

2012 Data Summary

Georgia Tobacco Quit Line and Smoking Cessation

Approximately 40% (765,000) of adult smokers in Georgia report they are aware of telephone quit line services available to help them quit using tobacco¹.

Smoking Prevalence and Health Costs

Overall, smoking prevalence among adults in Georgia is 21% (1.5 million).²

- Smoking prevalence among adult Georgians varies by age, gender, race/ethnicity, and Public Health Districts.
- Smoking prevalence varies among Georgia adults by age group, with the highest among those aged 18 to 24 years and significantly lower prevalence among adults 55 to 64 years and 65 years and older (Table 1)².
- Male adults have a significantly higher smoking prevalence (24%; 850,000) than female adults (18%; 670,000)².
- Among non-Hispanic (NH) whites, the smoking prevalence of 24% (1 million) is higher than for NH blacks (17%; 350,000) and Hispanics (13%; 71,000)².
- Public Health Districts with smoking prevalence rates significantly above the state average (21%; 1.5 million) include the Southeast (Waycross, 31%; 107,000), South (Valdosta, 26%; 58,000), and Northwest (Rome, 26%; 120,000) Districts (Figure 1)².
- Smoking accounts for an estimated \$1.8 billion in healthcare costs among Georgia adults aged 18 years and older³.

Compared to nonsmokers, smokers have an increased risk of heart disease, stroke, chronic obstructive lung diseases as well as various forms of cancer⁴.

Figure 1. Prevalence of Adult Smoking by Public Health District, Georgia, 2011²

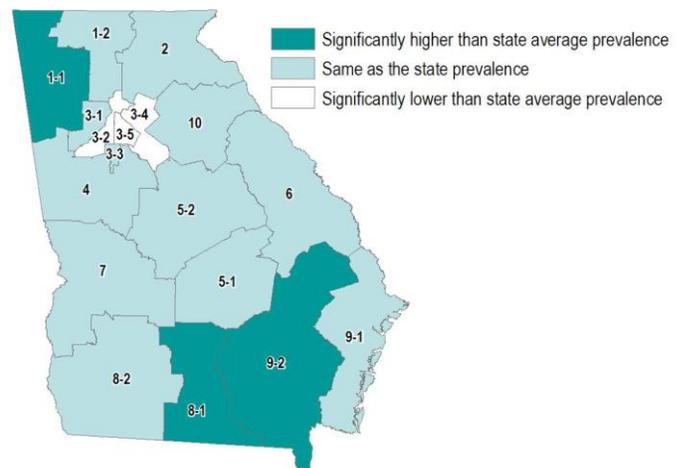


Table 1. Smoking Prevalence by Adult Age Groups²

Age Group (Years)	Smoking Prevalence (%)	Number of Persons
18-24	25	240,000
25-34	24	330,000
35-44	23	320,000
45-54	24	320,000
55-64	19	200,000
65 years and older	11	110,000

Healthcare Provider Advice

Smokers cite that a health professional’s advice is an important motivator to quit smoking⁵.

*2011 BRFSS smoking prevalence data should not be compared with smoking data from previous years due to changes in survey methodology.



Georgia Tobacco Quit Line and Smoking Cessation

Healthcare team referrals to tobacco cessation telephone counseling (such as, a quit line), referral to a class or program, or one-on-one counseling aids adults to quit smoking and using tobacco.

Approximately 70% (900,000) of Georgia adult tobacco users visited a doctor, dentist, nurse, or other health professional in the past year (Table 1)¹.

Tobacco Cessation Treatment Utilization¹

- Approximately half of Georgia adult smokers made a quit attempt in the past year (54%; 528,000).
- In an attempt to quit smoking, 28% (211,000) of Georgia adults used an FDA-approved medication and 4% (31,000) participated in a tobacco cessation class or program to help them quit.

Healthy People (HP) 2020 Objectives are science-based 10 year national objectives for improving the overall health of all Americans. Featured below is one of the objectives to address tobacco cessation among adults:
Tobacco Use (TU): TU-9. Increase by 2020 tobacco cessation screening in healthcare settings: office/hospital-based ambulatory care settings, dental (developmental) and substance abuse (developmental) settings.

