

## Sample Evaluation Plan

### Indicator 4.1.1

Number of culturally and linguistically appropriate behavior modification-based tobacco cessation services that are available and well utilized in the community

#### **Objective:**

By June 30th, 2009, 120 low-income/high-risk smokers will participate in behavior modification based tobacco cessation services in the community. At least 40% of those participants completing the intervention will quit smoking and of those who quit smoking, 40% will be smoke-free at the three month follow-up.

#### **Plan Type:**

Individual Behavior Change

#### **Study Design:**

Experimental

# Objective Activity - Objective Overview

## View Objective

[Return to Objective Index](#) | [Delete Objective](#)

### OBJECTIVE OVERVIEW EDIT

**Objective ID:** Not Yet Assigned

**Completion Date:** June 30, 2009

**Objective:** 120 low-income/high-risk smokers will participate in behavior modification based tobacco cessation services in the community. At least 40% of those participants completing the intervention will quit smoking and of those who quit smoking, 40% will continue to be smoke-free at a three month follow-up.

**Primary Priority Area:** (4) Promote Tobacco Cessation Services

**Is this a primary objective?** Yes

**Target Audience:** Audience Group

- Adults 18 years and older

**General Population Groups**

- Non-specific/General Audience

**Specific Ethnic Population Groups**

### INDICATOR(S) EDIT

### INTERVENTION TOPIC(S) EDIT

### INTERVENTION ACTIVITY PLAN ADD

### EVALUATION DESIGN

#### Overall Design EDIT

**Plan type:**

Individual Behavior Change

#### Collection of Outcome Data Design EDIT

**What specific outcome is being measured?**

the percentage of smokers who remain smoke-free three months after completing the intervention.

**What type of study design will be used?**

Experimental

**Number of Intervention Groups:**

4

**Number of Control Groups:**

4

**Intact Group:**

Yes

**Measurements:**

Pre- and Post-test

**Describe your study design:**

120 daily smokers will be recruited to participate in an intervention. The study will be an experimental design and smokers will be randomly assigned to either one of 4 control groups or one of 4 intervention groups. Assessments will be made about their smoking history, quitting history, demographics, and other factors specific to low-income smokers as identified by focus groups and previous research in the literature. After the intervention and assessment, those in the control will have an opportunity to participate in the intervention classes. This design is called a 'switching replication' design.

### EVALUATION ACTIVITY PLAN

Add Collection of **Process Data** Activity

[View Evaluation Activities in Applicant Determined Order](#) | [Re-order Process Data Activities](#)

Activity	ID	Action
<b>Collection of Outcome Data</b>		
Collection of Outcome Data Activity		<a href="#">View</a>
<b>Collection of Process Data</b>		
<b>Focus Group</b>		
Low-income smokers-to ascertain known barriers to (e.g. transportation, childcare, attitudes/beliefs...		<a href="#">View</a>
Community groups-to ascertain known barriers (e.g. transportation, child care, attitudes/beliefs abo...		<a href="#">View</a>

# Outcome Data Activity

## Collection of Outcome Data Activity

Edit Activity | Return to Objective View

**Objective:** By June 30, 2009, 120 low-income/high-risk smokers will participate in behavior modification based tobacco cessation services in the community. At least 40% of those participants completing the intervention will quit smoking and of those who quit smoking, 40% will continue to be smoke-free at a three month follow-up.

Remember to provide Tracking Measure and Responsible Party information in each section below!

### DATA COLLECTION METHODS

#### What instrument(s) will be used to collect outcome data for this objective?

The assessment of smoking history, quitting history, demographics, and other factors related to low-income smokers will be collected before and after the intervention via a mailed survey. Some questions will be pulled from surveys used by other cessation programs.

#### Describe the activities and resources to be used to design the above instruments:

We will use existing surveys from other cessation programs and request the assistance of the TC Evaluation Center to pull surveys from their repository that may have questions appropriate for our survey and experimental design.

#### Start period for instrument and data collection protocol development:

07/07-12/07

#### Completion period for instrument and data collection protocol development:

07/07-12/07

Tracking Measures			Add
Tracking Measure	Submit	Actions	
survey instrument	Yes	Edit   Delete	

Responsible Parties			Add
Responsible Party	Budget Type	Action	
Evaluation Consultant	Budgeted	Delete	
Program Coordinator	Budgeted	Delete	

#### Deliverable Percentage:

.50%

#### Copyright:

No

#### Which is the primary method in which the outcome data will be collected?

Mail survey

#### What is the primary source where the outcome data will be collected?

Mail

#### How will the sample be selected?

Purposive sampling will be conducted to recruit low-income smokers into the cessation program. Participants will be recruited or referred from area hospitals/clinics or from those who answered ads placed in various community publications and resource centers. Smokers will be screened and only daily smokers (CDC definition) will be eligible for inclusion in the intervention.

#### How many will be in the sample and why?

60 participants will be recruited for the control group and 60 for the intervention group. Participants will have the opportunity to switch from the control group to the intervention group after the first phase.

