



State of Connecticut
Department of Public Health
Public Health Initiatives Branch
**Health Education, Management, and
Surveillance Section**
**Tobacco Use Prevention and Control
Program**

**LEAD BY EXAMPLE.
BE TOBACCO FREE.**

TOBACCO USE PREVENTION & CONTROL

Program Goals

- 1. To prevent the initiation of tobacco use among young people.**
 - Statistics from the 2009 CT School Health Survey document a 27% tobacco use rate among high school seniors, up from 13% in ninth grade, and 23.9% of high school 'never smokers' are defined as susceptible to starting smoking.
- 2. To promote quitting among young people and adults.**
 - Statistics from the 2008 CT Behavior Risk Factor Surveillance Survey indicate that 62.7% of adults tried to quit smoking in the past 12 months; the *Healthy People 2010 (HP 2010)* target for adults is 75%. In 2009, 44.4% of high school smokers tried to quit in the past year; the *HP 2010* target for youth is 84%.

Program Goals, *continued*

3. **To eliminate nonsmokers' exposure to secondhand smoke.**
 - There is no safe level of exposure to secondhand smoke!

4. **To identify & eliminate the disparities related to tobacco use and its effects on diverse population groups.**
 - Several adult sub-population groups in CT have significantly higher smoking rates (2008):
 - Low-income (<\$15,000/yr) — 29.5%
 - Lower education (<high school degree) — 29.3%
 - Younger age (<35 years old) — 22.6%
 - Hispanic — 23.2%*
 - Grant funds targeted through RFP process.

*Note: The Hispanic population is younger than the general CT and US populations; cigarette smoking is higher among younger age groups, which will in part, account for the higher smoking prevalence rate among Hispanics.

Infrastructure and Funding

Staffing:

- 3 Program Specialists
- 1.7 Epidemiologists
- 1 Administrative

Training Institute:

- Established to provide training and educational opportunities for community partners.
- A training advisory committee helps guide conference topics & speakers.
- One-day session offered on March 18, 2009 for training community providers on clinical guidelines that were revised in the fall of 2008.
- Upcoming conference on March 18, 2010 to highlight youth cessation, media literacy and trends.

Work in Policy and Environmental Change Areas

Statewide Tobacco Use Prevention and Control Plan:

- Originally published in 2002
- Major overhaul and update in process:
 - Partnership with the Department of Mental Health and Addiction Services;
 - Goals have remained the same.
 - Community objectives include expansion of Clean Indoor Air Act in Connecticut to eliminate certain exemptions.

Voluntary campaign for outreach to multi-unit housing owners/managers/landlords:

- Main source of complaints to TUPAC;
- Toolkit and mailings for outreach have been developed.

Funding Sources

Source	Amount	Primary Use/Restrictions
CDC 2009-2010	\$ 889,343	Personnel, Quitline, EX Campaign Membership No Direct Services
CDC 2008-2009 (9-month period)	\$ 902,260	"
CDC 2007-2008	\$1,185,790	"
Tobacco & Health Trust Fund FY 2008	\$ 800,000	Cessation Programs & their evaluation for Pregnant Women at Community Health Centers
PHHS Block Grant, FY 2010	\$ 10,991	Cessation Programs offered through Local Health Departments

Funding Sources, *continued*

Source	Amount	Restrictions
Tobacco & Health Trust Fund FY 2009	\$1,612,456	Community Cessation Programs-General and Specialized
	\$2,000,000	Quitline Services
	\$2,000,000	Countermarketing & Media Campaign
	\$250,000	School-Based Tobacco Use Prevention and Cessation Programs
	\$500,000	Program Evaluation – All Components

Funding Sources, *continued*

Source	Amount	Restrictions
Tobacco & Health Trust Fund FY 2010	\$1,550,000	Community Cessation Programs-General and Specialized
	\$1,650,000	Quitline Services
	\$1,650,000	Countermarketing & Media Campaign
	\$500,000	School-Based Tobacco Use Prevention and Cessation Programs
	\$477,745	Innovative Programs
	\$300,000	Program Evaluation – All Components
	\$250,000	Statewide Tumor Tissue Biorepository

Tobacco Use Prevention and Control Programs



Programs: Cessation

Connecticut QuitLine: 1-800-QUIT-NOW

- Operated through contract with Free & Clear, Inc. in Seattle, Washington. Open 7 days a week, in process of expanding to 24-hour service.
- For ALL Connecticut residents, at no cost to caller.
- Multiple language staff and translation line available, including line for hearing impaired.
- Provides telephone consultation, including multiple calls for residents who are interested in quitting, and educational materials tailored to clients' needs.
- Provides Nicotine Replacement Therapy (NRT) when funding is available.
- Receives referrals from health care providers, local programs and others including fax referrals.

Connecticut Quitline Callers



	Registered Callers	NRT Shipments
2007 Total Registered Callers	9,070	4,780
2008 Total Registered Callers	2,541	332
2009 Total Registered Callers	3,918	2,502
Sample Month:		
December 2007	184	23
December 2008	155	n/a
December 2009	384	323

Connecticut QuitLine Quit Rates

- There are two primary ways that quit rates are calculated which impact the rate:
 - Intent-to-Treat (ITT) Method
 - Responder Rate Analysis Method
- ITT divides the number of abstinent patients contacted at follow-up by the number of patients registered for treatment. This method assumes that all survey non-respondents are continued tobacco users. This is considered the most conservative method.
- Responder Rate is calculated by dividing the number of respondents who have quit by the number of respondents who returned their survey.
- Our independent evaluator, the CDC, and the US Department of Health and Human Services 2000 Clinical Practice Guidelines all recommend using the ITT method of determining quit rates. The guidelines specifically do not include the responder analysis method.

Connecticut QuitLine Quit Rates

Quit Rates (%)

November 2005 - June 2006

	Responder Analysis	Intent-to-Treat
7 day	22.9	11.5
30 day	19.5	9.8

Data Source: Free & Clear Connecticut Tobacco QuitLine Evaluation Report, October 1, 2007

- 11.5% of respondents had not used tobacco in the last seven days.
- 9.8% of respondents had not used tobacco in a month or longer.

Connecticut QuitLine Quit Rates

Quit Rates (%)

January 2007 - July 2007

	Responder Analysis	Intent-to-Treat
7 day	34.1	15.0
30 day	26.1	11.5

Data Source: Free & Clear Connecticut Tobacco QuitLine Evaluation Report, March 11, 2008.

- 15% of respondents had not used tobacco in the last seven days.
- 11.5% of respondents had not used tobacco in a month or longer.

Programs, continued

Tobacco Use Cessation Programs

- Cessation services to pregnant women and women of childbearing age (13-44 years old) funded at six federally qualified community health centers
 - For period from November 1, 2008 to June 30, 2010.
 - Programs at CHC, Inc., Fair Haven, Hill Health, Generations, Optimus, and Staywell Health Centers.
- Community cessation programs targeted to high risk & disparate populations
 - For period from September 1, 2009 to August 31, 2011.
 - Programs at AIDS Project New Haven, Fair Haven CHC, Generations, Hartford Gay and Lesbian Health Collective, Hospital of Saint Raphael, and Ledge Light Health District.
- Programs must provide individual and group counseling, offer NRT and program services free of charge to program clients.

Programs, continued

Specialized Cessation Programs

Cessation services for severely mentally ill or those with co-occurring mental illness and substance use dependence

❖For period from October 1, 2009 to September 30, 2011

Contract with CommuniCare, Inc. includes four partner agencies in phase one and another three in phase two;

CommuniCare is responsible for the administrative oversight, training, and data collection of the other agencies.

Contract includes systems change component and technical assistance to other interested agencies.

