

# Perceptions towards the adoption of tobacco-related recommendations of the European Code Against Cancer (4th ed.) among the European Union population: a qualitative study.

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**Background:** Cancer is a major public health problem. Four million new cancer cases are diagnosed annually in Europe; of which, 40% could be prevented. The European Code Against Cancer (ECAC) is a health education tool aimed at raising awareness about evidence-based actions to prevent cancer. It reports 12 recommendations to reduce individuals' cancer risk. Our aim was to explore perceived barriers towards the adoption of cancer prevention actions recommended by the ECAC in 7 European Union (EU) countries (Croatia, France, Germany, Ireland, Poland, Portugal, Spain).

**Methods:** The COM-B model of behaviour change was used as a framework for the design and analysis of the study since it identifies factors (capability, opportunity, motivation) that need to be present for any behaviour to occur. We designed an exploratory research qualitative study by means of in-depth semi-structured interviews among adults with no previous cancer diagnose. Participants were selected using a quota sampling strategy according to sex, age and education level (18 profiles/country). Interviews were conducted in participants' native language by trained researchers. We conducted a thematic content analysis to identify common topics.

**Preliminary results:** Most participants were aware of all ECAC recommendations, except for radon; but did not know how to put them into practice nor where to find information. The main barriers to adopt lifestyle-related recommendations were having an addiction to quit smoking, lack of skills to be physically active or breastfeed (capability); lack of time to exercise or cook, lack of financial resources, cultural norms and peer pressure (opportunity). Barriers for other risk factors included lack of knowledge about work carcinogens or radon, lack of control of the exposure since it depends on others' diligence (e.g., employer) (capability). Finally, barriers to participate in vaccination and screening programs were personal beliefs (e.g., anti-vaccines movement) (capability), living in rural areas, and lack of quality and saturation level of national health system (opportunity).

**Conclusions:** Understanding how the ECAC recommendations are perceived by EU citizens and the barriers they encounter to take action to reduce their cancer risk is key to promote adoption of the recommendations and improve supportive societal structures to overcome these barriers.

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