



Cambridgeshire  
County Council

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Hallam  
University**

Centre for Behavioural  
Science and Applied  
Psychology

# Addressing barriers to accessing Stop Smoking Services in Cambridgeshire

Proof-of-concept testing for behavioural science-  
informed messaging

December 2025

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### Recommended citation:

Humphreys, H., Tkacova, D., Hope, D. & Thorneloe, R. (2025). *Addressing barriers to accessing Stop Smoking Services in Cambridgeshire: Proof-of-concept testing for behavioural science-informed messaging*. A report commissioned by Cambridgeshire County Council.

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# Executive Summary

Sheffield Hallam University were commissioned by Cambridgeshire County Council and Peterborough City Council to undertake research to understand the barriers and facilitators for seven health behaviours. These reports are available [here](#) (under 'healthy behaviours'). Following consultation with Cambridgeshire County Council, intervention recommendations for physical activity, alcohol consumption, and smoking in adults were taken forward for proof-of-concept testing. This report presents the findings for the **smoking** proof-of-concept evaluation. The findings for the alcohol intervention and the physical activity intervention are presented in separate reports.

**Aim:** To test the effectiveness and acceptability of behavioural science-informed messages designed to reduce barriers and/or increase facilitators to accessing Stop Smoking Services (SSS).

**Methods:** Adult smokers from across Cambridgeshire were asked to take part in a structured survey during which they were shown four prototype messages. Each message was designed to address a specific belief about local stop smoking services:

**Message 1:** Increasing the belief that it is typical for local smokers to access SSS

**Message 2:** Increasing the belief that stop smoking service advisors have appropriate expertise and lived experience

**Message 3:** Increasing the belief that quitting smoking with support increases chances of success

**Message 4:** Increasing the belief that other similar people have had positive experiences of stop smoking services

Participants were asked baseline questions about their beliefs about stop smoking services and then asked follow-up questions to explore whether their views had changed after seeing the messages. They were also asked questions about the acceptability of message content, intentions to access stop smoking services in future and asked to select a favourite message.

## Findings:

We found that two of the messages had a positive impact on participants' beliefs about stop smoking services. Messages 1 and 4 were effective in increasing the intended beliefs. No changes were observed for Message 2. Unexpectedly, Message 3 produced the opposite effect, with participants reporting a decrease in belief. This was surprising given that Message 3 received positive ratings for clarity, ease of understanding, perceived agreement among smokers, and overall appeal.

Across all four messages, participants *somewhat agreed* that:

- The words used in the messages were clear.
- They understood the aim of the messages.
- Other smokers would agree with the messages.

Across all four messages, participants *somewhat disagreed* that:

- The messages made them feel interested in learning more about SSS.
- The imagery used in the messages were appealing, although participants *somewhat agreed* that the imagery used in message 4 was appealing.
- The messages made them want to take action.

When asked which message they preferred and why, participants often cited the relatability of the person shown in the message, perceiving the message as friendly or positive, clarity and simplicity of the wording or the persuasiveness of the content (e.g., statistics).

## Recommendations include:

- 1) Incorporation of more peer stories, testimonials and case studies in service promotion
- 2) Emphasis on the relatability and lived experience of stop smoking service staff
- 3) Co-design of alternative messaging and communication approaches to appeal to younger smokers
- 4) Normalising repeat quit attempts and relapse in future messaging and communications
- 5) Considering messaging that avoids images of people
- 6) Developing a more enhanced intervention to help smokers develop the readiness to quit