Programs, continued

PHHS Block Grants

- Tobacco Use Cessation Programs are one of the options that can be selected through this Preventive Health Block Grant Process.
- Two health departments selected this option for the period from July 1, 2009 to June 30, 2010:
 - Guilford
 - Meriden

Tobacco Use Cessation Program Graduation Results

Results	# of Participants	%*
+ Result, reduced smoking	85	30.9
+ Result, stopped smoking	92	33.5
TOTAL POSITIVE RESULTS	177	64.4
- Result, increased smoking	20	7.3
- Result, started smoking	4	1.5
TOTAL NEGATIVE RESULTS	24	8.7
No change in smoking rate	66	24.0
No change, smoking rate unknown	4	1.5
No change, not smoking	4	1.5
TOTAL NO CHANGE RESULTS	74	26.9
TOTAL # PARTICIPANTS	275	100.0 %

*differences in totals due to rounding

Programs, continued

Prevention

- Fund programs to address youth tobacco use – aimed at preventing tobacco use by educating youth about its dangers. (No programs funded for the periods from July 1, 2008 – March 31, 2010)
- RFP for school-based tobacco use prevention and cessation programs had to be released twice for low response from school districts.
 - Four programs funded for the period beginning March 1, 2010.
- Schools to implement comprehensive school policies and environmental change, incorporating student, staff, faculty and family components.

Programs, continued

Media & Counter Marketing

- \$100,000 youth media campaign run in March 2008 resulted in a 45% increase in calls to the QuitLine for age group 18 to 24.
- In 2008, became founding member of the National Alliance for Tobacco Cessation, comprised of many states led by the National Legacy Foundation.
 - Receive benefits of national media campaign and use of materials for the "Become an Ex" campaign.
 - Campaign has significant online component and utilizes a website that incorporates information and blogging components for 'members' to join groups of like quitters. (www.becomeanex.org)





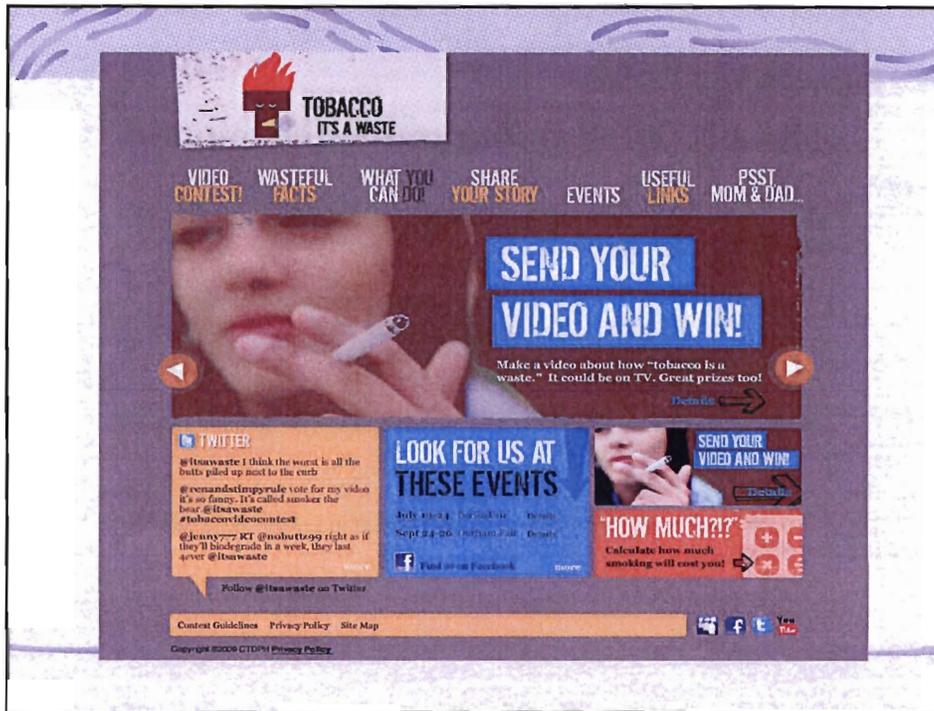
Programs, continued

Media & Counter Marketing, Continued

- ✓ Countermarketing campaign awarded during 2009 to feature youth and adult components.
 - Awarded to Cronin and Company, incorporates social media, traditional media, school outreach, youth video contest, adult cessation, and grassroots components.
 - Includes African American and Hispanic subcontracts for targeted marketing.
 - African American component kickoff on Martin Luther King Day, 2010.



TOBACCO IT'S A WASTE



Surveillance Efforts

- Data collection required from all cessation program contractors including QuitLine operations.
- Connecticut School Health Survey administered in 2000, 2002, 2005, 2007, and 2009.
 - Combined with the Youth Risk Behavior Survey, the CT Youth Tobacco Survey was administered February through June 2009 to public middle school students (grades 6 through 8) and high school students (grades 9 through 12).
 - The survey was successful (i.e., overall participation rate $>60\%$), and some preliminary data have been released. A comprehensive data report is expected later this year.
 - CT DPH conducts the survey in cooperation with the CDC and the CT Department of Education.
 - CSHS is a comprehensive survey of tobacco use, access, cessation, knowledge and attitudes, and secondhand smoke exposure among CT's youth.
- CT Adult Tobacco Survey administered for the first time in conjunction with the Behavioral Risk Factor Survey. Report was released in August 2008.



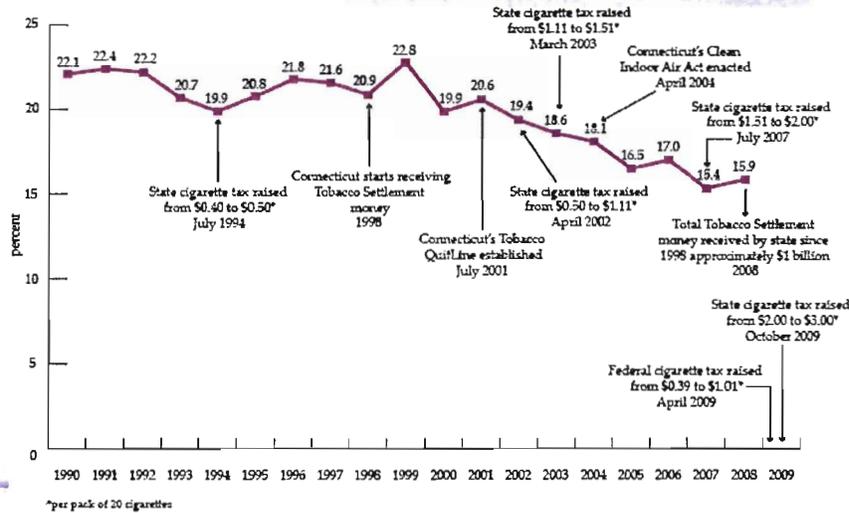
Tobacco Data



Cigarette Smoking in Connecticut

- Adults who smoke (2008): 15.9% (429,000)
 - 17.3% of men (223,000)
 - 14.7% of women (206,000)
- High school students who smoke (2009): 15.3% (26,600)
 - 16% of boys
 - 14.4% of girls
 - Grade 9 – 9% and Grade 12 – 21.3%
- Kids who live with someone who smokes cigarettes (2009):
 - Middle school – 42,000
 - High school – 59,000
- CT Adults who die each year from their own smoking: 4,900
- CT Adults, children & babies who die each year from others' smoking: 350-630

