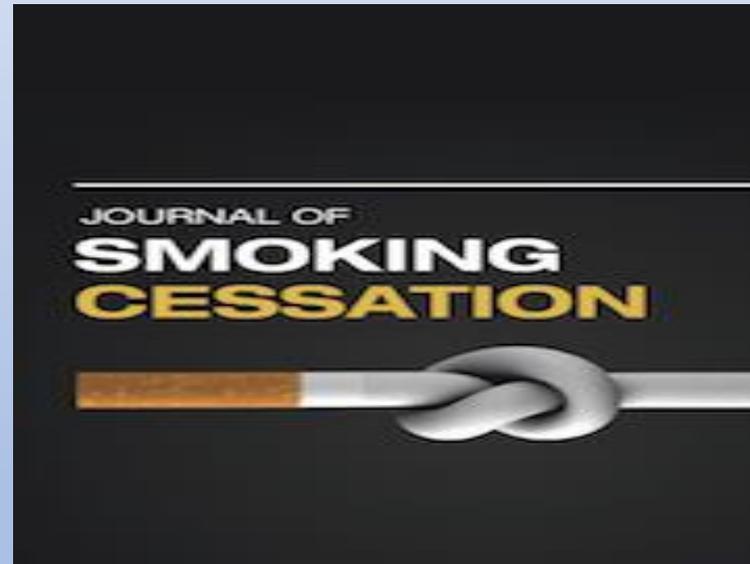


The Journal of Smoking Cessation



Quick History

- Invented/ founder Editor in Chief in Australia by Renee Bittoun 2009.
Journal of AASCP
- Seed funding for publisher Australian Academic Press
by Australian Federal Government
- Editorial Board included Karl Fagerström (Sweden), Ernest Groman (Germany), Carlos Andres Jimenez Ruiz (Spain), Hayden McRobbie (NZ), Haniki Mohamad (Malaysia), John Hughes (USA) and Matt Bars, USA (Journal of ATTUD, USA)
- 2012 Journal sold to Cambridge University Press, UK
- Journal went *Open Access 2021*
- Journal sold to MAXIMUM Press, China 2023- Prof. Yanhui Liao Editor in Chief.
- Current Open Access Fee to author : \$1750 USD
- One supporting association— —The Chinese Association for Drug Abuse Prevention and Treatment

Current Situation- Some Metrics

Journal of Smoking Cessation
2025 Quarter 3 Report

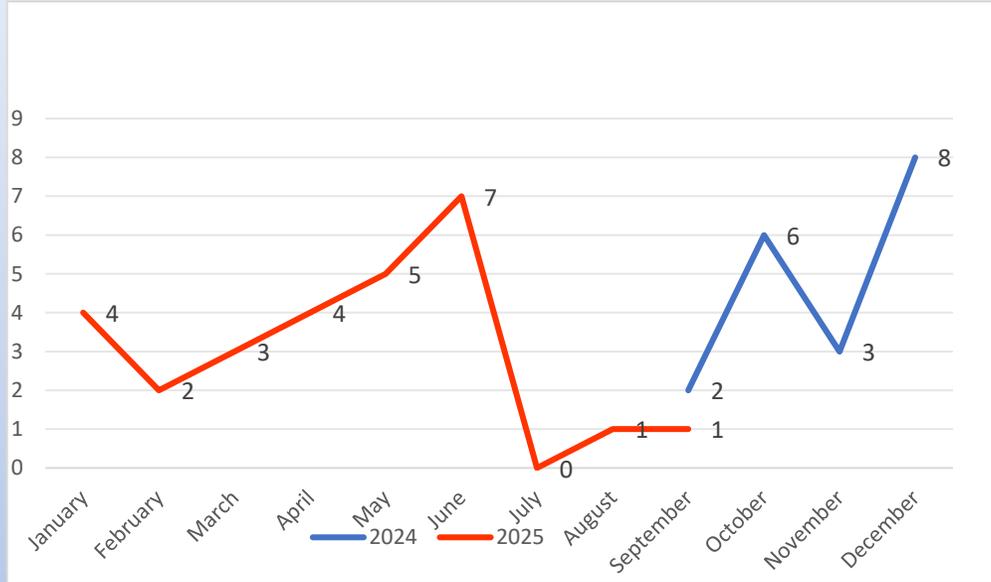


Figure 1 – Submissions by month.

