

## Attitudes towards smoking and tobacco control strategies – a comparison of recent quit-attempters versus non-attempters

### Background

Making a recent quit attempt is one of the factors that predicts further quit attempts (Hyland et al., 2006). However, little is known whether or not making a recent quit attempt also predicts attitudes towards smoking and tobacco control strategies. The Health Promotion Agency's (HPA's) 2012 Health and Lifestyles Survey (HLS) asked about attitudes towards smoking in general and opinions on specific tobacco control strategies. This fact sheet compares the responses from two groups of current smokers: those who had made at least one quit attempt in the last 12 months, and those who had not.

### Methodology

For this analysis, current smokers (smoked at least monthly) were stratified into two groups: those who had made at least one serious quit attempt that lasted for at least 24 hours in the past 12 months (n=341), and those who had not made a serious quit attempt in the past 12 months (n=318). These two groups are referred as 'quit-attempters' and 'non-attempters' hereafter.

In the 2012 HLS, respondents were asked the extent to which they agreed or disagreed with a series of statements about smoking and tobacco control interventions, using a five-point scale that ranged from 'strongly agree' to 'strongly disagree'. 'Strongly agree' and 'agree' responses were combined, and compared by past 12-month quit status.

Statistically significant differences ( $p < .05$ ) are reported.

### Responses stratified by past 12-month quit status

- The responses collected from quit-attempters and non-attempters are summarised in Table 1. Compared with non-attempters, quit-attempters were significantly more likely to agree with the following statements:
- The government should take action to reduce the availability of cigarettes and tobacco.
- The number of places allowed to sell cigarettes and tobacco should be reduced to make them less easily available.
- There should be a complete ban on displays of cigarettes and tobacco inside shops.
- Tax on cigarettes and tobacco should be increased every year.
- Duty Free shops should not be allowed to sell cigarettes or tobacco.

**Table 1: Opinions about smoking and tobacco control interventions, stratified by past 12-month quit status**

	Quit-attempters % (95% CI)	Non-attempters % (95% CI)	Odds ratio (95% CI)
<b>Smoking in general</b>			
<i>Most New Zealanders disapprove of smoking</i>	51.0 (38.6-63.5)	50.2 (40.3-60.2)	1.06 (.38-2.97)
<i>Being Smokefree is part of the New Zealand way of life</i>	39.0 (27.8-50.1)	37.4 (28.1-46.7)	1.06 (.54-2.08)
<b>Children's exposure to second-hand smoke</b>			
<i>Smoking should be banned in all outdoor public places where children are likely to go</i>	68.8 (58.9-78.6)	58.4 (49.3-67.6)	1.56 (.84-2.89)
<i>Smoking in cars should be banned when children are in them</i>	94.0 (89.7-98.3)	84.0 (76.7-91.4)	3.04 (1.00-9.30)+
<b>Government's role in tobacco control</b>			
<i>The government should do more to reduce the harm done by smoking</i>	54.0 (42.0, 65.9)	46.5 (36.8-56.2)	1.35 (.68-2.66)
<i>The government should take action to reduce the availability of cigarettes and tobacco</i>	56.3 (45.3-67.4)	36.7 (27.6-45.7)	2.25 (1.20-4.22)*
<b>Specific tobacco control interventions</b>			
<i>The number of places allowed to sell cigarettes and tobacco should be reduced to make them less easily available</i>	57.9 (47.3-68.4)	33.5 (24.5-42.3)	2.77 (1.40-5.48)**
<i>Duty Free shops should not be allowed to sell cigarettes or tobacco</i>	34.1 (22.5-45.6)	17.3 (10.1-24.5)	2.50 (1.07-5.88)*
<i>Shops should not be allowed to sell cigarettes or tobacco via the internet</i>	66.5 (53.6-79.4)	51.6 (42.3-60.9)	1.90 (.75-4.79)
<i>Cigarettes and tobacco should not be sold in New Zealand in 10 years' time</i>	36.6 (24.9-48.3)	28.5 (20.2-36.7)	1.45 (.75-2.80)
<i>Tax on cigarettes and tobacco should be increased every year</i>	41.4 (29.2-53.5)	19.2 (11.7-26.8)	3.02 (1.29-7.04)*
<i>There should be a complete ban on displays of cigarettes and tobacco inside shops</i>	61.5 (49.5-73.5)	43.7 (34.6-52.8)	2.06 (1.09-3.91)*
<i>Tobacco companies should be required to have cigarettes and tobacco in government-specified packs like that in Showcard X<sup>1</sup></i>	55.3 (43.6-67.1)	43.5 (33.8-53.2)	1.61 (.86-3.00)
<i>The nicotine content of cigarettes should be reduced to very low levels so that they are less addictive</i>	78.1 (69.8-86.4)	56.3 (46.2-66.4)	2.88 (.76-10.85)

+ p=.05

\* p<.05

\*\* p<.01

<sup>1</sup> Respondents were shown an image of the Australian plain pack prototype on a showcard.

## Key Points

- Quit-attempters and non-attempters did not differ in their attitudes towards smoking in general and their opinions on tobacco control measures that protect children from exposure to second-hand smoke.
- However, compared with non-attempters, quit-attempters were more likely to believe that the Government should take more action to reduce the availability of tobacco and agree with implementing the specific measures that could restrict access to tobacco.
- Quit-attempters were also more likely to agree with having an annual tax increase on tobacco, and removing tobacco displays from shops.

## References

1. Hyland, A., Borland, R., Li, Q., Yong, H. H., McNeill, A., Fong, G. T., O'Connor, R. J., & Cummings, K. M. (2006). Individual-level predictors of cessation behaviours among participants in the International Tobacco Control (ITC) Four Country Survey. *Tobacco Control, 15*(suppl 3), iii83-iii94.

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## About the Health and Lifestyles Survey

- The HLS is a nationwide in-home face-to-face survey conducted every two years, starting in 2008. The 2012 HLS consisted of a sample of 2,672 New Zealanders aged 15 years and over, who provided information about their health behaviours and attitudes relating to tobacco, sun safety, healthy eating, gambling, and alcohol.
- In 2012, the main sample, with a response rate of 86.3%, included 1,539 people of European/Other ethnicity, 619 Māori, 387 Pacific people and 127 Asian people (prioritised ethnicity).
- The data have been adjusted (weighted) to ensure they are representative of the New Zealand population.
- For this analysis, proportions and 95% confidence intervals were produced. Odds ratios were

undertaken to compare responses between groups. The significance level used for statistical analyses was set to  $\alpha=.05$ .

- A full description of the 2012 HLS survey methodology and further HLS publications can be found online at <http://www.hpa.org.nz/research-library/research-publications>.

## About the HPA

The HPA is a Crown entity that leads and delivers innovative, high quality and cost-effective programmes and activities that promote health, wellbeing and healthy lifestyles, prevent disease, illness and injury. The HPA also enables environments that support health and wellbeing and healthy lifestyles, and reduce personal, social and economic harm.

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