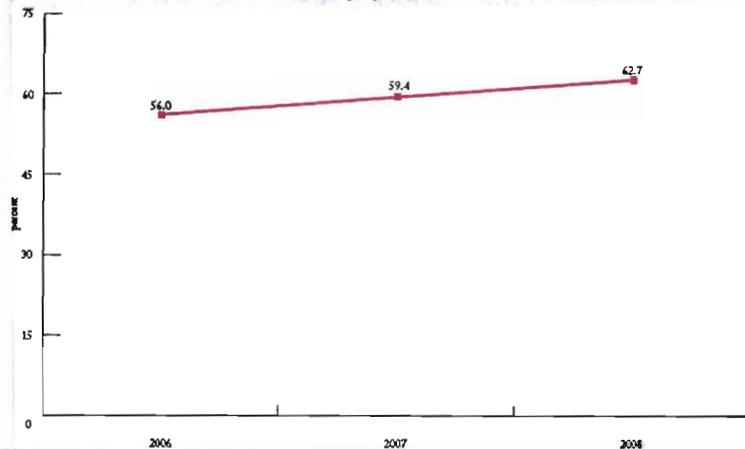
Cigarette Smoking Among Connecticut Adults by year



Trends in Cigarette Smoking Among Connecticut Adults

- The highest adult smoking rate in the past 10 years was in 1999 (22.8%); the lowest was in 2007 (15.4%).
- The first significant decline in the rate of adult cigarette smoking since 1999 was in 2003 when it fell to 18.6%.
- The CT QuitLine was established in 2001 when the rate was 20.6%, by 2004, the rate had decreased significantly to 18.1%.
- In 2008, CT's smoking rate was the 7th lowest in the nation.
- Since 1994, CT's cigarette tax has grown from \$0.40 to \$3.00, a 750% increase; during approximately the same time period, the adult smoking rate has dropped 20%.

Adult Connecticut Smokers Who Tried to Quit Smoking Cigarettes in the Past Year *by year*

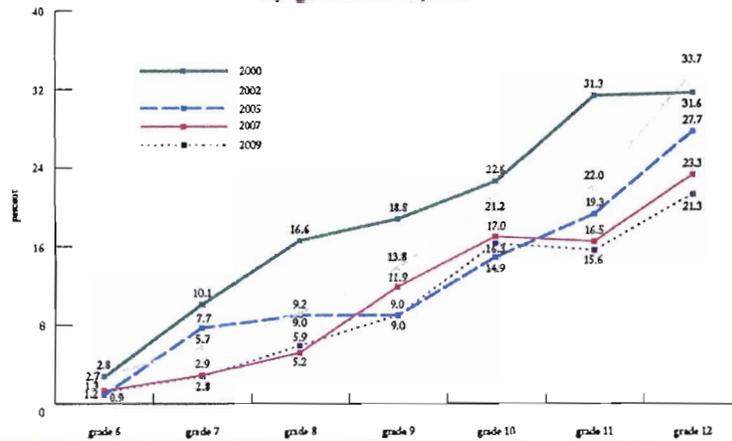


Smoking Cessation Among Connecticut Adult Smokers

- Although the trend over the past three years has shown an increase in the percentage of adult smokers who attempted to quit smoking cigarettes during the past year, the rates have not changed significantly.
- Between 2006 and 2008, the rate of adult smoking decreased 6.5%, while the rate of quit attempts increased 12%.
- An estimated 269,000 adult smokers in CT attempted to quit smoking in 2008.

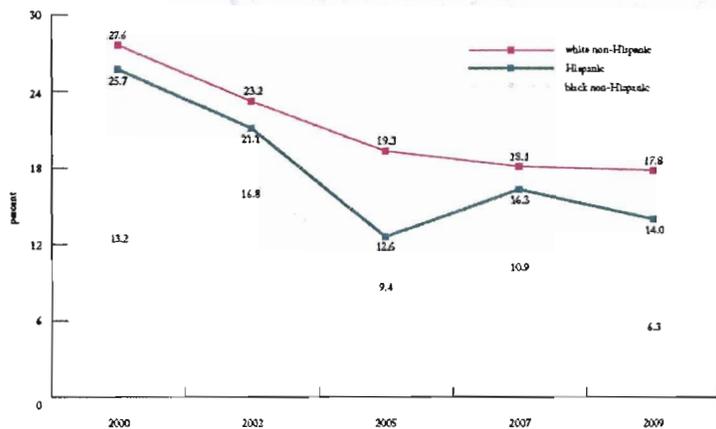
Cigarette Smoking Among Connecticut Students

by grade and year



Cigarette Smoking Among Connecticut High School Students

by year and race/ethnicity



Trends in Cigarette Smoking Among Connecticut Students

- In all grades since 2000, cigarette smoking among middle and high school students has decreased, in most cases, significantly.
- With the exception of survey results in 2000, the rate of cigarette smoking increases significantly between grades 11 and 12.
- The rate of smoking among high school students tends to mirror that of adult smokers.
- In 2000, the tax on a pack of cigarettes was \$0.50 and the rate of smoking among high school students was 25.6%. By 2009, the tax had quadrupled to \$2.00*, and their rate of smoking dropped by 40% down to 15.3%.

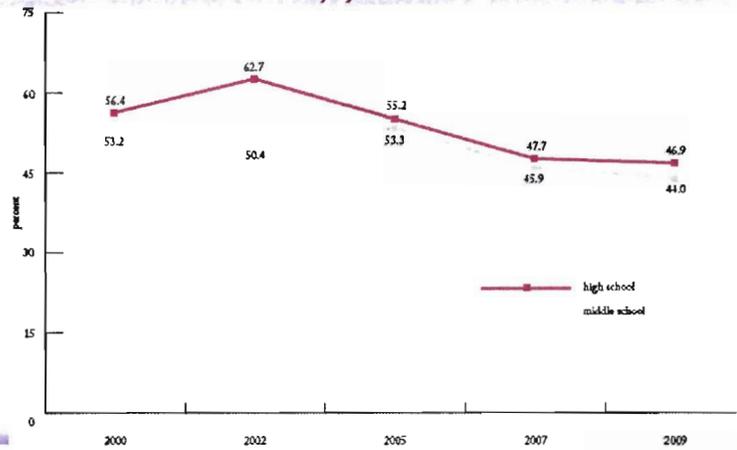
*The tax increase to \$3.00 in 2009 did not occur until after the survey was administered.

Trends in Cigarette Smoking Among Connecticut Students, *continued*

- Since 2000, cigarette smoking rates among white, black, and Hispanic high school students have decreased..... Although, only the change in the rate for white students is statistically significant.
- White high school students smoke at significantly higher rates than black students.

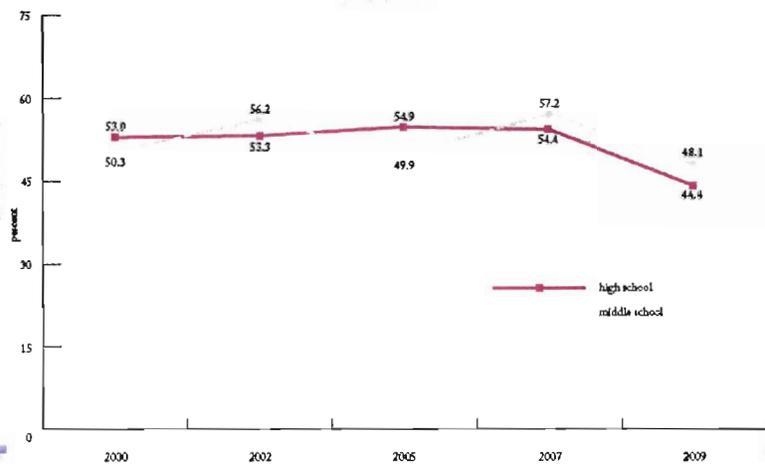
Connecticut Middle and High School Smokers Who Want to Stop Smoking Cigarettes

by year



CT Middle and High School Smokers Who Tried to Quit Smoking Cigarettes in the Past Year

by year



Smoking Cessation Among Connecticut Middle and High School Smokers

- For both middle and high school smokers, the rate of those who want to stop smoking cigarettes is at its lowest since 2000.
- For both middle and high school smokers, the rate of those who tried to quit smoking in the past year is at its lowest since 2000.
- Although these rates are the lowest they have been in nearly a decade, none of the differences between them are statistically significant.



