



ENGAGING LOW-INCOME SMOKERS IN TOBACCO CESSATION VIA EMPLOYMENT READINESS AND CREDIT COUNSELING PROGRAMS



Overview

Aims: To explore new channels for connecting low-income smokers with quitline services, and to increase smokers' motivation to quit by highlighting the personal financial impact of tobacco use.

Intervention: JSI trained employment and credit counselors to identify clients who smoke, provide brief advice to quit emphasizing the financial consequences of tobacco use, and offer proactive referral to a quitline and free nicotine patches.

Potential: Boosting readiness to quit and connecting low-income individuals with cessation resources via employment and credit counseling programs is an innovative, targeted strategy with the potential to help reduce socioeconomic disparities in the use of evidence-based cessation methods such as quitlines.

Rationale

Why Credit Counseling and Employment Readiness Programs?

- In the US, large disparities in smoking prevalence by SES persist and populations with the highest levels of tobacco use are least likely to utilize effective tobacco treatments.
- During employment and credit counseling, the negative effects of smoking on household finances and employment prospects are often mentioned, but clients are not offered cessation assistance.
- In the current recessionary environment, economic arguments for cessation may be especially motivating to low-income smokers, presenting an untapped opportunity to help these smokers act on this motivation by immediately offering proactive referral.
- Credit counseling and employment readiness programs are efficient channels for connecting with a hard-to-reach lower income population that historically has been less likely to use quitline services.

New Hampshire

NH Demonstration Site:
Consumer Credit Counseling Service of NH and VT

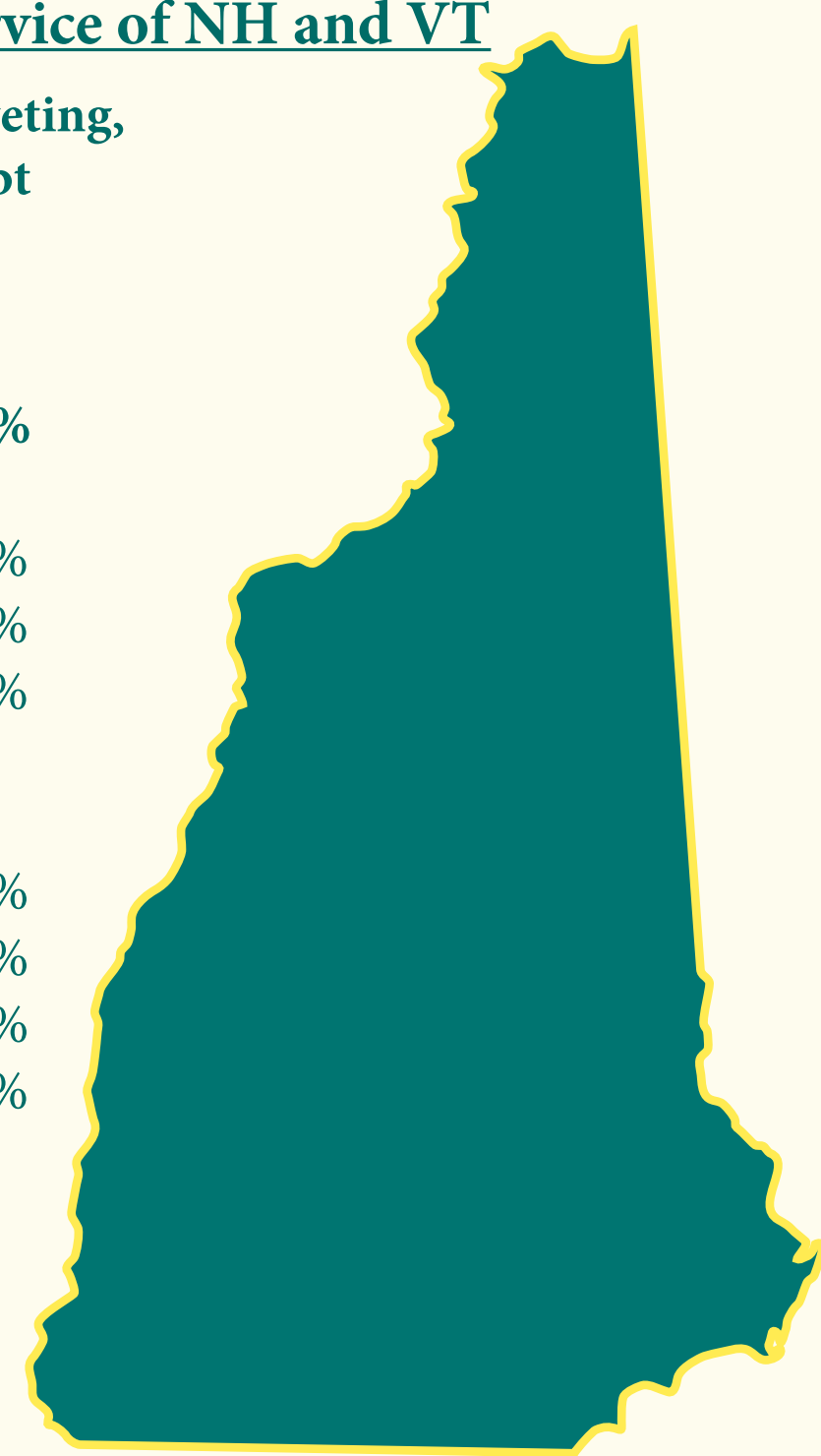
- Provides free and confidential budgeting, money management, credit and debt counseling services

