

SCLC presents:

“I COVID QUIT: Real people; Real Stories; New Campaign”

on Wednesday, March 31, 2021, at 1:00 pm EST (75 minutes)

Speakers:

- **Andy Burness**, MBA, President, Burness
- **Les Pappas**, MPA, President & Creative Director, Better World Advertising
- **Nicole Gyan**, MA, Project Manager/Social Media Specialist, Better World Advertising
- **Catherine Saucedo**, Deputy Director, Smoking Cessation Leadership Center, UCSF

All resources, including videos and Toolkit, are downloadable at: icovidquit.org

Images and Language

Q: I believe research shows that the cigarette with the red slash through it is a turn off for smoker's, it isn't welcoming and supportive. Is there plans to use a different logo?

A: We can see where smokers might feel that “no smoking” signs are unsupportive. However, a significant portion of the focus group participants actually suggested using the symbol because it quickly communicated what the ad is about and made the ad clearer and more easily understood. In the 3 focus groups, as well as the 100 online surveys, no person expressed any issue or objection to using the symbol.

Q: Can you talk about the decision to lean into a message that is heavier on health effects vs. focusing on how hard it is to quit, especially during COVID?

A: A decision was made early on regarding using COVID as a means of helping to motivate smokers to quit. The ads themselves were based on the attitudes and experiences of the people featured. They spoke about both the health effects of smoking and the challenges involved in stopping. In order to keep the tone encouraging and empowering, as well as to address our particular audience, we had established at the beginning of the process that improved mental health would likely be both new and valuable information.

Q: One of the video participants mentions smoking is a habit. We've been trying to use "addiction" instead -- was there any concern with that language?

A: The choice of words was the speakers' own. We thought it was important to have the people featured in the ads tell their own story in their own words. We believe that every smoker can relate to the more colloquial terminology, especially those who would not consider themselves “addicts” (which includes more social or situational smokers). Also, in keeping with an encouraging and empowering

tone, we wanted to appeal to everyone, including people who would not appreciate being diagnosed with a/another condition, like “addiction.”

Methodology

Q: Are there any opportunities for community researchers to contribute towards continued data collection?

A: Contact anita.browning@ucsf.edu to inquire about how your organization may be able to help promote the campaign resources and/or track their impact.

Q: Assuming that this campaign is successful at getting the message out. Are there enough resources available to address those in need.

A: Yes. We have been in close collaboration with the North American Quitline Consortium who has recently reported that quitline call volumes were dramatically lower over the course of the pandemic. Since the quitlines typically handle larger volumes, we are hoping the campaign will help to recover some of the lost call numbers.

Q: Did the ex-smokers share what methods they used to quit? Did your organization provide any support?

A: Several people talked about using meditation/relaxation techniques. They also mentioned the importance of receiving encouragement and support from friends and family (especially spouses).

Q: How will you determine the impact of the campaign when CDC is also doing the Tips from Former Smokers?

A: The Tips from Former Smokers campaign is in its 10th year, so we have data on its efficacy in previous years to compare to. Hopefully, increased efficacy can be, at least in part, attributed to I COVID Quit. We are also working with the North American Quitline Consortium to track call volumes from an established period before our campaign launched to compare to after our campaign launched as well as tracking the COVID intake call data pre-post. Our campaign launched 30 days (approximately one month) after 2021 Tips.

Q: Given that many other addictions /substances that have also risen during this time / not surprising, are there any attempts to connect collaboratively with other groups who have equal investment in dealing with the cost of addictions?

A: Fantastic question! And the answer is yes! You may have noticed that the campaign is branded by the National Partnership on Behavioral Health and Tobacco Use, which is a group of 25 organizations dedicated to ending tobacco use in the behavioral health community. American Society for Addiction Medicine (ASAM) is one of our newest partners and SAMHSA has been a partner since the founding of this group. We will continue to work collaboratively to promote this campaign and make cessation resources available to the most vulnerable individuals in our country.

Q: How many focus groups were held? What were the demographics of the focus groups- including geographic diversity?

A: Three focus groups were conducted online: Pennsylvania, South Carolina and California. These were statewide samples. The participants were about 50/50 male/female. About half the participants were People of Color. We also conducted 100 online surveys from a nationwide sample, with similar demographics to the focus groups.

