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Group Works to Redesign Tobacco-Cessation Products and Services to Appeal to Consumers

Designing innovations in tobacco-cessation products and services to boost treatment use and national quit rates

SUMMARY

Physicians and public health practitioners have traditionally viewed smokers as *patients* who need to be prescribed treatments and told how to quit. Yet quit rates have remained stubbornly low—especially among low-income and underserved racial/ethnic populations.

In 2005 tobacco control leaders formed the Consumer Demand Roundtable—a project of the National Tobacco Cessation Collaborative, both led by the Academy for Educational Development—to shift the field toward a different approach: seeing smokers instead as *consumers* of cessation products and services. The goal was to boost U.S. quit rates significantly, especially among low-income smokers and racial/ethnic minorities, by making treatments for smoking cessation more appealing and consumer-friendly.

From 2006 to 2010 the academy used five grants from the Robert Wood Johnson Foundation (RWJF) to build on the roundtable's work and fulfill that goal. The projects included engaging IDEO—the global design consulting firm—to help tobacco-control groups redesign their programs and creating tools to spur other such organizations to revamp their programs based on the consumer demand approach.

The grants further enabled the academy to publish research and promote findings on the value of that approach to smoking cessation and to create consumer-friendly information for smokers on treatments and services for quitting. A sixth grant funded Barker Bi-Coastal Health Consultants in Calabasas, Calif., and Gutman Research Associates in Cranbury, N.J., to assess the roundtable's impact on the tobacco-control field.

Key Results

Project staff cited the following results:

- Three public health organizations worked with IDEO to reconfigure their tobacco cessation products and services based on consumer demand principles.
- The Academy for Educational Development and IDEO published *Consumer Demand Design Principles: 8 IDEO Design Principles for Redesigning Tobacco Cessation Products and Services*, available online; and *Designing for Innovation: A Toolkit for Creating Solutions to Build Consumer Demand for Tobacco Cessation Products and Services*, also available online.
- Tobacco-control leaders authored some 21 articles and commentaries in "Increasing Tobacco Cessation in America: A Consumer Demand Perspective"—a supplement to the March 2010 issue of the *American Journal of Preventive Medicine*. Abstracts of articles are available online.
- In 2010 academy staff used consumer-friendliness concepts to create a *Consumer Reports*–style card targeted at smokers that rates the effectiveness of methods designed to help them stop smoking (available online toward the end of 2010).

Key Findings

In the March 2010 supplement to the *American Journal of Preventive Medicine*, researchers from Barker Bi-Coastal Health Consultants and Gutman Research Consultants reported on the impact of the Consumer Demand Roundtable:

- "The Consumer Demand Roundtable appears to have succeeded—despite its limited funding and duration—as a 'think tank' in generating new ways of thinking about building consumer demand for tobacco treatment.…That is, the [roundtable] helped participants recognize the importance of placing consumers in the forefront, and viewing quitting as a journey, not a one-time event."
- "The ultimate impact of the [roundtable] will depend on the continued testing and refinement of its ideas and products, and continued leadership and support for promising strategies and innovations.…As the [roundtable] made clear for smokers' use of proven treatments, 'if you build it, they will come' does not always apply."
- A November 2010 report released by the U.S. Department of Health and Human Services (HHS), *Ending the Tobacco Epidemic*, relied substantially on the recommendations of the Consumer Demand Roundtable, and specifically on an article published in the *American Journal of Preventive Medicine* March 2010 Supplement, "Reaching Healthy People 2010 by 2013: A SimSmoke Simulation," by Levy DT et. al.

Funding

RWJF awarded six grants totaling $723,524 from 2006 to 2010.

CONTEXT

More than 45 million Americans smoke—some 20 percent of the U.S. adult population. A high percentage of these smokers are low-income Americans and racial or ethnic minorities.

Although 70 percent of smokers say they want to quit, only 20 percent to 30 percent use evidence-based treatments that have been shown to more than double their chances of quitting successfully. Tobacco-control experts speculate that one barrier is that proven cessation products and services are not "packaged" in a way that attracts the average smoker.

