

# Smoking Cessation in Cuyahoga County 2003-2006

April 2007

Data Brief

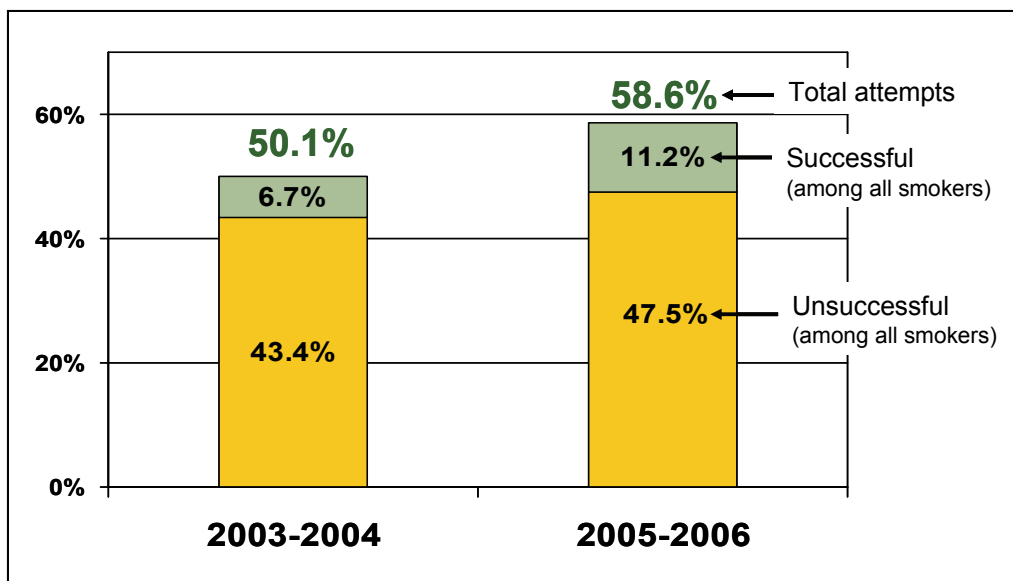
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- Quit Attempts and Successes
- Demographic Characteristics of Those Who Attempt to Quit and are Successful
- Importance of Health Care Coverage and Regular Physician Care
- Cessation Services Used

Over the past four years, the number of smokers making an attempt to quit smoking increased from 50.1% to 58.6%. More importantly, the percentage of smokers who quit also increased from 6.7% to 11.2%.

The Cuyahoga County Behavioral Risk Factor Surveillance Survey is supported with funds from the Ohio Tobacco Prevention Foundation and the Community Vision Council

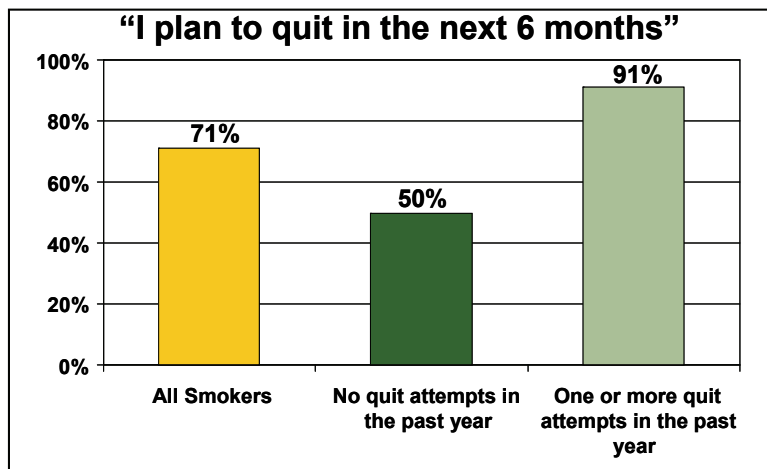
## Percentage of Quits Attempts and Success



Over the past four years, increasingly more Cuyahoga County adult smokers have tried to quit smoking; 50.1% made at least one attempt in 2003-04 and 58.6% made at least one attempt in 2005-2006. More importantly, 11.2% of all smokers succeeded in quitting in 2005-2006, as compared to 6.7% in 2003-2004.