### TIMELINES FOR DATA COLLECTION

#### When will the baseline (pre-test) data for the objective be collected?

07/08-12/08

#### When will the follow-up (post-test) data for the objective be collected?

01/09-06/09

Tracking Measures			Add
Tracking Measure	Submit	Actions	
Baseline data analysis report	Yes	Edit   Delete	
tobacco use baseline data	Yes	Edit   Delete	

Responsible Parties			Add
Responsible Party	Budget Type	Action	
Evaluation Consultant	Budgeted	Delete	
Project Director	Budgeted	Delete	



## Process Data Activity - Focus Group

### View Collection of Process Data Activity

[Edit Activity](#) | [Delete Activity](#) | [Return to Objective View](#)

Remember to provide Tracking Measures and Responsible Party information below!

**Objective:**

By June 30, 2009, 120 low-income/high-risk smokers will participate in behavior modification based tobacco cessation services in the community. At least 40% of those participants completing the intervention will quit smoking and of those who quit smoking, 40% will continue to be smoke-free at a three month follow-up.

**Activity Type:**

Focus Group

**What is the discussion topic(s) or purpose for this focus group?**

Community groups-to ascertain known barriers (e.g. transportation, child care, attitudes/beliefs about tobacco use) to the recruitment and retention of smokers for cessation classes in the low-income population.

**How many times will this focus group be conducted?**

1

**What are the criteria to select the participants or who will be in the group(s)?**

community members such as community center staff, cessation experts, and medical clinic personnel.

**How many participants will be in this focus group?**

10

**How will the results be analyzed and interpreted?**

A content analysis will be conducted on this qualitative data to characterize these barriers and create appropriate responses (e.g. transportation to and from cessation clinic or recruitment strategies/materials).

**Progress report period(s) in which the focus group will be conducted:**

07/07-12/07

**Progress report period(s) in which the focus group results will be analyzed and disseminated:**

01/08-06/08

**Copyright:**

No

**Deliverable Percentage:**

.50%

**TRACKING MEASURES** **ADD**

Tracking Measure	Submit	Actions
focus group questions and protocols	Yes	Edit   Delete
focus group result summary	Yes	Edit   Delete

**RESPONSIBLE PARTIES** **ADD**

Responsible Party	Budget Type	Action
Evaluation Consultant	Budgeted	Delete
Program Coordinator	Budgeted	Delete

## Process Data Activity - Focus Group

### View Collection of Process Data Activity

[Edit Activity](#) | [Delete Activity](#) | [Return to Objective View](#)

Remember to provide Tracking Measures and Responsible Party information below!

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Focus Group

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Low-income smokers-to ascertain known barriers to (e.g. transportation, childcare, attitudes/beliefs about tobacco use) to the recruitment and retention smokers for cessation classes.

**How many times will this focus group be conducted?**

1

**What are the criteria to select the participants or who will be in the group(s)?**

low-income smokers

**How many participants will be in this focus group?**

8

**How will the results be analyzed and interpreted?**

A content analysis will be conducted on this qualitative data to characterize these barriers and create appropriate responses (e.g. transportation to and from cessation clinic or recruitment strategies/materials).

**Progress report period(s) in which the focus group will be conducted:**

07/07-12/07

**Progress report period(s) in which the focus group results will be analyzed and disseminated:**

07/07-12/07

01/08-06/08

**Copyright:**

No

**Deliverable Percentage:**

.50%

TRACKING MEASURES			ADD
Tracking Measure	Submit	Actions	
focus group questions and protocols	Yes	Edit   Delete	
focus group result summary	Yes	Edit   Delete	
RESPONSIBLE PARTIES			ADD
Responsible Party	Budget Type	Action	
Evaluation Consultant	Budgeted	Delete	
Program Coordinator	Budgeted	Delete	

# Evaluation Reporting

## View Evaluation Reporting

[Edit Evaluation Reporting](#) | [Return to View Objective](#)

Remember to provide **Tracking Measure** and **Responsible Party** information below!

**Objective:** By June 30, 2009, 120 low-income/high-risk smokers will participate in behavior modification based tobacco cessation services in the community. At least 40% of those participants completing the intervention will quit smoking and of those who quit smoking, 40% will continue to be smoke-free at a three month follow-up.

**Primary Objective:** Yes

### What type of analysis will be done?

a content analysis of the focus groups will be performed to identify potential challenges in the recruitment and retention of low-income smokers. This will allow us to create appropriate responses (e.g. transportation to and from cessation clinic or recruitment strategies) prior to the initial recruitment of participants. In addition, it will be important to compare the intervention (in-person cessation class) and control group conditions. A series of analyses that can be used with repeated-measures data will be employed, including Analysis of Variance (ANOVA), chi-square, and others to determine whether there are significant differences between the intervention and control groups and/or between the baseline and post-intervention measurements. We will also use lifetable analysis to deal with program dropout, if any. The type of analysis that is conducted will depend on whether the outcome variable of interest is continuous or dichotomous. In addition, the characteristics that are associated with a smoker being more or less likely to quit will be explored with the use of logistic regression (quitting as a dichotomous outcome) that will allow us to control for factors known to be associated with a greater likelihood to quit other than the cessation class (e.g. demographic factors such as a smoker's age).