"For decades the public health community has seen smokers as 'patients' who are prescribed treatments and told how to quit," write Cathy Backinger and co-authors in "Building Consumer Demand for Tobacco-Cessation Products and Services" (*American Journal of Preventive Medicine*, Supplement, March 2010). "With this view, treatments only have to be effective, but not necessarily appealing. But in today's consumer culture, smokers have many options, both proven and unproven.

"Viewing smokers and quitters as consumers," the authors continue, "makes it clear that proven treatments must not only be effective, but also engaging and able to produce a positive consumer experience."

The Consumer Demand Roundtable

In December 2005, February 2006 and June 2006, the Consumer Demand Roundtable convened some 40 leading tobacco cessation funders, researchers, service providers, policy advocates, product designers and marketing experts to:

- Spur new ways of thinking about boosting demand for proven cessation products and services among all smokers.
- Identify and catalyze innovations in product design and promotion, funding, practice and policy to improve the use of treatments and their impact on public health significantly.

Participants identified six core strategies for building demand for evidence-based tobacco cessation products and services:

- View smokers as consumers and take a fresh look at quitting from their perspective.
- Redesign evidence-based products and services to meet consumers' needs and wants better.
- Market and promote cessation products and services in ways that reach smokers—especially underserved populations—where they are.

- Seize policy changes as opportunities for "breakthrough" increases in treatment use and quit rates.
- Systematically measure, track and report smoking quit rates and treatment use—and their drivers and benefits—to identify opportunities and successes.
- Combine and integrate as many of these strategies as possible for maximum impact.

See Innovations in Building Consumer Demand for Tobacco-Cessation Products and Services for more on these strategies, and Other Funding for key funders of the roundtable.

RWJF's Interest in the Area

RWJF funded these Consumer Demand Roundtable meetings and reports and wanted to build on the conclusions and recommendations.

The project described here was a way to leverage RWJF's and other major funders' investments in the roundtable and harvest the Tobacco team's contributions in the past decade: advancing policies that motivate quitting and increase treatment funding/access.

Working with IDEO, a consumer product design firm, was the next step in this process. IDEO had worked with a wide range of industries—including health care, consumer products, software, automotive, media and organizational design—to change the way companies innovate and create better consumer experiences. The IDEO process has been applied in diverse socioeconomic conditions:

- In Africa, IDEO designed a water pump using only locally available materials, which enabled African farmers to grow crops for trade.
- In the United States, IDEO designed education projects serving poor and minority populations.

IDEO worked with the RWJF Nursing team to transform inpatient environments to better meet the health care and interaction needs of patients and nurses.

For more information on where the field was at the time of this project, see the introduction to the supplement to the *American Journal of Preventive Medicine* by C. Tracy Orleans, Ph.D., senior scientist at RWJF.

The Projects

Redesigning Traditional Cessation Approaches: Pilot Tests

This project aimed to improve the appeal, delivery and use of proven tobacco cessation treatments and services through work with a nontraditional partner: IDEO (ID# 057171, August 2006 to January 2008).

Academy staff and IDEO invited organizations that aim to reduce tobacco use to apply for assistance in using one or more of IDEO's tobacco-control principles to improve their products and services:

- Allow smokers to **kick the tires** by giving them an opportunity to test or experiment with a service/product before buying into it.
- **Lower the bar** to make the initial quit attempt less costly, both psychologically and financially. This includes reducing the cost of products for quitters and breaking the process of quitting into manageable steps.
- **Design aesthetically pleasing products, tools and services** that create a positive and compelling consumer experience for each smoker trying to quit.
- **Facilitate transitions** to ensure that smokers receive appropriate tools, as well as professional and social support, as they move through the stages of smoking cessation.
- **Make progress tangible** to allow smokers to see and celebrate small steps that enable them to advance toward their overall goal.
- **Foster community** to link smokers and help them in their journey toward sustained smoking cessation.
- **Connect the dots** to link products, services and delivery systems and providers so smokers have a web of support and assistance. This principle includes linking products with promotions and policies that catalyze their use.
- **Connect to the rest of smokers' lives** by understanding that quitting is a lifestyle decision—not exclusively a health decision—that affects smokers in many ways.

