

# The Smoking Problem in Slovakia: Cessation Strategies & Recommendations

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## Abstract:

**Objective:** The aim of this research is to analyze the smoking problem in Slovakia and offer strategies and recommendations for cessation.

**Methods:** This paper is a secondary source research study augmented by person to person conversation.

**Results:** Efforts are being made to control the smoking problem in Slovakia; however, opportunities exist to increase public knowledge and awareness of the negative effects of smoking.

**Conclusion:** The study indicated that the Slovak Republic is experiencing a smoking problem. Steps are being taken in the right direction to increase public awareness of this issue and reduce smoking. Increasing public knowledge and public health legislations are needed to control this problem. There is opportunity to conduct future research on smoking trends.

## Introduction

Smoking is bad for health. Smoking harms nearly every organ in the body and is directly responsible for a significant number of diseases and deaths. Alcohol use, fire-arm-related incidents, HIV/AIDS, illegal drug use, and motor vehicle incidents combined would still not compare to the number of deaths caused by smoking. This public health issue is responsible for more than 7 million deaths annually (CDC, 2018). Although the rate of smoking is declining people are still smoking. Efforts are needed to further impact the percentage of people using tobacco.

## Risk Factors

Deaths caused by this problem are not just a result from direct smokers. Second-hand smoke can be just as detrimental to people. Non-smokers who breathe in secondhand smoke take in nicotine and other toxic chemicals just like smokers do. The more second-hand smoke you breathe, the higher the levels of these chemicals in your body (American Cancer Society, 2018). Smokers are more likely to develop a number of diseases that affect the heart and blood vessels. For instance, smoking causes stroke and coronary heart disease as well as a leading risk factor for chronic diseases such as cancer, lung diseases and cardiovascular diseases (CDC Europe, 2018).

## Prevalence

Tobacco use is the single most preventable cause of disease and death. Europe has the highest prevalence of daily tobacco smoking among adults (country range 10-38%) and some of the highest prevalence rates of tobacco use by adolescents (CDC Europe, 2018). Smoking causes a number of diseases as previously mentioned. Adding to this fact, oral diseases are most frequently found in Europe and share risk factors that are associated with other non-communicable diseases. Studies document a synergistic effect of tobacco and excessive alcohol use on the manifestation of oral cancer (CDC Europe, 2018). Oral cancer is a significant component of the burden of non-communicable diseases in Europe. Tobacco use is a major cause of periodontal diseases and premature tooth loss; children born to women who use tobacco during pregnancy may have congenital defects such as cleft lip and palate. Efforts are needed to prevent such cancers and diseases and obtain better health outcomes.

## Demographics

In Slovakia, smoking is very widespread. Over a third of the population smoke. However, stricter anti-smoking legislation efforts have been made in order to control this issue and protect the health of its citizens. The air has been cleared in most restaurants, cafes, bars and pubs and a few places offer separate

rooms to reduce the effects of secondhand smoke. To avoid complications and reconstruction, many restaurants or pub owners have opted to go entirely smoke free. Other non-smoking areas include health care facilities, universities, and indoor offices. The stricter the anti-smoking legislation for Slovakia the stronger the impact will be on reducing smoking habits of the population at large and lessen the outcomes of, diseases, disability and death.

## Adolescent Smoking

Although efforts have been made, reducing the numbers of smokers has been difficult. Smoking among young girls is on the rise and since smoking is popular among younger women, it has been increasing with potentially negative consequences for their future health. Smoking in adolescence increases the risk of developing cardiovascular diseases, respiratory illnesses, and cancers. The trend of younger girls smoking can be a result of peer pressure and shying away from the “good girl” image proving to others that they are grown up. Media influences and advertising cater to younger women and inadvertently show that smoking makes them thin by curbing their appetite. Interventions are needed to prevent younger people from starting to smoke in the first place and reduce their chances for premature diseases and death.

## Current Policy

Slovakia’s efforts to control smoking have made improvements to the number of individuals who smoke. Smoke-free policies have been shown to reduce tobacco consumption and encourage individuals to quit. Slovakia signed the WHO Framework Convention on Tobacco Control (FCTC) Treaty in 2004 to help fight the tobacco epidemic. This treaty made great improvements for countries controlling the

tobacco issue. However, more efforts can be made to strengthen the controls. The WHO FCTC and its guidelines are still not being used to their fullest potential and more work is needed to control the tobacco epidemic. Improvements are in demand to reduce the number of smokers and increase the overall health of Slovakia.

