

Tobacco Use in Minnesota: 1999 to 2007

MINNESOTANS ARE QUITTING SMOKING WITH HELP

More than half of Minnesota's smokers are trying to quit.

Comprehensive tobacco control efforts are helping Minnesotans quit tobacco use. More than half (56.7 percent) of adult Minnesotans who smoked in the past year stopped smoking for one day or longer in the past 12 months because they were trying to quit smoking, according to the 2007 Minnesota Adult Tobacco Survey (MATS). That's more than 392,000 Minnesotans who actively tried to quit.

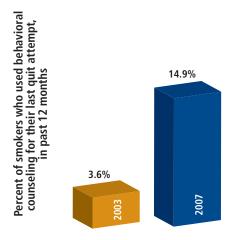
More than half of adult Minnesotans who smoked in the past year made a quit attempt.

Quitting tobacco use has many immediate and long-term health and economic benefits but successfully quitting is a complex and often difficult process that usually involves multiple attempts. Among current smokers with a quit attempt, 67.7 percent made multiple attempts to quit in the past 12 months.

Minnesota's Comprehensive Tobacco
Control Program: In Minnesota, a
comprehensive tobacco control program—led
by ClearWay MinnesotaSM, Blue Cross and
Blue Shield of Minnesota (Blue Cross) and the
Minnesota Department of Health (MDH)—
implements broad, evidence-based statewide
strategies to reduce tobacco use and exposure to
secondhand smoke.

Minnesota Adult Tobacco Survey: The three partner organizations also collaborate on the Minnesota Adult Tobacco Survey, which is the most thorough source of information about tobacco use prevalence, behaviors, attitudes and beliefs in the adult Minnesota population and serves as a tool for measuring the progress of Minnesota's comprehensive tobacco control program. Data for the most recent MATS were collected in 2007. Other survey years were 1999 and 2003. Key findings from the most recent MATS and the trend analyses from all three MATS are discussed in the complete report, Creating a Healthier Minnesota: Progress in Reducing Tobacco Use, and in accompanying MATS briefings, which are available at www.mnadulttobaccosurvey.org.

FIGURE 1. MORE ADULT MINNESOTANS USED BEHAVIORAL COUNSELING WHEN TRYING TO QUIT SMOKING IN 2007 THAN IN 2003.



Source: Minnesota Adult Tobacco Surveys, 2003 and 2007

CALL IT QUITS COLLABORATION HELPING SMOKERS QUIT

Through *Call it Quits*, a collaboration of Minnesota's health plans and ClearWay MinnesotaSM, every smoker in the state, regardless of his or her insurance coverage, can receive help with quitting.

ClearWay Minnesota and each of the seven health plans in Minnesota provide and promote telephone counseling services. In addition to phone counseling, ClearWay Minnesota's individual QUITPLAN® Services include online (quitplan.com) and in-person options (treatment centers, worksite group counseling, and culturally appropriate community-based services).

Over the past 10 years, Minnesota health plans have increased coverage for stop-smoking medications for their fully insured members and have encouraged large self-insured employer groups (who design their own benefits) to offer this coverage as well. For those without coverage or without health insurance, ClearWay Minnesota provides free nicotine replacement therapy to smokers who also participate in behavioral counseling.

More Minnesota smokers use behavioral counseling to quit.

Fifteen percent (14.9 percent) of current Minnesota smokers with a quit attempt in the past year report that they used behavioral counseling when trying to quit, a significant increase since 2003 (Figure 1). Ten percent (9.8 percent) used one-on-one counseling from a doctor, nurse or other health professional; 4.4 percent used a quit-smoking clinic or class; 2.8 percent used online or web-based counseling; 2.2 percent used a quit-smoking telephone helpline; and 1.5 percent used some other program or service in the past 12 months.

Behavioral counseling, particularly when combined with medications, greatly increases success in quitting. The Centers for Disease Control and Prevention includes interventions that increase the availability of behavioral support and medications to treat tobacco use as a major component of a comprehensive tobacco control program. When promoted on a statewide level, these evidence-based interventions have the potential to reach many smokers. Increasing the use of behavioral counseling has been an important goal of tobacco control efforts in Minnesota and, as a result of those efforts, every smoker in Minnesota has access to proven and cutting-edge stopsmoking programs.

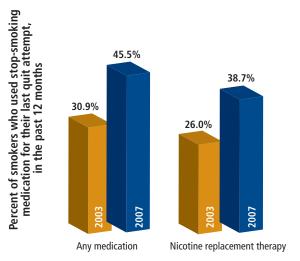
More Minnesota smokers use quit medications.

