

Utilizing Partnerships in Evaluation: A Retrospective Evaluation of the Cooper/Clayton Method to Stop Smoking Program (2009-2010)



Background

Alarmed by Kentucky's high smoking prevalence and resulting mortality rates coupled with a growing local/regional momentum towards policy initiatives for smoke-free public spaces, tobacco stakeholders approached the Kentucky Cancer Consortium (KCC) and the Kentucky Cancer Program (KCP) to evaluate the state-wide smoking cessation program- the Cooper/Clayton (C/C) Method to Stop Smoking(4). It was believed by these stakeholders that as local communities enacted smoke-free ordinances there would follow an increased demand for smoking cessation options.

The Cooper/Clayton (C/C) program combines the use of nicotine replacement products with group cessation counseling, a combination that has yielded the most effective results(5). The C/C program consists of 12-weekly classes conducted by trained tobacco facilitators in the (C/C) Method which offers (3) major programmatic components to aid smokers with tobacco cessation:

1. Cognitive-behavioral strategies for coping with tobacco addiction and smoking cessation
2. Nicotine replacement therapy products (NRT)
3. Support group setting

A diverse group of evaluation partners was convened which included tobacco facilitators, county/state level public health departments, and academic partners. This collaborative evaluation project entailed collecting retrospective data on CC classes held in 2009-2010 to provide baseline program completion data. Although evaluation is ongoing, this presentation will focus on the retrospective examination study.

Objectives

- 1) To obtain and disseminate the baseline completion rate for the Cooper/Clayton program for classes taught in 2009 and 2010
- 2) To obtain and disseminate aggregated, class-level data regarding participants' characteristics who completed the 12-week class series in 2009/2010 and self-reported to be a non-smoker

Methods

- ❑ **Type of Study Conducted:** Descriptive evaluation study utilizing a cross-sectional research design to gather data on participants who enrolled in the Cooper/Clayton program in 2009 and 2010, completed the 12-week class series, and self-reported to be a non-smoker.
- ❑ **Study Population:** Cooper/Clayton class participants who became non-smokers at the end of the 12-week class series
- ❑ **Class Reporting Form:** Data collected in Spring 2011 on classes taught in 2009 and 2010
Class report forms were available online via REDCap (6) and by hardcopy
- ❑ **Data Collected on the Class Reporting Form:**
 - Facilitator Name
 - Organization
 - County where class was held
 - Date of the first class AFTER orientation
 - Number of participants in first class AFTER orientation
 - Day of the week the class was held
 - Beginning time of class
 - Date of LAST class
 - Number of participants who completed the class as non-smokers
 - **Characteristics of Participants who completed the class series and self-reported being non-smokers:**
 - Age
 - Gender
 - Smoking History
 - Number of Quit Attempts
 - Type of Medication Used
 - How Nicotine Replacement Therapy (NRT) was offered as part of class participation
 - If so, the methods NRT was offered (Free, At low cost, With a refundable deposit, etc.)
 - Type of follow-up provided to non-smokers after the program/intervention completed
 - **Additional Comments of Tobacco Facilitators**

