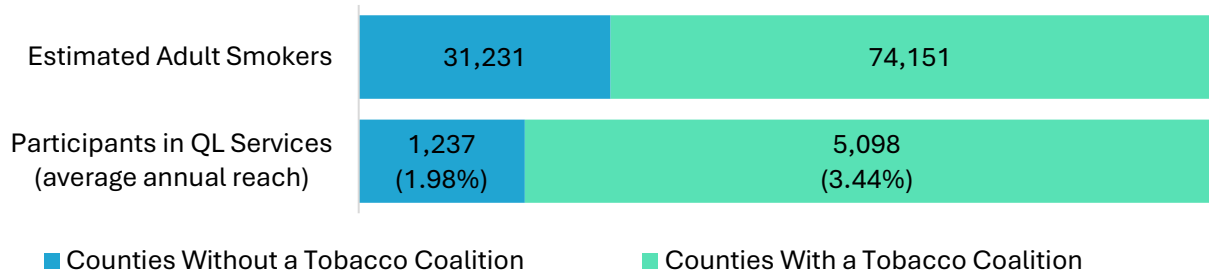


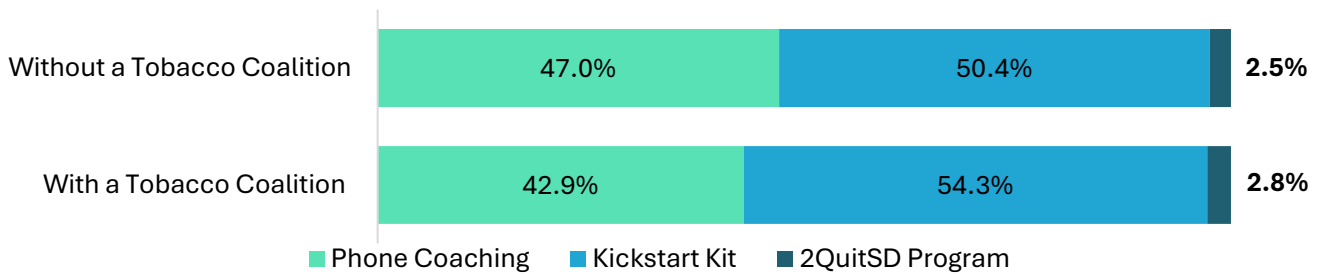
Enrollments into the SDQL services in FY2023 and FY2024 were higher in counties with a tobacco coalition than those without. A total of 5,098 individuals from a county with a tobacco coalition (average annual reach of 3.44%), and a total of 1,237 individuals (average annual reach of 1.98%) from a county without a coalition received a service from the SD QuitLine between July 1st, 2022, and June 30th, 2024. Figure 2 visualizes this impact, with a greater reach to adult smokers residing in a SD county with a tobacco coalition present.

Figure 2. Impact of Tobacco Coalitions on QuitLine Enrollments, Fiscal Years 2023 and 2024



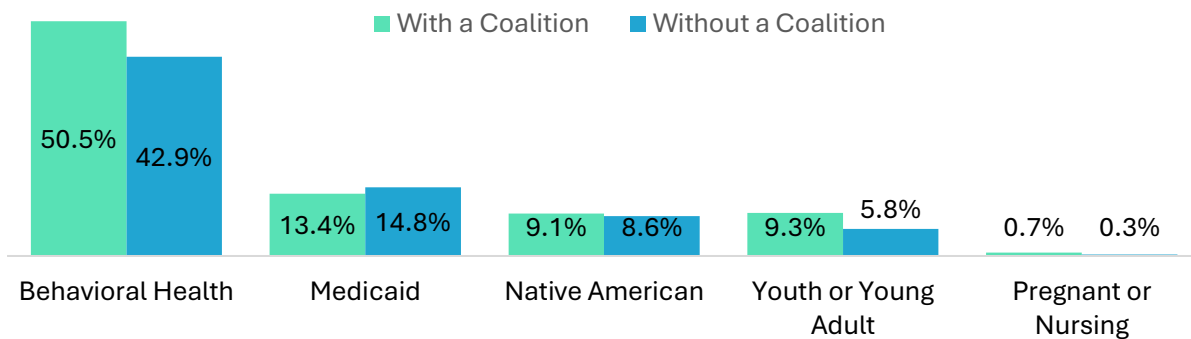
As shown in Figure 3, the type of service chosen by enrollees differed by tobacco coalition presence (p<0.05). Those with a coalition had a higher proportion of enrollments in the Kickstart Kit service.