In 2007, nearly half (45.5 percent) of Minnesota's current smokers with a quit attempt in the past year used some form of stop-smoking medication, up from 30.9 percent in 2003. Use of nicotine replacement therapy, the most common type of medication, also increased from 26.0 percent in 2003 to 38.7 percent in 2007 (Figure 2).

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The U.S. Public Health Service recommends several medications that can help smokers quit using tobacco by reducing the symptoms of withdrawal from nicotine or by helping people cope with those symptoms. Since 1998, the combined efforts of Minnesota's health plans and ClearWay Minnesota have greatly increased Minnesotans' access to these stop-smoking medications.

FIGURE 2. MORE ADULT MINNESOTANS USED MEDICATIONS WHEN TRYING TO QUIT SMOKING IN 2007 THAN IN 2003.



Type of stop-smoking medication

Source: Minnesota Adult Tobacco Surveys, 2003 and 2007

More Minnesota smokers receive financial support for stop-smoking medications.

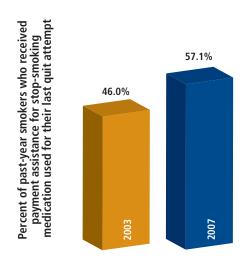
More than half (57.1 percent) of current smokers with a quit attempt in the past year and former smokers who quit in the past year report receiving some financial assistance for these medications, an increase of 11.2 percentage points since 2003 (Figure 3). Smokers in Minnesota can receive financial support to use stop-smoking medications through either their insurance coverage or from ClearWay Minnesota's QUITPLAN Services.

GETTING PROVIDERS MORE INVOLVED

Health care providers play an important role in helping their patients quit because a smoker pays attention when a health care provider advises him or her to quit. A published study from MATS 2003 demonstrated that having two or more types of health professionals asking about tobacco use more than doubled the odds that a cigarette smoker would have quit in the previous year.

In Minnesota, innovative programs have been implemented to increase both the documentation of smoking status of all patients and referrals to quit smoking programs. These programs encourage doctors, nurses and other providers to ask all patients if they smoke, advise those who smoke to quit, and refer those who have any interest in quitting to behavioral counseling and appropriate medications.

FIGURE 3. MORE ADULT MINNESOTANS
RECEIVED FINANCIAL SUPPORT FOR
MEDICATIONS TO HELP THEM QUIT SMOKING
IN 2007 THAN IN 2003.



Source: Minnesota Adult Tobacco Surveys, 2003 and 2007

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MINNESOTA PASSES FREEDOM TO **BREATHE ACT OF 2007**

In May 2007, Minnesota passed a comprehensive smoke-free law that covers indoor public places and workplaces, including bars and restaurants. Because the Freedom to Breathe Act went into effect in October 2007—after MATS data collection was conducted—this study does not reflect the effects of this statewide law. MATS 2007 data do provide an opportunity to describe the effects of local policies and, potentially, forecast the larger effects of a statewide policy.

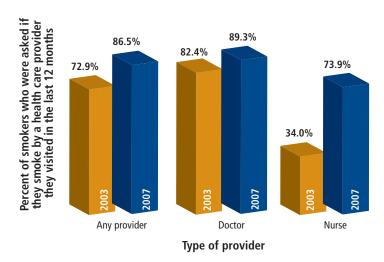
MATS SURVEY METHODS

MATS 2007 telephone interviews were conducted with adults aged 18 and older living in Minnesota from February to June 2007. The sample of 12,580 responding adults consisted of 7,532 from a statewide random digit dial sample and 5.048 from a list of Blue Cross members. The response rates were 41 percent and 48 percent, respectively. The two samples were merged using scientific survey weighting methods, and the merged sample is representative of the Minnesota adult population. Associations are based on bivariate analysis only and are not adjusted for potential confounders. Statistical tests used overlapping confidence intervals and chi-square tests. Differences are statistically significant at p<0.05 unless otherwise noted.

Minnesota health care providers increasingly ask patients if they smoke.

Among current smokers who saw any type of health care provider in the previous 12 months, 86.5 percent report that a provider asked if they smoked, compared with 72.9 percent in 2003 (Figure 4). Since 2003, nurses appear to be playing a more prominent role in addressing tobacco use with patients. Experts recommend that providers ask patients if they smoke, advise them to quit and refer them to an existing stop-smoking program.

FIGURE 4. MORE CURRENT SMOKERS REPORTED BEING ASKED IF THEY SMOKE WHEN THEY VISIT A HEALTH CARE PROVIDER IN 2007 THAN IN 2003.



Source: Minnesota Adult Tobacco Surveys, 2003 and 2007



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www.mnadulttobaccosurvey.org

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