Statewide smoking prevalence: 17%

- By Education:**
 - Less than high school: 29%
 - HS or GED: 20%
 - Some post HS: 15%
 - College graduate: 5%
- By Household Income:**
 - Less than \$15,000: 20%
 - \$15,000–\$24,999: 24%
 - \$25,000–\$34,999: 18%
 - \$35,000–\$49,999: 17%
 - More than \$50,000: 9%

Source: BRFSS 2008, CDC

- Annual cost of cigarettes (a pack-a-day):** up to \$2,184



Rhode Island

RI Demonstration Site:
Dorcas Place Adult & Family Learning Center

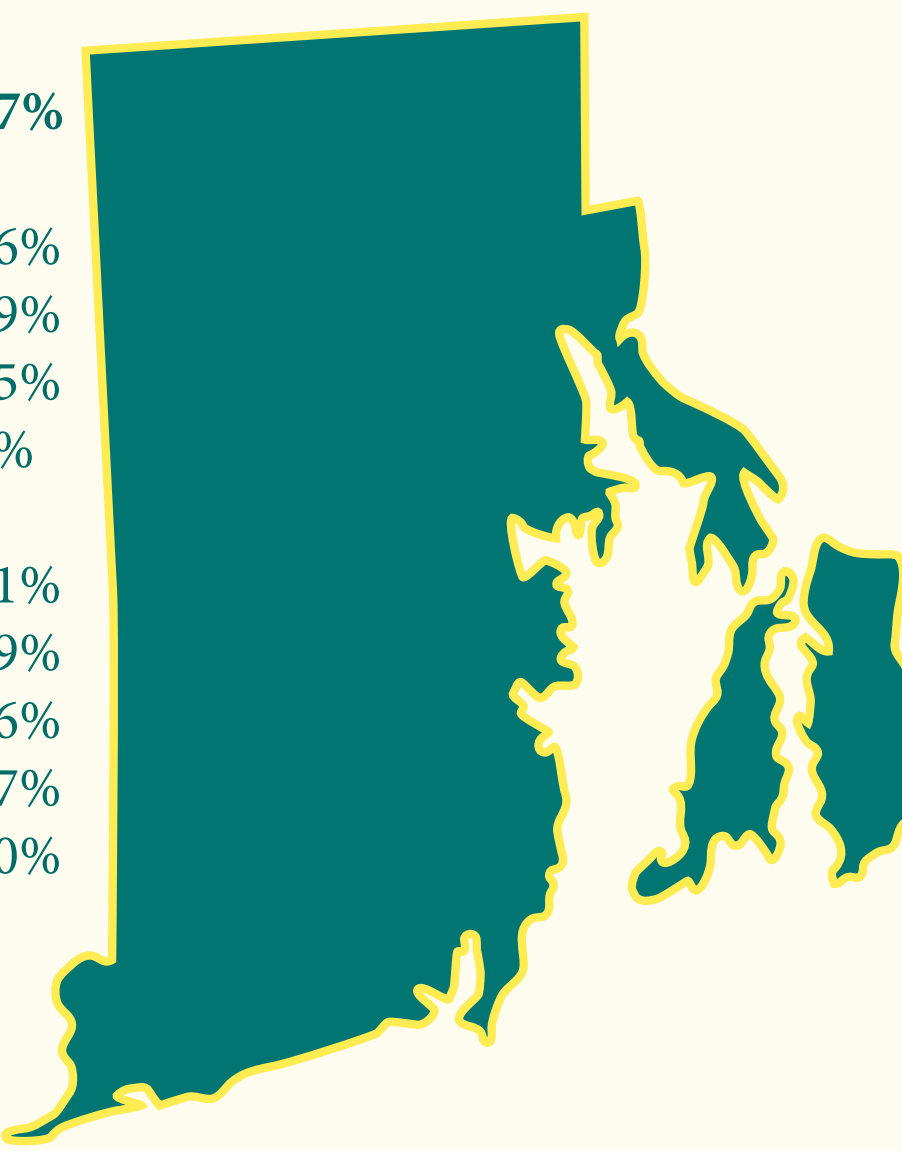
- Provides employment readiness education, workplace training, college preparation and transition -to-work programs for low-income residents

