

# Quitline messages that stress benefits of quitting may improve smoking cessation

January 7 2010

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Smokers who received gain-framed messaging from quitline specialists (i.e., stressing the benefits of quitting) had slightly better cessation outcomes than those who received standard-care messaging (i.e., potential losses from smoking and benefits of quitting), according to a new study published online January 7 in the *Journal of the National Cancer Institute*. Researchers also established that quitline specialists can be trained to provide gain-framed messaging with good fidelity.

Benjamin A. Toll, Ph.D., of the Department of Psychiatry, Yale University School of Medicine in New Haven, Conn., and colleagues randomly assigned 28 specialists working at the New York State Smokers' Quitline to two groups: one group delivered standard-care messaging and one was trained to deliver gain-framed messages. The researchers assessed whether specialists could be trained to consistently deliver gain-framed messages to smokers and evaluated the cessation outcomes of clients exposed to both kinds of messages. A total of 813 people were exposed to gain-framed messaging and 1,222 were exposed to standard messaging. Phone calls took place between March 2008 and June 2008.

[Smokers](#) who received gain-framed messaging reported statistically significantly more quit attempts and a higher rate of abstinence from smoking at the 2-week follow-up interview (99 of the 424 in gain-framed group vs. 76 of the 603 in the standard-care group). However, at 3 months there was no difference between the groups. Researchers also found that quitlines can train staff to deliver gain-framed messages in a

consistent fashion.

"The fidelity outcomes from this study should encourage quitlines to test novel counseling strategies for their ability to increase [smoking cessation](#) rates and, thus, prevent cancer," the authors write. "Furthermore, gain-framed statements appear to be somewhat beneficial in enhancing short-term smoking cessation and other secondary outcomes, such as quit attempts and positive health expectancies."

In an accompanying editorial, Robert T. Croyle, Ph.D., of the Division of Cancer Control and Population Sciences, National Cancer Institute, Bethesda, Md., calls the study timely, given the urgent need for more effective quitline strategies as generations shift.

"Quitline program directors need more specific evidence concerning the types of counseling strategies that are most effective and how to maximize the use of pharmacotherapies," the editorialist writes. "As new communication technologies are incorporated into quitline services, it will become increasingly important to identify the relative contributions of intervention components through efficacy and effectiveness studies that include cost-effectiveness analyses."

Provided by Journal of the National Cancer Institute

Citation: Quitline messages that stress benefits of quitting may improve smoking cessation (2010, January 7) retrieved 5 May 2024 from <https://medicalxpress.com/news/2010-01-quitline-messages-stress-benefits-cessation.html>

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