Nine organizations submitted proposals and a panel selected three to receive IDEO consulting services:

- The Massachusetts Department of Health.
- The University of Arizona's Helper's Program, which provides cessation tools and online resources for friends and family members of smokers. According to project staff, these "health influencers" are an often-untapped resource for boosting consumer demand for cessation and reaching underserved groups.
- The Alaska Native Tribal Health Consortium, which aimed to spur demand for tobacco cessation products and services at the Alaska Native Medical Center in Anchorage.

Project staff from IDEO and the Academy for Educational Development made site visits in March and April 2006. After its initial meeting, the Massachusetts Department of Health decided it could not participate, as the six-to-nine-month IDEO design process

would not give the state health commissioner enough time to approve the resulting products, as the state required.

The other two organizations spent several days with IDEO staff outlining the "cessation journey," brainstorming consumer-focused solutions, role-playing and developing prototype tools and services.

In a separate development, the Los Angeles County Department of Health asked the academy and IDEO to help create LA QUITS, a program that aimed to get 1 million smokers in Los Angeles County to quit smoking in a year. Toward that end, staff at the academy, IDEO and the department held a one-day meeting with pharmacies, including Target, CVS and Long Drugs, to identify ways to improve their services to smokers during the LA QUITS campaign.

Conference on Consumer Perspective on Tobacco Cessation

This grant supported two sessions at Innovations in Building Consumer Demand for Tobacco Cessation Products and Services—a two-day national conference organized by the Consumer Demand Roundtable in Washington in May 2007, attended by more than 100 leaders in the field (see the text box for more on the conference).

What Does It Mean to View Smokers as Consumers?

Participants explored this question in depth at the May 2007 conference. Kay Kahler Vose, M.A., roundtable planning committee member and marketing expert, presented a summary of what the marketing firm, Porter-Novelli, showed to be key characteristics of smokers in its 2006 Styles Database:

- *Smokers are high sensation seekers.*
- *They are more interested in living now than in living longer.*
- *Only 32 percent of smokers say that they do everything they can to stay healthy, versus 52 percent of nonsmokers.*
- *Health is not as important to smokers as it is to nonsmokers, but appearance is. Vose relates this finding to smokers' perception of themselves as more adventurous and youthful than nonsmokers, and more trendsetting.*

The first session was planned to showcase innovations in tobacco cessation based on IDEO's design principles.

The second session was planned to engage Just Ask a Woman to conduct a live conversation with women smokers on their beliefs about and perceptions of quitting, as well as treatments for quitting. Just Ask a Woman is a New York marketing firm that interviews women on particular topics and uses the findings to improve products and services for women.

Disseminating the Consumer Perspective on Tobacco Cessation: The Supplement

This project aimed to expand the impact of consumer demand principles on the tobacco-control field by publishing a supplement to the *American Journal of Preventive Medicine* (ID# 063362, November 2007 to October 2008).

Designing Innovations in Tobacco-Cessation Products and Services: The Toolkit

This project worked to create a low-cost "innovation kit" outlining IDEO's consumer-based approach to tobacco control (ID# 063363, November 2007 to October 2008). Project staff pilot-tested the toolkit in two venues:

- A meeting of Maryland county health commissioners in Baltimore in January 2009
- The Arab Community Center for Economic and Social Services in Dearborn, Mich., in collaboration with the Michigan Department of Community Health

What Does It Mean to View Smokers as Consumers? (continued):

- *Smokers are less likely to attend church, and more likely to follow alternative music, read edgy magazines, go to bars and nightclubs, gamble, play cards and buy lottery tickets.*
- *They often go to the Internet for health information. Vose noted the difficulty of finding accurate information about smoking cessation on the Internet.*

The key message Vose found in these data is that smoking is intimately tied up with smokers' self-perception. Any marketing or outreach around cessation needs to help smokers understand that giving up smoking does not mean giving up who they are.

Initial Assessment of the Consumer Demand Roundtable

Barker Bi-Coastal Health Consultants (Calabasas, Calif.) and Gutman Research Associates (Cranbury, N.J.) used this grant to assess the work of the Consumer Demand Roundtable (ID# 063733, March to September 2008). The researchers conducted in-depth telephone interviews in May and June 2008 with 30 tobacco cessation leaders who had participated in at least one roundtable meeting. The consultants also reviewed the roundtable's products and its Web-based surveys of meeting participants.

