



Navy and Marine Corps Public Health Center

Health Promotion and Wellness Tobacco Cessation Program
Survey Report

Dec 1, 2013



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Background:

The Navy and Marine Corps Public Health Center's (NMCPHC) Health Promotion and Wellness Department collects tobacco data biannually from Military Treatment Facility (MTF) Health Promotion Programs in accordance with the Bureau of Medicine and Surgery (BUMED) Instruction 6200.12A *Comprehensive Tobacco Control for Navy Medicine*. The purpose is to obtain information on the types of wellness tobacco cessation programs offered and outcomes data for counseling participants.

Methods:

The survey was emailed in AUG 2013 to all Health Promotion representatives from clinics and hospitals throughout Navy Medicine. Participants reported on patients and programs that took place between 1 JUL- 31 DEC 2012. The tobacco counseling quit rates are based on individuals who participated in any counseling between 1 JUL- 31 DEC 2012 to allow for the collection of comprehensive follow-up data at the 3- and 6-month periods. The survey consisted of 39 questions plus demographic information, with the focus on areas such as education and awareness, outcome data, training and other initiatives, and medications and clinical champions. All information is self reported by the MTFs. If reported data had errors, Health Analysis and Health Promotion and Wellness staff made several attempts to verify information for the problematic question response. If correct information was unable to be obtained, the facility was removed from that question's analysis to preserve data accuracy and validity. This may result in uneven number of respondents across question items and is reflected in our analysis as missing data. Following the completion of the data collection phase, Health Analysis staff reviewed and validated the data and provided a summary report. Data were extrapolated and analyzed using Microsoft Excel 2010.

Results:

A total of 57 facilities responded to the survey. Qualitative and quantitative data collected from the survey are summarized below.

MTF Tobacco Cessation Support and Activities

Approximately 73% (n=40) of the Navy Medicine facilities who completed the survey are located on a tobacco free campus (Table 1). The following regional tobacco free campus percentages were reported: 74% (25 out of 34) in Navy Medicine East, 73% (11 out of 15) in West, and 67% (4 out of 6) in the National Capital Area (NCA) (Table 1).

Table 1: Number of Tobacco Free Facilities by Navy Medicine Region, 1 JAN - 30 JUN 2012

	Yes	No	N/A*	Total
Region				
East	25	9	-	34
West	11	3	1	15
NCA	4	2	-	6
Total	40	14	1	55

Source: HPW Tobacco Cessation Survey, 1 JAN - 30 JUN 2012

Note: The data used in this analysis is self-reported and is based off of the question, "Is your MTF campus/compound Tobacco Free?"

*Denotes that the survey respondent left this question blank.

There were various reasons cited for not having a tobacco free campus. Many facilities cited location issues specifically related to the sharing of space. Some Navy Medicine facilities share property with numerous commands and organizations to include Veterans Affairs (VA) and the U.S. Coast Guard; other issues include local installation barriers and unions. Implementing a tobacco free policy may be difficult or impossible for these shared facilities, as Navy Medicine does not retain the full control needed for such a policy. Two facilities indicated that their facility was expecting to go tobacco free in March 2013, with a third planning for June 2013.

Eighty percent (n=44) of reporting Navy Medicine facilities participated in the Great American Spit Out (GASpO) in 2012 (Table 2). The most common activity was an educational booth set up either in the clinic lobby, Navy Exchange, galley, or fitness center. Another common activity was the creation of unique local materials to include flyers, brochures, banners, or emails. Reasons commonly reported for not participating in GASpO included a lack of personnel, limited funding and/or supplies.

Table 2: 2012 Great American Spit Out Participation by Navy Medicine Region, 1 JAN - 30 JUN 2012

	Yes	No	Total
Region			
East	28	6	34
West	12	3	15
NCA	4	2	6
Total	44	11	55

Source: HPW Tobacco Cessation Survey, 1 JAN - 30 JUN 2012

Note: The data used in this analysis is self-reported and is based off of the question, "Did your MTF participate in the Great American Spit Out?"

Tobacco Cessation Facilitator Training

Of reporting facilities, the number of currently trained tobacco cessation facilitators at MTFs ranged from a maximum of 27 in Navy Medicine East, 10 in West and four in NCA (Table 4) to zero at MTFs in all regions. The number of newly trained facilitators by regional and local health promotion staff during JAN-JUNE 2012 was also reported. Newly trained facilitators are located not only at Navy Medicine facilities, but also fleet, operational, and reserve commands. The largest Navy Medicine facilities trained the highest number of tobacco cessation facilitators. Naval Medical Center San Diego trained 90 tobacco cessation facilitators between JAN-JUNE 2012 while Naval Medical Center Portsmouth trained 55 tobacco cessation facilitators during the same time period.

