokers and others

- Wisconsin Tobacco Quit Line information and materials — posters, brochures, cards, reports
- Links to cessation websites and materials
- Information on the CTRI stop smoking clinic



The University of Wisconsin Center for Tobacco Research and Intervention
a nationally-recognized research center specializing in understanding and treating tobacco dependence



The UW Center for Tobacco Research and Intervention

Reducing Tobacco Use In Wisconsin

The death and suffering from tobacco use in Wisconsin is significant. Over 23 percent of Wisconsin adults smoke. Deaths from lung cancer are up over 20 percent in the past 20 years. Over 70 percent of Wisconsin smokers want to quit and at least 50 percent try to quit each year. The UW Center for Tobacco Research and Intervention (UW-CTRI), a national leader in smoking cessation, saw the need for a comprehensive smoking cessation program in Wisconsin. So in 2001, UW-CTRI created a statewide initiative designed to reduce tobacco use.

The Statewide Education and Outreach Program

Funded by the Wisconsin Tobacco Control Board, the UW-CTRI statewide program has the following areas of concentration:

The Statewide Education and Outreach Program

A significant component of the statewide program is the location of UW-CTRI Education and Outreach Specialists in each of the five regional health districts - Rhinelander, Eau Claire, Madison, Green Bay, and Milwaukee. These professionals bring state-of-the-art prevention and cessation strategies to clinics, hospitals and communities in their areas.

They are currently focused on assisting clinics and healthcare providers in adopting the U.S. Public Health Service Clinical Practice Guideline: *Treating Tobacco Use and Dependence*. The Outreach Specialists provide training and technical assistance on the Guideline which is the gold standard for treating tobacco use and helping people quit smoking. To date UW-CTRI Outreach Specialists have conducted nearly 2000 training sessions with healthcare providers.

UW-CTRI Outreach Specialists also work with local coalitions, providing training and expertise on smoking cessation processes and issues. With funding for new initiatives in 2003, UW-CTRI Outreach will assist worksites and insurers to implement policies that support and expand cessation benefits and services.

The Wisconsin Tobacco Quit Line

UW-CTRI manages the Wisconsin Tobacco Quit Line which provides free telephone smoking cessation services to anyone anywhere in Wisconsin. Trained cessation specialists work with tobacco users to plan an individualized, effective quit plan. Quit Line counselors also provide information to healthcare providers and family and friends of smokers. In addition to providing direct services, the Quit Line refers callers to local smoking cessation programs when appropriate. To date, the Quit Line has received over 26,000 calls and provided services to 1094 senior citizens as part of the Wisconsin Senior Patch Program. The Quit Line number is **1-877-270-STOP (7867)**.

Action Papers: Smoking in Wisconsin

In the fall of 2002, UW-CTRI began releasing action papers based on over 6000 interviews conducted as part of the Wisconsin Tobacco Survey. The survey obtained in-depth information on smoking initiation, quit attempts, exposure to second-hand smoke and more. The first two action papers were "Why People Smoke" and "Smoking and Pregnancy." Both papers contained recommendations for action based on the information gleaned in the survey. Additional papers will examine how people are quitting, healthcare providers and smoking and insurance coverage for cessation.

OCT 10 2001

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Calling 1-877-270-STOP is Helping Many



Brenda Schwertsig

by Teri Casper
In the first three months of operation (May, June and July), 6,700 people in Wisconsin called the Tobacco Quit Line. Twenty-five of those callers lived in Adams County. This is the story of one of those 25. A success story. She quit.

When Brenda Schwertsig and her husband Paul moved to Adams County two years ago, she left a life of high stress working and living in Chicago. One of her goals was to live a healthier life where there is better nutrition, more exercise, and most important, no smoking.

As a teenager, Brenda thought smoking was "cool." "It wasn't long before I was hooked and I've been hooked all these years," she said. However, Brenda really wanted to quit and started thinking about what she could do to help herself.

Last April, she tried zyban®, a non-nicotine medication that reduces the urge to smoke, but it just didn't agree with her. In May, she attended a Quit Smoking

Please see Stop on 8A

Stop

continued from 1A

class at ACMH, but she didn't quit. In May, and June, frequent anti-tobacco commercials were shown on TV: the man who lost his young wife to a smoking related disease, and the model who suffered from throat cancer. "On Thursday, July 5, there was a program on ABC about women and smoking; young women who were sick because they smoked. After that program and the media bombardment, I realized that could be me...I called the Tobacco Quit Line that night," said Brenda. "I gave them my information and they called me back the next day."

The Quit Line is staffed with cessation specialists who provide in-depth personalized help to smokers. Funding for the Quit Line comes from the Wisconsin Tobacco Control Board and is part of the multi-million dollar Master Settlement Agreement with the tobacco companies.

Helping a smoker quit is

accomplished one step at a time. "They told me to call anytime and were so supportive," said Brenda. "Everything I was feeling, they had an answer for." They told Brenda when she craved a cigarette, she should have a glass of water, or count to 10, or take a deep breath, or take a walk - anything to take her mind off the craving. Another helpful suggestion was to cut a straw the length of a cigarette and inhale through the straw. She tried all of those things, and they helped.

However, and this was really emphasized, NEVER ever use food as a replacement for tobacco. Snack on celery or carrots if something must be eaten.

