Use of a national quitline and variation in use by smoker characteristics: ITC Project New Zealand

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Abstract

Introduction: We aimed to describe use of a national quitline service and the variation in its use by smoker characteristics (particularly ethnicity and deprivation). The setting was New Zealand (NZ), which takes proactive measures to attract disadvantaged smokers to this service.

Methods: The NZ arm of the International Tobacco Control Policy Evaluation Survey (ITC Project) utilizes the New Zealand Health Survey (a national sample) from which we surveyed adult smokers in two waves (N = 1,376 and N = 923) 1 year apart.

Results: Quitline use in the last 12 months rose from 8.1% (95% CI = 6.3%–9.8%) in Wave 1 to 11.2% (95% CI = 8.4%–14.0%) at Wave 2. Māori (the indigenous people of NZ) were significantly more likely to call the Quitline than were European/other smokers. Relatively higher call rates also occurred among those reporting higher deprivation, financial stress, a past mental health disorder, a past drug-related disorder, and higher psychological distress (Kessler 10-item index). Independent associations in the multivariate analyses of Quitline use were being Māori, reporting financial stress, and ever having been diagnosed with a mental health disorder.

Discussion: This national Quitline service is successfully stimulating disproportionately more calls by Māori smokers and those with some measures of disadvantage. It may therefore be contributing to reducing health inequalities. It appears possible to target quitlines to reach those smokers in greatest need.

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