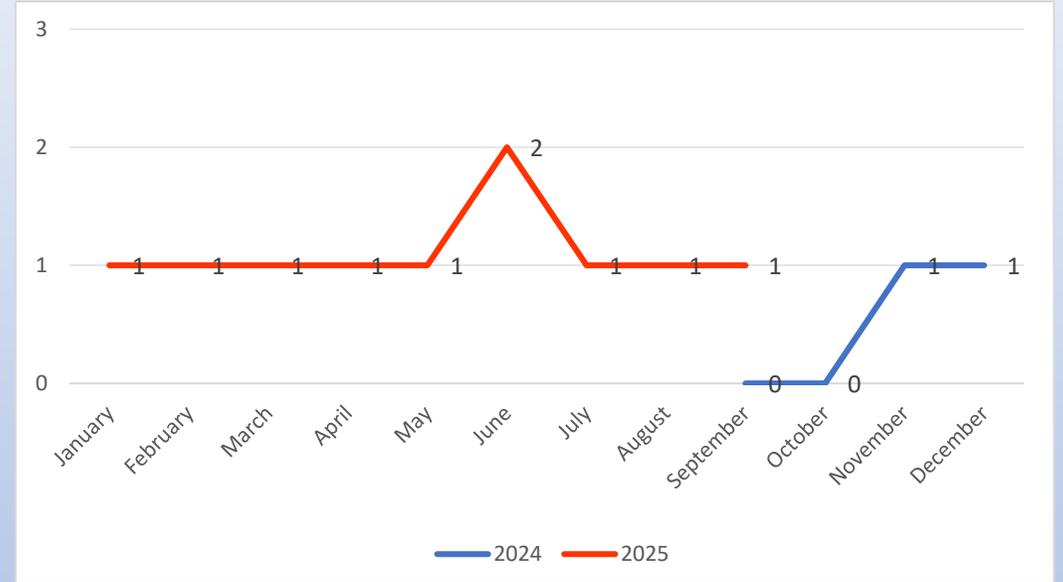


Figure 2 – Papers accepted by month.

