



January 25, 2024

ITEM # 7

INFORMATION ACTION

SUBJECT: SMOKING CESSATION

Strategic Plan Priority Area: Child Health

Goal: All children thrive by achieving optimal health prenatal through age 5.

RECOMMENDATION

First 5 California (F5CA) staff recommends the Commission approve up to \$2.5 million for three years (fiscal years (FY) FY 2024–25 through 2026–27) from the education and research and data accounts to continue having the Quitline provide tobacco cessation services focused on F5CA’s priority populations. OF THE ISSUE

The purpose of this item is to request approval to continue support of *Kick It California*, an ongoing tobacco education and cessation activity, to meet the statutory requirement of the Children and Families Act (Health and Safety Code Section 130125 A, 130125 C). *Kick It California* (the “Quitline,” formerly known as the California Smokers’ Helpline) uses evidence-based educational approaches for tobacco cessation among pregnant and parenting tobacco users and caregivers of children ages 0–5. *Kick It California* is managed and operated by the University of California, San Diego (UCSD) and is funded by multiple agencies: California Department of Public Health, Tobacco Control Program, Centers for Disease Control and Prevention (CDC), and F5CA. Funding by each agency is proportional to the population served.

Secondhand Smoke Harms Children. Exposure to secondhand smoke in utero and during the first five years of life causes a multitude of health problems, including more frequent and severe asthma attacks, ear infections, pneumonia, and bronchitis. A 2019 study of over 20 million births found smoking during pregnancy doubles the risk an infant will die suddenly. (See <https://pediatrics.aappublications.org/content/143/4/e20183325/76782>.) Exposure to secondhand vape aerosols carry many of the same health risks.

Smoking remains the leading cause of preventable death in the United States. In 2022, the CDPH Tobacco Control Program reported California had 3.2 million adult tobacco users (10.9 percent) including smokers, vapers and other tobacco users (See

<https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/CDPH%20Document%20Library/ResearchandEvaluation/FactsandFigures/CATobaccoFactsandFigures2022.pdf>.)

Although these rates of use are the second lowest in the country, they still represent a major health risk to millions of young children through exposure to secondhand smoke and secondhand vape aerosol, especially among low-income families.

Quitlines Help Tobacco Users Quit. Telephone quitlines are an effective, accessible, cost-effective, and evidence-based public health approach to increase smoking cessation rates. Currently, all 50 states operate quitlines as one of their primary means of addressing tobacco use. The California Quitline was the first statewide program. It was established in 1992 to provide free and confidential evidence-based tobacco cessation services to California smokers. In 2017, after a long pilot period with primarily dual users (smoking and vaping), the Quitline formally expanded its cessation services to reduce vaping. Quitline coaching protocols and services, including those for vaping and new modalities for contact such as text and chat, are grounded in evidence-based coaching tenets and cessation resources. Services are offered in English, Spanish, Mandarin, Cantonese, Korean, and Vietnamese. Currently among the F5CA priority population who receive quitline services, most request services in English (88 percent). About 10 percent request services in Spanish and about 2 percent request Mandarin/Cantonese, Korean, or Vietnamese (<1 percent each).

Quitline services include telephone intake conducted by coaches trained to assess a caller's intention and readiness to quit tobacco use and population-specific coaching, such as a protocol specifically designed and proven effective with pregnant women. Coaches and callers work together to develop a plan to quit, and continued interaction at key intervals over the first several weeks after quitting increases the likelihood of long-term success. Most Quitline clients have a higher nicotine dependence than the general smoker. Since 2013, the F5CA contract has supported the Quitline in offering a kit of Nicotine Replacement Therapy (NRT) to medically eligible smokers who are pregnant or caring for children ages 0 to 5 years as an adjunct to telephone coaching. A 2018 review of 133 smoking cessation studies (<https://doi.org/10.1002/14651858.pub5>) concluded that the use of NRT made it 50 to 60% more likely that a person's attempt to quit smoking would succeed, regardless of the setting.

Quitline Success with F5CA Priority Population. During the past contract, the Quitline has provided:

- Specialized coaching protocol for pregnant women
- Individualized coaching by culturally and linguistically representative staff
- Services to a higher-than-average proportion of low-income individuals (37 percent of smokers in California are covered by Medi-Cal and 78 percent of callers from F5CA's priority population were covered by Medi-Cal)
- Services to an ethnically diverse population – 68 percent of callers in the F5CA priority population identify as an ethnicity other than white

- Educational materials focused on the dangers of tobacco and vaping on children ages 0 to 5
- Specialized training for pediatricians and obstetricians to ask, advise, and refer patients for tobacco and vaping cessation services
- Implemented an automated text intervention specific to F5CA's priority population.
- Implemented a method in the live chat program to assess for F5CA status allowing for intervention specific to F5CA's priority population
- Continue to support F5CA's priority population by partnering with county 211 Information and Referral systems (supported through a pilot program funded by the California Tobacco Control Program) to proactively refer clients who are identified as tobacco users or as being exposed to secondhand tobacco

Challenges and Opportunities.

The majority of F5CA's funding for the Quitline is allocated to providing direct services (intake and coaching). The Quitline draws most callers from statewide media and promotional campaigns (e.g., CDPH Tobacco Control Program and the Centers for Disease Control and Prevention), as well as referrals from local entities to reach F5CA's priority populations. Effectiveness in reaching callers through these methods has decreased over time. Over recent years, the Quitline has experienced a decline in callers. This statistic is similar to what quitlines are experiencing nationally, both because of the decline in tobacco consumption and a trend away from using the phone to communicate.

The Quitline has addressed challenges by expanding the range of services to include vaping and new modalities for contact, such as text and chat, to provide evidence-based coaching and resources. In addition, F5CA and the Quitline have worked to integrate smoking and vaping cessation into F5CA-funded investments, social media, and websites to promote tobacco cessation, with the goal of driving tobacco dependent users to the Quitline and reducing children's exposure to second-hand smoke and vape.

In the next contract, the Quitline will continue to provide tobacco and vape cessation services, work with F5CA to incorporate tobacco cessation messaging into the *Kit for New Parents*, F5CA websites, and media campaign. As funding allows, F5CA and the Quitline will work to build upon and adapt the work funded by CDPH to be relevant to F5CA's priority population and look at innovative ways to reach underserved communities with tobacco users who are pregnant and those who are parents, and/or caregivers of children ages 0 to 5.

SUMMARY OF PREVIOUS COMMISSION DISCUSSION AND ACTION

Since 2001, the Commission has approved funding for smoking cessation contract to support the California's Smoker's Helpline. At the January 28, 2021, Commission meeting, the request to continue funding the California Smokers' Helpline (rebranded to

Kick It California in September of 2021) was presented. The Commission approved up to \$3.6 million over three years (July 1, 2021, through June 30, 2024) to continue tobacco cessation services focused on the F5CA priority population by the Helpline.

FISCAL ANALYSIS

This request is for up to \$2.5 million from the Education, and Research and Development accounts, for three years (FYs 2024–25 through 2026–2027), for the continued provision of tobacco cessation services to the F5CA priority population, NRT, and the development and provision of educational materials focused on the dangers of tobacco and vape aerosols on children.