Innovative Tools and Messages for Smokers

Project staff aimed to translate the 2008 Clinical Practice Guidelines for Effective Tobacco Cessation from the U.S. Public Health Service into a form that would engage smokers (ID# 065887, April 2009 through June 2010). The goals were to inform smokers of the success rates of various treatments, expand their use of proven treatments and alert them to policies and resources supporting tobacco cessation.

To fulfill those goals, academy staff decided to apply "consumer-friendliness" concepts to create a *Consumer Reports*–style card, targeted at smokers, that rates the effectiveness of smoking cessation methods. Key members of the panel who developed the clinical

practice guidelines and members of the National Tobacco Cessation Collaborative reviewed the card and related visuals, and panel members approved the final version.

Project staff conducted two rounds of consumer testing of the card from April to June 2010. Each round included three focus groups with three participants each, and one group of lower-literacy smokers. In the first round, project staff solicited feedback on several versions of the card. In the second round, project staff used feedback from the focus groups to finalize the card. UserWorks, a market research firm in Silver Spring, Md., assisted with the testing under a subcontract.

Other Funding

The Consumer Demand Roundtable and the National Tobacco Cessation Collaborative are co-funded by RWJF, the American Cancer Society, the American Legacy Foundation, the Centers for Disease Control and Prevention, the National Cancer Institute and the National Institute on Drug Abuse.

These groups helped fund the national conference in May 2007 and outreach activities of the roundtable and the collaborative. For example, the National Institutes of Health and the American Legacy Foundation contributed funding for the March 2010 supplement.

RESULTS

Project staff cited the following results in reports to RWJF:

Consumer-Oriented Redesign of Products and Services

- **Three public health organizations reconfigured their tobacco-cessation products and services based on consumer demand principles.**
  - The Helpers Program in Arizona worked with IDEO to create tools to support a "prototype journey" for cessation "helpers." These tools included cards referring helpers to training; a guide on starting a conversation on quitting with a smoker; sample quit plans; online forums; and a graduation kit and certification for completed training.
  - The Anchorage Health Center chose smokers who came to the center for surgery or another procedure as their target audience. Applying IDEO principles, the team created interventions designed to support quitting during referral and diagnosis, before and during the procedure and during recovery. The interventions were designed to be respectful and relevant to patients living in remote communities and those who face strong cultural barriers to quitting.
  - The Los Angeles Department of Health presented ideas for enlisting pharmacies in cessation efforts at a summit meeting for LA QUITS in August 2006 and incorporated several ideas into the campaign. For example, CVS set up prototype

"quitters' corners" in pharmacies in the Los Angeles area, staffed by summer interns.

- **Incorporating what it learned through the redesign projects, IDEO reworked its design principles and published *Consumer Demand Design Principles: 8 IDEO Design Principles for Redesigning Tobacco Cessation Products and Services*, available online.**

The May 2007 National Conference

- **Project staff presented perspectives on applying consumer demand principles at the Innovations in Building Consumer Demand for Tobacco Cessation Products and Services conference in Washington:**
  - Peter Coughlan, Ph.D., of IDEO; Myra L. Muramoto, M.D., M.P.H., of the University of Arizona; and Caroline Cremo Renner, M.P.H., of the Alaska Native Tribal Health Consortium in Anchorage described how they applied consumer demand principles to quit services. See the slide presentation.
  - Just Ask a Woman hosted a panel in which low-income women smokers gave their views of quitting and cessation products and services. The panelists' comments included:
    - I smoke because ... "I like it." "It's my only outlet for stress."
    - When I think about quitting ... "I get nervous." "I think about weight gain." "I'd get stress, I don't know what else I'd do."
    - What do you do when you can't smoke? "As soon as I finish my meal and the check is paid, I'm out there digging in my purse for a cigarette." "I try not to visit places that won't allow me to smoke, so I stay home a lot."
    - Tried to quit last year using Wellbutrin. "I couldn't keep at it, I felt like a failure."
    - "I quit for seven years and started up again two and a half months ago when my mother got lung cancer. I've quit now for two days and I'm ready to slap someone."
    - Does your doctor know you smoke? "I lie."
    - "Cigarettes are $5 and [nicotine replacement therapy] is $45. It's too expensive, and health insurance won't pay. They'll pay a thousand million dollars to suck out your lungs and give you chemo, but they won't give you what you need to stop."