The first three weeks are the most difficult because it takes that long before the nicotine is out of the body. Even when the nicotine is gone, the psychological craving lasts much longer.

Breaking old thought processes and cigarette related habits are also a must. For instance, that familiar cigarette and cup of coffee needs to be changed. Staying away from places where smokers are present keeps

the mind off of cigarettes. Crafts or hobbies will also keep hands and mind busy. Someone from the Quit Line calls Brenda about every three weeks to ask how she is doing and to keep her focused.

Exercise is very helpful. Brenda now walks three miles a day which is healthy in and of itself, but it also keeps her mind off smoking and forces deep breaths. In fact, Brenda's reward to herself is buying a treadmill for winter walking. Not buying cigarettes saves a lot of money.

Brenda is employed at ACEC and has found others to be very supportive in her quest for a healthier life without cigarettes.

Her husband, Paul, who has never been a smoker, told Brenda, "If you feel that overpowering need for a cigarette, call the Quit Line." He has seen what a help they were to Brenda. "It's been 13 weeks since I quit," said Brenda, "and it feels so good to take a deep breath and not cough." Would she recommend the Wisconsin Tobacco Quit Line to others? Absolutely! Call 1-877-270-STOP and get help.

WISCONSIN
Newspaper Association

P.O. Box 5580
Madison, WI 53705
Clipping Service Division

MONTELLO
The Marquette County Tribune

SEP 12 2002

verage and dessert. Children's por-
tions will also be available.

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Wisconsin Tobacco Quit Line Offers Help

The Wisconsin Tobacco Quit Line, launched May 1, 2001 as part of the state comprehensive program to reduce use, continues to provide quitting service to Wisconsin residents. Since the program's inception, over 24,000 calls have been placed to the Quit Line. Recently, the Quit Line added the Wisconsin Senior Patch Program which has provided patches and cessation counseling to over 1000 senior smokers.

"Because of recent publicity about the use of the tobacco settlement money to plug holes in the state budget, many people think that the Quit Line has shut down," said Dr. Michael Fiore, director of the UW Center for Tobacco Research and Intervention. "That is not the case. We are funded through the end of the year and hope that this important service can continue as long as it is needed."

The Wisconsin Quit Line has demonstrated success in helping callers quit. The quit rate for the average caller was 26 percent and callers who used the most comprehensive program offered through the Quit Line achieved a 33 per cent quit rate. These rates are triple those of unassisted quit attempts. A Quit Line satisfaction survey also revealed over 80 percent satisfaction with Quit Line services.

Although Wisconsin's tobacco control programs are funded at less than

half the amount recommended by the Centers for Disease Control (CDC), the Quit Line and other programs are working to address the high tobacco use rate in the state. According to recent research done by the CDC, smoking remains highest among people below the poverty line. The study concluded that the high cost of medication and unequal access to tobacco use counseling probably accounts for higher smoking levels among lower income groups. The Quit Line and other outreach programs are designed to address these inequities.

The Quit Line provides free, individualized smoking cessation counseling to anyone, anywhere in Wisconsin, who calls the Quit Line number. Callers receive a quit kit and can receive up to four follow-up calls to help them stay quit.

The Quit Line is part of the state's plan to reduce smoking in Wisconsin by 20 percent by 2005. The Quit Line is managed by the UW Center for Tobacco Research and Intervention and supported by activities of the local Tobacco Control Coalitions. Funding for the Quit Line comes from the Wisconsin Tobacco Control Board and is part of the multi-million dollar Master Settlement Agreement with the tobacco companies.

The Quit Line is toll-free at 1-877-270-STOP.

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P.O. Box 5580
Madison, WI 53705
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WISCONSIN RAPIDS

The Daily Tribune

OCT 09 2002

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WISCONSIN RAPIDS

LIFESTYLE

Put down the cigarette and pick up the phone

Study: Chats help avert cravings

By KATHLEEN FACKELMANN
USA TODAY

Smokers trying to kick their habit often fail again and again, but a new study suggests telephone counseling can double that slim chance of success.

Those findings are encouraging to public health experts in the United States, where an estimated 46.5 million people smoke.

"Nicotine is an extremely addictive substance," says Christopher Anderson, the program director for the California Smokers' Helpline, one of 33 state-funded telephone counseling programs. Past studies had suggested phone counseling does help people quit smoking, but Anderson and his colleagues wanted to find out if that success held true in the real world.

They enrolled 3,282 smokers who called the California Smokers' Helpline. All of the callers got a package of information designed to help them quit.

But some people in the study got a call from a trained counselor who helped them set up a plan to quit smoking. Those callers got an average of three over-the-phone counseling sessions over a period of one to two months.

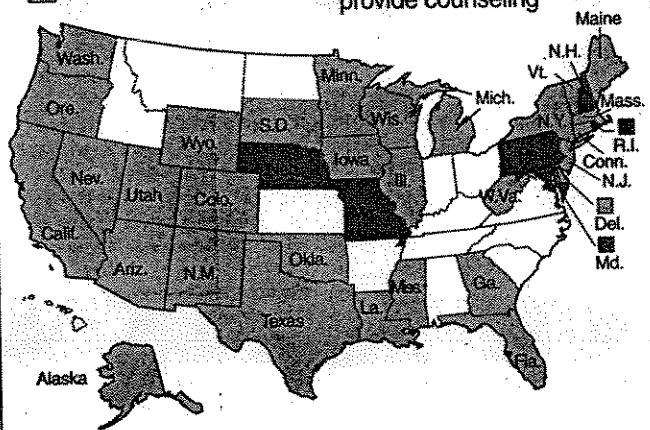
That extra attention paid off. The team found that a month after quitting, 21 percent of people who got the counseling remained smoke-free as compared with 10 percent of those who relied on the self-help method.