Statewide smoking prevalence: 17%

- By Education:**
 - Less than high school: 26%
 - HS or GED: 19%
 - Some post HS: 15%
 - College graduate: 5%
- By Household Income:**
 - Less than \$15,000: 21%
 - \$15,000–\$24,999: 19%
 - \$25,000–\$34,999: 16%
 - \$35,000–\$49,999: 27%
 - More than \$50,000: 10%

Source: BRFSS 2008, CDC

- Annual cost of cigarettes (a pack-a-day):** up to \$2,920



A TAILORED ASK-ADVISE-REFER APPROACH

Implemented by credit and employment counselors during regular counseling appointments



Find out whether client is a smoker



Talk about COST of smoking and impact on employment



Offer to refer client to the state's Smokers' Helpline

Both demonstration sites have a “built in” opportunity to ASK about smoking status during the standard counseling session.

Credit Counseling Program:

When looking at household expenses, counselor asks about out-of-pocket expenses such as cigarettes, take-out coffee, etc.

Employment Readiness Program:

When discussing job seeking strategies, counselor can ask about smoking status as a potential barrier to employment.

- If client is a smoker, counselor proceeds to ADVISE step.

The ADVISE step focuses on the financial cost of tobacco use rather than on health effects.

- Counselor works with client to complete the **Smoking Costs Worksheet** to calculate the client's actual cost of smoking and consider how else that money might be spent.
- In employment readiness setting, counselor may also discuss the impact of smoking on job prospects.
- After discussion, counselor proceeds to REFER step.

Counselor asks whether client would consider trying to quit smoking, and offers referral to the Helpline with option to receive free nicotine replacement therapy (NRT).

- Counselor reviews with client the **Helpline Handout** that describes Helpline services.
- If client wants to be connected with the Smokers' Helpline, s/he signs the **Referral Form**, and counselor faxes it to the Helpline.
- Proactive Referral:** Within 48 hours Helpline calls the referred client and invites him/her to engage with Helpline services.

Participant Checklist
Engaging Smokers in Cessation through Financial Assistance Programs

TODAY'S DATE: ____/____/____

COUNSELOR'S NAME: _____

PARTICIPANT'S NAME: First _____ Last _____

PARTICIPANT smoking status: ☐ Smoker ☐ Non-smoker ☐ Unknown

Complete the remainder of this form for ALL participants who smoke. Please indicate when the following are completed with the participant.

		Counselor/Notes
1.	Participant was advised about the costs of smoking cigarettes.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Participant was offered referral to the NH Smokers' Helpline.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Did participant accept or refuse referral to the NH Smokers' Helpline?	<input type="checkbox"/> Accepted (Signed form) <input type="checkbox"/> Refused
4.	Referral form faxed to 1-800-750-9112.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Participant received project info handout kit.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Participant specific information:

6. Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
7. Race	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White/Caucasian
8. Ethnicity	<input type="checkbox"/> Other <input type="checkbox"/> Unknown
9. Age	<input type="checkbox"/> 18-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65-74 <input type="checkbox"/> 75+

Once complete, make a copy of this sheet for the client and check out the participant's name. At the end of the month's visit or first completed checklist to Shasta Jorgensen, Community Health Institute, 200 South Street, 2nd Floor, Box 200 (open office) for 1000120100.

What Could You Do with an Extra \$30 (or more!) a Week?

