

Identifying Themes for Effective Smoking Cessation Messaging for Vietnamese and Korean Immigrant Patients

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Conflicts of Interest: None



BACKGROUND

➤Smoking prevalence among Vietnamese (31%) and Korean (30%) immigrant males remains disproportionately higher than the U.S. general population (CDC, 2011; Chae et al., 2006).

➤While physician advice can be effective and double the likelihood of quitting smoking (Fiore et al., 2008), Asian-American smokers are less likely to receive advice to quit from their providers (Tong et al., 2010).

➤The goal of this study was to develop an understanding of both patient and provider views to enhance the effectiveness of physician advice targeting Asian smoking patients.

METHODS

➤This study was conducted to provide formative qualitative research data to inform the development of a clinic-based interactive video program for an on-going parent study.

➤Participants were patients and staff members of Asian Health Services (AHS) of Oakland, California. AHS is a federally-qualified community health center providing bilingual comprehensive medical, dental, and behavioral services in 11 Asian languages.

- Patient participants (n=17) included 11 Vietnamese and 6 Korean current and former male smokers ranging in age from 30-80. All were immigrants with limited English proficiency.
- Staff member participants (n=8) included 3 medical providers and 5 medical assistants who were bilingual clinic staff members (Vietnamese and Korean).

➤ A total of 3 focus groups were conducted: one with Vietnamese patients, one with Korean patients, and one with staff.

➤All interviews were conducted in language, recorded, transcribed, translated into English (for patient focus groups) and then analyzed using qualitative analysis software (Dedoose).