Results

Figure 1. Causal Pathway of Lung Cancer

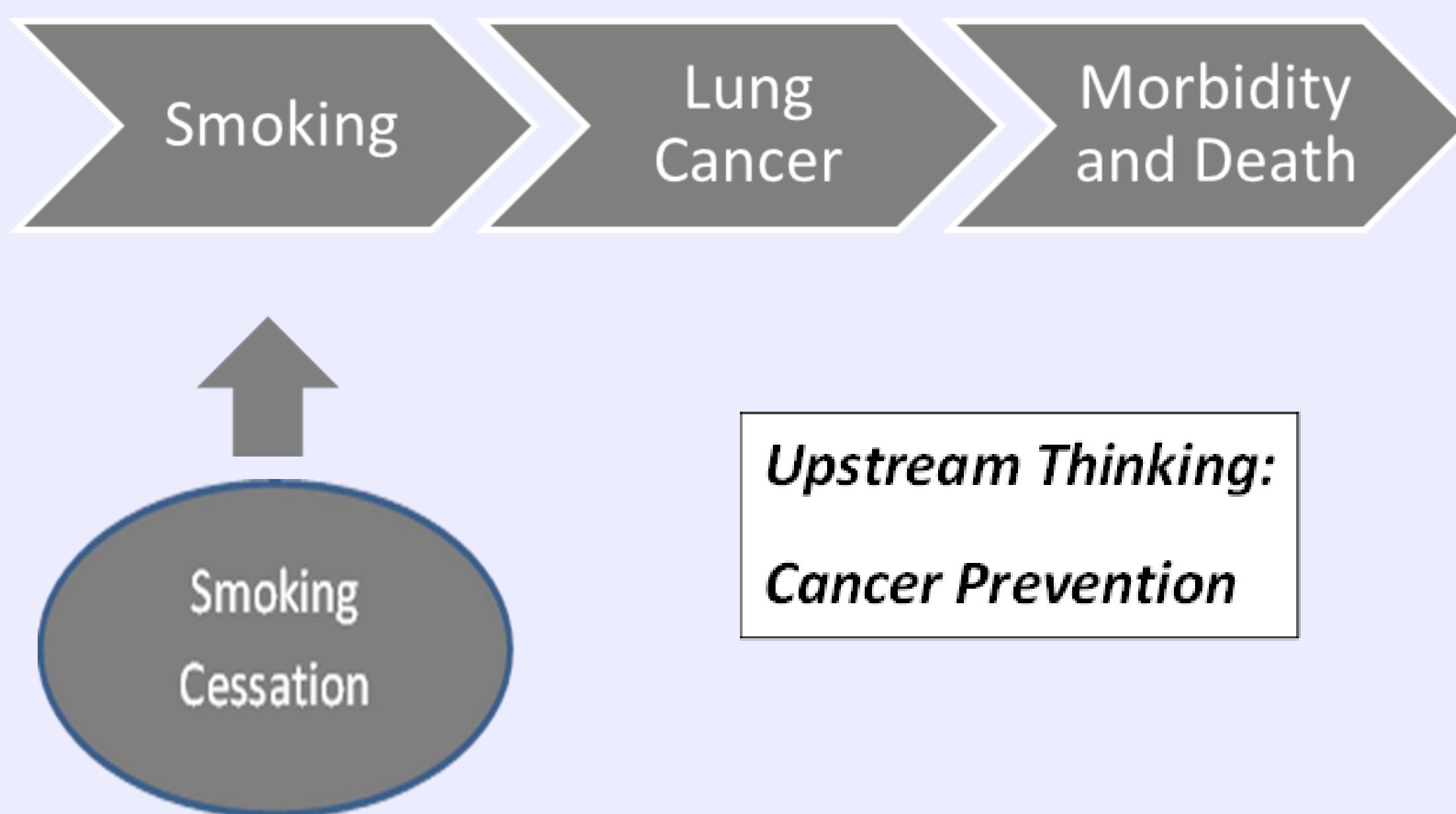
