

LETTER TO THE EDITOR

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International Quit & Win '96: a global campaign to promote smoking cessation

EDITOR.—Based on encouraging experience from the first European smoking cessation contest involving 13 countries in 1994,¹ the first worldwide "Quit & Win" campaign was held in May 1996, with participation from 25 countries on three continents. Thirteen of these countries (Croatia, Czech Republic, Estonia, Finland, Hungary, Israel, Kyrgyzstan, Latvia, Malta, Russia, Slovakia, Slovenia, and Turkey) undertook national campaigns, whereas 12 countries (Argentina, Belarus, Bulgaria, China, Germany, Lithuania, Poland, Portugal, Spain, Sweden, Turkmenistan, and Ukraine) conducted regional or local campaigns.

The campaign was organised through collaboration networks, with the World Health Organisation's Country-wide Integrated Non-Communicable Disease Intervention (CINDI) programme in Europe playing a lead role. In spring of 1995, the National Public Health Institute (KTL) in Finland sent the CINDI centres, and other interested centres, information and training materials. By winter of 1996 more than 20 countries had announced plans to participate, and were provided with international promotional materials.

Each country's Quit & Win campaign followed common rules and procedures for registration of participants and selection of winners. For the participating countries (with a minimum of 300 registrants) an international "super prize" (\$US5000) was announced. The entry deadline was the quit day, 2 May, and winners were drawn after the four weeks' attempted abstinence period. Two witnesses and a biological test (cotinine, carbon monoxide, or other test, based on local choice) were required to verify smoking abstinence for the winners.

While the coordinating center in Finland (KTL) provided advice, contest rules and instructions, an international poster, and other materials, the organisers in each country carried out national and local

promotional activities. These usually included newspaper, television, and radio publicity, and distribution of entry forms through worksites, health services, schools, etc. In several countries the campaigns were part of longstanding CINDI activities.

In Finland an intensive intervention has been in action since 1972 in the province of North Karelia, where this Quit & Win approach has by now been tested many times.²⁻⁴ The North Karelia Project has recently helped to launch similar activities in the town of Pitkaeranta, in the Russian Republic of Karelia. This campaign has included the Quit & Win contest, combined with role models whose attempts to stop smoking were publicised, and special training to involve healthcare workers for attempts to stop smoking.

Intensive local activities in China were organised in areas of Beijing, Tianjin, and Shanghai in collaboration with KTL. In several countries, such as China and Argentina, Quit & Win was quite a novel idea. In Hungary the campaign was related not only to CINDI but to World Bank-supported activity to improve public health in Hungary.

Total registration was more than 65 000, with 10 countries providing more than 1000 participants. Most of the participants came from China, Hungary, Russia, Finland, and Spain. The draw gave the international super prize to the Chinese winner, a 48-year-old man working at an electric cable factory in Tianjin, China.

To assess the possible impact on whole populations, the number of smokers were estimated in each country and region, to compute rates of participation. By this standard, the highest level of involvement was in the small country of Malta, where about 1% of all smokers participated. For larger countries, the highest national-level participation rates were in Finland and Hungary. Six other countries produced rates of 0.1% or greater (table). Regional and community campaigns produced participation rates of about 1% or more in five countries. The highest levels were in North Karelia, Finland (2% of smokers) and the neighbouring area of Pitkaeranta, Russia (1.4%).

In the spring of 1997 a standardised, one-year follow-up survey will be conducted to assess long-term cessation rates among participants. Based upon previous studies, the organisers expect 15-20% of the registrants to remain smoke-free during the first year, depending upon the extent of continuing activities to promote and support non-smoking. This means that a total of 10 000-15 000 smokers may stop permanently through participation in the campaign.

This experience demonstrates the beneficial results of international cooperation to promote smoking cessation. The "Quit & Win" approach can stimulate quit attempts in

different populations, including those where much cessation has already occurred, such as Finland, and those with high smoking rates and less attention to smoking cessation—for example, in eastern Europe and China. The success of the campaign appears to be greatest where it is part of a continuing programme of health promotion, as in North Karelia, Pitkaeranta, and Tianjin. In Pitkaeranta, where a very high rate of smoking poses a challenge to local public health leaders, monthly competitions are being organised after the international campaign to provide further stimulation for quit attempts.

The evaluation of this kind of Quit & Win campaign faces many difficulties. There are problems caused by greatly different situations in the participating countries. One critical question is whether all registrants in fact are smokers.⁵ According to the present rules, the smoking status at entry was verified by the signature of the registrant and by two witnesses on the entry form. Another important question is how much the campaign actually increases quit rates and to what extent it just concentrates spontaneous quit attempts around a researched event.⁶

The research team plans to study several aspects of the experience and to test modified methods of the approach. Because of the positive experience with the 1996 campaign, the International Quit & Win team plans to arrange the next campaign in 1998.

This letter was prepared by the authors on behalf of the International Quit & Win Group.

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High national participation rates

	Registrants n	Smokers ≥ 18 years (estimated no)	National participation rates (% smokers)
Malta	752	63 000	1.19
Finland	6639	950 000	0.70
Hungary	9581	2 800 000	0.34
Estonia	691	400 000	0.17
Slovenia	766	500 000	0.15
Slovakia	716	645 180	0.11
Czech Republic	2715	2 500 000	0.11
Israel	1000	900 000	0.11
Latvia	612	600 000*	0.10

* Estimated by KTL, other figures given by the countries.