Title of Intervention: Community Intervention Trial for Smoking Cessation (COMMIT)


Purpose of the Intervention: To reduce smoking through community-wide efforts

Population: Heavy adult smokers and light-to-moderate adult smokers

Setting: Communities (10 in the US and 1 in Canada) of different ethnic diversities, size, degree of urbanization and region of the country; worksite-based, health care facility-based, community-based

Partners: Research institutions for each community, corresponding, data management center for each community, National Cancer Institute, community board, worksites, health care facilities

Intervention Description: This four-year intervention focused on four primary channels: 1) media and community-wide events, 2) healthcare providers, 3) worksites and other organizations and 4) cessation resources.

• Campaigns and Promotions: The intervention began with a kick-off event to publicize the intervention components. Events and cessation contests were also promoted in the community and in worksites.
• Provider Education: Providers (physicians and dentists) were trained in cessation techniques for patients. Staff were trained to support cessation activities and promote smoke-free policies.
• Group Education: Community board members received media advocacy training. Worksites were encouraged to provide a variety of smoking cessation resources to their employees. The COMMIT worksite intervention included smoking policy presentations and workshops.
• Individual Education: Participants had access to self-help materials, resource guides and newsletters.
• Supportive Relationships: Trained providers participated in health care facility and worksite-based counseling. Smokers also had access to local support networks.
• Environments and Policies: The intervention promoted worksite smoking bans/restrictions with the establishment of a worksite smoking policy network.

Theory: Not mentioned

Resources Required:
• Staff/Volunteers: Implementation staff, health care providers, community board members
• Training: Not mentioned
• Technology: Not mentioned
• Space: Room for kick off events, training sessions, counseling sessions, presentations, workshops, group support sessions
• Budget: Each intervention community received an average of $220,000 per year for 4 years.
• Intervention: Promotional materials, training materials, educational materials, contest prizes, self-help materials, resources guides, newsletters
• Evaluation: Surveys

Evaluation:
• Design: Randomized controlled trial
• Methods and Measures:
  o A survey assessed smoking status, intervention awareness and participation.
  o For worksite evaluation, a survey similar in design and procedure to the National Worksite Health Promotion Survey conducted by the United States Public Health Service was used.

Outcomes:
• Short Term Impact: Worksites in intervention communities had significantly more smoking cessation activities.
• Long Term Impact: There was a statistically significant reduction in smoking for light-to-moderate smokers. The smoking policies that were enacted in intervention communities did not show an increase in other forms of tobacco usage (i.e., smokeless tobacco) while showing a decrease in smoking prevalence.

Maintenance: Not mentioned

Lessons Learned: Carrying out a nationally-sponsored intervention in many communities is a logistical challenge. Process evaluation showed that considerable attention should be given to adapting intervention protocols to specific communities.

Citation(s):