As time went on, more people relapsed. Still after a year, 8 percent of the people who had gotten counseling remained smoke-free while just 4 percent of the self-

Dial up to quit

States that provide free telephone counseling to help smokers quit or are planning to offer phone counseling:

■ Provides counseling ■ Planning to provide counseling



Source: National Cancer Institute

Adrienne Lewis, USA TODAY

Map shows states that provide free telephone counseling to help smokers quit or are planning to offer phone counseling.

Help available in Wisconsin

Smoking cessation counseling and assistance is available through the Wisconsin Tobacco Quit Line. Call 1-877-270-STOP (7867).

help group could say the same.

The study appears in a recent edition of "New England Journal of Medicine."

"This is very good news," says Matthew Sones, a spokesman for the Centers for Disease Control and Prevention Office on Smoking and Health. Sones says this study suggests telephone counseling can give smokers an extra edge, one that may help them stay the course.

"We hope this study will encourage other states to estab-

lish quitlines," he says.

Telephone counselors can help smokers figure out ways to avoid situations that set off a craving for a smoke, says Angela Geiger of the American Cancer Society.

In addition, telephone counselors often give smokers information on nicotine replacement therapy, such as the nicotine patch or nicotine chewing gum. Such products can take the edge off the withdrawal symptoms, like irritability, that can derail a plan to quit smoking.

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Quit Line has more calls from seniors, pregnant women, rural areas

BALSAM LAKE — The Second Quarter 2002 Report of the Wisconsin Tobacco Quit Line shows a significant increase in calls, primarily due to the Wisconsin Senior Patch Program, announced May 8. Almost 50 percent of the second-quarter callers were over 60 years old. The Wisconsin Senior Patch Program provided free nicotine patches to smokers 65 and over who signed up for the Quit Line's comprehensive counseling program.

In the second quarter, calls from Polk County increased by 20 percent from those in the first quarter. Some Wisconsin counties reported as much as a ten-fold increase in calls over the first quarter. Over the past 14 months, since the launch of the Quit Line, 81 residents of Polk County have called for help in quitting smoking.

The report also shows a significant number of calls from pregnant women. In its first year of operation, 263 pregnant women, 172 women planning a pregnancy and 36 women who were breastfeeding called for assistance in quitting smoking. "Helping pregnant women quit smoking is a high priority," said Dr. Michael Fiore, director of the UW Center for Tobacco Research and Intervention which manages the Quit Line, "because of the health consequences to both the mother and her baby."

The Quit Line report also reveals a high number of rural callers. While less than 45 percent of Wisconsin residents live in rural areas, 65 percent of Quit Line callers live in areas designated as

rural, areas with populations less than 50,000. "The high percentage of calls from rural areas probably results from fewer smoking cessation services available," said Lezli Redmond, CTRE Education and Outreach director. "The Quit Line can serve rural residents because it is both convenient and confidential."

Calls by minorities have also been significant — almost 9 percent in the first year, 724 African Americans, 228 Native Americans, 150 Hispanics and 24 Asian Americans have called the Quit Line number. The Quit Line provides counseling services in a number of languages including Spanish and Hmong.

The Quit Line provides free, individualized smoking cessation counseling to anyone, anywhere in Wisconsin, who calls the Quit Line number. Callers receive a quit kit and can receive up to four follow-up calls to help them stay quit.

The Quit Line is part of the state's plan to reduce smoking in Wisconsin by 20 percent by 2005. The Quit Line is managed by the UW Center for Tobacco Research and Intervention and supported by activities of the local Tobacco Control Coalitions. Funding for the Quit Line comes from the Wisconsin Tobacco Control Board and is part of the multi-million dollar Master Settlement Agreement with the tobacco companies.

If you'd like more information about the Wisconsin Tobacco Quit Line or other smoking cessation materials, contact Jay Shrader at the Polk County Health Department at 715-485-8500.

Quit Line flooded with calls

But state funding doubts leaves program in limbo

By Antoinette Rahm
Central Wisconsin Sunday

The success of the state's Tobacco Quit Line has surpassed the expectations of some supporters, but shaky funding is leaving its future in question.

"Right now, the Quit Line has been an incredible success; we can prove that," said David Gundersen, the Tobacco Control Board's executive director. "It's clear

there is a demand. The only problem we have is there is too much demand."

The Quit Line will continue to provide callers with smoking cessation counseling and assistance in 2003, with a budget of \$1.3 million, up from \$1 million in 2002. Gundersen said. But the state used its tobacco settlement money to offset a budget deficit, so organizers fear the money won't be

there the following year to support the program.

In Portage, Wood and Marathon counties, calls to the line have more than doubled from the first quarter of this year, January through March, to the second quarter, April through June. The Quit Line is a free service that provides individual smoking cessation counseling, a quit kit and optional intensive intervention.

