



FACILITATORS AND BARRIERS TO SWITCHING OR QUITTING: Context Matters

GFN 2023 WORKSHOP SUMMARY

Over 60 people attended the workshop facilitated by **Dr Marewa Glover** with co-facilitators consumer legend **Judy Gibson** and INNCO Board Member **Tomás O’Gorman** from Mexico.

Groups were formed to brainstorm the barriers and facilitators to stopping smoking or switching to low-risk tobacco and nicotine products for the following consumer groups:

- People on low-incomes
- People with mental health conditions and dependency on other substances (MHCs)
- People with co-morbidities, such as, COPD, excess weight
- Women
- Latin America
- Asia

BARRIERS:

Barriers common to most groups were:

- Cost and affordability (all groups)
- Misinformation via media, health professionals, political class
- Hard to find accurate information; lack of knowledge, and unreliable advice from health professionals
- Low income more likely to smoke rolling tobacco and more likely to access the illicit market due to affordability; also illicit market (Latin America and co-morbidity groups).
- Lack of trained retailers - not matching for strength, lack of knowledge of product difference (Asia, Latin America; women)

SOME BARRIERS AND DETERMINANTS WERE SPECIFIC TO SOME GROUPS:

- The loss of pleasure e.g. due to too low nicotine; loss of flavours and sensory experience; not as good as cigarettes (low-income, MHCs)
- Lack of regulation / different countries with different regulations - making it harder to access support (Asia and Latin America)
- Fear of relapse (MHCs, Latin America, women)
- Stigma (MHCs; women more likely to hide that they smoked or used alternatives. This was especially a barrier for pregnant women).
- Geographical distance prohibiting access to products (Asia; MHCs)
- Lack of availability of low-risk products, e.g. online (low-income)
- Worried about weight gain (women)
- Technological barriers for older people; devices need maintenance; cognitive barrier to accessing information (people with co-morbidities)
- Higher levels of stress and pressures, so quitting not a priority; concern alternatives won't help with coping (MHCs, low-income)
- Prohibition prevents access

SUMMARY OF RESULTS:

FACILITATORS TO SWITCHING OR QUITTING, AND FACILITATORS THAT HELP MITIGATE THE BARRIERS COMMON TO MOST GROUPS INCLUDED:

- Evidence based regulation
- Community assistance
- Better involvement of healthcare professionals

HALF THE GROUPS MENTIONED:

- Better access and availability to products and advice
- Training health professionals and retail staff
- Product innovation and evolution
- Education & communication about the benefits of nicotine
- Subsidise products for people with low-incomes, people with mental health conditions and dependency on other substances
- Provide incentives and subsidies to access
- Responsible media practice

FACILITATORS TO SUPPORT SWITCHING AMONG PEOPLE ON LOW-INCOMES WERE:

- Remove restrictions on nicotine strength and advertising restrictions; and have products that meet the need of people on low-incomes such as disposables

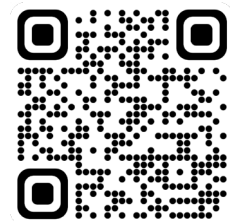
SPECIFIC GROUP FACILITATORS:

- Research findings to enlighten women
- Peer group support for people with MHCs



VIEW MORE STUDY RESULTS:

This page lists scientific papers and conference presentations of results from our Voices of the 5% Study.



For more information about the Barriers and Facilitators to Switching or Quitting please watch the following GFN Fivers:

2021 - Voices of the 5% - Barriers to Vaping: <https://youtu.be/gCBriXg8gZg>

2022 - Facilitators to Vaping Among People with No Intent to Stop Smoking: <https://youtu.be/u16N87a6SdM>

2023 - Voices of the 5% Study: Facilitators of Vaping Over 2 Years: <https://youtu.be/hfDUMR32qK4>

You can read our study participants' case stories on www.voiceofthe5percent.nz