## Intention to Quit

Research has found that most smokers make many quit attempts before they were successful. Thus, unsuccessful quit attempts should not be considered failures, but instead, "practice sessions". Smokers in Cuyahoga County followed this trend, as 91%



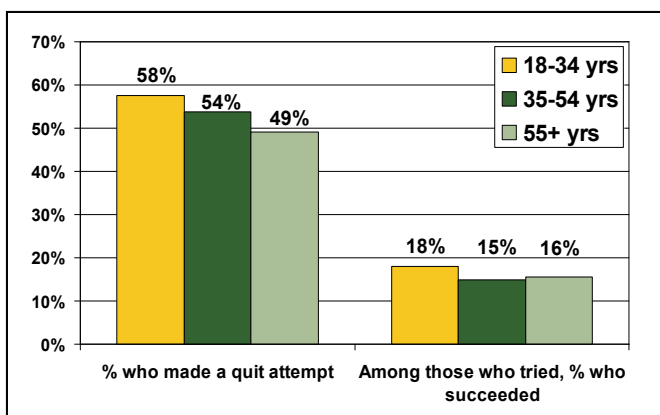
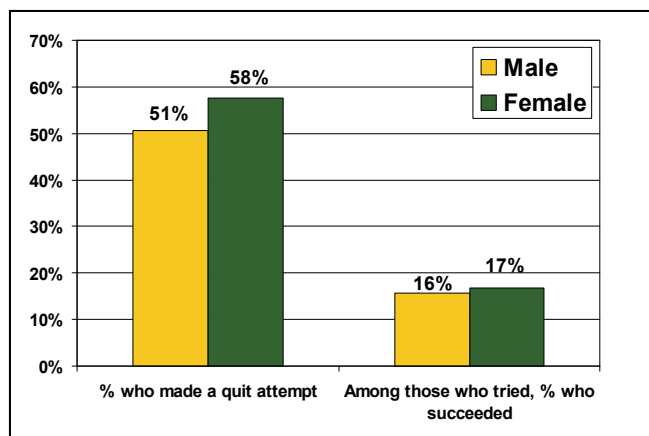
of smokers who made at least one quit attempt in the past year (between 2003 and 2006) said that they "plan to quit in the next six months".

Additionally, even 50% of those who had not made a quit attempt in the past year stated that they were thinking of quitting in the future.

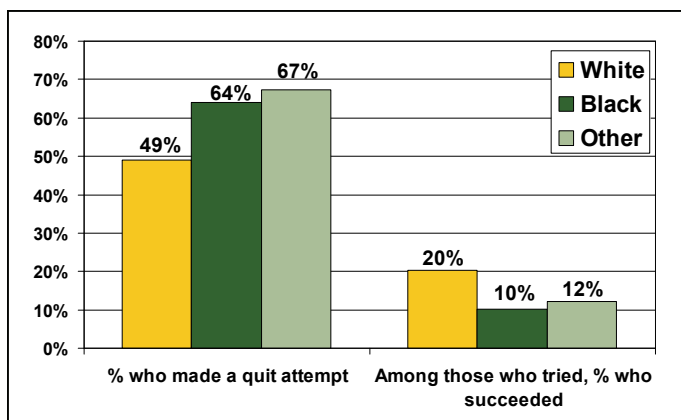
## Who Tries and Who Succeeds?

This page provides a description of who made at least one smoking quit attempt in the past year (bars on the left side of each graph) and among those who tried, who succeeded (bars on right side of each graph) between 2003 and 2006.

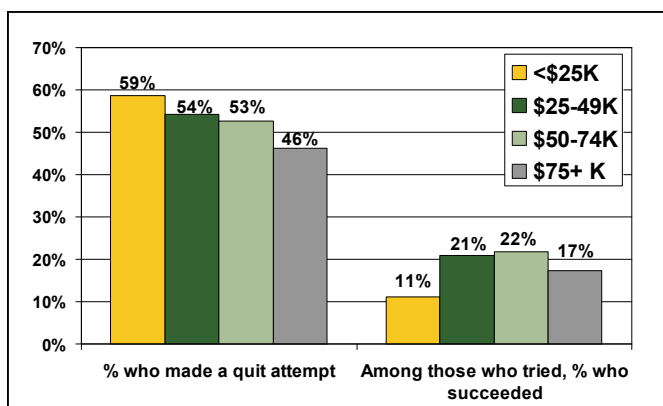
**BY GENDER (right):** Women were more likely than men to make a quit attempt (58% vs. 51%). However, women were only slightly more likely than men to succeed at quitting smoking (17% vs. 16%).