# Main report

## Background

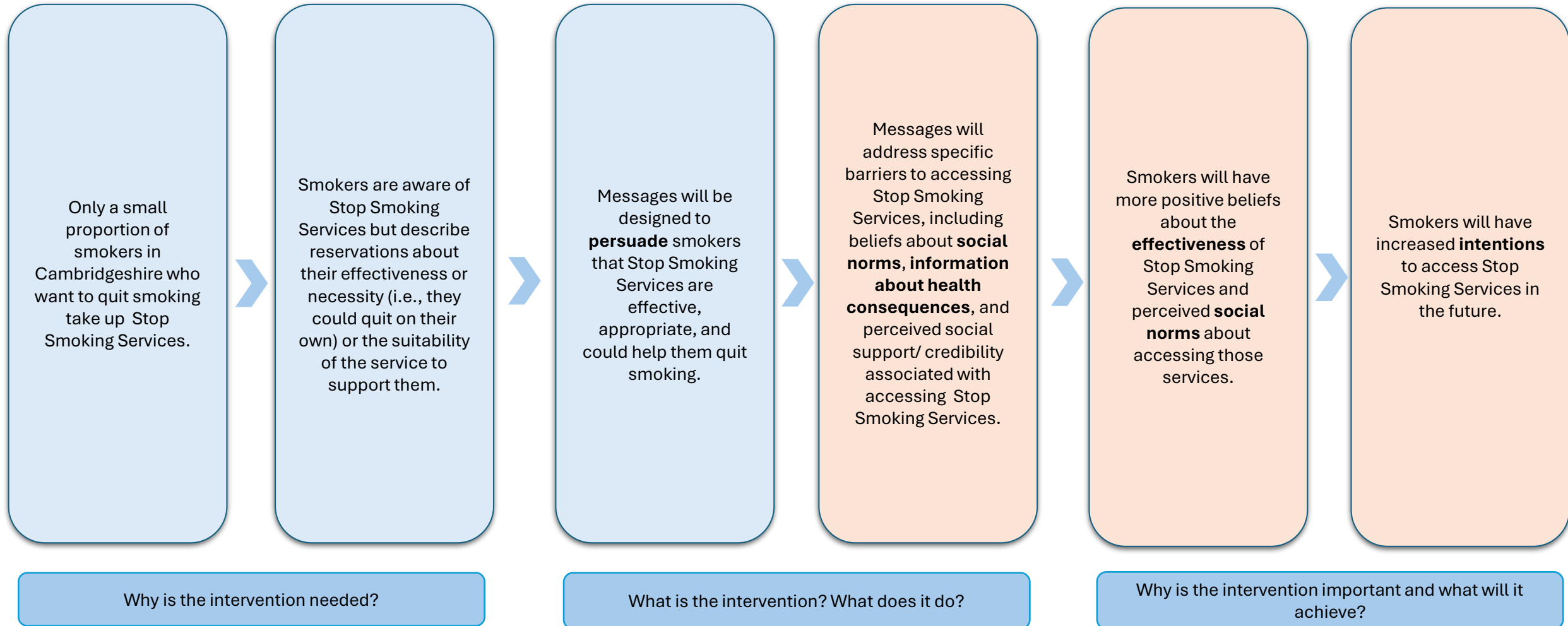
Evidence shows that community-based Stop Smoking Services are an effective intervention to support smokers to quit smoking [1] but they may be underutilised by many smokers [2]. Throughout 2024 and 2025 we undertook a series of advisory workshops with local professionals working in smoking cessation-related roles, a survey of local smokers (n=272) and qualitative interviews with smokers (n=13) living in Cambridgeshire to understand barriers and facilitators for quitting smoking, and for accessing Stop Smoking Services [3].

Our survey of Cambridgeshire residents found that only ~10% of smokers who had previously tried to quit had accessed a local Stop Smoking Service. Further interview findings found that most smokers were aware of the local service, but that some had reservations about their effectiveness, or the suitability of the services to support them.

Barriers to accessing stop smoking services included a perception that Stop Smoking Services were not run by people with lived experience of smoking, that they might be judgemental, that smokers felt able to quit independently, or preferred to quit without support. Facilitators to accessing Stop Smoking Services included beliefs that support would be helpful and knowing others who had positive experiences of using the service.

Along with several other recommendations, we advised Cambridgeshire County Council that developing new messaging about the effectiveness of smoking cessation support available throughout Cambridgeshire could potentially encourage more smokers to try and quit using the local services. We recommended that messages were designed to address key barriers and facilitators to accessing Stop Smoking Services.

## Theory of Change



The outcomes to be examined in this proof-of-concept evaluation are those in the orange boxes.

## Research questions and outcome measures

**AIM:** To test the effectiveness and acceptability of behavioural science informed messages designed to reduce barriers and/or increase facilitators to accessing Stop Smoking Services (SSS).

### Research Questions (RQs)

- **RQ1:** To what extent do prototype messages address barriers and facilitators to attending SSS?
- **RQ2:** Is the content of each message acceptable to local smokers?
- **RQ3:** Does the content of each message make smokers want to learn more about the SSS?
- **RQ4:** To what extent does exposure to prototype messages influence intentions to access SSS?

### Outcomes

#### Primary outcome measure:

- Beliefs about SSS (measured via Likert scales)

#### Secondary outcome measures:

- Acceptability of messages (measured via Likert scale)
- Intention to access SSS (measured via Likert scale)
- Preference between messages

## Methods

Prototype messages were developed using the behaviour change wheel[4], and with reference to the EAST framework [5]. Messages were tested with local smokers using a structured survey, delivered on-street by a market research organisation. Adult smokers living across Cambridgeshire were approached to take part.

Participants were asked brief questions to check their eligibility (i.e., ensuring that they were over 18, a current smoker and were not already accessing stop smoking services locally) and to collect demographic information (age, gender, ethnicity, geographical location within Cambridgeshire). All participants provided written and verbal consent to take part.

Each participant was asked baseline questions to assess their pre-existing beliefs about stop smoking services and their intentions to access them. They were then shown the four messages.

After each message participants were asked brief questions about the message content (e.g., acceptability of wording, images) and a specific question about the particular barriers (i.e., change in beliefs about stop smoking services) that each message was designed to address.

After seeing all four messages, participants were asked again to rank their intentions to access stop smoking services.

They were also asked whether the messages had increased their knowledge about stop smoking services, which message was their favourite and why.

Ethical approval was obtained from Sheffield Hallam University (ER81622054) and local approval was obtained from Cambridgeshire County Council (040225CF).