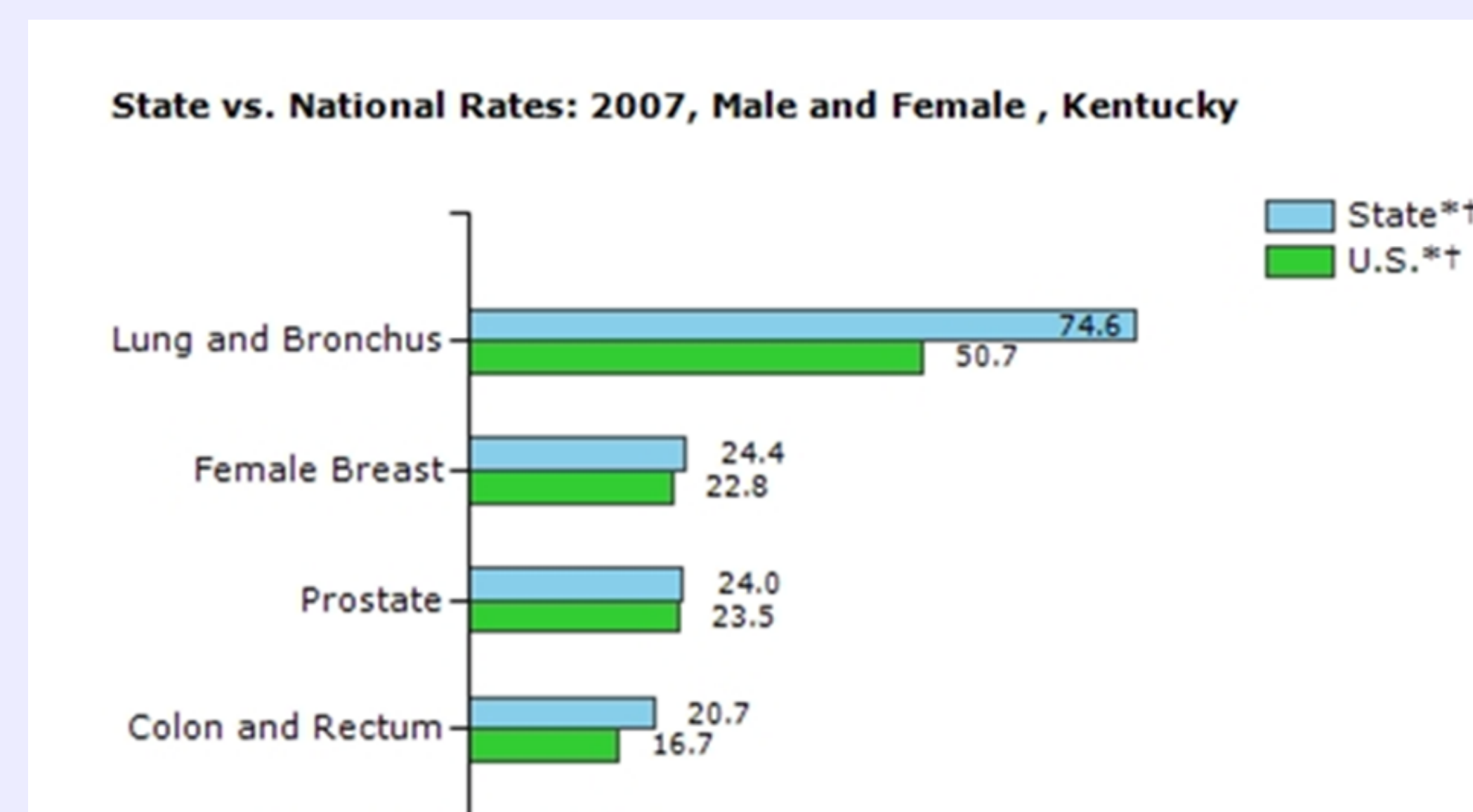
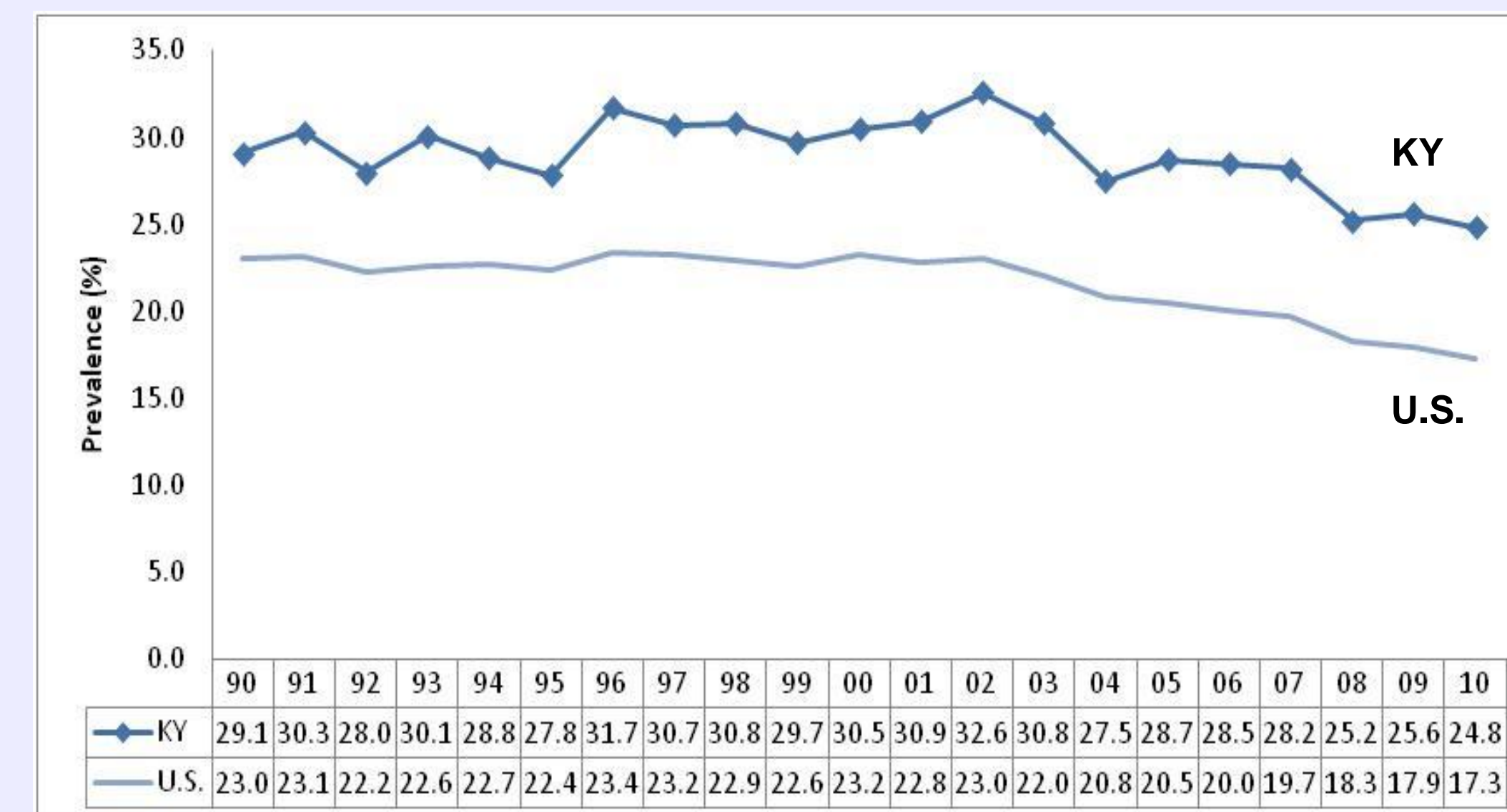