## Strategies & Recommendations

There are a few strategies and recommendations that can be made in order to help control this public health issue and have shown to be effective in doing so. Health promotion is pivotal in the drive to reduce smoking and the growing number of diseases worldwide. Public education is an integral part of the efforts to both prevent the initiation of smoking as well as encourage cessation (Larzelere, Williams 2012). By increasing the public’s knowledge about smoking cessation methods, health professionals can support and encourage a larger number of smokers to quit. This can be done by encouraging health professionals to use cessation interventions in their practice and educate patients as to the harmful effects of smoking. Health practitioners can inform patients about the benefits of tobacco cessation; and distribute nicotine replacement pharmacologies to patients that may have trouble quitting on their own. Another smoking cessation strategy that can be used is encouraging public role models like educators, nurses, medical students, community members, and doctors to spread the awareness of the negative effects smoking has and motivate cessation.

As previously mentioned, more youth are beginning to smoke. This can be due to peer pressure from their friends or the media. More often than not, younger people are unaware of the effects smoking truly has on their lives. In order to control this, school-based prevention programs are beneficial

to prevent adolescent smoking and increase their knowledge at a young age. The goal of such initiatives is to keep young people tobacco free.

Smoking in the workplace can result in the loss of productivity and increase absenteeism. By offering smoking cessation programs in the workplace, organizations can improve employee health, and over the long term, can bolster the bottom line by reducing health costs and improving productivity. Some organizations will not hire smokers due to the effects smoking has on other employees and the organization. Organizations can implement a policy restricting smoking in the workplace and offer cessation programs among employed smokers. This strategy can be effective in making for happier and healthier employees.

Public health actions must be taken to control this issue to make for a healthier population. Slovakia must strengthen national monitoring and surveillance in order to create evidence-based legislative measures and programs for tobacco control. This can be done with the help of the WHO Framework Convention on Tobacco Control (FCTC). Such measures of this treaty include: monitoring tobacco use and prevention policies; protecting people from second-hand tobacco smoke; offering help to quit; warning about the dangers of tobacco; raising taxes; enforcing bans; etc. (WHO Europe, 2018).

## Conclusion

Slovakia has made great strides to control smoking by enforcing bans on tobacco use, raising taxes, health warnings, etc.; however, there are still opportunities for increased reduction in smoking. Smoking is the most preventable cause for disease and death. Control efforts are needed to reduce this problem. With the help of legislative measures and public health education this problem can be controlled and positive

results achieved. More public knowledge and education is needed to spread the awareness of the detrimental effects this risk factor. Tighter surveillance and monitoring is called for in order to create evidence based legislation and cessation interventions to get this problem under control.

## References

1. DATA AND STATISTICS (2018) Retrieved from <http://www.euro.who.int/en/health-topics/disease-prevention/tobacco/data-and-statistics>.
2. LARZELERE M M, WILLIAMS D E (2012, March 15) Promoting Smoking Cessation. Retrieved from <https://www.aafp.org/afp/2012/0315/p591.html>.
3. POLICY RECOMMENDATIONS FOR SMOKING CESSATION AND TREATMENT OF TOBACCO DEPENDENCE (2010, December 11) Retrieved from [http://www.who.int/tobacco/resources/publications/tobacco\\_dependence/en/](http://www.who.int/tobacco/resources/publications/tobacco_dependence/en/)
4. SLOVAKIA (2017, September 19) Retrieved from <http://www.healthdata.org/slovakia>.
5. SLOVAKIA (2018) Retrieved from <https://tobaccoatlas.org/country/slovakia/>.
6. SLOVAKIA (2018, October 13) Retrieved from <http://www.who.int/countries/svk/en/>.
7. SMOKING & TOBACCO USE (2017, May 15) Retrieved from [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/health\\_effects/effects\\_cig\\_smoking/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm).
8. SMOKING & TOBACCO USE (2017, February 01) Retrieved from [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/cessation/quitting/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/cessation/quitting/index.htm).
9. RANNEY L, MELVIN C, LUX L, MCCLAIN E, LOHR K N (2006, December 05) Systematic Review: *Smoking Cessation Intervention Strategies for Adults and Adults in Special Populations*. Retrieved from <http://annals.org/aim/fullarticle/730874>.