    The women painted a compelling picture of the experience of trying to quit smoking without help, project staff reported:

- Most participants lacked knowledge of effective products and services that could help them quit.
- Some had used medications that are effective, but often without counseling or guidance on how to do so correctly.
- Overall, the women reported a pervasive sense of demoralization. Most had tried to quit and failed and seemed to have given up on the value of treatment and their own capacity to quit.

A conference report is available online.

The *American Journal of Preventive Medicine* Supplement

- **Tobacco-cessation leaders authored some 21 articles and commentaries in "Increasing Tobacco Cessation in America: A Consumer Demand Perspective"—a supplement to the March 2010 issue.** (See the Bibliography for a complete list.) Abstract of all the articles are available on *rwjf.org*. The articles included:

  — "Reaching Healthy People 2010 by 2013: A SimSmoke Simulation," by David T. Levy, Patricia L. Mabry, Amanda L. Graham, C. Tracy Orleans and David B. Abrams argues for stronger efforts to increase cessation attempts. See abstract.

  — "Creating a Perfect Storm to Increase Consumer Demand for Wisconsin's Tobacco Quitline," by Megan A. Sheffer and others, which describes a media effort to enhance knowledge, availability and services of a state quitline. The media campaign reached nearly 3 percent of adult Wisconsin smokers during the first three months of 2008, and it spurred a record 27,000 calls to the quitline. See abstract.

  — "Increasing Consumer Demand for Tobacco Treatments: Ten Design Recommendations for Clinicians and Healthcare Systems," by S. S. Woods and C. R. Jaén, which offers a roadmap for clinicians and clinical systems aiming to provide tobacco treatments more effectively. See abstract.

  — "A Call for ACTTION: Increasing Access to Tobacco-Use Treatment in Our Nation," by C. G. Husten, which highlights the fact that the United States is not fulfilling two key consumer demand principles: that tobacco users know about effective treatments and that they have access to them. The shortfall is greatest among low-income and blue-collar populations, in which smoking rates remain highest. See abstract.

  "Government is swayed by peer-reviewed articles [it] can base decisions on," observed Project Director Todd Phillips. "That's why we did the supplement." All articles are available for free download from the National Tobacco Cessation Collaborative.

The Toolkit

- **The Academy for Educational Development and IDEO published "Designing for Innovation: A Toolkit for Creating Innovative Solutions to Build Consumer Demand for Tobacco-Cessation Products and Services."** The toolkit (available online) walks users through five stages of redesigning products and services:
  - ***Observe:*** Watch consumers' behavior to come up with new ideas. Close observation can provide clues about smokers' relationship to tobacco, which organizations can use to link smokers to cessation products and services.
  - ***Look for patterns:*** After observing people smoking or trying to quit, have them tell stories about their experiences and start to see patterns—which indicate that observers have stumbled onto an opportunity area.
  - ***Brainstorm:*** After discovering the opportunity area, use brainstorming to break free of the usual ways of thinking about a problem.
  - ***Prototype:*** Make an idea tangible so people can experience it. Prototyping starts conversations about what people like and don't like, and what they need and don't need.
  - ***Feedback:*** Ask smokers, their helpers or others to assess the prototype.
- **Practitioners who tested the toolkit found it helpful.** In a June 2009 report, for example, the Arab Community Center in Dearborn, Mich., noted that the toolkit provided a "scientific and reliable approach" and a "new perspective and ideas" in applying the 5As (the intervention in which clinicians: Ask about tobacco use; Advise them to quit; Assess their willingness to make a quit attempt; Assist them in making a quit plan; and Arrange for follow-up).

  Because of this positive feedback, the Michigan Department of Community Health agreed to share the approach with other local agencies serving communities of color.