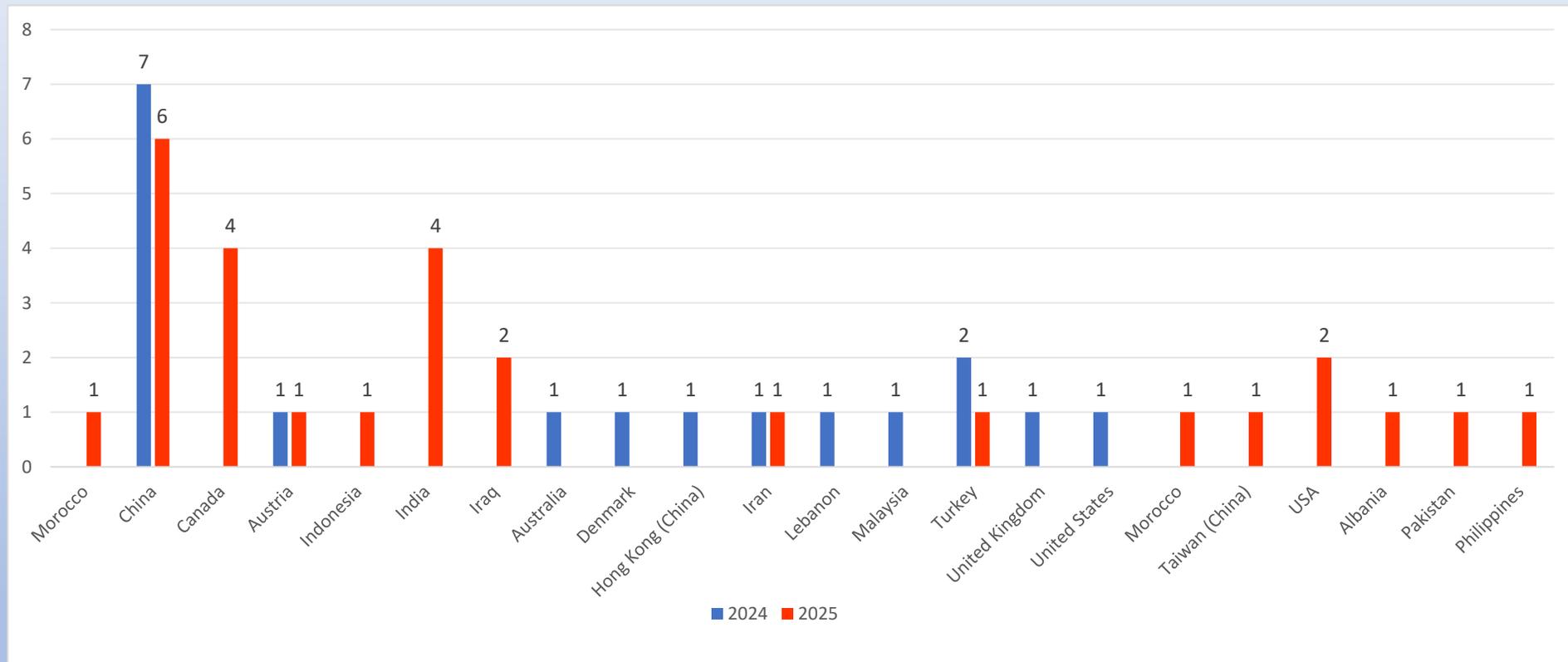


Figure 3 – Submission geographic region of origin (determined by corresponding author) by year.

Table 5 – Articles Attracting the Highest Views in Q3 2025.

Views	Article Details	Download
2594	Urgent need for new regulations to stop e-cigarettes from encouraging smoking among Chinese youth 10.48130/jsc-0025-0007	3108
2397	The development of community-based smoking cessation interventions in Hong Kong 10.48130/jsc-0025-0003	490
2079	Association between school bullying victimization and e-cigarette use and its sex difference: evidence from Chinese adolescents 10.48130/jsc-0025-0001	691
1553	Harnessing basic research to advance smoking cessation treatments: a perspective on new directions 10.48130/jsc-0024-0002	370
1501	Barriers and facilitators to smoking cessation in smokers: a semi-structured and qualitative interview 10.48130/jsc-0024-0005	923

Citations

Simulated Real-time Journal Impact Factor

$$\text{Journal Impact Factor 2025} = \frac{\text{Citations in 2025 to items published in 2023 + 2024}}{\text{Number of citable items in 2023(11) + 2024 (2)}} = \frac{16}{13} = \mathbf{1.23}$$

Citations gathered via Web of Science™, Updated to 20 October 2025.

CiteScoreTracker

$$\text{CiteScoreTracker 2025} = \frac{\text{Citations received in 2022–2025 for publications from 2022 to 2025}}{\text{Total number of articles published from 2022 to 2025}} = \frac{34}{32} = \mathbf{2.6}$$

Citations gathered via Scopus. Updated to 05 October, 2025.

- Good Impact Factor is > 1.
- Many excellent, highly specialized journals have lower impact factors.

What We Can Do?

- Support OUR journal as the APSAD Special Interest Group
- Send articles— free of charge for you
- Become a Reviewer
- Become an Editor/Sub Editor