"And we've seen in other states that have quit lines like ours, that the lines are one of the most successful. See QUIT/2A



Casey Laska, Central Wisconsin Sunday
Wisconsin Rapids plays cards with a friend in Tibbets, who quit smoking about six months after-in-law promised her a diamond if she quit smoking.

From Page 1A

and cost-effective plans for quitting," said Lezli Redmond, director of state-wide outreach for the University of Wisconsin Center for Tobacco Research and Intervention, which manages the Quit Line.

Ann Tibbets of Wisconsin Rapids says she gained a new lease on life thanks to the Quit Line.

"I feel really good. It's so nice to walk outside and get a breath of fresh air," said Tibbets, who smoked for 40 years and celebrates six months of smoke-free living this month. "My apartment smells a lot nicer, and that balcony smells gaining weight is just that, balcony I lost weight."

Since the inception of the Quit Line in May 2001, there have been 16,000 callers, according to a report by the UW Center for Tobacco Research and Intervention.

The Tobacco Control Board is trying to offset some costs by working with businesses and health-care providers to make nicotine replacement therapies more acces-

For help

The Wisconsin Tobacco Quit Line phone number is 1-877-270-STOP (7867).

sible for employees, Gundersen said.

"The medications are a big-ticket cost item that right now the board can't afford to pay for," he said. "We need to find public and private partnerships to help support this program."

Tibbets, who tried to quit smoking many times before, used nicotine replacement chewing gum and the assistance of Quit Line staff members to remain smoke-free, though it's still sometimes difficult.

"Our building is smoke-free, and I used to be one of the people who would go outside and smoke," she said. "I feel a little left out sometimes now, but I'll stop and think about it and realize I feel really good now. I don't have anything against people who smoke, but it's not for me anymore."

Quit Line facts

- Calls in 2002:
- Marathon County: 16 in the first quarter, 45 in the second quarter.
- Portage County: 10 in the first quarter, 26 in the second quarter.
- Wood County: 20 in the first quarter, 47 in the second quarter.
- Other facts:
- Throughout the state, 80 percent of the 2,730 callers in the second quarter were tobacco users, the highest percent of tobacco users to call the line.
- From May 1, 2001, to May 31, 263 pregnant women and 172 women planning a pregnancy called the line for help.
- A quit-rate survey shows 23.3 percent of the callers remained smoke-free after six months. The rate of those who remained nonsmokers after using intense intervention was 33 percent, according to the report.

Source: UW Center for Tobacco Research and Intervention



The Wisconsin Tobacco Quit Line
Quarter 4, 2002
(Ending December 2002)
The UW Center for Tobacco Research and Intervention

Introduction

As of the end of December 2002, the Wisconsin Tobacco Quit Line has received over 30,000 calls from over 20,200 callers. There were close to 2,500 callers in the fourth quarter of 2002, up from 1,800 callers in the third quarter.

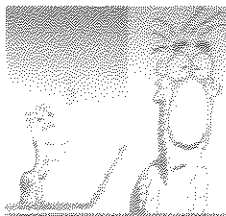
Starting November 18th, consistent Quit Line advertising began for the first time in a year. "Quitting Takes Practice", a television commercial that has resulted in many calls in other states and previously in Wisconsin, has been running on television stations throughout the state. Call volumes increased and have remained steady throughout the fourth quarter, with help from the statewide television advertising, reaching an average of about 42 callers per day as compared to approximately 20 callers per day prior to the television advertising.

This report again provides information about how callers heard about the Quit Line on a county-by-county basis. The data indicates that in the fourth quarter of 2002, callers reported hearing about the Quit Line most often through television, newspapers or magazines and their health care providers. The percent of callers who indicated that they learned about the Quit Line from television jumped up from only 10% in October to over 40% in November, when the television ads started running. And that number was over 60% in December! As well, the percent of callers who reported hearing about the Quit Line through newspapers and magazines dropped significantly from almost 15% in October to a low of only 2% in December. During the months of November and December, while the new Quit Line television ads were running, CTRI did not promote the Quit Line through press releases and other media outlets as done more frequently in the past months.

Quit Line Monthly Reports: Need help interpreting what the numbers mean?

CTRI will be holding a teleconference in April to help all coalitions and others who receive the Quit Line Monthly Reports to understand what each category means and how the numbers can be used to help you with your tobacco cessation efforts. We'll inform you via email when the date is set so you can join us!

Tables contain data by region and county. For access to the report electronically, please visit the CTRI website at www.ctri.wisc.edu or the Wisconsin Tobacco Resource Center website at www.tobwis.org.



"Quitting Takes Practice" Television Ad



How Many Calls?

As of the end of December 2002, the Wisconsin Tobacco Quit Line has received over 30,000 calls from over 20,200 callers. There were nearly 2,500 callers in the fourth quarter of 2002. The Quit Line "Little Guy" television ads started running on November 18, 2002. As a result, calls in November and December nearly doubled over the number of calls in October and previous months (see table below).