Figure 2: Age-Adjusted Cancer Death Rates for the 4 Primary Sites with Highest Rates within State- and Sex-Specific Categories (For combined data, for years 2003-2007) (1)



*Rates are per 100,000 persons and age-adjusted to the 2000 U.S. Standard Population

Figure 3: Prevalence of Smoking Among Adults, Kentucky vs. Nationwide (States & DC), 1995-2010 (BRFSS) (2,3)



Limitations

- ❑ Data was gathered from a cross-sectional class report form. It is not possible to measure other factors that affected participants becoming non-smokers.
- ❑ No comparison group- Participants who resigned from the program were not monitored to determine their smoking status.
- ❑ Participation bias- Tobacco facilitators who responded to the voluntary request for retrospective information might not have been representative of all classes.

Conclusions

- ❑ Evaluation of programs that are implemented by partners with varying agendas and goals takes a great deal of communication, coordination, and collaboration. Kentucky's Comprehensive Cancer Control program provides a forum for partners to work together in evaluating a state-wide smoking cessation program, and dedicated staff time for the necessary technical assistance.
- ❑ Based upon class report forms completed by tobacco facilitators for class series taught in 2009 and 2010, the majority of program participants who became non-smokers during the Cooper/Clayton smoking cessation program were:
 - Between the ages of 45-64
 - Female
 - Had a 16-25 year smoking history

References

- 1) US Cancer Statistics Working Group. United States Cancer Statistics : 1999-2007 Incidence and Mortality Web-based Report. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; 2010.
- 2) Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention,1995-2009.
- 3) Kentucky Department for Public Health (KDHP) and Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Frankfort, KY: Cabinet for Health and Family Services, Kentucky Department for Public Health, 1995 – 2009.
- 4) Cooper, T. and Clayton, R. (2010). *The Cooper/Clayton Method to Stop Smoking*. Retrieved May 2012, from <http://www.stopsmoking4ever.org/>
- 5) Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs- 2007. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; October 2007.
- 6) Paul A. Harris, Robert Taylor, Robert Thielke, Jonathon Payne, Nathaniel Gonzalez, Jose G. Conde, Research electronic data capture (REDCap) - A metadata-driven methodology and workflow process for providing translational research informatics support, J Biomed Inform. 2009 Apr;42(2):377-81.

This evaluation project and poster were supported by Cooperative Agreement U58/CCU000810-04-05 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Table 1. Determining the Baseline Completion Rate for Cooper/Clayton Program Participants, for Classes taught in 2009 and 2010

Numerator	Participants who completed the 12 weekly sessions and self-reported to facilitators that they were non-smokers	918 participants at 12 weeks reported being non-smokers to tobacco facilitators	44.31% of participants enrolled in the Cooper/Clayton classes, completed the 12-week class series and self-reported that they were non-smokers(at the end of the program)
Denominator	Participants who attended at least one class after the orientation class	2,072 participants enrolled in 231 class series	

Data collected from: 71 Tobacco Facilitators
231 Completed Class Report forms (on classes taught in 2009 & 2010)- One form per 12-week class series
14 Area Development Districts

Figures 3-5: Characteristics of Cooper/Clayton Program Participants who Self-Reported being Smoke-free at the End of the 12-Week Class Series by Age, Gender and Smoking History

