

Barriers to Quit Smoking among Adult Smokers

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Background: Smoking is a physical and psychological addiction, which could create serious health problems. Smoking is the leading preventable cause of illness and death in the world and is known to affect all parts of a person's body. Only few studies discussed the barriers of quitting smoking in the Gulf Cooperation Council countries.

Design: A cross sectional questionnaire based survey. The questionnaire was adopted from Wisconsin Tobacco survey after taking the author's permission.

Setting: Bahrain mall, Isa town mall, Seef mall, Muharraq mall and Riffa mall.

Method: The sample size was calculated according to Wisconsin study. The selected smokers who were attending the selected malls were asked to name "the main barrier or number one reason that kept them from quitting smoking".

Result: Craving for smoking cited by one third of the smokers as the main barrier followed by enjoyment of smoking 60 (24%) and nicotine withdrawal symptoms 27 (11%).

Conclusion: Craving, enjoyment of smoking, and how to handle stress were the main barriers found in this study.

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Cigarette smoking is a cause of death and disability in many countries. Smoking is a threat to current and future world health. Quitting smoking is the solution to improve smokers' health. Doctors and other health professionals should encourage their patients to quit smoking¹.

Smoking is the main cause for lung cancer, lung diseases and cardiovascular diseases. Smoking has been linked to cancer of the cervix, vulva, oropharynx, bladder, pancreas, liver, kidneys and colorectal system. Depression and anxiety disorders, bulimia, attention deficit disorder, schizophrenia, or alcoholism are more prevalent in smokers than non-smokers². In 2000, it was estimated that 4.8 million premature deaths in the world were attributed to smoking, 50% in the developing countries and 50% in the industrialized countries³.

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In 2000, it was estimated that 4.8 million premature deaths in the world were attributed to smoking, 50% in the developing countries and 50% in the industrialized countries³.

The prevalence of smoking among males in the Arabian Gulf is higher than that of their female counterparts⁴. The prevalence of smoking among males is higher in Kuwait and Saudi Arabia than Bahrain and Oman. The highest female smokers were in Kuwait⁴. In Bahrain, smoking rate in females was 5%-9% and in males 22%-23%^{5,6}.

Although there are some anti-smoking measures in the Kingdom of Bahrain, such as counseling, self help materials, medications and the anti-smoking clinic, no study had been done to assess the success rate of quitting.

The aim of the study is to determine the barriers that inhibit the smokers from quitting smoking.

METHOD

Smokers who speak English or Arabic visiting Bahrain mall, Isa town mall, Seef mall, Muharraq mall and Riffa mall were included in the study.

Inclusion criteria: current smoker, any amount, any duration, Bahraini and non-Bahraini, both genders, age from 18 years and above were included. Data was analyzed using descriptive statistics.

RESULT

Two hundred ninety-three people were approached, 43 declined to take part in the study. Two hundred fifty (85%) responded, see figure 1. The majority of responders were males 226 (90%), see figure 1.

The mean age of the respondents was 32 (SD10). Female respondents were slightly older than males (35 versus 31). One hundred seven (43%) of the respondents were university graduates followed by secondary school graduates 88 (35%) and 5 (2%) of our responders could read and write only. One hundred forty-three (57%) were married, 100 (40%) were single and 7 (3%) were divorced. Two hundred twelve (85%) of the respondents were Bahrainis. One hundred thirteen (63%) of the smokers were employed and 20 (11%) were students, see table 1.

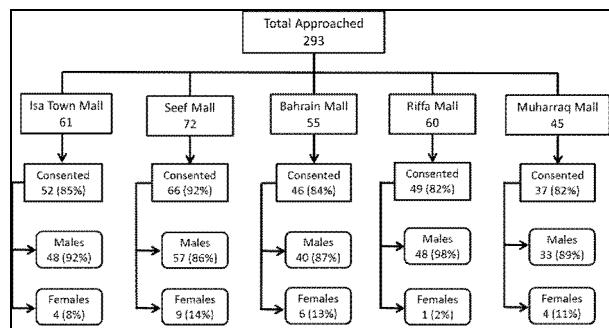


Figure 1: Distribution of Population in Various Malls

Table 1: Personal Characteristics of Responders

Age	Both	Mean=32 SD=10
	Males	Mean=31 SD=9.5
	Females	Mean=35 SD=12.7
Gender (n=250)	Male	226 (90%)
	Female	24 (10%)
Educational Level (n=234)*	Can read and write only	5 (2%)
	Primary	9 (4%)
	Intermediate	25 (11%)
	Secondary	88 (38%)
	University	107 (46%)
Marital Status (n=250)	Married	143 (57%)
	Divorced	7 (3%)
	Widowed	0 (0%)
	Single	100 (40%)
Nationality (n=250)	Bahraini	212 (85%)
	Non-Bahraini	38 (15%)
Occupation (n=180)*	Unemployed	41(23%)
	Working	113 (63%)
	Student	20 (11%)
	Retired	6 (3%)

*The missing data is due to failure to respond to some questions by respondents

Craving for smoking; cited by 83 (33%) as the main barrier against quitting, this was followed by enjoyment 60 (24%). Two (1%) cited the cost of medication for the treatment to quit smoking as a barrier and two (1%) fear that they cannot quit, see figure 2.