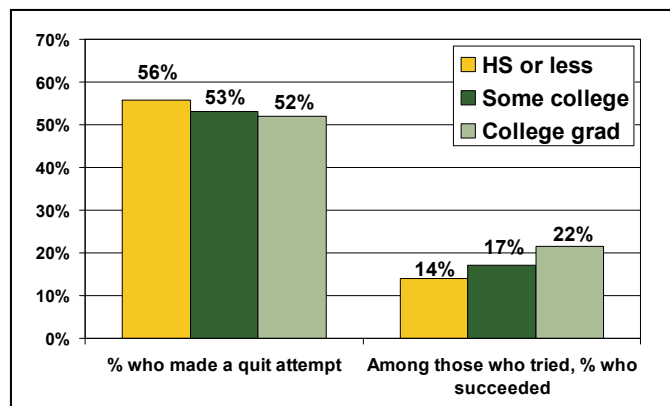
**BY AGE (above):** Younger adults were more likely to make a quit attempt (58% vs. 54% vs. 49%). However, younger adults were only slightly more likely to succeed in their attempt.



**BY RACE (above):** Black adults and those from other racial or ethnic groups (e.g., Hispanic, Asian) were more likely to make a quit attempt than White adults (64% and 67% vs. 49% respectively). White adults, however, were more likely to succeed.

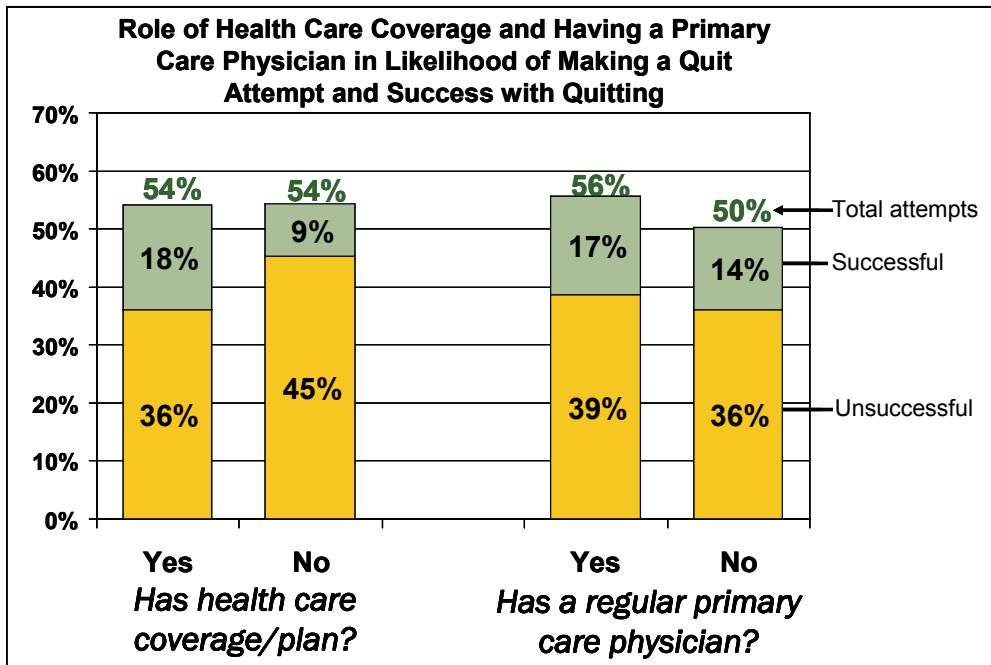


**BY INCOME (above):** The lower the income level, the more likely a smoker was to make a quit attempt in the past year, as evidenced by quit attempts made by 59% of those making \$25,000 or less compared to only 46% of those making \$75,000 or more. However, those at the lowest income level were least likely to succeed.



**BY EDUCATION (above):** Similar to income, those with less education were somewhat more likely to make a quit attempt in the past year; however, they were the least likely to succeed when compared to other smokers with more education.

