EP004

WHY QUITTING FAILS AND SUCCEEDS: BARRIERS AND FACILLITATORS OF SMOKING CESSATION IN A PERAK TENGAH DISTRICT

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Introduction

Smoking remains a major global public health challenge, causing over 8 million deaths annually and contributing significantly to non-communicable diseases (WHO, 2023).

In Malaysia, the National Health and Morbidity Survey (NHMS) 2023 reported a modest decline in smoking prevalence among adults compared to 2019; however, tobacco use remains a significant public health concern, particularly with persistently high prevalence among males and the rising use of e-cigarettes (Institute for Public Health [IKU], 2024).

Despite ongoing control efforts, smoking persists, influenced by social and environmental factors.The Capability, Opportunity, Motivation-Behaviour (COM-B) model highlights that smoking cessation is shaped by the interaction between individual capability, social opportunity, and motivation, rather than knowledge alone (Michie et al., 2011).

Objectives

This study aimed to explore the barriers and facilitators influencing smoking cessation practices among community members in Perak Tengah

Methodology

A qualitative case study was conducted using semi-structured, in-depth interviews among nine adult male smokers recruited from government health clinics. The interview guide was based on the COM-B framework (Capability, Opportunity, Motivation). All interviews were audio-recorded, transcribed verbatim, and analysed using thematic analysis (Braun & Clarke).

Ethical approval was obtained from the Medical Research and Ethics Committee (NMRR ID-25-02152-I9Q).

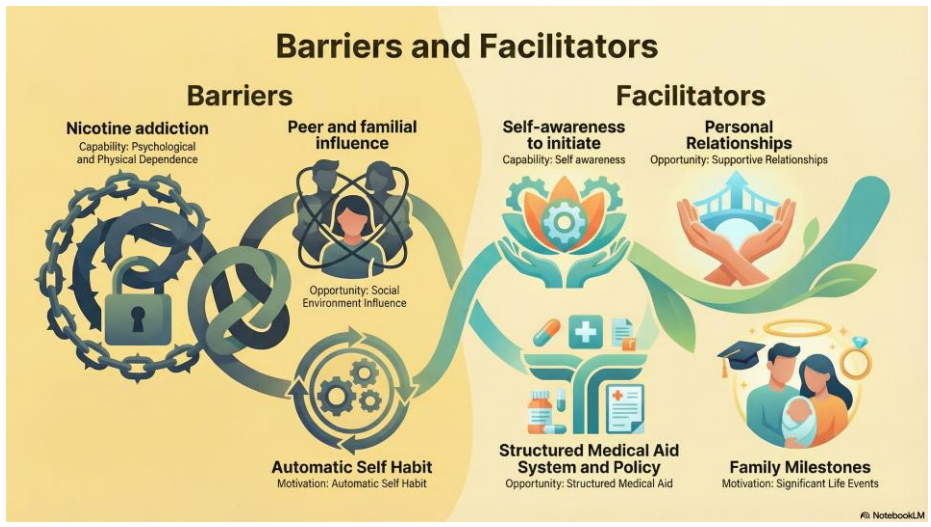
Results

Nine male long-term smokers aged 27–49 participated in semi-structured in-depth interviews; data saturation was reached by the sixth participant but extended to nine to ensure saturation.

7 themes emerged with 3 related with barrier and 4 related with facilitator.

Major barriers included Capability: Psychological and Physical Dependence, Opportunity: Social Environment Influence, Motivation: Automatic Self Habit.

Facilitators of smoking cessation included Capability: Self Awareness, Opportunity: Supportive Relationships, Opportunity: Structured Medical Aid and Motivation: Significant Life Events.



Discussion and Conclusion

Smoking cessation is influenced not only by knowledge, but by behavioural, social, and health system factors.

The social environment, particularly peer and family influence emerged as the primary barrier, reinforcing smoking as a normalized behaviour and contributing to relapse.

A critical gap exists between available cessation services and real-world behavioural support. While Nicotine Replacement Therapy (NRT) is valued, inconsistent counselling and poor continuity of care reduce its effectiveness.

In Perak Tengah, smoking behaviour reflects a complex interplay between nicotine dependence, social norms, and system level limitations.

Key Implications:

- Strengthen continuity and quality of counselling in Quit Smoking Clinics
- Integrate family and peer-based support systems
- Implement community level behavioural interventions
- Address social normalization of smoking

A holistic, behavior focused approach is essential to translate quitting intention into sustained abstinence.

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