## Message 1 (Social norms)



### AIM OF MESSAGE

Increasing the belief that it is typical for local smokers to access SSS

### CONTENT

Statistic on local smokers using SSS

### QUESTION TO ASSESS BELIEFS

“I think that smokers in Cambridgeshire access stop smoking services when they are thinking about quitting”  
(Participants answer on a scale)

## Message 2 (Social support + credible source)



### AIM OF MESSAGE

Increasing the belief that stop smoking service advisors have appropriate expertise and lived experience

### CONTENT

Highlighting expertise and credibility of stop smoking advisors

### QUESTION TO ASSESS BELIEFS

“I think the people who work in the Stop Smoking Service understand what it is like to be a smoker and what it is like to try and quit”  
(Participants answer on a scale)

## Message 3 (Information about health consequences + persuasion about effectiveness)



### AIM OF MESSAGE

Increasing the belief that quitting smoking with support increases chances of success

### CONTENT

Statistic on likeliness of quitting with support vs. without support

### QUESTION TO ASSESS BELIEFS

“I think that using Stop Smoking Services makes smokers more likely to quit successfully”  
(Participants answer on a scale)

## Message 4 (Social norms + credible source)



### AIM OF MESSAGE

Increasing the belief that other similar people have had positive experiences of stop smoking services

### CONTENT

Quote/testimonial from local service user

### QUESTION TO ASSESS BELIEFS

“I think that other people like me have found the Stop Smoking Service helpful” (Participants answer on a scale)

## Findings: Participant demographics

In total, 164 smokers across Cambridgeshire took part in the survey. Demographic characteristics of participants are described below.

Variable		Value
Age	18-25	27 (16.5%)
	26-35	36 (22.0%)
	36-45	23 (14.0%)
	46-55	27 (16.5%)
	56-65	24 (14.6%)
	65+	27 (16.5%)
Gender	Male	89 (54.3%)
	Female	74 (45.1%)
	Non-binary	1 (0.6%)

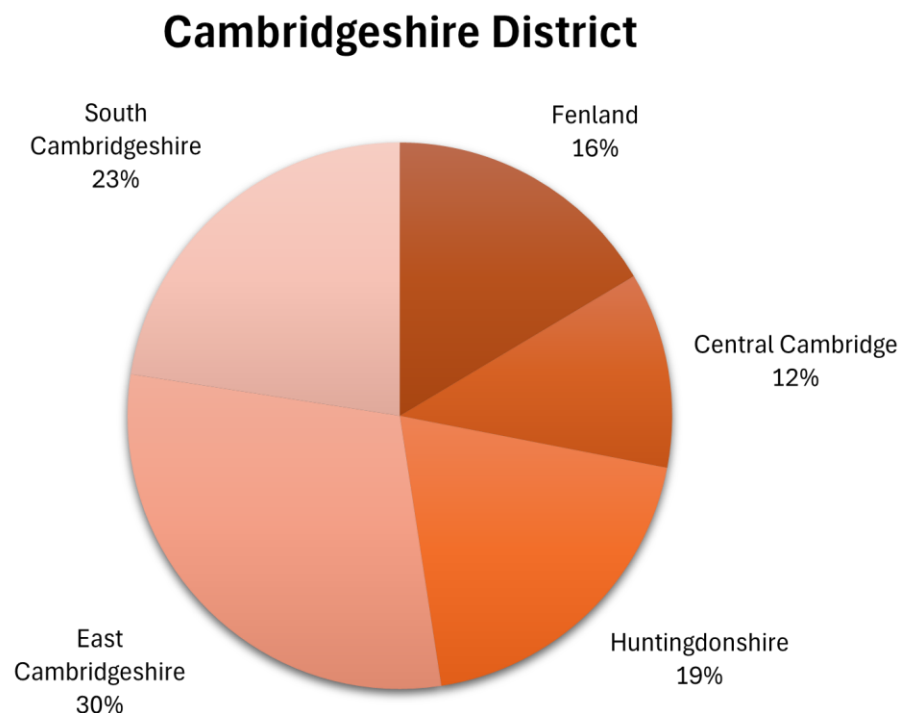
Variable		Value
Country of birth	United Kingdom	133 (81.1%)
	Other	31 (18.9%)
Multiple languages at home	Yes	32 (19.5%)
	No	132 (80.5%)
Employment <sup>a</sup>	Employed	103 (62.8%)
	Unemployed	10 (6.1%)
	Other	51 (31.1%)
Routine or manual occupation	Yes	74 (45.1%)
	No	89 (54.3%)
	Don't know	1 (0.6%)

a = employed categories are = Full-time, part-time, self-employed/ freelance, on maternity/ paternity, signed off sick short-term/ temporary; Not employed categories are = Unemployed and looking for work, Unemployed and not looking for work; Other employment categories are = retired, in full time education or training, looking after home or family, unpaid carer, long-term sick or disabled, other.

## Findings: Participant demographics

### Location

Participants were recruited from **Cambridgeshire districts**, these included Fenland, Central Cambridge, Huntingdonshire, East Cambridgeshire, and South Cambridgeshire.



### Ethnicity

Ethnicity	White British	129 (78.7%)
	White other	14 (8.5%)
	Mixed/multiple or other ethnic groups	4 (2.4%)
	Asian or Asian British	7 (4.3%)
	Black/ African/ Caribbean/ or Black British	2 (1.2%)
	Other	8 (4.9%)

### Languages spoken

At home, 32 participants used a language other than English.