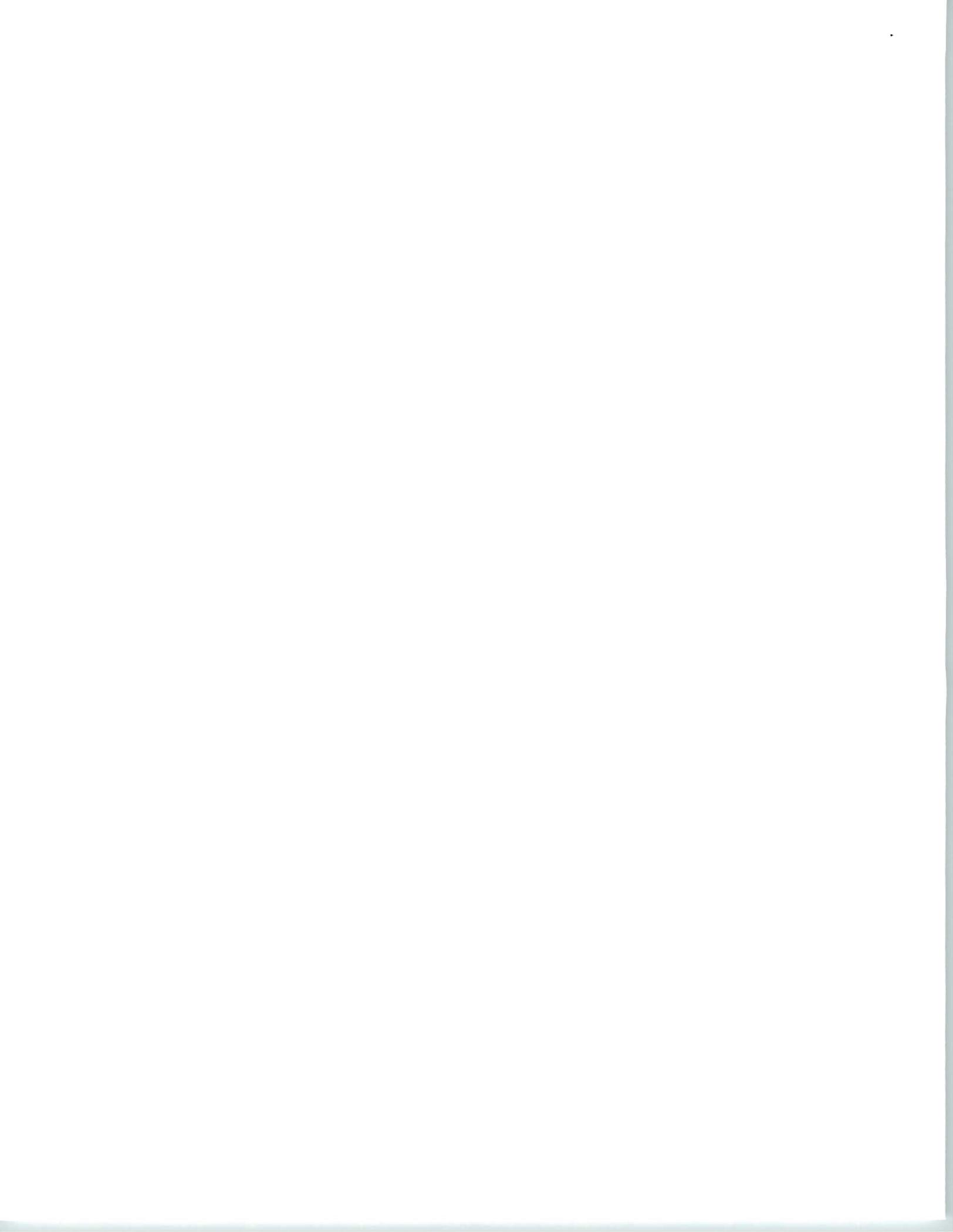
Put Smoking In Its Place. Out.

Call the Quitline at **1-866-END-HABIT**

Connecticut Department of Public Health - Keeping Connecticut Healthy

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2008 Adult Smoking in Connecticut

- ✓ An estimated 429,500 adults (15.9%) smoke cigarettes
- ✓ 17.3% of men and 14.7% of women smoke
- ✓ The smoking rates among white, black, and Hispanic adults are 15.3%, 14.3%, and 23.2%, respectively
- ✓ The smoking rate among adults has decreased significantly since 2002 when it was 19.4%
- ✓ Connecticut has the 7th lowest smoking rate in the country*
- ✓ The highest smoking rate among adults is found in the 25-34 year-old age group (23.8%)
- ✓ The smoking rate among adults who report an income of \$50,000 or more per year is significantly lower (12.7%) than it is for those with smaller incomes (22.7%)
- ✓ College-educated adults have a significantly lower smoking rate (9.1%) than those with less than a college degree. The highest rate is among adults who never graduated from high school (29.3%)
- ✓ More than half of adult smokers tried to quit in the past year
- ✓ Nearly 6% of women who gave birth in 2006 reported smoking during their pregnancy

**Tied with Arizona. The US smoking rate is 18.4%.*

Quit Smoking Today!

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TOBACCO USE PREVENTION & CONTROL



**CONNECTICUT
QUITLINE**
1-800-QUIT-NOW

Call the Connecticut QuitLine at 1-800-Quit-Now or 1-800-784-8669

For more information about tobacco use in Connecticut contact:

The Department of Public Health Tobacco Use Prevention and Control Program at 860-509-8251 or visit our website at www.ct.gov/dph/tobacco.



Trends in Adult Smoking in Connecticut

→ The rate of smoking among adults in Connecticut has fallen significantly since the 1990s. Between 1995 and 2008, the lowest smoking rate was in 2007 (15.4%), which was significantly lower than any of the rates prior to 2005 (see figure 1)

Adult Smoking in Connecticut
1995-2008

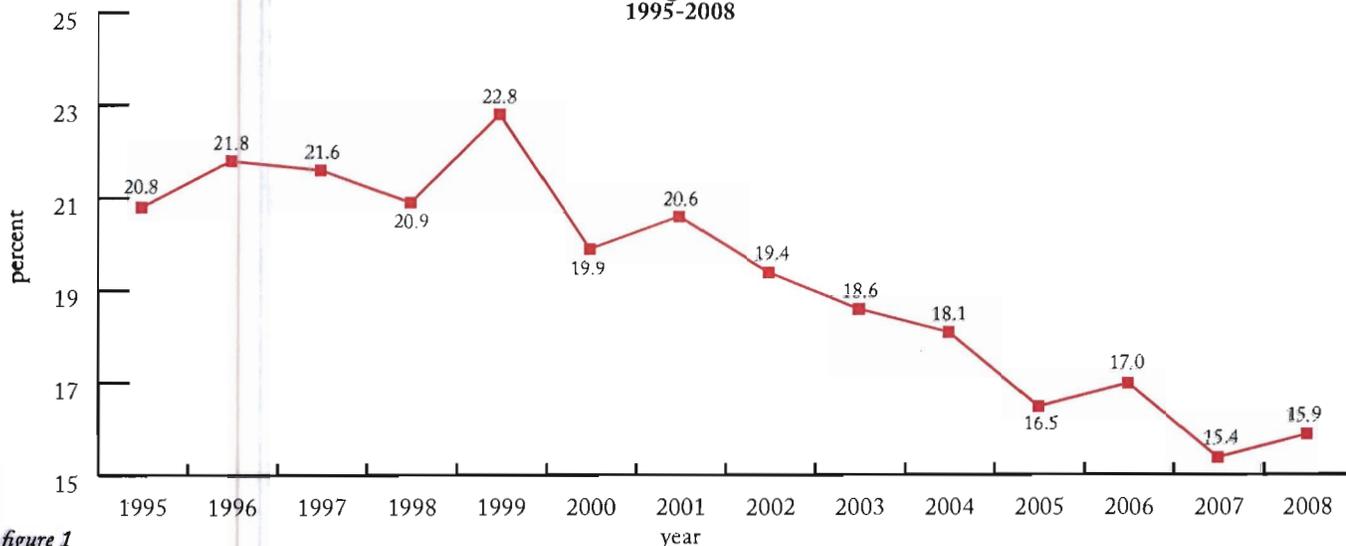


figure 1

→ In comparison to men, over the past decade, women have shown a steadier decline in their rate of smoking. In 2004 and 2006, the rate for women was significantly lower than for men. Between 1995 and 2008, the lowest smoking rate for men was in 2007 (16.5%), which was significantly lower than in 1996, 1999, and 2001. For women, the lowest rate was in 2007 (14.4%), which was significantly lower than any of the rates prior to 2004 (see figure 2)