### How will the results be disseminated?

We will post our lessons learned on PARTNERS and write and submit an abstract to meetings such as the Project Directors Meeting (PDM) that summarizes any unique findings. In addition, given the challenges with working with this population, the results may warrant a manuscript or brief paper submitted to an addiction journal, in order to share strategies with others in the cessation field.

### During which Progress Report period(s) will TCS receive interim evaluation report(s) describing the results of data analysis?

07/09-12/09

### During what Progress Report period will TCS receive the Final or Brief Evaluation Report describing the results of data analysis?

01/10 - 06/10

TRACKING MEASURES			ADD
Tracking Measure	Submit	Actions	
Final Evaluation Report	Yes	Edit   Delete	
tobacco use final data	Yes	Edit   Delete	

RESPONSIBLE PARTIES			ADD
Responsible Party	Budget Type	Action	
Evaluation Consultant	Budgeted	Delete	
Project Director	Budgeted	Delete	

### Deliverable percentage:

3.50 %

### What if any limitations or challenges do you foresee with the evaluation?

There will likely be a number of unique challenges working with this population. As with any cessation class, the recruitment and retention of smokers is a challenge. If the drop-out rate is too high, it could be difficult to calculate stable quit rates. In addition, follow-up may be difficult with this population (some individuals may not have phones), so unique methods will need to be employed, including establishing a centralized location for classes and distributing materials. Surveys that are sent back via mail will also be used, as will methods of contacting individuals other than by telephone.

## Evaluation Narrative Summary:

According to community surveys that have been previously performed in the community and research on the demographics of smokers by socioeconomic status in our community, including calls to the Smokers' Helpline, it was clear to coalition members that low-income individuals were not only at the highest risk of smoking, but that they were the least likely to obtain services to help them quit. As a result, the initial needs assessment identified cessation services in low-income groups are a high priority for our community. The overall CX indicator rating was 2.0.

Prior to smoker recruitment, two focus groups will be conducted - one among low-income smokers and another with members from a diverse collection of community agencies, including community centers, cessation experts, and medical clinic personnel. The focus groups are intended to ascertain known barriers (e.g. transportation, child care, attitudes/beliefs about tobacco use) to the recruitment and retention of smokers for cessation classes in this population and to create appropriate responses to these barriers. A content analysis will be conducted on this qualitative data to characterize these barriers and create appropriate responses (e.g. transportation to and from cessation clinic or recruitment strategies/materials).

Per the objective, the main purpose of the evaluation is to document that at least 40 percent of the participants who complete the intervention will quit smoking and that of those who quit, 40 percent will remain smoke-free at the three month follow-up assessments. Given the anticipated challenges with the recruitment and retention of low-income smokers for cessation classes, a formal class structure approach (intervention group) will be tested against an approach that relies on self-help materials and limited follow-up (control group). One hundred and twenty daily smokers will be recruited to participate in the intervention. Following an experimental design approach, these smokers will be randomized to one of the two conditions described above. There will be a total of eight classes (four intervention, four control) created, with 15 participants being randomized to each. This experimental design comparing participants in the control group with those in the intervention group allows us to determine whether the structured classroom approach (the intervention) makes a statistically significant difference in the percentage of former smokers who are able to remain smoke free three months after the cessation program ends.

After respondents are randomly assigned to their group, all eight groups will undergo an assessment that measures among other things, quitting history, smoking status, demographic characteristics, and other factors that may be specific to low-income smokers as identified by the focus groups and previous research findings from the literature. The four intervention groups will then participate in the cessation classes. Participants in the four control groups will receive self-help materials. Quitting status will be ascertained at the end of the class and at a three month follow-up. The assessment will take place in both the intervention and control groups. The longitudinal surveys will be mailed, with extensive follow-up. After the assessment, participants in the four control groups will have the opportunity to participate in the identical classes. Smoking/quitting status assessments will be conducted prior to the classes and again at the three month follow-up to be consistent with the procedure done in the first phase of the study with the intervention group. This type of experimental design is called a "switching replications" design. This approach allows for the replication of findings from the structured cessation classes in both phases of the study, which will strengthen our confidence in the evaluation findings and give all participants an opportunity to experience the more rigorous educational approach.



As described above, a content analysis of the focus groups will be performed to identify potential challenges in the recruitment and retention of low-income smokers. This will allow us to create appropriate responses (e.g. transportation to and from cessation clinic or recruitment strategies) prior to the initial recruitment of participants. In addition, it will be important to compare the intervention (in-person cessation class) and control group conditions. A series of analyses that can be used with repeated-measures data will be employed, including Analysis of Variance (ANOVA), chi-square, and others to determine whether there are significant differences between the intervention and control groups and/or between the baseline and post-intervention measurements. We will also use lifetable analysis to deal with program dropout, if any. The type of analysis that is conducted will depend on whether the outcome variable of interest is continuous or dichotomous. In addition, the characteristics that are associated with a smoker being more or less likely to quit will be explored with the use of logistic regression (quitting as a dichotomous outcome) that will allow us to control for factors known to be associated with a greater likelihood to quit other than the cessation class (e.g. demographic factors such as a smoker's age).

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