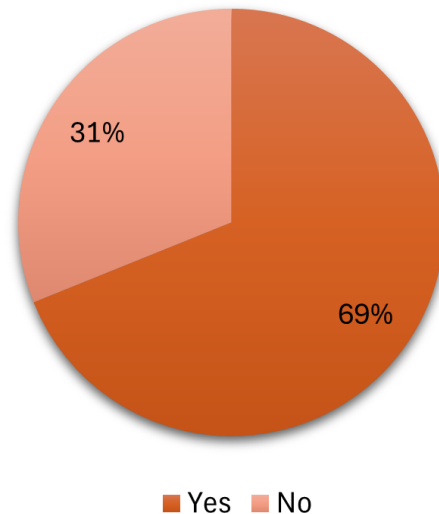
A total of 21 languages were spoken by participants and 4 participants spoke multiple languages.

## Participants' smoking history

### Previous quit attempts

Participants were asked about their **smoking history**, such as whether they had previously tried to quit. All participants in the survey were current smokers, and a large proportion (113 participants) had **not tried to quit before**.

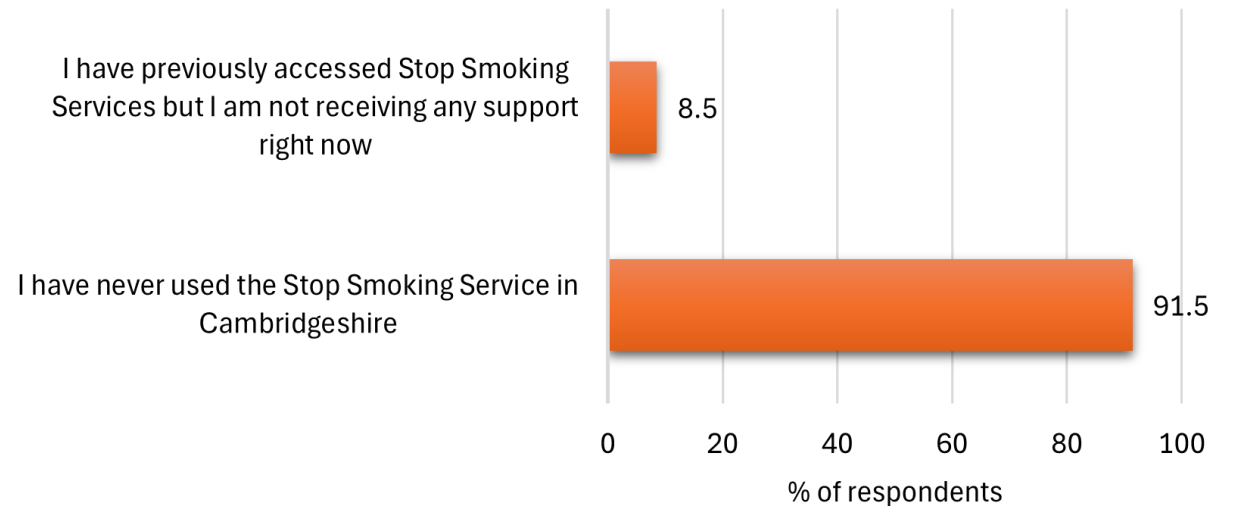
### Have you ever tried to quit smoking before?



### Access to SSS

Participants were also asked about whether or not they had accessed SSS before. Out of all the smokers in the survey, the majority had **not accessed SSS** (150 participants).

### Have you ever accessed Stop Smoking Services in Cambridgeshire?

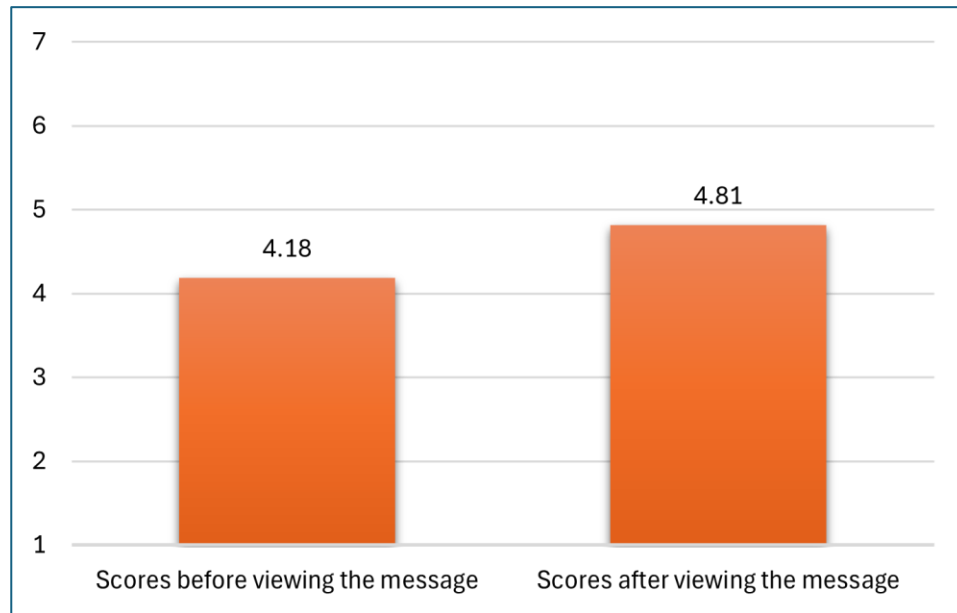


# Research Question 1: To what extent do prototype messages address barriers and facilitators to attending Stop Smoking Services?

Before and after participants were presented with the prototype message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “*strongly disagree*” and 7 was “*strongly agree*”.