Adult Smoking in Connecticut
1995-2008
by sex

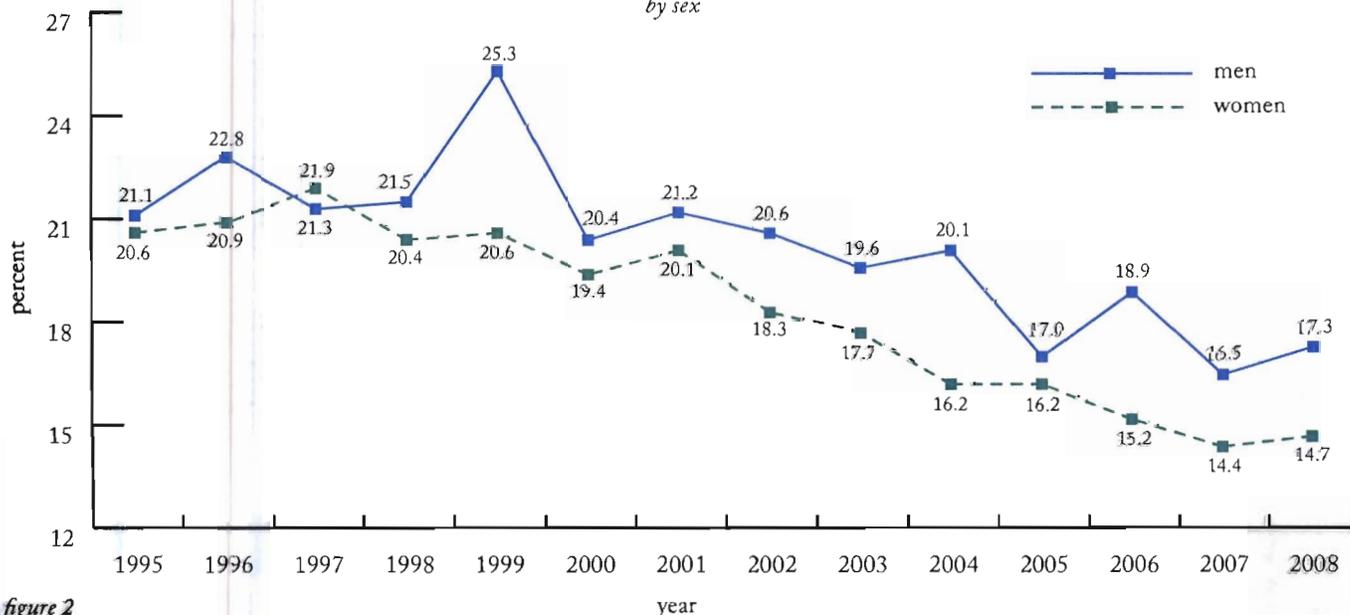


figure 2

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Trends in Adult Smoking in Connecticut

→ The rate of smoking among black and Hispanic adults has varied widely over the past eight years. The 2008 rate of 14.3% for black adults is significantly lower than it was in 2000 (27.3%). For Hispanic adults, the rate dropped significantly between 2006 and 2007 from 24.6% to 15.1%, but increased to 23.2% in 2008. Among white adults, the rate has declined almost steadily. In 2008, the smoking rate of 15.3% is significantly lower than it was between 2000 and 2003 (see figure 3)

Adult Smoking in Connecticut
2000-2008
by race/ethnicity

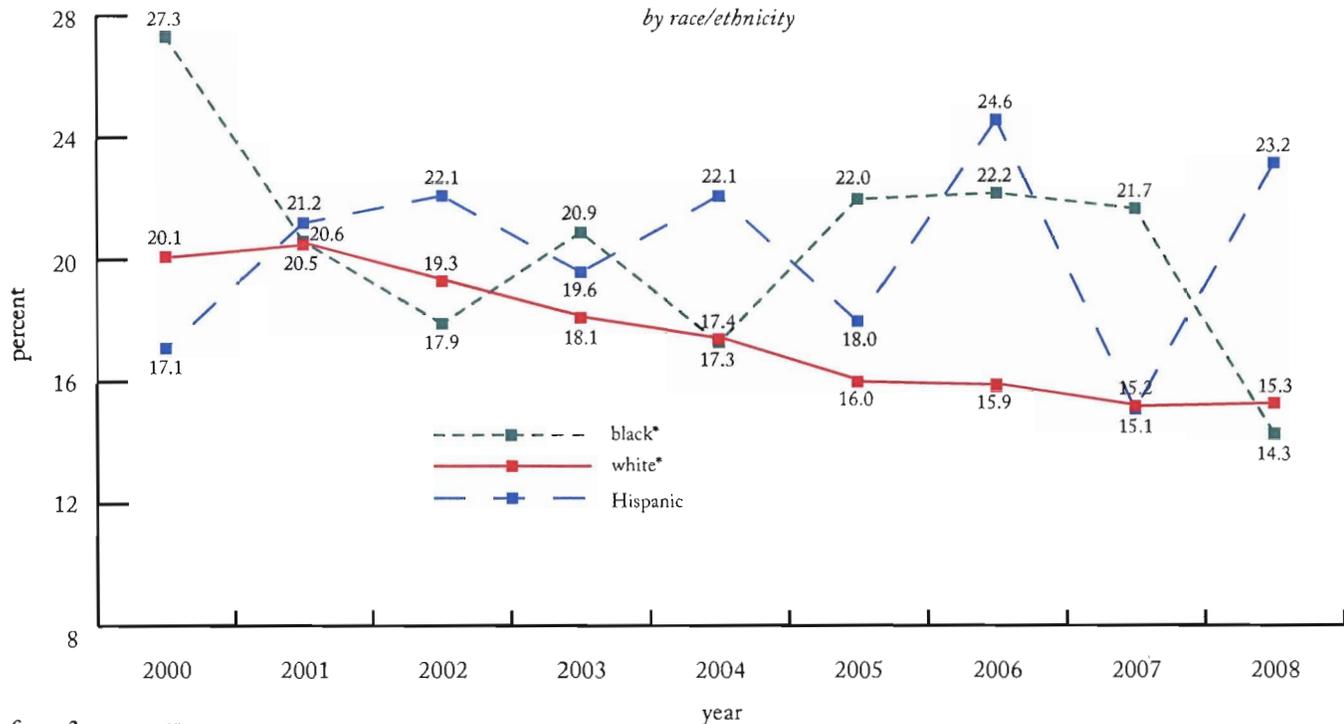
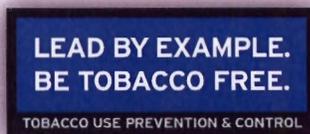


figure 3 *non-Hispanic

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2009

Youth Smoking in Connecticut

-  15.3% of high school and 3.3% of middle school students smoke cigarettes
-  16% of boys and 14.4% of girls in high school smoke; in middle school, 3.3% of boys and 3.2% of girls smoke
-  In high school, the smoking rates among white*, black*, and Hispanic students are 17.8%, 6.3%, and 14%, respectively
-  In middle school, the smoking rates among white*, black*, and Hispanic students are 2.9%, 3.1%, and 4.5%, respectively
-  The rate of smoking among high school students has decreased from 16.9% in 2007, but the change is not statistically significant
-  The rate of smoking among middle school students has remained relatively unchanged from the 2007 rate of 3.4%
-  The majority (70.6%) of high school students who have ever smoked a whole cigarette, smoked it between the ages of 13 and 16
-  Approximately 46% of high school current smokers have ever smoked cigarettes daily
-  Approximately 44% of high school smokers tried to quit in the past 12 months, and nearly 47% want to stop smoking
-  In high school, 23.5% of never smokers are considered susceptible to starting smoking in the next year, and in middle school, 17.3% are susceptible

