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Smoking Cessation: Why Do Smokers Fail?

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Abstract

Purpose

The purpose of this article is to probe three explanations for the difficulty that cigarette smokers have in quitting: the addictive nature of the product; the failure to deliver messages with effective quit strategies; and the resistance to enacting smoking bans in bars and restaurants. It aims to argue that the latter two issues result in misplaced marketing.

Design/methodology/approach

This article examines data from published research, interviews with smokers who have successfully quit, and government statistics to have a clearer picture of the issues.

Findings

Smokers are exposed to anti-smoking messages created to discourage youth from starting to smoke, but smokers seldom encounter smoking cessation messages that offer realistic quit strategies. Instead, too many messages offer overly simplistic solutions. Furthermore, smokers in many states continue to find smoking

permitted in bars – a place that typically triggers the desire to smoke due to associations between drinking and smoking. Arguments favoring smoking bans have concentrated on the health benefits to those who want to avoid second-hand smoke but have neglected to address the added benefits to smokers.

Practical implications

Creators of messages can focus more specifically on successful quit strategies, and legislators can add a compelling argument for banning smoking in bars and restaurants.

Originality/value

The article calls for an end to misplaced thinking that leads to ineffective campaign message strategy and resistance to smoking bans for bars and restaurants.

Keywords

Addiction, Information media, Information strategy, Individual behaviour

More than 70 percent of smokers have expressed the desire to quit (Fiore *et al.*, 2000), and 41 percent have attempted to quit for at least a day (CDC, 2005), but the success stories are few and far between. With such great motivation to quit, smoking cessation would seem relatively easy; however, many smokers report making 8-11 attempts before they succeed – that is, if they succeed at all (Institute of Medicine, 2007). Stories are plentiful about smokers who simply decided to quit, threw away their cigarettes, and never looked back. Yet, this strategy works for only 5 percent of the population (Shiffman, 2004). With so many anti-smoking campaigns and extensive media coverage of the risks of smoking, why do so many smokers fail to quit?

Perhaps the most obvious explanation is that nicotine is simply so addictive a substance that quitting is beyond the reach of many people (USDHHS, 1988; WHO, 2003). One smoker of menthol cigarettes compared the difficulty of quitting cigarettes to that of quitting crack cocaine (Eckholm, 2007). But a second explanation is that too many campaigns have failed to show effective ways to quit. With limited funds available, many campaigns have focused on preventing teens from starting to smoke – a very worthy goal that no one disputes – but one that has left smokers on their own when it comes to smoking cessation. Instead of incorporating successful “how-to” strategies, many cessation messages in the media offer overly simplistic tips (e.g. put a quarter in a jar when you are tempted to smoke) or else they concentrate on the end results (e.g. quit smoking and you will save money). Like messages in many other failed public information or social marketing efforts, these lack insights into the audience (Rotfeld, 1999). Messages that fail to provide real-world solutions for smokers who want to quit take their place among the many examples of misplaced marketing.

Risk communication is an area of research that has identified a number of key concepts that must be expressed in order to convince people to modify their at-risk behavior. They include communicating the severity of the consequences of the behavior (e.g. smoking can lead to disease or death), personal vulnerability (e.g. it can happen to you), response efficacy (e.g. quitting will remove the danger), and self-efficacy (e.g. you are capable of quitting). Messages that communicate all four concepts stand a better chance of success than those that incorporate one or two concepts (Pechmann *et al.*, 2002). According to some models, such as the extended Parallel Process Model (Witte, 1994), making people aware of the severity of the consequences and their own personal vulnerability without also increasing self-efficacy is doomed to generate fear, which can lead to denial and defiance and various boomerang effects (Wolburg, 2006). On the other hand, delivering a message about risks that also builds confidence in self-efficacy increases the chance of success in changing behavior in the right direction.

Many anti-smoking messages have concentrated on the severity of the consequences – both physical and social – and when directed at adolescent non-smokers they have succeeded in reducing the prevalence of smoking (Smith and Stutts, 2006). However, they are seldom the right message for smokers who are trying to quit. Since most smoking cessation campaigns directly attack the problem of quitting, they are in a prime position to build self-efficacy. One strategy is to warn against the common pitfalls and promote the tactics of successful quitters. A recent study among college students who successfully quit showed that the most frequent reason for failure was lack of planning, which in turn was due largely to underestimating the difficulty of the task (Wolburg, 2007). These students all envisioned quitting by the time they graduated but had given little thought as to how they would quit and had little awareness of their true dependency upon cigarettes. Only after several unsuccessful attempts did they begin to learn how to quit. Smoking cessation messages that tell the story of the failures and successes among everyday quitters have good potential, given that an already high percentage of smokers want to quit.

Bars are one of the most difficult settings for many smokers who are trying to quit. Not only are smokers surrounded by other smokers, but many express such a close association between drinking and smoking that merely entering a bar triggers a desire to smoke (Wolburg, 2007). In fact, many college student smokers have to stay out of bars in order to quit for good. Thus, in addition to the addictive nature of the substance and the problematic nature of the messages sent to smokers, a third explanation for the low success rates is the opposition to banning smoking in bars and restaurants. Although more than half of the nation's restaurants/bars are now smoke-free by law, most owners have continued to oppose bans for fear of lost revenue despite evidence to the contrary (Alamar and Glantz, 2007; McIntyre, 2007). Many owners have argued against a ban within a specific locality because they fear they cannot compete with those in neighboring communities; however, state-wide bans have leveled the playing field so that no bars/restaurants are advantaged or disadvantaged.

Governments have banned smoking in order to diminish the adverse health effects of second-hand smoke in the workplace, with significant health benefits coming from bans in bars and restaurants (Minnesota House of Representative Research Department, 2006). Furthermore, youths in cities with greater smoking restrictions are less likely to escalate their smoking habits (Siegel *et al.*, 2005). However, a benefit that may have gone unnoticed is the benefit to smokers who are trying to quit.

The best smoking cessation efforts in the world will not change the addictive nature of the product, which is all the more reason to make sure that restrictions prioritize health over revenue and that cessation messages deliver how-to strategies that are on target. Otherwise, smokers trying to quit as well as other members of the community are the victims of misplaced marketing.

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