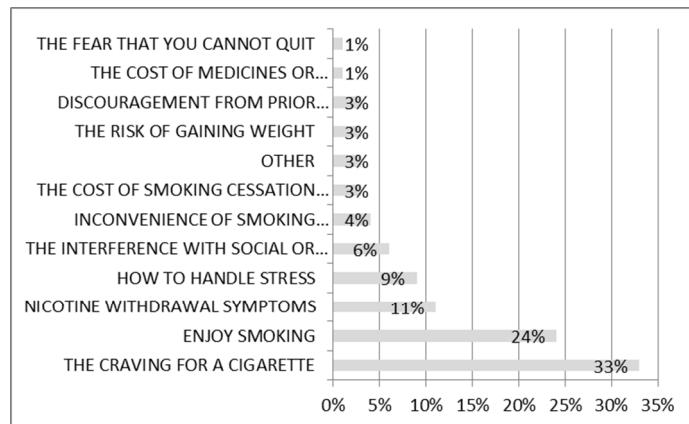


Figure 2: The Main Barrier to Quit Smoking

Craving and enjoyment were listed as the major barriers to quit smoking for all ages. How to handle stress was a barrier for smokers below 20 years old. Thirteen percent of smokers (25-40 years old) reported that craving was a barrier to quitting compared to 6% of smokers below 20 years old, see figure 3.

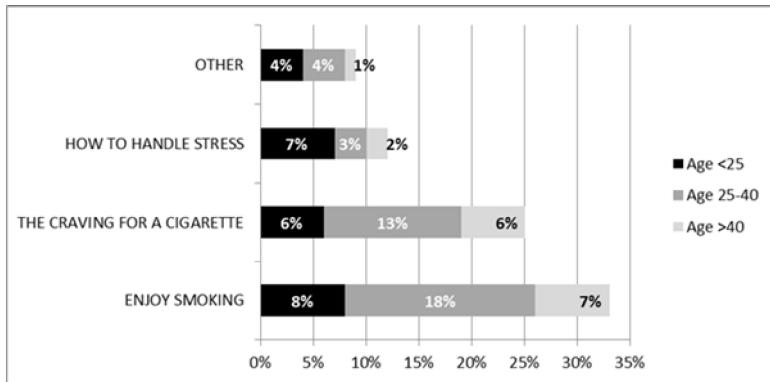


Figure 3: Age and Barrier

In both genders, öcravingö and öenjoyment of smokingö were the main barriers to quit, followed by how to handle stress; it affects more men (10%) than women (1%), see figure 4.

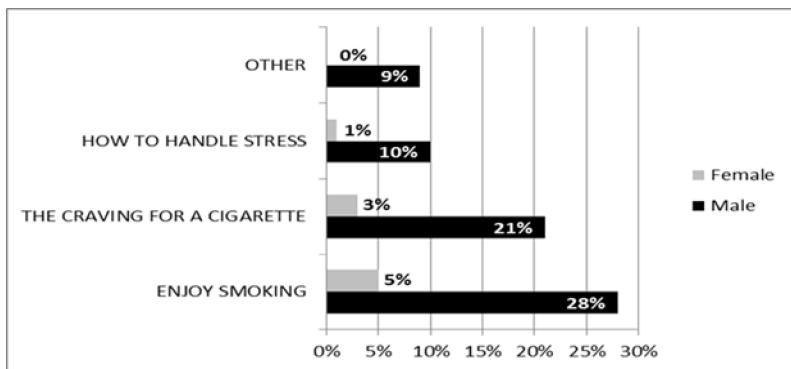


Figure 4: Gender and Smoking Quitting

None of the women reported the risk of gaining weight as a main barrier compared to 4% of men. Working smokers were having difficulty with öhow to handle stressö as a barrier to quit smoking (7%). Barriers show no difference in relation to occupation, marital status, educational level or nationality. One hundred seventy-two (69%) participants have never heard about Smoking Cessation Clinic in Bahrain.

DISCUSSION

In our study, we found craving is the main barrier to quit smoking. A study conducted in Minnesota showed similar results, unlike a study conducted in Wisconsin which showed that enjoyment of smoking is the main barrier to quit. Our study showed no variations seen by age, gender, education, nationality, occupation or marital status^{7,8}.

In this study, the risk of gaining weight is a barrier for men. Unlike Wisconsin study, which showed that gaining weight is a concern for women; however, in our study, there was a higher response of males than females which might be due to cultural reasons.

How to handle stress was an important barrier to many smokers, more for men than women. In Wisconsin the opposite result was found⁸. We found that the mean age of smoking for both genders were 32, which might be related to stress of life at that age.

How to handle stress is an important barrier for younger age group. Wisconsin also found similar results, which might due to stressful life events^{8,9}. The cost of medications was a barrier among intermediate and secondary school graduates.

This study showed that smokers who had never tried to quit were older than 40 years. A study showed that younger smokers never had an attempt to quit¹⁰.

In this study, most of the participants have not heard about the Smoking Cessation Clinic in Bahrain. A study showed that smoking cessation service is cost effective, but they need to be widely and appropriately promoted especially to the deprived population⁸.

This study had some limitations. Missing values had been noticed in one question which might be misunderstood by our participants. It was difficult for young females to admit that they smoke because it was socially unacceptable. Our study result should be interpreted with caution.

CONCLUSION

Despite the fact that our community encourages quitting smoking, smokers face many barriers preventing them to quit. Craving, enjoyment of smoking and how to handle stress were the main barriers to quit smoking; therefore, psychological support is advised to overcome these barriers.

A randomized controlled study is recommended to be done based on larger number of participants.

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