## Importance of Health Care Coverage and Regular Physician Care



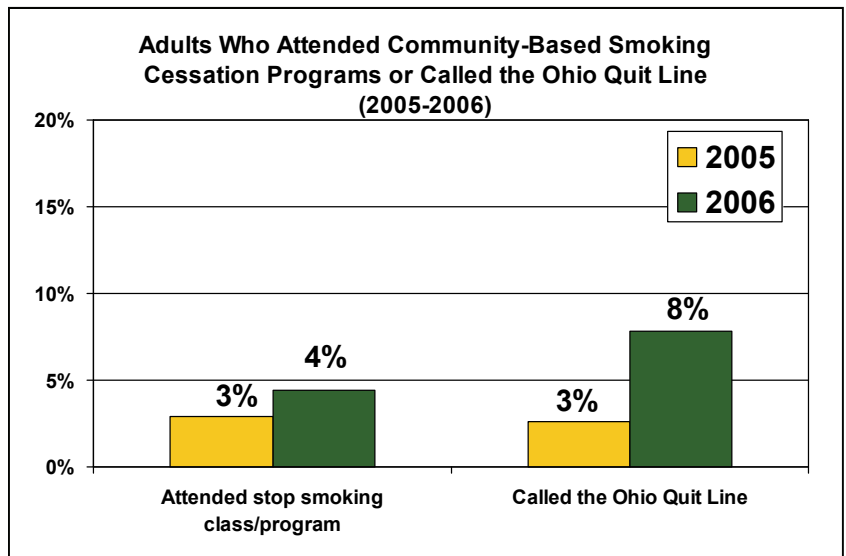
“Those with health care coverage were twice as likely to succeed (quit smoking) as compared to those without coverage (18% vs. 9%).”

As shown in the figure above, health care coverage was not associated with incidence of a quit attempt. However, smokers with a primary care physician (PCP) were slightly more likely to make a quit attempt than those without a PCP (56% vs. 50%). In contrast, among those who made at least one quit attempt in the last year, those with health care coverage were twice as likely to succeed (quit smoking) as compared to those without coverage (18% vs. 9%), and those with a PCP were slightly more likely to succeed as compared to those without a PCP (17% vs. 14%).

## Cessation Services Used

Individuals who reported smoking in the previous year were asked about the smoking cessation services they used in the past 12 months. As shown in the figure to the right, only a small number of smokers attended a smoking cessation program or class (3% in 2005; 4% in 2006). The percentage who called the Ohio Quit Line in 2005 was similarly small (3%); however, this number increased to 8% in 2006. This increase is notable when compared to national averages of 1-2% of smokers who call quit lines in the U.S.<sup>1</sup>

While the numbers are quite small, those most likely to call the Ohio Quit Line were older, female, Black or of other race/ethnicity, aged 25-49, and had some college education (data not shown).



<sup>1</sup> Ossip-Klein, D., McIntosh, S. Quitlines in North America: evidence base and applications. Am J Med Sci 2003; 326: 201-205.

**Local Data Source:** Cuyahoga County Behavioral Risk Factor Surveillance Survey (CC-BRFSS), 2003-2006.

**Methodology:** The local CC-BRFSS is a point-in-time survey modeled after the Centers for Disease Control and Prevention's (CDC) state-based system of health surveys administered annually by each state. The BRFSS is conducted via telephone interviews of randomly selected adults from randomly sampled, telephone-equipped households. A total of 5,301 Cuyahoga County adults were surveyed between 2003 and 2006. All participants' answers were aggregated and weighted so that the overall group represents all Cuyahoga County adults based on Census population figures (see the Cuyahoga County Behavioral Risk Factor Surveillance Survey Methodology Brief available on the Center for Health Promotion Research website for more details – see web address below).

**Measures:**

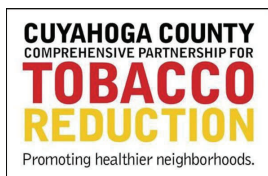
- Smoker – Anyone who has ever smoked at least 100 cigarettes in their lifetime and reported either (1) currently smoking everyday or some days OR (2) not currently smoking but quit smoking within the previous 12 months
- Quit attempt – “During the past 12 months, have you stopped smoking cigarettes for one day or longer because you were trying to quit smoking?”
- Successful attempt – Anyone who has ever smoked at least 100 cigarettes in their lifetime who is not currently smoking and quit smoking within the previous 12 months
- Healthcare coverage – “Do you have any kind of healthcare coverage, including health insurance, pre-paid plans such as HMOs, or government plans such as Medicare?”
- Primary care physician – “Do you have one person you think of as your personal doctor or healthcare provider?”

**Definitions:**

- Ohio Quit Line – Funded by the Ohio Tobacco Prevention Foundation, the Ohio Tobacco Quit Line, 1-800-QUITNOW, is a toll-free telephone counseling service that connects people who want to quit using tobacco with trained counselors who can guide and support them through the quitting process. This free service is available in both English and Spanish to people calling from anywhere in Ohio.

For more information on the methodology, including the sample description, please refer to the Cuyahoga County Behavioral Risk Factor Surveillance Survey Methodology Brief available on the Center for Health Promotion Research website (see web address below).

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