Table 3: Trained Tobacco Cessation Facilitators

Region	Number of Trained TC Facilitators	Number of Newly Trained* Facilitators
East	34	99
West	52	102
NCA	17	4
Total	103	205

Source: HPW Tobacco Cessation Survey, 1 JAN - 30 JUN 2012

Note: The data used in this analysis is self reported. The first column reflects the sum of facilitators at each MTF grouped by region. *The number of newly trained facilitators only includes individuals trained by Health Promotion and Wellness staff between 1 JAN - 30 JUN 2012.

Tobacco Cessation Counseling and Outcomes

The information in the tables below reflects individual and group counseling sessions that were offered between 1 JAN – 30 JUN 2012. To allow for appropriate follow-up time, the survey data was not collected for this counseling period until after 30 DEC 2012. To calculate the quit rate, the intention-to-treat model was used. This method calculates the quit rate by dividing the number of participants who reported being tobacco free at the follow-ups by the total number of participants who started counseling, even if counseling was not completed or participants were unable to be contacted at follow-up. At the follow-up marks, 7 day point prevalence (Have you used any tobacco products in the last 7 days?) was assessed to determine quit status.

A total of 5,371 persons participated in counseling during this time period. This is a 42% increase from the previous reporting period. The overall quit rate for Navy Medicine at the 3-month follow-up was 35% for individual counseling and 31% for group counseling (Tables 5 and 6, Graph 1). The overall quit rate at the 6-month follow-up was 28% for individual counseling and 22% for group counseling (Tables 5

and 6, Graph 2). Note that the counseling categories were not mutually exclusive so an individual could be counted more than once if they utilized more than one counseling method in the allotted time frame.

Table 4: Individual Tobacco Cessation Counseling and Follow Up Quit Rates, 1 JAN - 30 JUN 2012, by Navy Medicine Region

	Number of Facilities	Total Number of Participants	Tobacco Free at 3 Months	Loss to Follow-Up 3 Months	Tobacco Free at 6 Months	Loss to Follow-Up at 6 Months
Region						
East	33	1,785	41%	31%	35%	35%
West	18	1179	23%	50%	16%	63%
NCA	6	273	41%	23%	30%	27%
Total	57	3,237	35%	37%	28%	44%

Source: HPW Tobacco Cessation Survey, 1 JAN - 30 JUN 2012

Note: The data used in this analysis is self reported. Not all facilities offered or had participants for individual counseling during this reporting period. Facilities with errors in reporting were removed from the analysis.

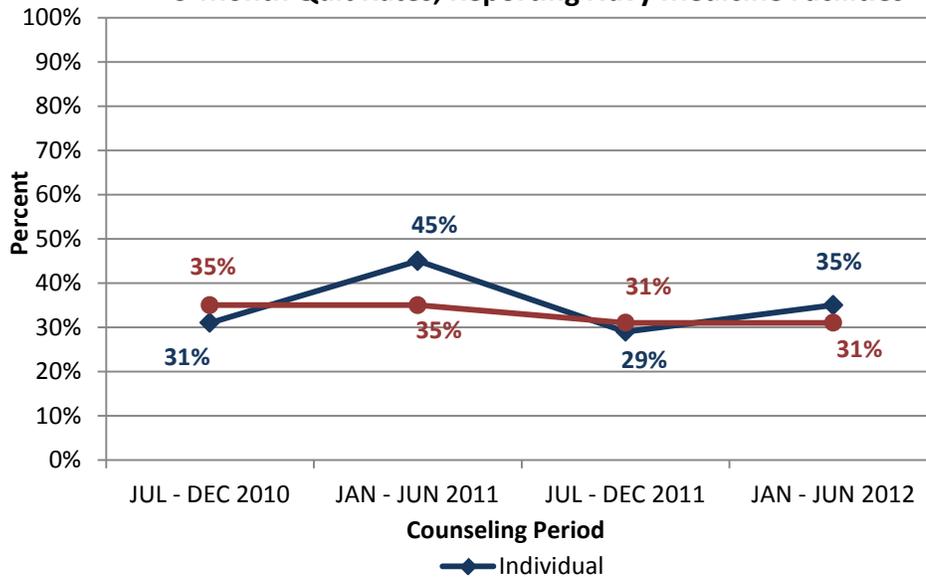
Table 5: Group Tobacco Cessation Counseling and Follow Up Quit Rates, 1 JAN- 30 JUN 2012, by Navy Medicine Region

