Knowledge, attitudes and beliefs towards e-cigarettes among e-cigarette users and stop smoking advisors in South East England: a qualitative study.

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1. Background & Aim
The increased popularity of e-cigarette use in the United Kingdom (UK) has created controversy among the public, health and political spheres (RCP, 2016); hence, exploring e-cigarette users’ perceptions among different populations is vital. This study explores the perceptions of e-cigarettes among the e-cigarette users and stop smoking advisors, the risks and benefits they associate with e-cigarettes and how these understandings shape their attitudes towards e-cigarettes.

2. Research Questions
- How are e-cigarettes perceived by e-cigarette users and stop smoking advisors?
- What are the perceived risks associated with e-cigarettes, as discussed by e-cigarette users and stop smoking advisors?
- What factors have shaped the perceptions of e-cigarettes?

3. Methodology
Setting South East England, UK. Design & Participants Face to face and phone semi-structured interviews were conducted with a) 13 stop smoking advisors from two Stop Smoking Services in two Counties (7 from one county & 6 from the other county; 9 females & 4 males) b) 15 current e-cigarette users (median age 44y (range 21–67); 60% (n 9) males; 33% (n 5) were Stop Smoking Service users; duration of e-cigarette use ranged between 4-36 months (average 14.6 months); 53% (n 8) were ex smokers (the rest were current or occasional smokers).
Measurements Audio recorded data transcribed verbatim, coded systematically and analysed using QSR NVivo10. An inductive approach of thematic analysis was used applying the six phases of analysis framework proposed by Braun and Clarke (2006)².

4. Findings
E-cigarettes’ perceptions were shaped by beliefs and experiences of smoking, addiction and nicotine; the media; marketing strategies; societal, political and the tobacco industry’s involvement in e-cigarettes. Nearly all advisors favoured a medicinal regulation for e-cigarettes to add them to their prescription list, aiming at eliminating nicotine use. Most advisors disagreed e-cigarettes’ resemblance to conventional cigarettes and favoured their ban in public places. Nearly all users did not agree on e-cigarettes ban. A prominent theme is the diverse perceptions e-cigarettes have generated and the uncertainty associated with them. This can be classified into three sub themes i) the ambiguity of e-cigarettes’ status and efficacy, ii) the ambiguity of e-cigarettes’ physical risks and iii) the ambiguity of e-cigarettes’ social risks.

The Ambiguity of E-Cigarettes’ Status and Efficacy
E-cigarettes were perceived and used as therapeutic products; recreational products; a smoking substitute and an addion for Nicotine Replacement Therapy (NRT).

Nearly all users and most of the advisors perceived e-cigarettes to be as effective as or more effective than NRT. E-cigarettes’ effectiveness in helping particular types of smokers to quit or reduce smoking was highlighted.

“…You chew a piece of gum, which you’re not even allowed to chew. It produces all these vile stuff and you’ve got to try not to swallow. It’s horrid. It’s disgusting... it was certainly a block for me to stop me smoking. …I hated it. Whereas I liked smoking. Whereas I like using that [e-cigarette] in a way …it’s a satisfying thing to do; a pleasant thing to do!” (11M, male user)

“…I don’t know, I am not certain. I think for people who are very addicted to the nicotine and very addicted to the habits surrounding the smoking, it could be the e-cigarette is the thing that help them to stop or at least the thing to taking nicotine at a relatively safe level without all the chemicals from tobacco and all the harm from Carbone monoxide” (HS, Advisor).

The Ambiguity of E-Cigarettes’ Physical Risks
E-cigarettes were perceived as safe products; safer alternative to smoking; an innovation with potential long-term threats; “dangerous” and risky objects.

All participants perceived e-cigarettes to be less harmful than smoking. The advisors expressed more concerns than users, especially of e-cigarettes’ long term health effect.

“Obviously this is less harmful [than smoking] to you and people around you” (10F, female user)

“I certainly think if we had e-cigarettes, we would probably do more with e-cigarettes than we do with nicotine replacement. In terms of, do I think they’re better or healthier; no, not at the moment. I don’t. I still think that what we give out, we know is safe” (SS, Advisor)

“I wish I could tell them with absolute surety what the safety is and I can’t. I wish I can tell them with absolute surety how much nicotine they are getting from the product and I can’t. So I think there are gaps there that I would like to fill” (H6, Advisor)

The Ambiguity of E-Cigarettes’ Social Risks
E-cigarettes were perceived as devices that might create addiction; maintain nicotine addiction; a gateway to smoking; a gateway from smoking; a smoking renormalisation threat; a stigmatised and approved habit.

- Some users were encouraged and endorsed to use e-cigarettes, instead of smoking, by friends, family and health personnel (n 6).
- Some users pointed to a possibility of stigmatising e-cigarette use (n 5).

“…I think the stigma that smokers had has kind of carried on to the e-cigarette users in the sense that the stigma surrounding the addiction itself. People see you as weak because you give in to the addiction; because you obviously don’t have willpower enough to stop, so it’s kind of the moral judgement” (L2M, male user)

“The think smokers had has kind of carried on to the e-cigarette users in the sense that the stigma surrounding the addiction itself. People see you as weak because you give in to the addiction; because you obviously don’t have willpower enough to stop, so it’s kind of the moral judgement” (H6, Advisor)

“…I do have reservations about in that it’s looking like a cigarette and undoing the work of tobacco control we’ve done in terms of de-normalising it” (HS, Advisor)

5. Discussion and Conclusion
E-cigarette users and stop smoking advisors demonstrated different knowledge, beliefs and attitudes with regards to the status, efficacy and risks associated with e-cigarette use. Public health messages should address the different perceptions of e-cigarettes, the link that is established with conventional smoking and highlight the difference between stop nicotine use and stop smoking. Ambiguity and fear played a major part in stigmatising some biotechnological innovations, health conditions and behaviours (Gregory et al., 1996; Stuber et al., 2008). E-cigarettes’ benefits and risks should be continuously evaluated, put in perspective and circulated to avoid ambiguity and non-evidence based fear which could lead to stigmatising e-cigarette users.

6. References

Conflict of Interest: None.