Quit Line Call Summary:

	Year 2001 Total	Qtr 1 2002 Total	Qtr 2 2002 Total	July	Aug	Sept	Qtr 3 2002 Total	Oct	Nov	Dec	Qtr 4 2002 Total	Year 2002 Total
Total Number of Callers	11,800	1,500	2,730	690	620	550	1,860	560	900	1,010	2,470	8,560

* Numbers rounded

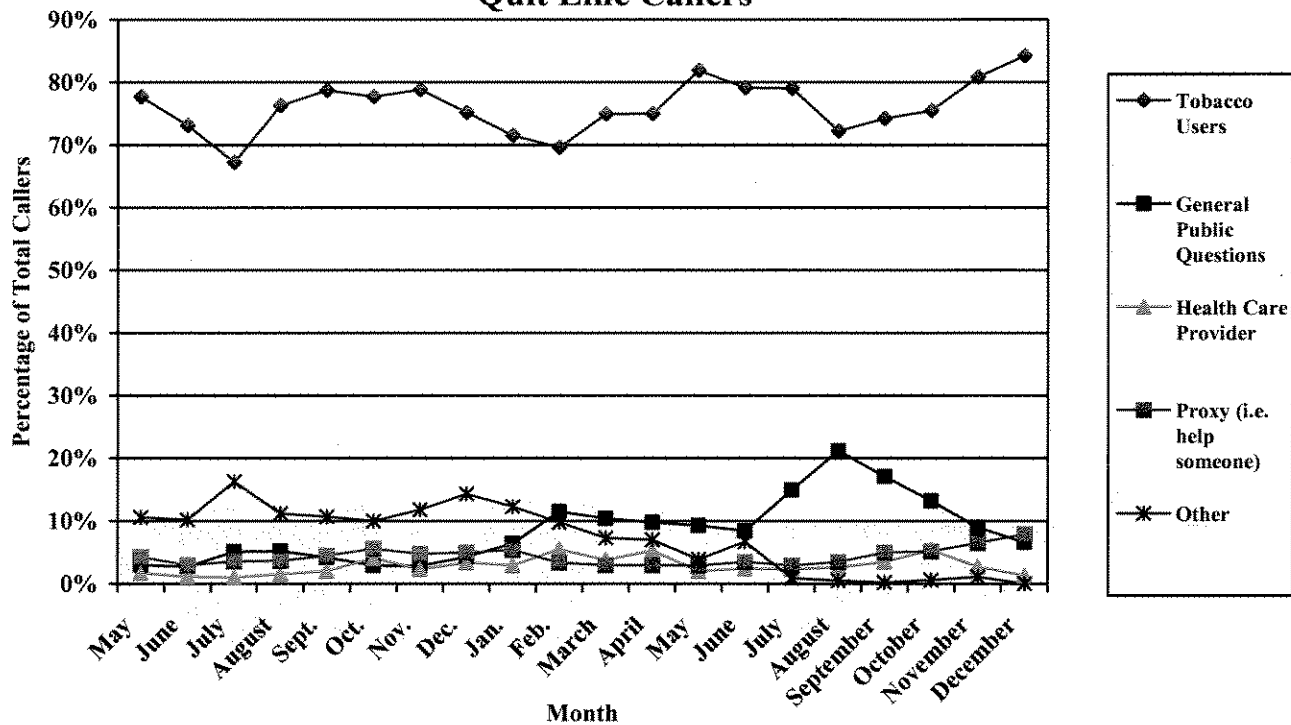
In the fourth quarter of 2002, 80% of callers were tobacco users who received a minimum of a one-time intervention. The percent of callers to the Quit Line who are tobacco users has consistently increased in the fourth quarter, with the highest percent of tobacco users (over 84%) calling the Quit Line in December 2002 (see table below).

Below are a chart and a graph that indicates the types of callers who call the Quit Line:

Quit Line Caller Categories:

Category (%)	Year 2001 Total	Qtr 1 2002	Qtr 2 2002	July	Aug	Sept	Qtr 3 2002 Total	Oct	Nov	Dec	Qtr 4 2002 Total	Year 2002 Total
Tobacco Users	75.6	72	78.7	79	72.2	74.2	75.3	75.5	80.8	84.2	80.2	76.6
General Public Questions	3.6	9.4	9.2	14.9	21.2	17.1	17.6	13.2	9	6.6	9.6	11.5
Health Care Provider	1.8	4.1	3.2	2.3	2.6	3.5	2.8	5.4	2.7	1.3	3.1	3.3
Proxy i.e. help someone	4.0	3.9	3.1	2.9	3.5	5	3.7	5.2	6.5	7.9	6.5	4.3
Other	11.5	9.8	5.9	0.9	0.5	0.2	0.6	0.8	1.1	0	0.6	4.2