Figure 3. Impact of Tobacco Coalitions on QuitLine Enrollments by Service Type, Fiscal Years 2023-2024



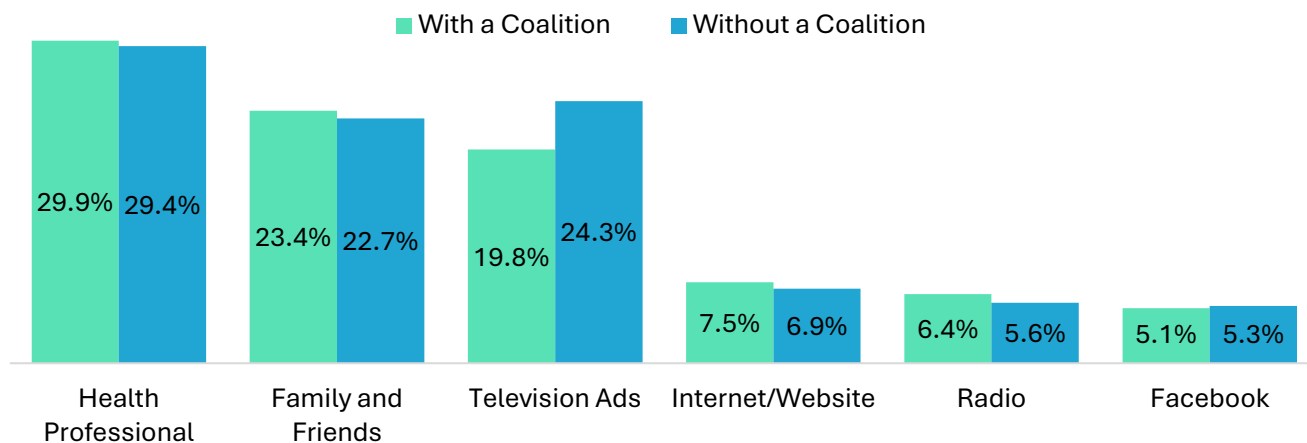
Enrollments by priority population groups are shown in Figure 4. A greater portion of all priority population groups enrolled in the counties with tobacco coalitions compared to those without, with the exception of the Medicaid priority population.

Figure 4. Impact of Tobacco Coalitions on QuitLine Enrollments by Priority Population Groups, Fiscal Year 2023-2024



The frequency of responses received for how enrollees heard about the SD QuitLine was compared among the two populations with and without a tobacco coalition. A greater proportion of enrollees residing in a county without a coalition cited a television advertisement as their way of learning about services (Figure 5).

Figure 5. Most Frequently Reported Ways of Hearing About SD QuitLine Services, by Tobacco Coalition Status, Fiscal Year 2023 and 2024



Summary

This brief report examined the impact of community-level tobacco coalitions over fiscal years 2023 and 2024. Of the 66 counties in South Dakota, 25 counties and one tribal reservation had a tobacco coalition present. Enrollments into the SDQL services in FY2023 and FY2024 were higher in counties with a coalition with an annual average reach of 3.44% than those without a coalition, with an average annual reach of 1.98%. Enrollments by service type differed by tobacco coalition presence, with those with a tobacco coalition having a higher proportion of enrollments in Kickstart Kit services. Enrollments by priority population groups showed a greater portion of priority population group enrolled in counties with a tobacco coalition compared to those without, with the exception of the Medicaid priority population. A comparison was also made in how enrollees heard about the SD QuitLine, with those residing in counties with a tobacco coalition more often citing television advertisements as path to services.

In summary, tobacco coalitions seem to have an important impact on SDQL enrollments. Coalitions appear to drive enrollments to the SDQL services, particularly among priority population groups.

Tobacco use prevalence was calculated using adult population estimates (<http://data.census.gov>, Table S0101, 2023 5-year ACS); and CDC PLACES County Data (2022 BRFSS data), for adult smoking rates in South Dakota counties. Enrollment data was provided by the SD QuitLine service provider.

This report was produced by Elizabeth Roden and Jennifer Kerkvliet in the Population Health Evaluation Center at South Dakota State University through a cooperative agreement with the SD Department of Health. Additional information on the SD QuitLine service is available from the Tobacco Control Program at (605) 773-2891.