Table 2. Healthcare Provider Advice and Support on Tobacco Cessation to Georgia Tobacco Users

US Public Health Service (PHS) Recommended Interventions to Improve the Successful Rate of Tobacco Cessation ^{1,5}	Percent (%)	Estimated Number of Adult Smokers
Visited a doctor, dentist, nurse, or other health professional in the past year	70%	900,000
Healthcare professional advised tobacco users to quit smoking or using tobacco products ^a	47%	738,000
Last time a health care professional advised tobacco users to quit using tobacco, they put them into contact with or told the tobacco users how to contact a telephone tobacco cessation quit line, class or program, or one-on-one counseling ^a	40%	133,000
Last time a health care professional advised tobacco users to quit using tobacco, they recommended or prescribed FDA-approved medication ^{a,b}	56%	188,000

^aIncludes adult tobacco users who have seen a doctor in the past year

^bFDA-approved nicotine patch, nicotine gum, nicotine lozenges, nicotine nasal spray, nicotine inhalers or pills (oral medications)

The Georgia Tobacco Quit Line (GTQL)

The Georgia Tobacco Quit Line was established in 2001 and is funded by the Tobacco Master Settlement Agreement (MSA). The administrator of the GTQL provides evidence-based cessation services in accordance with the current US Public Health Services (PHS) Clinical Practice Guidelines for Treating Tobacco Use and Dependence.

The GTQL provides free professional telephone and web-based counseling cessation services and referrals to adult and adolescent (aged 13 and older) tobacco

users statewide, regardless of health insurance status or health status.

The Georgia Tobacco Quit Line also provides free specialty tobacco cessation services to pregnant and postpartum women as well as adolescent tobacco users.

Within the last year, the GTQL provided services to various types of tobacco users including cigarette users (92% of callers), cigar users (4% of callers), and smokeless tobacco users (3% of

Georgia Tobacco Quit Line and Smoking Cessation

callers). The GTQL provides both proactive “outbound” and reactive “caller- initiated” services to all tobacco users. Evidence shows that these services, as well as individual counseling and group counseling, are effective interventions for increasing tobacco cessation and tobacco abstinence rates.

Georgia Tobacco Quit Line Service Utilization⁸

Between July 2011 through June 2012, the GTQL provided services to 10,481 registered callers compared to 4,992 registered callers in the previous year.

- Since 2001, the Georgia Tobacco Quit Line has served more than 84,024 callers.
- DeKalb (12%), Southwest (Albany, 11%), Southeast (Waycross, 9%), and Fulton (9%) Health Districts had the largest percentage of tobacco user callers (Table 2).

Data sources:

1. 2009-2010 National Adult Tobacco Survey (ATS).
2. 2011 Behavioral Risk Factor Surveillance System (BRFSS).
3. Georgia Vital Statistics, 2003-2007; CDC SAMMEC web application (<http://apps.nccd.cdc.gov/sammec/>).
4. CDC Health Effects of Cigarette Smoking (www.cdc.gov).
5. U.S. Public Health Service (2008). *Clinical Practice Guidelines for Treating Tobacco Use and Dependence*. U.S. Department of Health and Human Services.
6. United States Department of Health and Human Services. Healthy People (HP) 2020 Objectives <http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicId=41#>.
7. “Quitting Takes Practice” Health Communication Campaign (July 1, 2011 – December 31, 2011). Funded with Communities Putting Prevention to Work Funding (CPPW).
8. Georgia Tobacco Quit Line Performance Dashboard Report (July 2009-June 2012).

Table 3. Percent of Georgia Tobacco Quit Line Tobacco User Callers by Health District, 2011

Public Health District	Tobacco Users (%)	Level of Tobacco Use*
DeKalb (3-5)	12	High
Southwest (Albany, 8-2)	11	High
Southeast (Waycross, 9-2)	9	High
Fulton (3-2)	9	High
Northwest (Rome, 1-1)	8	Medium
North Central (Macon, 5-2)	6	Medium
Coastal (Savannah, 9-1)	6	Medium
East Central (Augusta, 6)	6	Medium
South (Valdosta, 8-1)	5	Medium
Cobb/Douglas (3-1)	5	Medium
East Metro (Lawrenceville, 3-4)	4	Medium
LaGrange (4)	4	Medium
Clayton (Morrow, 3-3)	3	Medium
North (Gainesville, 2)	3	Low
North Georgia (Dalton, 1-2)	3	Low
Northeast (Athens, 10-0)	2	Low
South Central (Dublin, 5-1)	2	Low
West Central (Columbus, 7)	2	Low

*Smoking prevalence compared to state smoking prevalence, based on 95% confidence intervals.

QUITTING TAKES PRACTICE!

The Georgia Tobacco Quit Line is available for all Georgians 13 years of age and older who want to quit using tobacco. To receive free counseling, support, and referral services call:

1-877-270-STOP (English)

1-877-2NO-FUME (Spanish)

1-877-777-6534 (Hearing Impaired)

<http://www.livehealthygeorgia.org/quitline.shtml>