Quit Line Callers



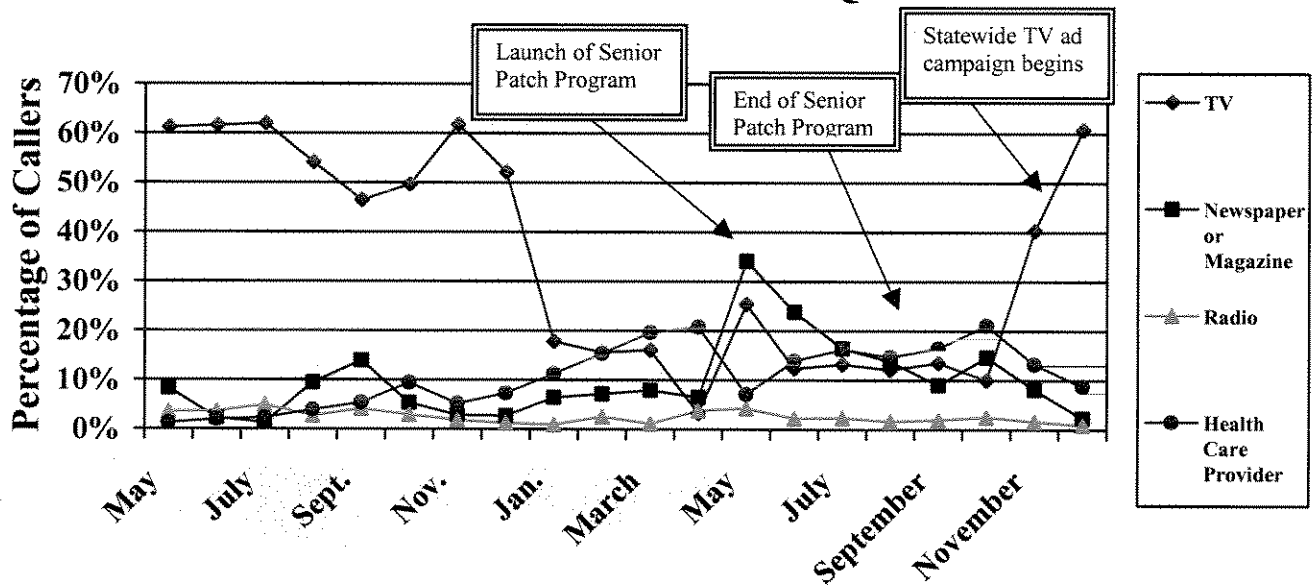
How Did They Hear about the Quit Line?

Below please find the tables that show how callers from each county heard about the Quit Line. This information will be helpful to evaluate specific initiatives on a quarterly basis by county. With the start of statewide television advertising for the Quit Line in November, the percent of callers hearing about us through television jumped up dramatically in the fourth quarter, with a high of over 60% in that category. The callers who reported hearing out about the Quit Line through newspapers and magazines decreased quite substantially at the end of the fourth quarter. With the beginning of the "Little Guy" Quit Line television ads in mid-November, there was less Quit Line advertising through press releases and other print media during the fourth quarter. All other categories stayed fairly consistent in the fourth quarter.

How Callers Heard about the Quit Line

Category (%)	Year 2001 Total	Qtr 1 2002	Qtr 2 2002	July	Aug	Sept	Qtr 3 2002	Oct	Nov	Dec	Qtr 4 2002	Year 2002 Total
TV (%)	58.3	16.5	13.7	13.2	12.1	13.5	12.9	10	40.3	60.8	37	20
Newspaper/ Magazine (%)	5.4	7.1	21.5	16.4	13.8	9	13.1	14.6	8.1	2.3	8.3	12.5
Radio (%)	3.3	1.5	3.4	2.3	1.6	1.9	1.9	2.5	1.6	0.9	1.7	2.1
Past Caller (%)	4.2	10.3	5.7	7.4	6.8	7.3	7.2	7.1	4.0	3.5	4.9	7
Family or Friend (%)	3.7	6.2	6.8	11.2	6.1	11.2	9.5	7.9	5.6	5.7	6.4	7.2
Health Care Provider (%)	3.5	15.4	13.9	16.2	14.7	16.5	15.8	21.1	13.2	8.8	14.4	14.9
Workplace (%)	0.3	1.8	6.4	0.3	1.3	1.3	1	0.4	0.1	0.6	0.4	2.4
Other (%)	21.3	41.2	34.4	33	43.5	39.2	38.6	36.4	27.1	17.4	27	35.3

How Callers Heard about the Quit Line



How Many Callers Were Ready To Quit?

It is important to ensure that the Quit Line is serving its target population and we can do this by tracking what stage of quitting callers to the Quit Line are in when they make the call. Although the Quit Line is available to help move individuals toward being more ready to quit, it is most important to match those ready to quit with this service. There has been a steady increase in those ready to set a quit date compared to all other groups. Those who are ready to quit and receive support and counseling will be more likely to quit successfully.

Tobacco User Intervention Summary (tobacco users in Qtr 4, N=1768):

Category	Year 2001 Total	Qtr 1 2002	Qtr 2 2002	Qtr 3 2002	Oct	Nov	Dec	Qtr 4 2002	Year 2002 Total
Not ready to quit – Precontemplator	0.6%	1.9%	0.7%	0.5%	0.3%	0.8%	0.7%	0.6%	0.9%
Ready to quit but not ready to set a quit date within 30 days – Contemplator	12.6%	11.2%	7.4%	7.3%	6.9%	5.3%	7.7%	6.6%	8.1%
Ready to quit, set quit date within 30 days – Preparation	76.7%	74.1%	82.6%	83.9%	79.4%	86.6%	87.4%	84.5%	81.3%
Recent quitter	5.4%	11.7%	8.7%	7.2%	11.7%	6.5%	3.7%	7.3%	8.7%
Unknown	4.7%	1.2%	1.0%	1.0%	1.8%	0.8%	0.5%	1.0%	1.1%

Are Tobacco Users Being Referred to Local Programs?