	Number of Facilities	Total Number of Participants	Tobacco Free at 3 Months	Loss to Follow-Up 3 Months	Tobacco Free at 6 Months	Loss to Follow-Up at 6 Months
Region						
East	35	1,341	36%	31%	24%	40%
West	18	793	28%	37%	21%	42%
NCA	3	0	-	-	-	-
Total	56	2,134	31%	33%	22%	43%

Source: HPW Tobacco Cessation Survey, 1 JAN - 30 JUN 2012

Note: The data used in this analysis is self reported. Not all facilities offered or had participants for group counseling during this reporting period. Facilities with errors in reporting were removed from the analysis.

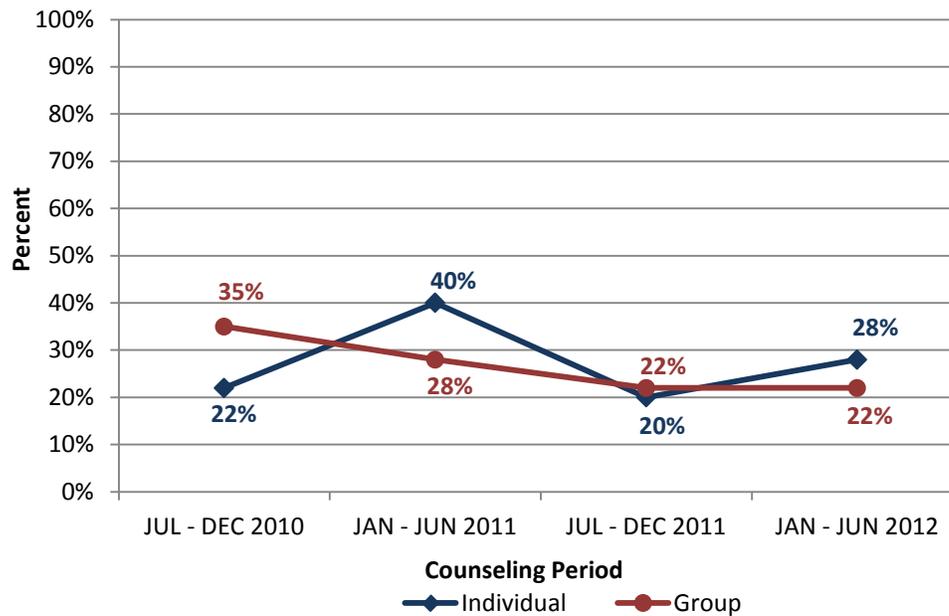
**Graph 1: Individual and Group Tobacco Cessation Counseling*,
3-Month Quit Rates, Reporting Navy Medicine Facilities**



Source: HPW Tobacco Cessation Survey

*Despite standardized data definitions, data is self-reported by facility and tobacco user and may include error such as variation in interpretation of survey questions. Additionally, the data above reflects varying clinics between reporting periods.

**Graph 2: Individual and Group Tobacco Cessation Counseling*
6-Month Quit Rates, Reporting Navy Medicine Facilities**



Source: HPW Tobacco Cessation Survey

*Despite standardized data definitions, data is self-reported by facility and tobacco user and may include error such as variation in interpretation of survey questions. Additionally, the data above reflects varying clinics between reporting periods.

Limitations

Recent updates to the HPW Tobacco survey questions may have resulted in some errors in reporting. Facilities that provided inaccurate data i.e. mathematical error or participant classification issues were contacted several times. If facilities were unable to be contacted, they were removed from this analysis. It is important to note that these rates do not include all facilities that conduct tobacco cessation activities and therefore generalizations regarding Navy-wide efforts should be made with caution.

This report is based on self reported data which is delivered to NMCPHC as aggregate data. It is possible that there is variation in interpretation of the survey questions by those completing the survey. Therefore, the summary statistics that were calculated for this analysis may be over- or under-represented.

Conclusion

The biannual Tobacco Cessation Program Survey provides comprehensive information on the status of Health Promotion tobacco cessation programs and initiatives across Navy Medicine. Information highlighted in this report can be used to guide NMCPHC Health Promotion staff in directing training efforts and identifying effective tobacco cessation programs. Routine reporting will continue and data will be collected for the next reporting period in the summer of 2013 (1 JUL – 31 DEC 2012).

Disclaimer

The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of the Navy, Department of Defense, or the U.S. Government.