## Message 1

*“I think that smokers in Cambridgeshire access stop smoking services when they are thinking about quitting”*



This message **significantly increased** the perception that smokers in Cambridgeshire access Stop Smoking Services when they are thinking about quitting smoking.

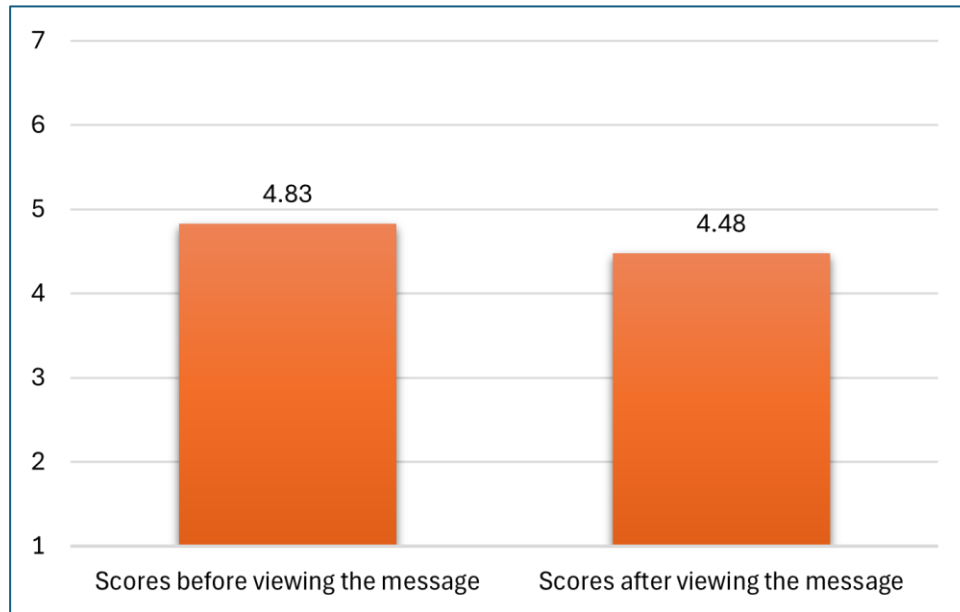
Note. The data for Research Question 1 demonstrated normality. A paired samples t-test and the mean and standard deviation (SD) were reported. There was a significant difference in the item score ( $p = .001$ ) before ( $M = 4.18$ ;  $SD = 1.72$ ) and after ( $M = 4.81$ ;  $SD = 1.60$ ) viewing the content of message 1.

# Research Question 1: To what extent do prototype messages address barriers and facilitators to attending Stop Smoking Services?

Before and after participants were presented with the prototype message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “*strongly disagree*” and 7 was “*strongly agree*”.

## Message 2

*“I think the people who work in the Stop Smoking Service understand what it is like to be a smoker and what it is like to try and quit”*



This message **did not change** participants' perception that people who work in the Stop Smoking Service understand what it is like to be a smoker who is trying to try and quit.

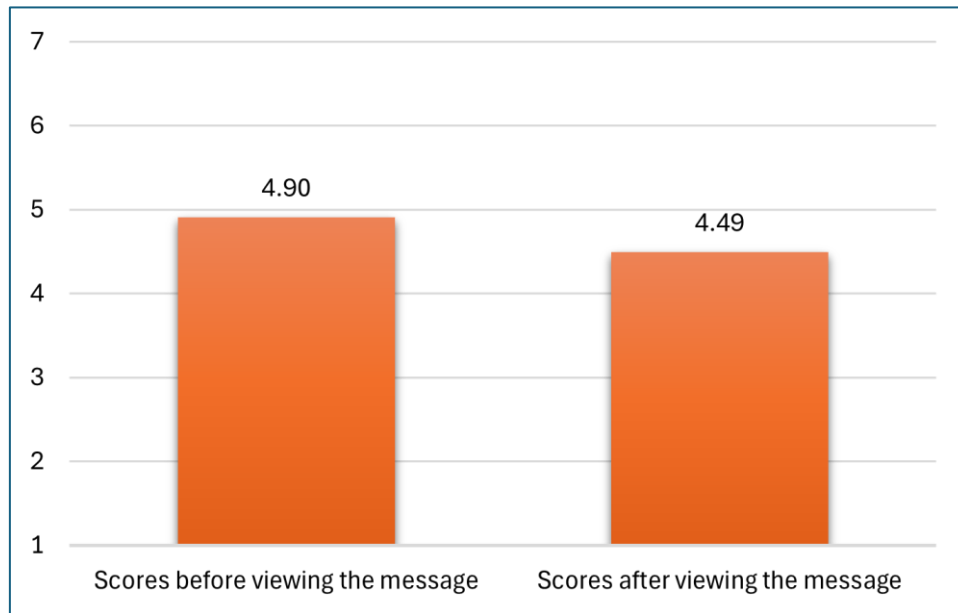
*Note.* The data for Research Question 1 demonstrated normality. A paired samples t-test and the mean and standard deviation (SD) were reported. There was no significant difference in the item score ( $p = .055$ ) before ( $M = 4.83$ ;  $SD = 1.71$ ) and after ( $M = 4.48$ ;  $SD = 1.70$ ) viewing the content of message 2.