Wisconsin residents who contact the Wisconsin Tobacco Quit Line are being referred to cessation programs that exist near their home or work. From October through December 2002, 1,124 referrals were made to local cessation programs. Since the beginning of the Quit Line, 4,744 referrals have been made. In addition, the *Compendium of Cessation Programs* is routinely mailed in the Quit Packet to callers.

If you'd like to know how many callers were referred to your program or you want to make sure your program is included in the database, please contact Laurie Draheim (608-265-5617), lad@ctri.medicine.wisc.edu.

The Quit Line Fax Referral Program – What is it and how can providers and employers join?

You can work directly with the Wisconsin Tobacco Quit Line to enhance your client or employee's chances of quitting for good. The Fax Referral program offers the opportunity for intense intervention and follow-up beginning with you in your office; the more intense the intervention, the more likely a person is to quit for good. Following a discussion about tobacco use and cessation, your client or employee can agree to have the Quit Line contact him/her to begin the counseling process. The Quit Line will make the first outgoing call to your client or employee upon receiving their written permission via a fax from your office. The Quit Line will then communicate with you in return about the intervention plan with each client/employee.

PROTOCOL

The Fax Referral Program is dependent on your client or employee agreeing, in writing, to participate. Therefore, in order for this program to work, there must be a face-to-face meeting with each client or employee to explain the program and to obtain her/his consent to participate. It is vital to the success of the program that each person demonstrates that he/she wants and understands that the Quit Line will contact her/him.

This program is available to all clinicians and employers. The following is the protocol for utilizing this service for your office. If you are interested in this program:

1. Contact the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) Special Projects Coordinator, Laurie Draheim, at 608-265-5617.
2. The Special Projects Coordinator will work with you to determine issues that may be specific to you and your clients' situations (i.e. calls postpartum/during pregnancy, obtaining specific HMO benefits etc).
3. Each clinician's office or employer is encouraged to contact participating clients following the Quit Line intervention as additional follow-up and support increasing chances of quitting for good.

The Regions and Their Counties

Introduction

To help each county and each region assess more precisely the effectiveness of their initiatives in driving calls to the Quit Line, the following tables break down how callers heard about the Quit Line. From legislator newsletters to radio advertisements to health care providers, all the categories collected by the Quit Line are listed for each county.

Beginning with the Great American Smoke-out on November 18th, Quit Line television advertising will run through the end of 2003, allowing heightened awareness by Wisconsin residents. Regional initiatives will be able to take advantage of this heightened awareness as residents should be more susceptible to ideas and suggestions about calling the Quit Line to get help in quitting for good.

Remember, the following county data reports the number of **callers**. In the fourth quarter of 2002, nearly **2,500** people statewide called the Quit Line. However, only **1,937 callers** reported their county of residence. Thus, the "How Heard" charts are based upon the number of callers in each region whose county of residence was known.

Please review numbers carefully. Also, if you are planning an initiative that will need specific data not seen in this report, please contact Laurie Draheim at least one month prior to the date you will need the data as time is needed to request specific information from the Quit Line.

If you would like a zip code report, we are able to provide you with that information as well. Please contact Laurie Draheim at lad@ctri.medicine.wisc.edu or 608-265-5617 to request that information.

The Western Region

There were 317 callers from October 2002 through December 2002 from the Western Region. Wisconsin began our statewide television advertising for the Quit Line in the middle of November. The Minnesota Tobacco Helpline is continuing their free patch program for Minnesota residents. We know that some of the publicity from this program made its way into the western region of Wisconsin and motivated some people to call the Wisconsin Tobacco Quit Line, who shares the same toll-free number as Minnesota's Helpline. In the beginning of 2003, Wisconsin and Minnesota will begin to collaborate on our Quit Line and Helpline advertising campaigns and programs so that both states may benefit from the shared border media reach and advertising expertise. Minnesota will be launching more television and radio Helpline advertising in early 2003. We are confident that this endeavor will be successful and very helpful to both state's tobacco quit line programs.

In October, CTRI's western region outreach specialist conducted a presentation on volunteer tobacco control projects to the Wisconsin Hospital Association (WHA) Partners Statewide meeting in LaCrosse. WHA Partners is a non-profit, volunteer service organization affiliated with the WHA and it boasts more than 20,000 members in Wisconsin. The outreach specialist presented as part of a panel presentation on tobacco control activities. The focus of her presentation was the Quit Line, what it is and how volunteers can work to promote it.

	MAY-DEC. 2001 TOTAL	QTR 1 2002 TOTAL	QTR 2 2002 TOTAL	QTR 3 2002 TOTAL	OCT 2002	NOV 2002	DEC 2002	QTR 4 2002 TOTAL	COUNTY TOTAL MAY 2001- DEC 2002
Barron	57	11	20	10	1	5	4	10	108
Buffalo	15	0	7	2	0	1	2	3	27
Burnett	20	7	15	2	2	2	2	6	50
Chippewa	118	8	41	4	1	2	13	16	187
Clark	83	11	19	5	4	2	9	15	133
Douglas	202	25	43	14	7	7	25	39	323
Dunn	67	11	5	13	5	8	3	16	112
Eau Claire	166	10	40	12	3	16	16	35	263
Jackson	27	10	13	3	0	1	5	6	59
La Crosse	207	20	63	41	9	18	33	60	391
Monroe	67	6	16	16	5	10	11	26	131
Pepin	10	5	3	1	1	1	0	2	21
Pierce	32	13	21	11	4	8	5	17	94
Polk	37	20	24	28	5	4	2	11	120
Rusk	51	6	12	3	0	4	2	6	78
Saint Croix	60	20	12	27	9	11	3	23	142
Trempealeau	43	3	15	7	1	4	4	9	77
Vernon	26	3	15	14	0	6	4	10	68
Washburn	57	3	31	10	3	2	2	7	108
Western Region Total	1,345	192	415	223	60	112	145	317	2,492
State Total	11,774	1,490	2,706	1,828	436	677	824	1,937	19,735