*non-Hispanic
 Source: 2009 Connecticut School Health Survey Youth Tobacco Component



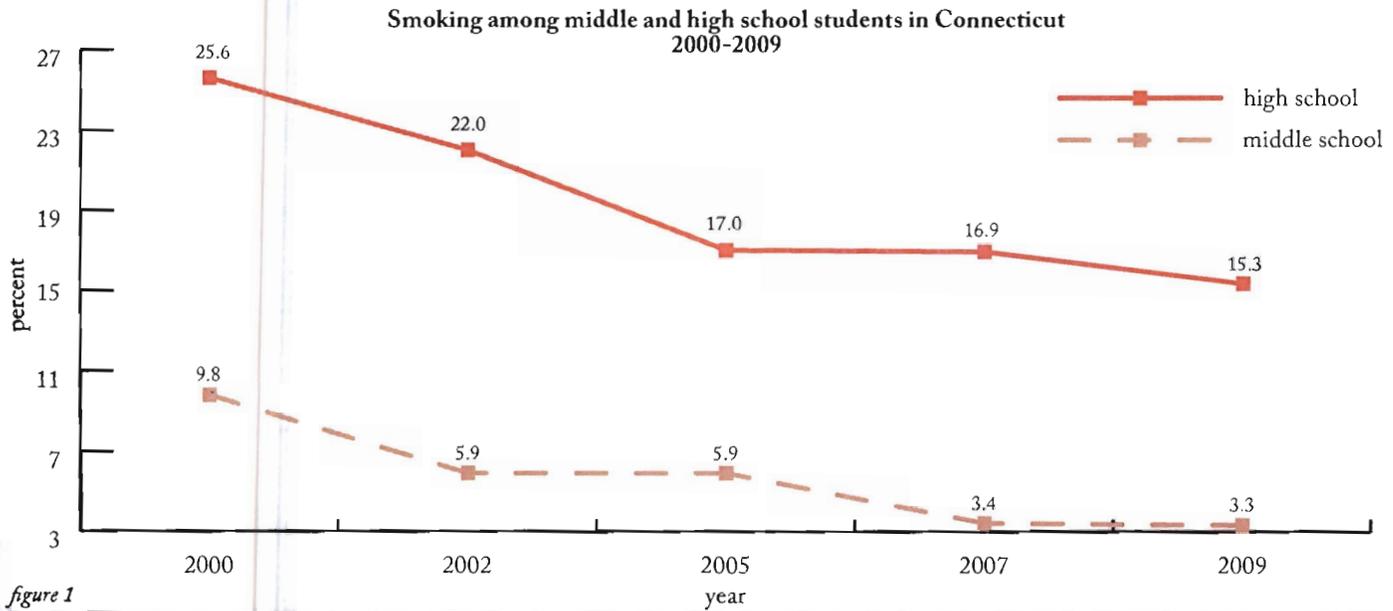
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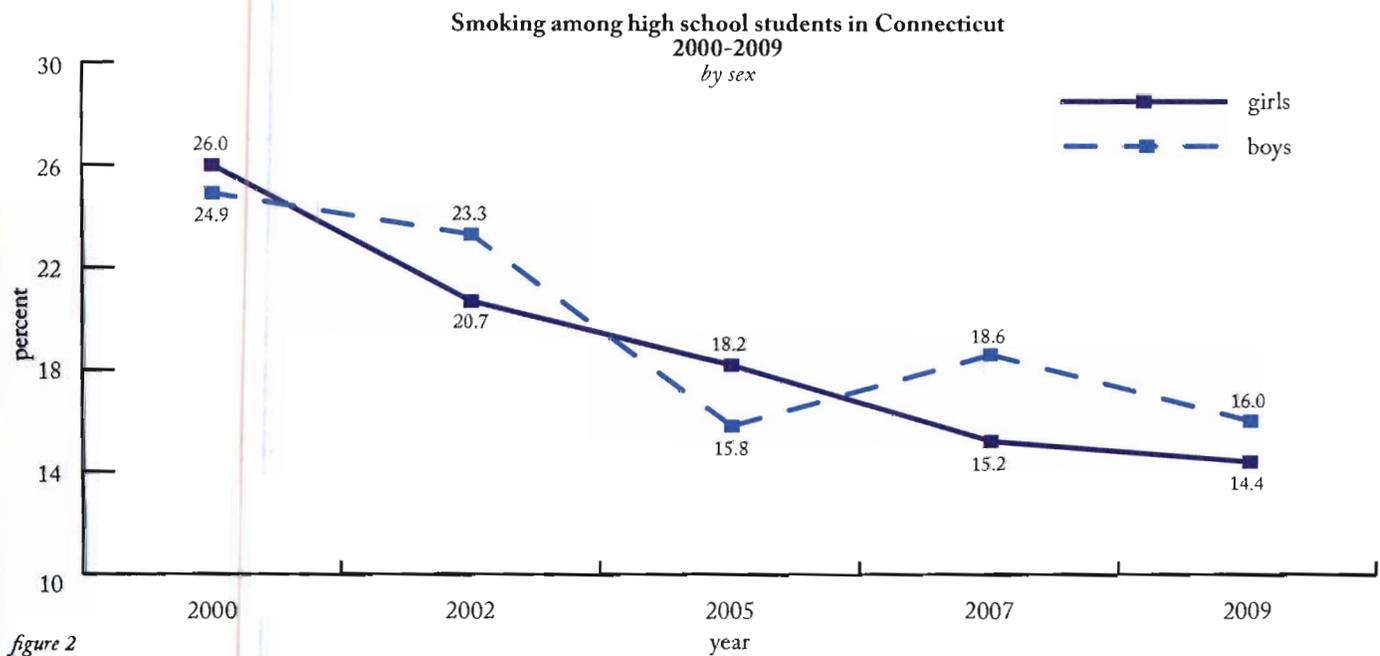
The Department of Public Health Tobacco Use Prevention and Control Program at 860-509-8251 or visit our website at www.ct.gov/dph/tobacco.

