

## Smoking cessation behaviours in the past 12 months: quit attempts and use of support

### Background

New Zealand has a goal of reducing smoking prevalence to a minimal level by 2025 (often referred to as 'Smokefree 2025').<sup>1</sup> This goal is supported by one of the six New Zealand health targets: better help for smokers to quit that is designed to prompt smokers to make a quit attempt and use evidence-based cessation support.<sup>2</sup> Cessation support available includes a range of services and products, such as behavioural support (delivered via face-to-face, telephone, internet etc), nicotine replacement therapy (NRT) and other medicines (including Bupropion, Zyban and Champix).<sup>3</sup>

The Health Promotion Agency's (HPA) Health and Lifestyles Survey (HLS) provides insight into New Zealanders' tobacco-related behaviours and attitudes, including smoking cessation behaviours. This factsheet examines smokers' quit attempts and use of support in the past 12 months.

### Methodology

In 2014, current smokers and recent quitters<sup>a</sup> (n=640) were asked "in the last 12 months, how many serious attempts to stop smoking did you make that lasted 24 hours or longer?" Those who had made at least one quit attempt that lasted 24 hours or longer in the past 12 months (n=334), were asked to "identify any help, advice, programmes and products used to help you quit during your last quit attempt" and multiple responses were permitted.

Responses to the first question were compared by ethnicity, neighbourhood deprivation status, age, gender and educational background. See the 'About the Health and Lifestyles Survey' section for more detail and the relevant comparison groups. Sub-group analysis was not conducted for the second question due to the small sample size.

### Quit attempts

The number of quit attempts made by current smokers and recent quitters in the past 12 months ranged from 0-20. The average number of quit attempts was one.

Overall, almost one in two (46%, 39-54%) respondents had made a quit attempt lasting 24 hours or longer in the past 12 months, and the remaining (54%, 46-61%) had not. No differences were found by ethnicity, neighbourhood deprivation status, age, gender or educational background.

### Use of cessation aids

Among those who had made at least one quit attempt lasting 24 hours or longer in the past 12 months, 42% (30-54%) indicated that they did not use any cessation support. The remaining respondents reported using at least one support. Table 1 presents responses selected by at least 5% of the respondents. Some categories were combined for reporting.

<sup>a</sup> Recent quitters refer to those who had successfully quit smoking in the past 12 months.

**Table 1: Help, advice, programmes and products used by current smokers and recent quitters who had made at least one quit attempt lasting 24 hours or longer in the past 12 month (n=334)**

Help, advice, programmes and products used	Weighted %
No support	42%
Nicotine replacement therapy (NRT) including patches, gum, microtab, lozenges and inhalers	26%
Champix	16%
Help from a General Practitioner (GP)	14%
Quitline over-the-phone support	12%
A friend or family member	7%
Zyban or Bupropion	5%

## Key points

- Around one in two (46%) current smokers and recent quitters had made at least one quit attempt lasting 24 hours or longer in the past 12 months.
- Current smokers and recent quitters made an average of one quit attempt lasting 24 hours or longer in the past 12 months.
- Among those who had tried to quit in the past 12 months, two in five (42%) did not use any help, advice, programmes and/or products.
- The four most common kinds of cessation support used in the past 12 month were NRT product(s), Champix, GPs and the Quitline.

## References

- <sup>1</sup> The New Zealand Government (2011). *Government Response to the Report of the Māori Affairs Committee on its Inquiry into the tobacco industry in Aotearoa and the consequences of tobacco use for Māori. Final Response*. Presented to the House of Representatives in accordance with Standing Order 248. Wellington: the New Zealand Government.
- <sup>2</sup> Ministry of Health (2015, July 2). *Health targets: Better help for smokers to quit*. Retrieved from <http://www.health.govt.nz/new-zealand-health-system/health-targets/about-health-targets/health-targets-better-help-smokers-quit>
- <sup>3</sup> Ministry of Health (2014). *Background and Recommendations of the New Zealand Guidelines for Helping People to Stop Smoking*. Wellington: Ministry of Health

## Citation

Nelson S., & Li, J. (2016). *Smoking cessation behaviours in the past 12 months: Quit attempts and use of support. [In Fact]*. Wellington: Health Promotion Agency Research and Evaluation Unit.

## About the Health and Lifestyles Survey

- The HLS is a nationwide in-home face-to-face survey conducted every two years since 2008.
- The 2014 HLS consisted of a sample of 2,594 New Zealanders aged 15 years and over, who provided information about their health behaviours and attitudes relating to tobacco, sun safety, healthy eating, gambling, alcohol, exercise, immunisation, mental health, breast feeding, and cancer screening. The response rate was 73.2%.
- The 2014 HLS sample included 1420 European/Other people, 564 Māori, 393 Pacific people, and 217 Asian people (prioritised ethnicity).
- The data have been adjusted (weighted) according to 2013 Census data to ensure they are representative of the New Zealand population.
- For this analysis, jack-knife proportions and associated 95% confidence intervals were calculated first. Logistic regression was then used to compare responses between groups. The significance level was set to  $\alpha=0.05$ .
- Comparison groups for these analyses were as follows:
  - Ethnicity (Māori, Pacific and Asian, compared with European/Other)
  - Neighbourhood deprivation status (New Zealand Deprivation Index 8 to 10 and 4 to 7, compared with New Zealand Deprivation Index 1 to 3)
  - Age (25 to 34, 35 to 54, 55+ years, compared to 15 to 24-year-olds)
  - Gender (males, compared with females)
  - Educational background (no formal qualification, secondary school and trade certificate/professional/diploma, compared with degree/postgraduate).
- A full description of the 2014 HLS methodology and further HLS publications can be found online at [www.hpa.org.nz/research-library/research-publications](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, and prevent disease, illness and injury. HPA also enables environments that support health and wellbeing and healthy lifestyles and reduce personal, social and economic harm.

### Research and Evaluation Unit

Health Promotion Agency, PO Box 2142, Wellington 6140, New Zealand

<http://www.hpa.org.nz/research-library/research-publications>

[research@hpa.org.nz](mailto:research@hpa.org.nz)

January 2016

ISSN 2350-2991