It was gonna take about three days

The Transtheoretical Stages of Change

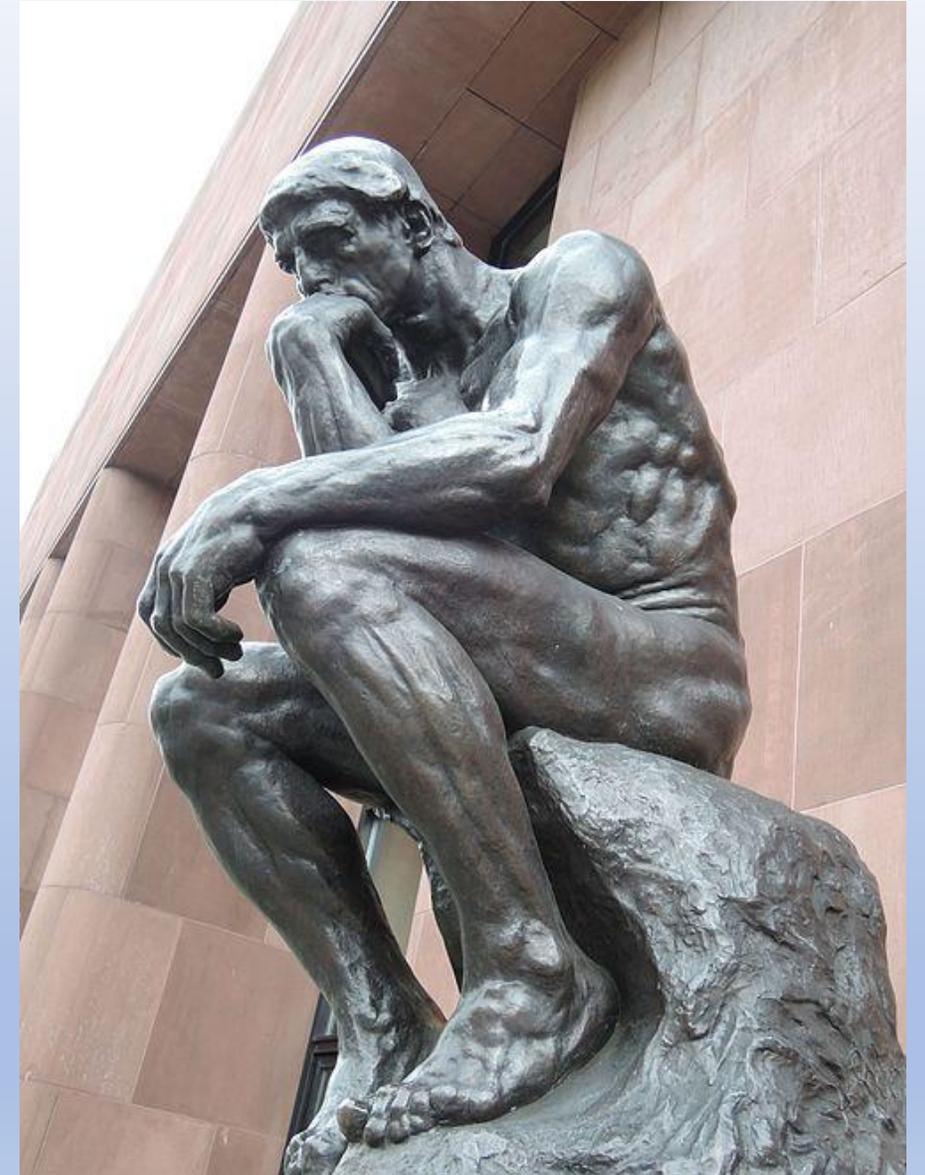
Time to Stop Using This Model

Renee Bittoun

Stages Of Change



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- The Stages of Change model, developed by Prochaska and DiClemente in the 1980s, has been widely used in smoking cessation interventions.
- Reports of > 4500 citations in adult cessation alone
- Recent research has increasingly questioned its validity and effectiveness.

Here are key points debunking this model, supported by scientific evidence:

Lack of Empirical Support

- Multiple studies have failed to find evidence supporting the model's basic assumptions about discrete stages and sequential progression
- A systematic review by West (2005) concluded that the evidence for the model in the domain of smoking cessation is "meagre".
- Stages have increased from 3, to 4, to 6 and more
- A systematic review by West (2005) concluded that the evidence for the model in the domain of smoking cessation is "meagre".