# Research Question 1: To what extent do prototype messages address barriers and facilitators to attending Stop Smoking Services?

Before and after participants were presented with the prototype message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “*strongly disagree*” and 7 was “*strongly agree*”.

## Message 3

*“I think that using Stop Smoking Services makes smokers more likely to quit successfully”*



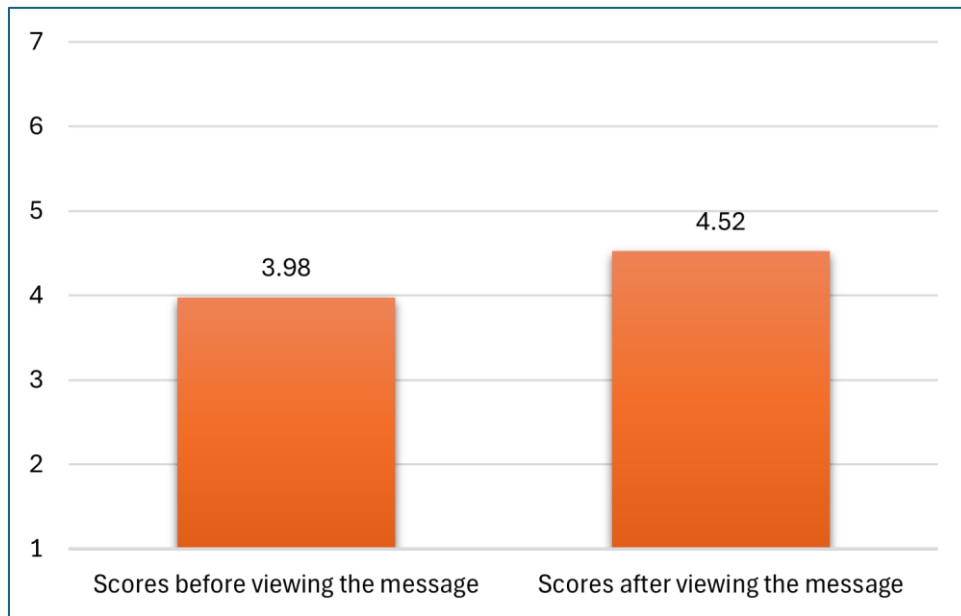
This message **significantly decreased** the perception that using Stop Smoking Services makes smokers more likely to quit successfully.

# Research Question 1: To what extent do prototype messages address barriers and facilitators to attending Stop Smoking Services?

Before and after participants were presented with the prototype message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “*strongly disagree*” and 7 was “*strongly agree*”.

## Message 4

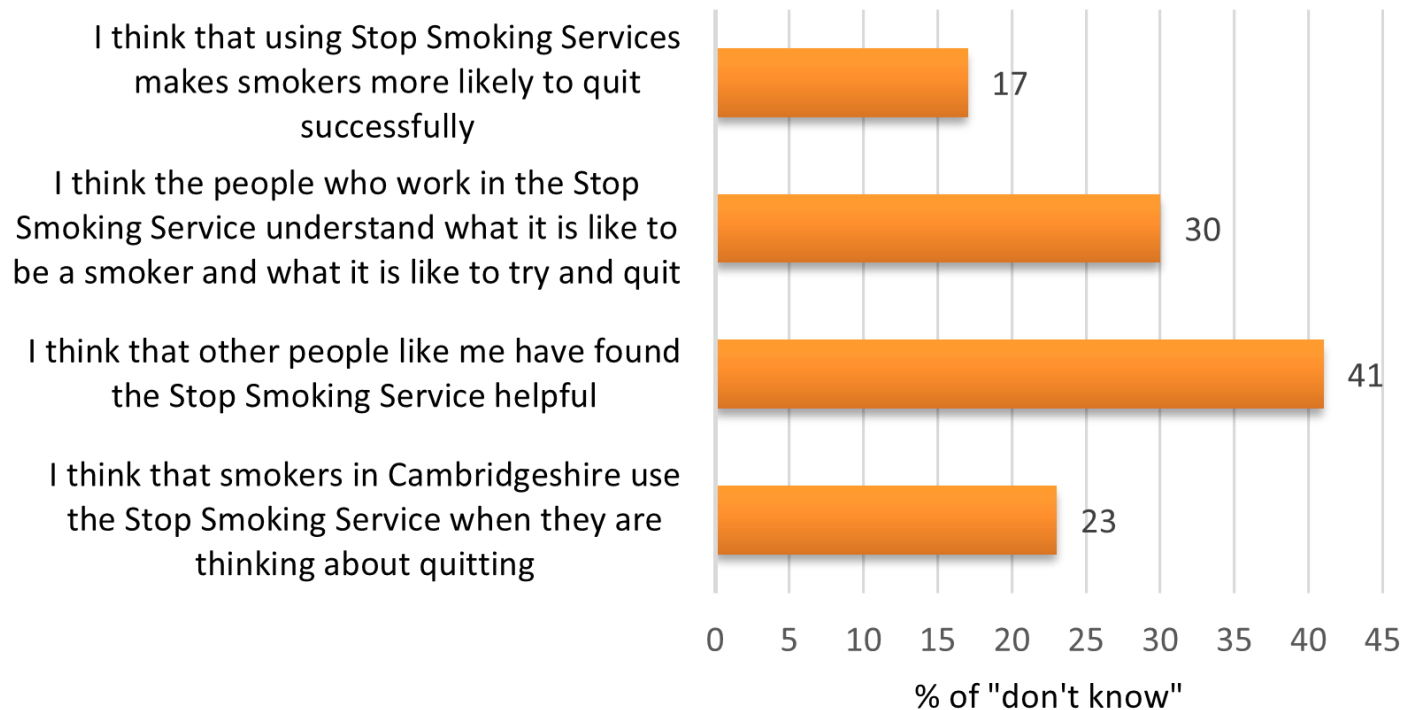
“I think that other people like me have found the Stop Smoking Service helpful”



This message significantly increased the perception that other people like them have found the Stop Smoking Service to be helpful.