Trends in Youth Smoking in Connecticut

→ Between 2000 and 2009, cigarette smoking among high school students decreased significantly from 25.6% to 15.3%; the same is true for middle school students, where the rate went from 9.8% down to 3.3% (see figure 1)



→ Between 2000 and 2009, the rate of smoking among high school boys decreased significantly from 24.9% to 16%. The same significant decrease also occurred among high school girls, where the rate went from 26% down to 14.4% (see figure 2)



For more information about tobacco use in Connecticut contact:

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Trends in Youth Smoking in Connecticut

→ Between 2000 and 2009, the rate of smoking among white students fell significantly from 27.6% to 17.8%. Among black students, the rate decreased significantly from 16.8% in 2002 to 6.3% in 2009. The rate for Hispanic students dropped from a high of 25.7% in 2000 to a low of 12.6% in 2005 and is currently at 14%, but none of the changes between any of the years are statistically significant (see figure 3)

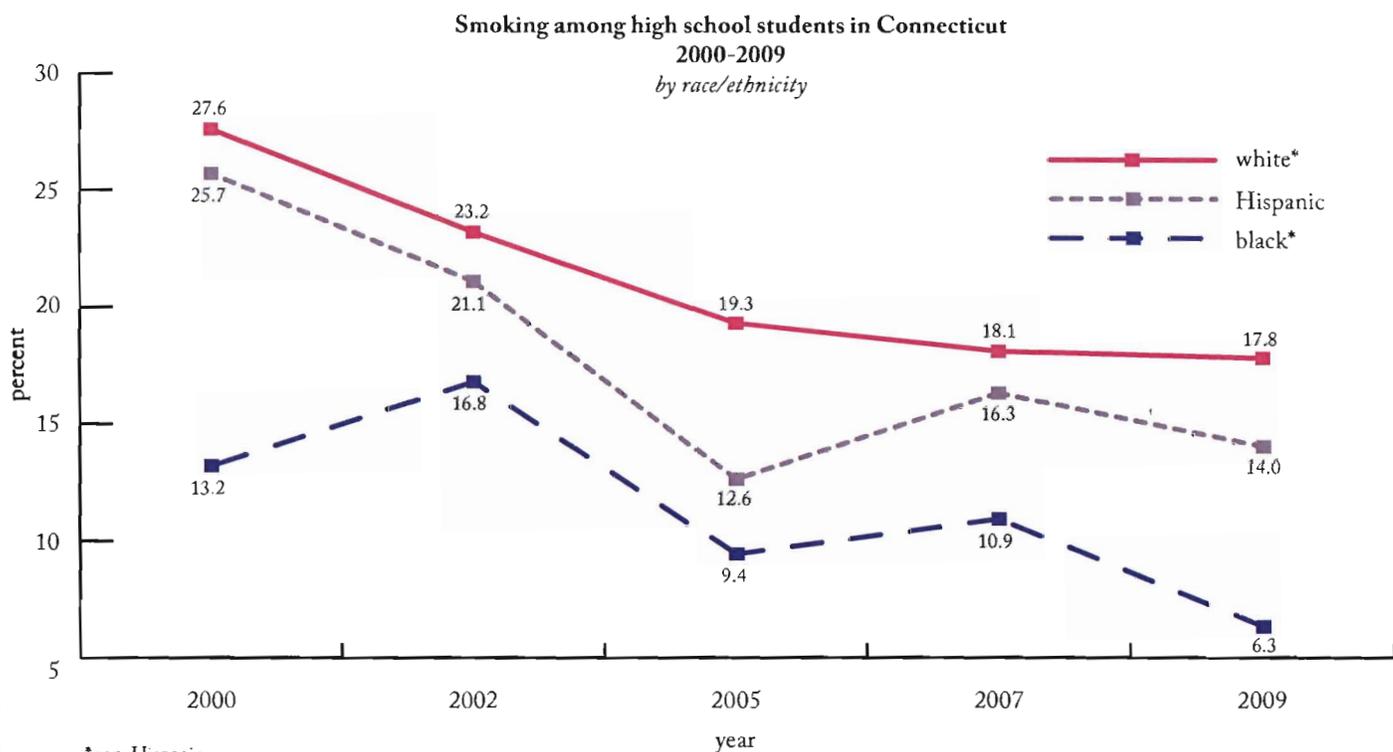
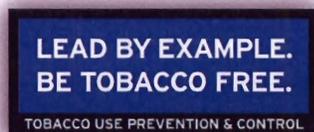


figure 3

Quit Smoking Today!

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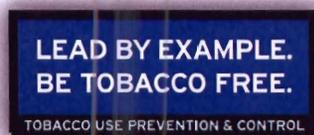


2009 Youth Secondhand Smoke Exposure in Connecticut

Secondhand smoke (SHS), also known as environmental tobacco smoke, is a complex mixture of gases and particles that come from a burning cigarette, cigar, bidi, or pipe tip (sidestream smoke) and exhaled as mainstream smoke. SHS is a known human carcinogen (cancer-causing agent). More than 50 compounds in SHS have been identified as known or reasonably anticipated human carcinogens. SHS contains at least 250 chemicals that are known to be toxic or carcinogenic.

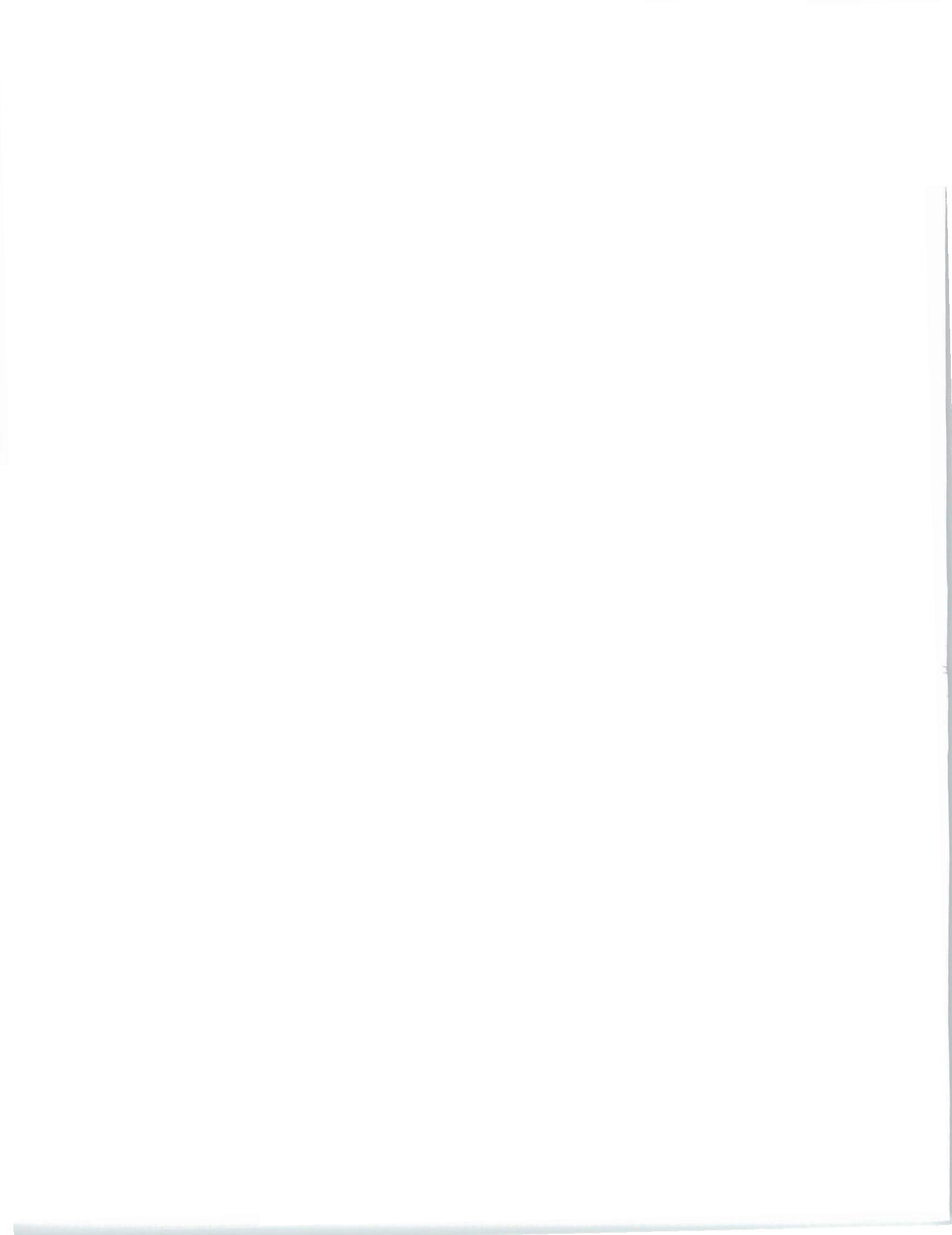
- ➔ On at least one of the past seven days, one-third of middle school students who have never smoked were in a room with someone who was smoking; the rate in high school is 42.6%
- ➔ On at least one of the past seven days, about 21% of both middle and high school students who have never smoked rode in a car with someone who was smoking
- ➔ About 95% of both middle and high school never smokers believe that smoke from other people's cigarettes is **definitely or probably** harmful to them
- ➔ Nearly 30% of middle school and 27% of high school never smokers currently live with someone who smokes cigarettes
- ➔ More than 19% of both middle and high school students say that smoking is allowed at least sometimes or in some places in their homes
- ➔ Approximately 23% of middle school and 29% of high school students report that smoking is sometimes or always allowed inside the vehicle they drive or ride in the most
- ➔ More than 11% of middle school and more than 16% of high school students believe that smoking should be allowed in indoor public places at some times or in some places
- ➔ More than 11% of middle school and more than 20% of high school students think that employers should allow smoking in indoor areas at least sometimes or in some places
- ➔ Among high school students who have a job, 44.3% say that smoking is allowed at least sometimes or in some places where they work
- ➔ Among high school students who have a job and worked in the past seven days, more than 30% say that they breathed the smoke from other people's cigarettes at work at least once in the past week