Oversimplification of Behaviour Change

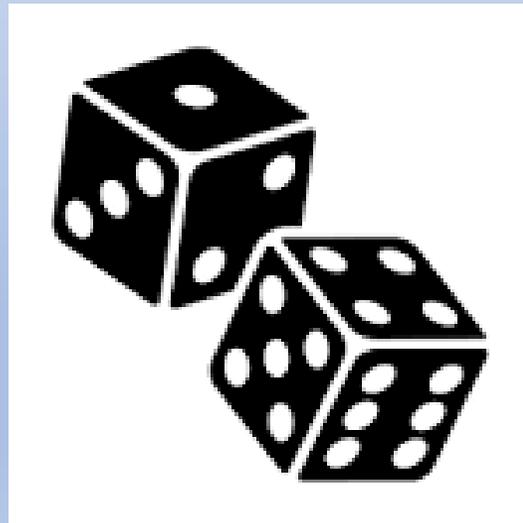
- The model assumes a linear progression through stages, which doesn't reflect the complex reality of smoking cessation.
- It fails to account for the often sudden, trauma induced and unplanned nature of successful quit attempts.

The Ambulance Quitter →



Poor Predictive Value

- Stage membership has been found to be a poor predictor of future smoking status or quit attempts.
- The model's ability to predict smoking cessation was no better than chance.



Arbitrary Time Frames

- The time frames used to define stages (e.g., planning to quit within the next 30 days) are arbitrary and lack empirical justification .



**Pick a quit date?
New Year's Resolutions?**

Neglect of Social and Environmental Factors

- The model neglects crucial social and environmental factors that influence smoking behaviour . Family, friends

All my friends do it



All my friends hate it



Limited Effectiveness of Stage-Matched Interventions

- Interventions based on the Stages of Change model have not consistently outperformed non-stage-based interventions .
- A Cochrane review found no evidence that stage-based interventions are more effective than non-stage-based interventions in changing smoking behaviour.



Potential for Harmful Effects

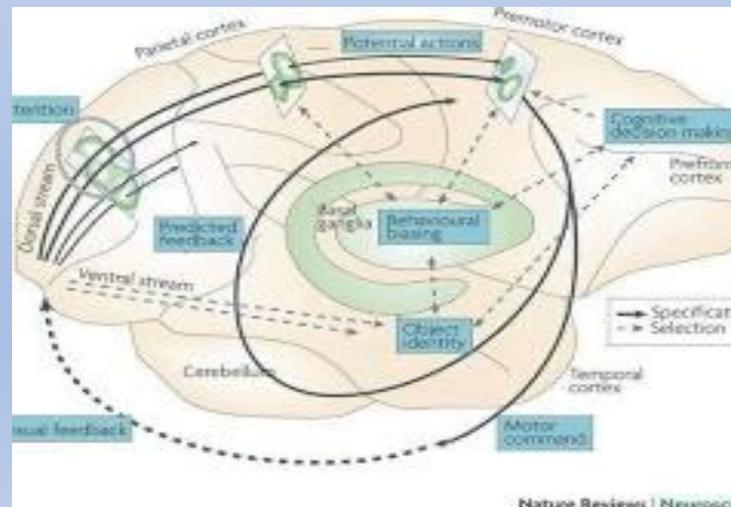
- The model may lead to withholding effective interventions from smokers deemed "not ready" to quit, potentially delaying quit attempts. Is this negligent?



Intimidating

NO Consideration of Nicotine Dependence

- The model doesn't adequately account for the role of nicotine dependence in maintaining smoking behaviour and influencing quit attempts. Is this negligence!
- Motivation and decision making is corrupted by the addiction itself (see Volkow et al), hypo-frontality.



Alternative Models Showing Promise

- Other models, such as PRIME theory (Plans, Responses, Impulses, Motives, Evaluations) by West, offer more comprehensive frameworks for understanding smoking behaviour and cessation.
- Or you could simply ask: Do you want to quit?
- Ask about “managing” this better?

Conclusion

- While the Stages of Change model has been influential, accumulating evidence suggests there are limitations in effectively understanding and promoting smoking cessation.
- Healthcare professionals and researchers should consider more comprehensive, evidence-based approaches to smoking cessation that account for the complex, often non-linear nature of behaviour change.