How Callers Heard about the Quit Line – Western Region – October – December 2002

COUNTY	Brochure or Newsletter	Clinic Pilot	Don't Remember	Family or Friend	Health Care Provider	Health Department	Health Fair / Community Event	Legislator	Newsletter	Newspaper or Magazine	Non-Profit Organization	Other	Past Caller	Radio	School	TV Commercial	TV News	Web Site	Workplace	Unknown	Great Start	Grand Total
BARRON				1	1				1							7						10
BUFFALO									1							2						3
BURNETT				1		2			1			1	1									6
CHIPPEWA									2			1				13						16
CLARK					3	1			1			1	1			7				1		15
DOUGLAS	4			6	2	4						2	2	2	1	14				1	1	39
DUNN					3				1				2	3		6	1					16
EAU CLAIRE				4	3							1	2			25						35
JACKSON									1							5						6
LA CROSSE	2				8	3			4			2	5			35			1			59
MONROE				1	7							2	1			15						26
PEPIN				1											1							2
PIERCE				3	5	1					1	1	1		1	2	1		1			17
POLK	1	1		1	2				1			2	2			1						11
RUSK					1				1							4						6
SAINT CROIX				3	7							3	2	4		4						23
TREMPEALEAU	1												1			7						9
VERNON	1			1							1	1				6						10
WASHBURN				1					1			1				4						7
Western Region Total	9	1	0	23	42	11	0	0	15	2	18	20	9	3	157	2	0	2	2	2	1	317

The Northeastern Region

There were 381 callers from the Northeastern Region from October 2002 through December 2002.

In the fourth quarter, the Northeast Region CTRI Outreach Specialist gave Clinical Practice Guideline training to providers in Shawano County, ThedaCare at Work in Winnebago County, and to Respiratory Therapists at St. Mary's Hospital in Green Bay.

	MAY- DEC. 2001 TOTAL	QTR 1 2002 TOTAL	QTR 2 2002 TOTAL	QTR 3 2002 TOTAL	OCT 2002	NOV 2002	DEC 2002	QTR 4 2002 TOTAL	COUNTY TOTAL MAY 2001- DEC 2002
Brown	543	30	90	26	2	28	46	76	765
Calumet	53	2	9	4	0	5	7	12	80
Door	45	2	8	3	0	2	5	7	65
Fond Du Lac	176	22	31	18	5	6	13	24	271
Green Lake	75	5	18	7	1	5	4	10	115
Kewaunee	28	2	8	7	0	1	5	6	51
Manitowoc	155	12	70	32	5	11	16	32	301
Marinette	93	7	33	11	5	8	8	21	165
Marquette	53	7	17	17	3	7	6	16	110
Menominee	4	1	3	1	0	0	0	0	9
Oconto	71	9	24	10	3	10	7	20	134
Outagamie	242	16	43	20	4	14	14	32	353
Shawano	81	3	18	11	1	5	4	10	123
Sheboygan	142	18	65	23	3	15	15	33	281
Waupaca	126	11	35	8	2	1	11	14	194
Waushara	74	3	30	7	3	2	1	6	120
Winnebago	265	20	43	37	15	12	35	62	427
Northeastern Region Total	2,226	170	545	242	52	132	197	381	3,564
State Total	11,774	1,490	2,706	1,828	436	677	824	1,937	19,735

How Callers Heard about the Quit Line – Northeastern Region

COUNTY	Brochure or Newsletter	Clinic Pilot	Don't Remember	Family or Friend	Health Care Provider	Health Department	Health Fair / Community Event	Legislator Newsletter	Newspaper or Magazine	Non-Profit Organization	Other	Past Caller	Radio	School	TV Commercial	TV News	Web Site	Workplace	Unknown	Great Start	Grand Total
BROWN	3		1	3	3				1	2	2	2			57	1			1		76
CALUMET									1		2		1		8						12
DOOR	1														6						7
FOND DU LAC	2				4				1		1				13	1	2				24
GREEN LAKE	1								3		2				4						10
KEWAUNEE					2										4						6
MANITOWOC	2		1		5				7		2				14						32
MARINETTE	2			1	3				1	3		1			10						21
MARQUETTE	1			3	3						4	1			3	1					16
MENOMINEE																					0
OCONTO				1	3				5	1	3				6	1					20
OUTAGAMIE	1			3	2				1			1			24						32
SHAWANO					4										6						10
SHEBOYGAN	4			4	9						2	2			12						33
WAUPACA				4	1				1		1	1			6						14
WAUSHARA					1						1				2				1	1	6
WINNEBAGO	2			4	5				1		4	6		3	33		1	1	2		62
NORTHEASTERN REGION TOTAL	19	0	2	23	45	0	0	0	22	6	24	14	1	3	208	4	3	1	4	1	381