Source: 2009 Connecticut School Health Survey Youth Tobacco Component



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re-learn habit

Tracking:

Things like driving, stress or just having dinner can be triggers that make you want to smoke. Once you learn your triggers, you can re-learn how to do these things without smoking.

Think about what your triggers might be.

Take a minute to think about what your triggers are. At BecomeAnEX.org you'll see a list of ways to start separating each trigger from its cigarette. You'll learn about how to loosen the "glue" between your triggers and smoking, and you'll do it *before* you quit smoking. It's all part of re-learning life without cigarettes.

Common triggers:

Coffee	A fight with a friend
My jerk-face boss	Going outside
Driving	Friends who smoke
I'm having a bad day	Certain locations
I got up this morning	Finishing a meal
Happy hour	Other triggers
I'm celebrating	
My team lost	
Stress at work	

re-learn addiction

Nicotine is the chemical that makes smokers become addicted to cigarettes. When you inhale, nicotine reaches your brain in less than 10 seconds. It's a lot of nicotine really fast.

When you inhale, nicotine reaches your brain in less than 10 seconds.

When you put out a cigarette, the nicotine level in your blood drops, and your brain sends out signals of withdrawal. This is when you feel a craving for another cigarette. Understanding this cycle and how nicotine works in your body is an important part of re-learning life without cigarettes. EX will help you understand why using medicine is so important and can double your chances of success.

Nicotine level
in blood drops

Nicotine craving
in brain grows

re-learn support

Community:

There's no shame in not being able to quit. Quitting is tough. It can take a few tries. So telling your spouse, your family and even a few key friends is all part of a smart plan.

The right kind of support from those around you is something that's really going to help down the road. So as you re-learn the idea of support, EX will show you how to lean on the people around you. You'll learn different ways to tell folks how they can help, even if it's just to give you a little space. On BecomeAnEX.org we'll also introduce you to other people who are going through the same things and some who can share their successful experiences.

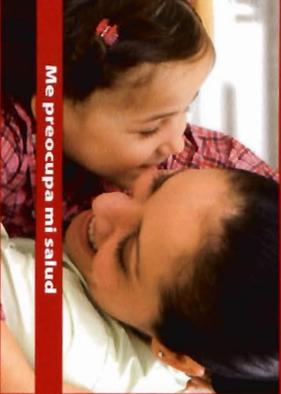
Why is all this important? Because those who get support greatly increase their chances of quitting.



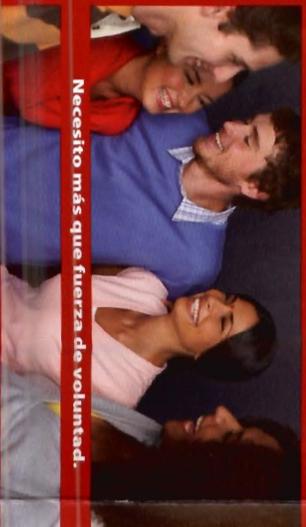
CONNECTICUT

QUITLINE

1-800-QUIT-NOW



Me preocupa mi salud



Necesito más que fuerza de voluntad.

¿Estás pensando en dejar de fumar?

Te damos algunas razones para ayudarte a tomar la decisión:

1. Disfrutar de una vida más larga y saludable
2. Ahorrar dinero. Podrías disfrutarlo en vacaciones familiares o para un auto nuevo.
3. ¡liberarte del humo y el vicio del tabaco!

Tienes muchas opciones... Permítenos ayudarte.

¡Llama hoy! La ayuda es gratis

CONSEJERO PROFESIONAL

All llamar, te atenderá un consejero profesional adiestrado para ayudarte a dejar el hábito de fumar.

PLAN PERSONALIZADO

Tu consejero profesional te diseñará un plan para que logres dejar de fumar.

GUIAS DE AYUDA

Contarás con una serie de guías e información que te serán de mucha ayuda en el proceso de dejar de fumar.

MEDICAMENTOS

¿Te preocupa la ansiedad que pueda provocar dejar el tabaco? Existen métodos de ayuda como parches o chicles de nicotina, entre otros medicamentos. Tu consejero te ayudará a escoger el que mejor te convenga.

REFERENCIAS

Tu consejero también podrá referirte a programas en tu comunidad.



**7 días a la semana
8 a.m. - 3 a.m.**



1-800-QUIT-NOW

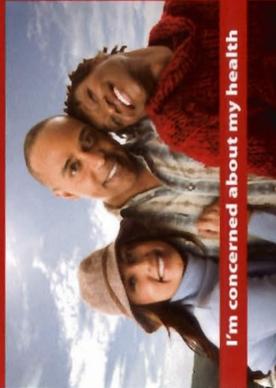
(800-784-8669)



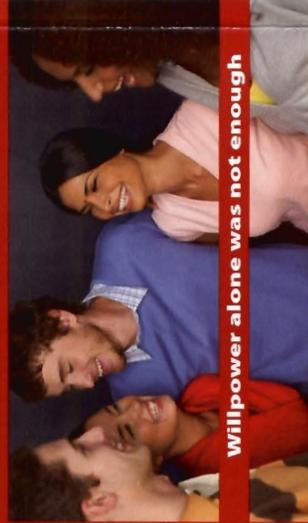
Patrocinado por el Departamento de Salud Pública de Connecticut, con la ayuda de los Centros de Control y Prevención de Enfermedades y de la Sociedad de Cáncer de Connecticut.



**CONNECTICUT
QUITLINE
1-800-QUIT-NOW**



I'm concerned about my health



Willpower alone was not enough

make your quit personal...

THINKING ABOUT QUITTING?

Here are some reasons:

1. You deserve to be free from tobacco!
2. Save money for something else—like a family vacation or a new car.
3. Enjoy a longer healthier life with family and friends.

What are your reasons - Let us help.

FREE HELP IS JUST A PHONE CALL AWAY

QUIT COACH™

When you call, your call will be answered by one of our Quit Coaches who are professionally trained to help you quit tobacco.

PERSONAL QUIT PLAN

With a Quit Coach, a personalized quit plan is created for you to be most successful.

QUIT GUIDES

Quit Guides are full of helpful tips and information to keep you on track.

QUIT MEDICATION

Worried about cravings? Your Quit Coach will help you decide if the nicotine patch, gum or other medication is best for you.

REFERRALS

Your Quit Coach can also refer you to local programs in your community.



**7 days a week
8 a.m. - 3 a.m.**



Funded by the Connecticut Department of Public Health with grants from the Centers for Disease Control & Prevention and the Connecticut Cancer Partnership

1-800-QUIT-NOW
(800-784-8669)