The Card for Smokers

- **In 2010 the Academy for Educational Development produced "What Works? A Guide to Quit Smoking Methods," a card that translates the 2008 clinical practice guidelines into a consumer-friendly format.** This is the first tool of its type designed to enable smokers to make informed treatment decisions. The card:
  - Rates the effectiveness and cost of evidence-based and nonevidence-based options for helping smokers quit
  - Provides information on how to gain access to the resources
  - Includes photos and quotes for visual appeal, and targets low-literacy smokers

— Can be adapted and distributed by health care providers, pharmacies, smoking quitlines and other channels

— Links users to other web-based resources

— Can be easily updated as new evidence-based guidelines are released

Project staff printed an initial 1,000 copies for distribution in 2010. See Afterward for details.

- **Feedback during testing was consistently positive.** Participants found the card informative and easy to understand and reported that it motivated them to try a new cessation method, according to the project director.

FINDINGS

In "An Initial Assessment of the Consumer Demand Roundtable: Results and Promise"—in the March 2010 issue of the *American Journal of Preventive Medicine*—researchers from Barker Bi-Coastal Health Consultants and Gutman Research Associates reported:

- **"The Consumer Demand Roundtable appears to have succeeded—despite its limited funding and duration—as a 'think tank' in generating new ways of thinking about building consumer demand for tobacco treatment.…**That is, the [roundtable] helped participants recognize the importance of placing consumers in the forefront, and viewing quitting as a journey, not a one-time event."

- **"The Roundtable brought diverse sectors (i.e., philanthropy, government, community-based and voluntary organizations, leading tobacco-control advocacy groups, treatment providers, academic organizations, and pharmaceutical companies) together, 'creating a fertile area for thinking and innovation,' leading to 'a synergy of influence across various groups.'"**

- **"The ultimate impact of the [roundtable] will depend on the continued testing and refinement of its ideas and products, and continued leadership and support for promising strategies and innovations….**As the [roundtable] made clear for smokers' use of proven treatments, 'if you build it, they will come' does not always apply."

SIGNIFICANCE TO THE FIELD

"The Consumer Demand Roundtable… was incredibly timely and had a profound effect on changing the way we think about reaching smokers and encouraging the use of evidence-based treatment for cessation," says David Abrams, Ph.D., executive director of the Steven A. Schroeder National Institute for Tobacco Research and Policy Studies at American Legacy Foundation. "In particular it reframed the whole way we think about marketing and promoting smoking cessation products and services."

The consumer demand perspective has taken hold in the field since the launch of the roundtable, noted Project Director Phillips. For example, pharmaceutical companies "have completely changed how they market their nicotine replacement products: they are much less medicalized and more consumer- friendly. Nicotine lozenges used to come in pop packs like throat medicine. Now they come in a package like Mentos."

What's more, today Free & Clear quitline websites no longer look like government-sponsored cessation websites, Phillips noted. "They look like commercial websites.

"I am not attributing all of this to [our work]," he acknowledged. However, "our focus was on changing the way key opinion leaders and leaders of cessation organizations thought about their provision of services and development of their products. Five years later we have evidence that that's what folks are doing. That's a pretty big achievement."

A November 2010 report, *Ending the Tobacco Epidemic*, from the U.S. Department of Health and Human Services (HHS), introduced by President Obama, outlines a four-part strategic action plan for strengthening the nation's tobacco-control efforts and impacts. Two of its primary aims are to reduce tobacco use by adults and adolescents and to increase successful cessation attempts by smokers.

This report and its framers (including HHS Secretary Kathleen Sibelius and Assistant Secretary for Health Howard Koh, M.D., M.P.H.), relied substantially on the recommendations of the Consumer Demand Roundtable, and specifically on the article "Reaching Healthy People 2010 by 2013: A SimSmoke Simulation," by David T. Levy and other roundtable members, to argue for stronger efforts to increase cessation attempts.

On page 19, *Ending the Tobacco Epidemic* identifies the following high-impact evidence-based actions as critical to national tobacco-control progress: "smoke-free air for everyone, tobacco price increases, an adequately funded mass media educational campaign, and full access to comprehensive tobacco cessation services."