## Baseline questions: Frequency of "don't know" responses

### Baseline questions

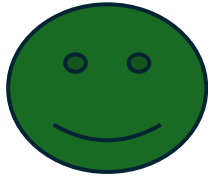


For baseline questions at the beginning of the survey, participants reported a high percentage of "don't know".

This ranged from 17% to 41% across the questions, with two items showing particularly high levels (30% and 41%).

A possible explanation may be that participants had little prior experience of SSS and thus felt unable to comment on its use by other smokers. This aligns with the finding that 91.5% of participants had not accessed the service in the past.

## Research Question 1: Summary



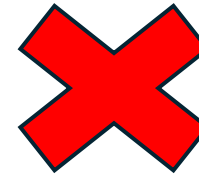
Two messages had a positive impact on participants' beliefs about Stop Smoking Services.



This message **increased the belief** that it is typical for local smokers to access Stop Smoking Service.



This message **increased the belief** that others who are similar to them have had positive experiences of Stop Smoking Services.



Two messages had no impact, or evidence of unintended negative consequences, on participant's beliefs about Stop Smoking Services.



This message **did not influence** the belief that Stop Smoking Service advisors have appropriate expertise and lived experience.

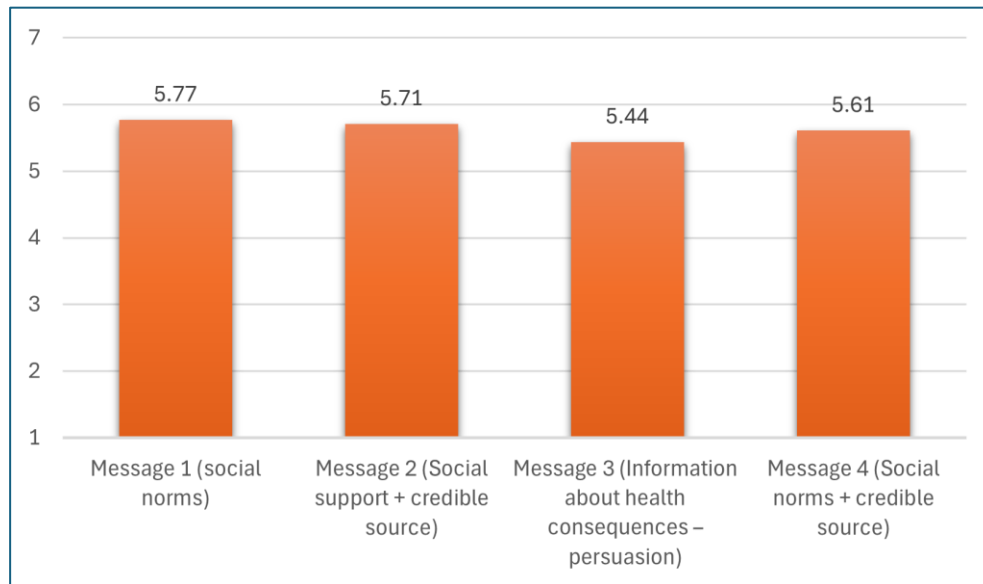


This message **decreased the belief** that quitting smoking with support increases chances of success.

## Research Question 2: Is the content of each message acceptable to local smokers?

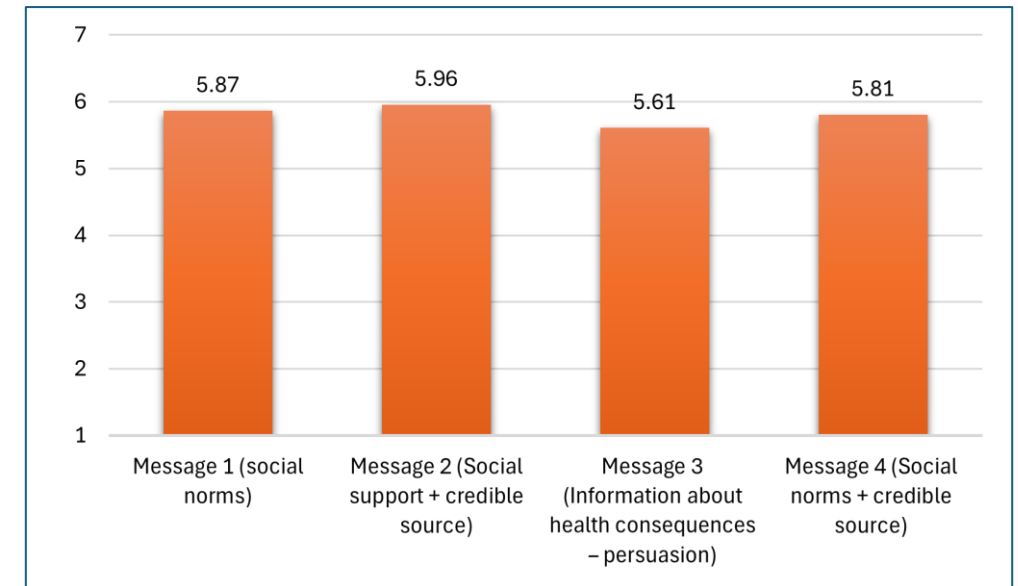
After participants viewed each message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “strongly disagree” and 7 was “strongly agree”.