Among the *focus group applicants*, 61% said they had been diagnosed with anxiety or depression by a healthcare provider. Also, 62% of all applicants disclosed that they were in recovery for alcohol abuse. Among the *online survey respondents*, 71% were people living with anxiety, 73% were living with depression, and 13% with another mental health struggle they were not willing to disclose. Also, 31% of all survey respondents were in treatment for alcohol abuse.

COVID

Q: How does quitting impact the risk of COVID? How long after quitting does it take for the risk of severe disease/death to approach to never smokers?

A: This is a good question! There is no conclusive data on this yet, but because smoking suppresses the immune system, it is prudent to quit so that one's immune system is fully functional during a pandemic such as COVID-19. Since the rate of COVID is higher in former smokers than in never smokers, it is probable that there will always be some residual risk.

Q: This is for anyone. Maybe I missed it, but I'm not sure I understand why smoking has increased and quitting has decreased with COVID.

A: We don't know whether more people started smoking than before the epidemic, but recent data suggests that people have stopped trying to quit smoking for a couple of reasons due to the pandemic. One is because they are stuck at home where there are no, or at least fewer, prohibitions against smoking. Another is because of the stress and anxiety caused by the increased uncertainty in their lives. Many people still mistakenly associate smoking with "calming down" when actually we know that it does NOT relieve anxiety but makes it worse.

Q: Did COVID have any limitations on how these ads were produced? For example, were there other concepts you explored that weren't just people talking to a camera in-studio?

A: Though other different types of concepts were considered and tested, the idea of using real people providing their testimony felt like a good approach in reaching other smokers. It is also a proven strategy in communicating with this particular audience—advice from a peer. It's also important to note that the individuals featured in these videos were not talking to a camera, but actually to another, appropriately-distanced human with a camera in the room.

Miscellaneous

Q: Are there links to the USA today, AP, and other national media mentioned?

A: Sure! We also included these in emails to our listservs, so feel free to sign up and be the first to hear future news.

The Washington Post

- https://www.washingtonpost.com/lifestyle/wellness/smoking-help-quit-cigarettes-covid/2021/03/12/333936ee-82c2-11eb-ac37-4383f7709abe_story.html

USA Today

- <https://www.usatoday.com/story/news/health/2021/03/12/cigarette-sales-increase-and-fewer-sought-help-to-quit-smoking-amid-covid-19-anxiety-and-isolation/4664323001/>

Fast Company

- <https://www.fastcompany.com/90614637/yet-another-damaging-health-effect-of-covid-cigarettes-are-making-a-comeback>

HealthDay & WebMD

- <https://www.webmd.com/smoking-cessation/news/20210316/smoking-makes-a-comeback-in-the-pandemic>
- <https://consumer.healthday.com/3-16-smoking-makes-a-comeback-in-the-pandemic-2650972416.html>

UPI (United Press International)

- https://www.upi.com/Health_News/2021/03/12/coronavirus-smoking-cessation-quit-line-calls-drop-report/8771615562950/

Q: I know this is mainly for tobacco and cigarette smoking, however, are there vaping resources also? Or do you have something in the works?

A: At this time, we are not planning on extending this campaign to include vaping. Truth Initiative, our partners in the National Partnership on Behavioral Health and Tobacco Use, have developed numerous anti-vaping resources which you can access here: <https://truthinitiative.org/our-top-issues/vaping-issue>

<https://truthinitiative.org/thisisquitting>

Q: Just curious the first presenter gave a stat of tobacco's deadly toll of 540,000. Media Advisory slide stated smoking related deaths: 480,000.

A: According to the CDC website, "Cigarette smoking is responsible for more than 480,000 deaths per year in the United States." The surgeon general also says 480,000 annual deaths, but a report from the American Cancer Society upped that to 540,000 due to previously unreported deaths from lung disease. The most accurate answer is probably about 500,000.

Q: Do you know which of the 4 speakers smoked menthol?

A: LP: We didn't talk much about brands, so do not remember who may have identified as having smoked menthols.

Q: Any suggestions on approaching rural, lower income individuals?

A: We tried to utilize people whose stories would resonate with a broad spectrum of people. However, featuring additional people who more closely reflect particular subgroups (rural, Asian, etc.) could help to reach more people. Nevertheless, the issues addressed in the campaign are relevant to many smokers. SCLC suggests you reach out to <https://www.geohealthequity.org/> for information on rural and <https://selfmadehealth.org/> for information on low-income tobacco use.