It goes on to say "the most current and authoritative model of the effect of comprehensive tobacco control measures concludes that, with all of these interventions implemented simultaneously, the Healthy People objective of reaching the adult smoking rate to 12 percent can be reached by 2020," referencing Levy et al. Citing strong evidence for the impact and underutilization of evidence-based cessation services, Sibelius and Koh announced major expansions in treatment coverage and a new media campaign that would help to promote their use.

Cathy Backinger, Ph.D., chief of the Tobacco Cessation Research Branch at the National Institutes of Health, co-chaired the treatment/cessation subcommittee that helped put together the HHS strategic plan in regard to tobacco. She believes that her and others'

involvement in the Consumer Demand Roundtable [through the National Tobacco Cessation Collaborative] has helped inculcate consumer demand principles into federal tobacco initiatives.

"This [the federal tobacco plan] was a broad-based initiative," Backinger said. "We had representatives from many agencies in the department… So this was a nice way to educate other people in the department about what some of the issues are around tobacco control. It was absolutely because of RWJF's efforts in this regard and my participation in the collaborative [that we were able] to make sure we were thinking about consumer demand issues and principles as we try to reach smokers."

The work of the Consumer Demand Roundtable also served to highlight the ways in which FDA regulations inhibit creative marketing of tobacco cessation products. "The packaging and the way they are sold is very unfriendly to consumers," Abrams said. "The rules do not allow the kind of marketing that is now being done in England, for example, where the rules have been relaxed. It's almost as if we have our hands tied behind our backs. We have such strict regulation on how to sell over-the-counter nicotine replacement, whereas the tobacco industry is still relatively free to sell small packages in convenient places with direct consumer marketing of various kinds.

"It is not a level playing field and one of the other insights of our roundtable was that we identified that there was not a level playing field," he continued. "Some of the regulations of government tend to have restrictive consequences."

The American Legacy Foundation, the Campaign for Tobacco Free Kids, and the Society for Research on Nicotine and Tobacco have each petitioned the FDA to reconsider their current regulations on packaginOg of nicotine replacement products.

LESSONS LEARNED

1. **While tobacco-control organizations could benefit from participating in a redesign process to better engage smokers, most cannot afford it.** The University of Arizona's Helpers Program and the Alaska Native Tribal Health Consortium said they would not normally have had the resources to hire a firm such as IDEO, which charges up to $50,000 for a week of consulting. (Project Director/Phillips)

2. **When preparing a journal supplement, allow plenty of time for busy researchers and practitioners to write, review and revise their articles.** The academy extended the timeline for producing the supplement by a year to accommodate authors' schedules. The longer time frame actually worked to the project's advantage, as the supplement covered a wider range of consumer demand–related topics than originally envisioned. (Project Director/Phillips)

3. **Pilot-testing products is essential to meeting the needs of the target audience.** Project staff tested IDEO's toolkit for redesigning tobacco-cessation products and services in two venues and used the resulting feedback to tweak the final version. They also tested the "What Works?" card with consumers, including people with low literacy, and addressed issues the testers identified. (Project Director/Phillips)

4. **Collaborative projects with multiple funders exert more impact on a field.** "Bringing several national funders to the table from the very beginning makes for a messier process," Phillips noted. "However, it leads to better products, quicker adoption and better outcomes."

   Relying on both foundations and government agencies for funding also allows greater flexibility. "Foundations can pay for certain things that government can't," Phillips said. And government funding is year by year [rather than by project], which helps pay for dissemination and communication, giving a project a longer life.

AFTERWARD

The National Tobacco Cessation Collaborative continues to post products from the grants on its website.

Working through the collaborative, the Academy for Educational Development will disseminate and market the "What Works?" consumer card through an article in the collaborative's newsletter, e-mail announcements and possible sessions at national conferences. Academy staff also has created a micro-site to promote the card and provide more information on methods for quitting and links to other resources. The address is *http://whatworkstoquit.tobacco-cessation.org*.

Pilot Projects

Researchers at the University of Arizona have continued to test their redesigned Helpers Program in various settings. In a 2008 feasibility study, they found that promoting the Helpers website through an employer-sponsored health program is feasible, and that employees respond. website users received training, encouraged smokers to quit and referred them to services. Read more online.

Other states, such as Maryland, have shown interest in adopting the Helpers Program as part of their quitline and county health programs, according to Phillips.

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