RESULTS

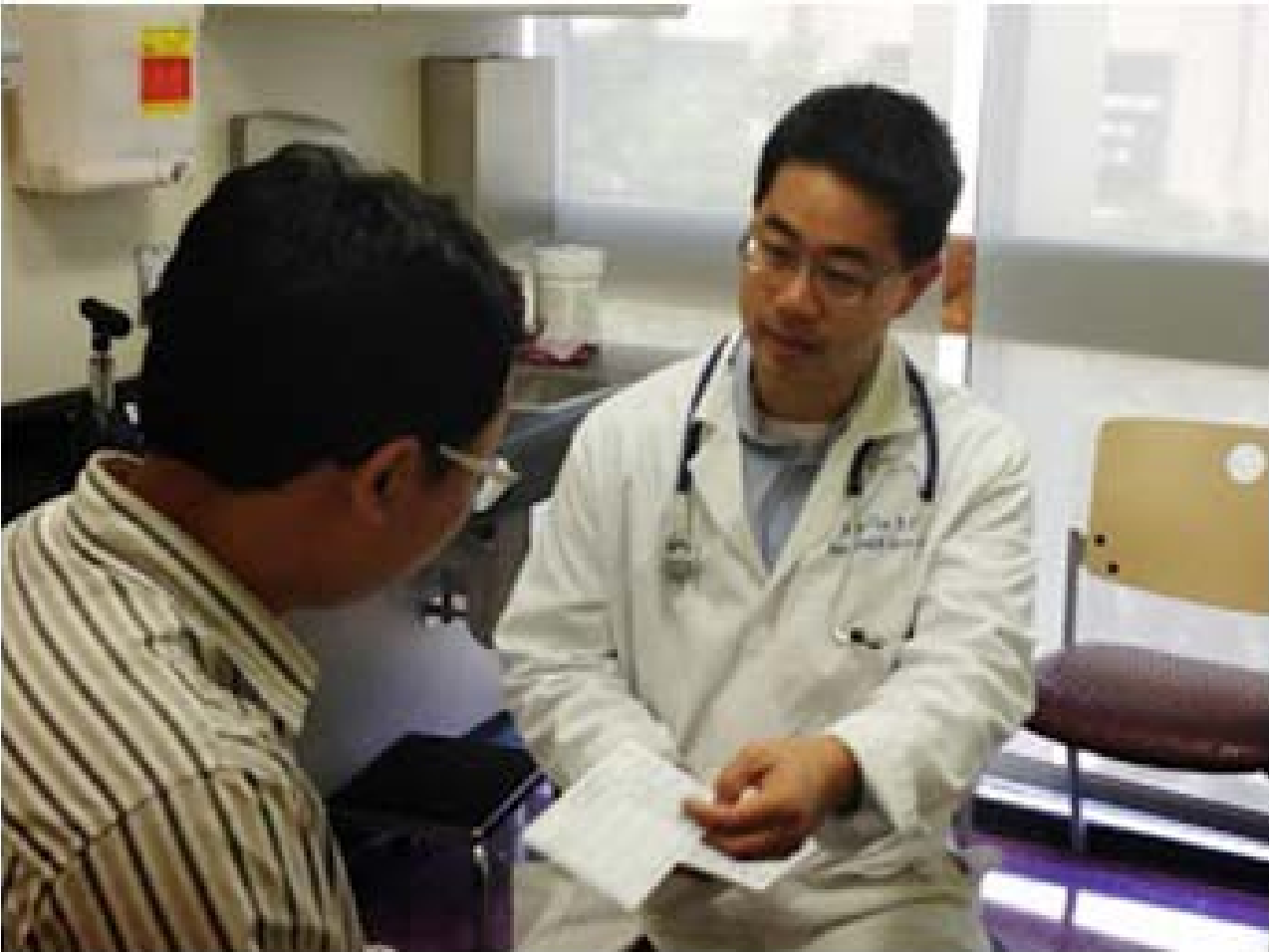
Themes	Patient’s Views	Provider’s Views
<ul style="list-style-type: none">▪ PERCEIVED EFFECTIVENESS OF PHYSICIAN ADVICE WAS LOW	<i>“What doctors tell me does not really help much; they can be references but I think quitting smoking all depends on one’s determination.” – Korean male, current smoker</i>	<i>“I think just the only times that I had success with patients is nothing that I did.”</i>
<ul style="list-style-type: none">▪ IMPORTANCE OF WILLINGNESS	<i>“Doctors and nurses have been telling me to quit smoking but it doesn’t really help because quitting is all about my own willingness and motivation.” – Korean male, current smoker</i>	<i>“It’s hard because it’s just like... a weight loss program. You know that you have to do it but it’s just that determination, motivation, and support...”</i>
<ul style="list-style-type: none">▪ EMPHASIS ON BOTH FAMILY AND OWN HEALTH	<i>“I’m not afraid of dying anymore. It doesn’t affect me, but the later generation, the children, the grandchildren, it affects them.” – Vietnamese male, current smoker</i> <i>“When you advertise about quitting tobacco, it should emphasize not the smoker themselves, but their children and family...” – Korean male, current smoker</i>	<i>“I think just the only times that I had success with patients is nothing that I did. It was that there was some bad illness that they incurred.”</i> <i>“I think we can show them things about their health and their family’s health ...”</i>
<ul style="list-style-type: none">▪ ADDRESS SOCIAL AND ACCULTURATIVE STRESS	<i>“...I’m forced to smoke because friends around me smoke. Whenever I see them smoke...I want to smoke too. I quit three times in the past and they all failed.” – Korean male, current smoker</i> <i>“Now the only thing I have to enjoy, in case I get in a fight with my wife or sad because of my kids... I’ll go, take a cigarette and go to the yard to smoke to feel happy.” – Vietnamese male, current smoker</i>	<i>“In Vietnam... A lot of men there go to coffee shops or they just spend hours talking, drinking and smoking...it [smoking] brings them a sense of home in America.”</i> <i>“...and so smoking is associated with ...a time to socialize, a time to just get away from the troubles of everyday life... But we don’t address the things that smoking brings them...”</i>
<ul style="list-style-type: none">▪ EMPOWER WITH RESOURCES AND OPTIONS	<i>“The doctor keeps asking me, quit smoking yet? Quit smoking yet?...Every doctor is like that, but there’s no way to quit smoking. It’s because the doctor doesn’t have a way to advise me, and I don’t have a way to quit.” – Vietnamese male, current smoker</i>	<i>“There is a lot of different types of support available... I think they don’t understand that there is... lozenges, patches, actual medicines...”</i> <i>“... for me too, I don’t know all the success rates... So I think that’s empowering for us to know and then offering to our patients as well.”</i>

Conclusions

▪Increasing effectiveness of physician advice for smoking cessation among Asian immigrant patients may require culturally-appropriate messaging that:

- ✓ Emphasizes both family and individual health
- ✓ Addresses patients’ motivations to smoke, with regard to social and acculturative stress
- ✓ Empowers patients with knowledge of evidence-based resources and options for quitting

▪These themes informed the development of a clinic-based “Mobile Doctor” interactive video program targeting Vietnamese and Korean immigrant patients.



Acknowledgements

The authors wish to acknowledge the contributions of the following research team members in developing the interview guide questions, and in conducting and transcribing the interviews: Alisha Tran, Susan Yoon, Tiffany Seto, Terrence Park, Jennifer Lee, Tuyen Vo, Tam Ho, Jum Sook Shim, and Chong U Nam.

Research was supported by grants from the Tobacco-Related Disease Research Program (19XT-0083H, Community PI: Huang; Academic PI: Tsoh) and the TRDRP Cornelius Hopper Diversity Award Supplement (Awardees: T. Duong and J. Chun; Primary Mentors: Quach and Tsoh).

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