Take a few moments to figure out how much extra money you would have if you quit smoking cigarettes. Fill in the blanks below.

My DAILY COST of cigarettes: _____ X _____ = _____ DAILY COST

My WEEKLY COST of cigarettes: _____ X 7 = _____ WEEKLY COST

My MONTHLY COST of cigarettes: _____ X 30 = _____ MONTHLY COST

My YEARLY COST of cigarettes: _____ X 365 = _____ YEARLY COST

Now think about what you could do with that money if you weren't spending it on cigarettes. Fill in the blanks below.

My weekly cost of cigarettes: _____

My monthly cost of cigarettes: _____

My yearly cost of cigarettes: _____

My weekly cost of cigarettes: _____

My monthly cost of cigarettes: _____

My yearly cost of cigarettes: _____

My weekly cost of cigarettes: _____

My monthly cost of cigarettes: _____

My yearly cost of cigarettes: _____

If You Want to Quit Smoking... CCCS can refer you to the New Hampshire Smokers' Helpline.

The NH Smokers' Helpline provides stop-smoking help over the phone, to anyone who lives in New Hampshire. It's free, it's confidential and it's convenient.

Here's how the program works:

- With your permission, your CCCS counselor sends a referral form for you to the NH Smokers' Helpline.
- A quit-smoking expert from the NH Smokers' Helpline will call you, at a time convenient for you.
- You will get the kind of stop-smoking help you need.
- Answers to your questions.
- Step-by-step help to quit smoking.
- Advice about problems that come up in quitting.
- Friendly support, because quitting isn't easy.
- A free supply of nicotine patches (a kind of medicine to reduce cravings for cigarettes and help you quit smoking for good).
- Everything is done by phone. You don't have to worry about getting to appointments or who will watch the kids.
- If you change your mind about trying to quit, just let the person who called you know, and they will not call you again.

Key Questions

Measuring the Feasibility and Effectiveness of the Model

- Are credit counseling and employment readiness programs good venues for connecting low-income smokers with quitline services?
- Is the intervention acceptable/feasible for credit counselors and their agency?
- Is the intervention acceptable/feasible for employment counselors and their agency?
- Is the intervention acceptable to clients?

Feasibility

Participant and Partner Feedback

"This project helps my clients understand the actual cost in dollars of smoking and provides them the opportunity to see where those dollars could be better or more enjoyably spent."
-CCCS Financial Counselor

"This project uniquely engages low-income residents in thinking about quitting smoking as it relates to economics as opposed to health. The NH Smokers' Helpline has seen a significant increase in referrals through the project."
-NHTPCP Director

"I do think the cost of my cigarettes was an appropriate subject to talk about with my CCCS counselor since I was there for budget help. I was relieved that the counselor had information that could help me quit and that he understood it was an addiction."
-CCCS Client

"I like that I can help my clients save the money—they are struggling to pay bills and want to quit smoking...and my clients don't mind me asking about smoking because we are already talking about other issues for them."
-Dorcas Place Employment Readiness Counselor

"This project has worked seamlessly with current quitline and proactive referral operations."
-NH/RI Smokers' Helpline Director

"My son has been wanting me to quit for a long time. But I had not realized that smoking could hurt my chances to get a good job. I now have two good reasons to try to stop smoking again."
-Dorcas Place Client

Effectiveness

Preliminary Results Client Activity for 1st Three Months of Project (Jan - Mar 2010)

	CCCS	Dorcas Place
Total Count of Clients Seen	623	150
Clients Who Smoke	64 (10.3%)	21 (14.0%)
Total Number of Smokers Accepting Referral to Helpline	30	21
Highest Number of Smokers Referred to Helpline From Any Other Single Agency in the Same State	13	20

PARTNERS:

Consumer Credit Counseling Service of NH & VT, Concord, NH

Dorcas Place Adult & Family Learning Center, Providence, RI

NH Dept. of Health and Human Services, Tobacco Prevention & Control Program, Concord, NH

RI Dept. of Health, Tobacco Control Program, Providence, RI

PROJECT TEAM:



JSI Research & Training Institute, Inc.

Martha Bradley

Rachel Kohn

Deborah Dean

Shannon Spurlock

Shasta Jorgensen

FUNDED BY:

The American Legacy Foundation

"Dedicated to building a world where young people reject tobacco and anyone can quit."