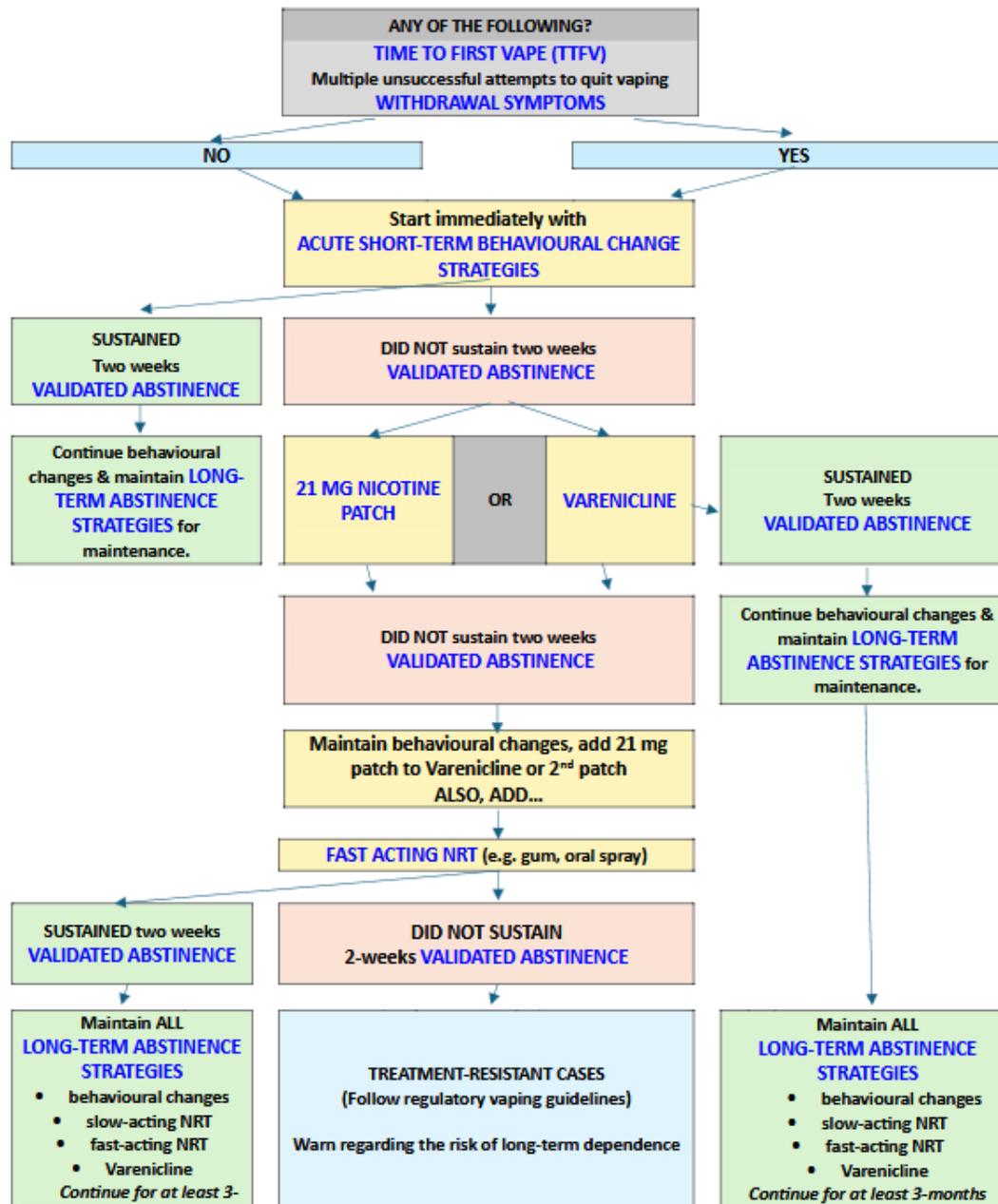
Next time: The **4Ds**.....where is the evidence?

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BITTOUN CLINICAL DECISION FLOW CHART FOR VAPING CESSATION IN ADULTS 18 +

In these recommended processes, TTFV lengthens, and withdrawal symptoms should reduce



Hierarchy of Nicotine Delivery

Order of speed of delivery, neurological, vascular effects and dependency potential