*“The words used in this message are clear to me”*



Across all four messages, participants *somewhat agreed* that the words used in the messages were clear.

*“I understand the point of the message”*

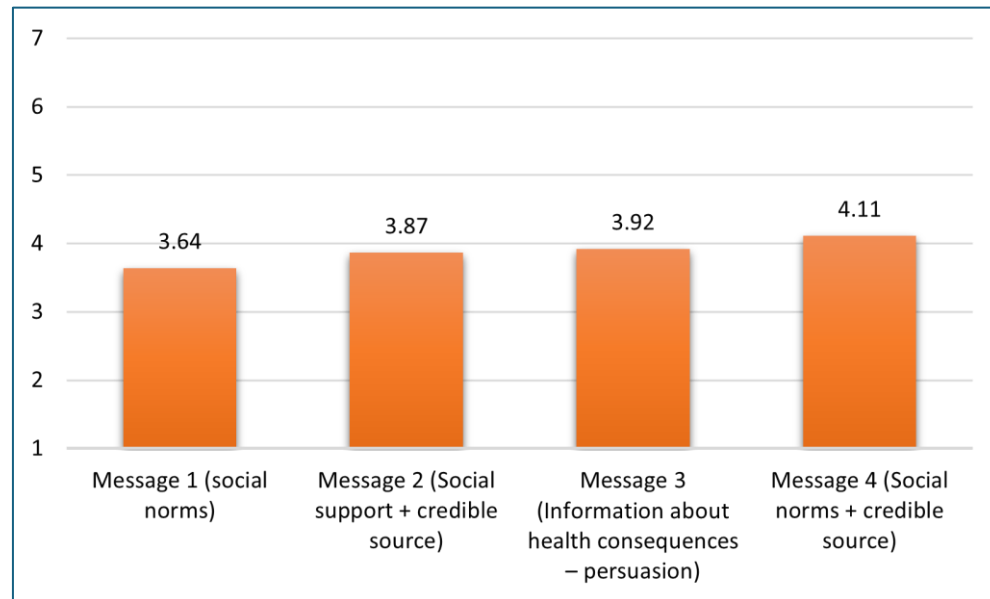


Across all four messages, participants *somewhat agreed* that they understood the aim of the messages.

## Research Question 2: Is the content of each message acceptable to local smokers?

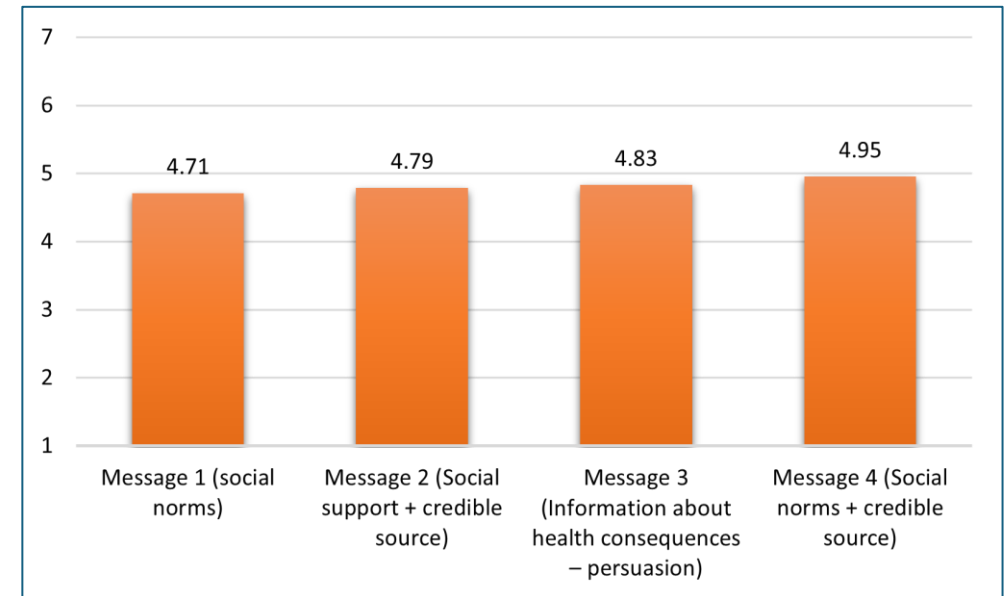
After participants viewed each message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “strongly disagree” and 7 was “strongly agree”.

*“The pictures in Message 1/2/3/4 appeal to me”*



Participants *somewhat disagreed* that the imagery used in the messages were appealing, although participants *somewhat agreed* that the imagery used in message 4 was appealing.

*“I think other smokers would agree with this message”*

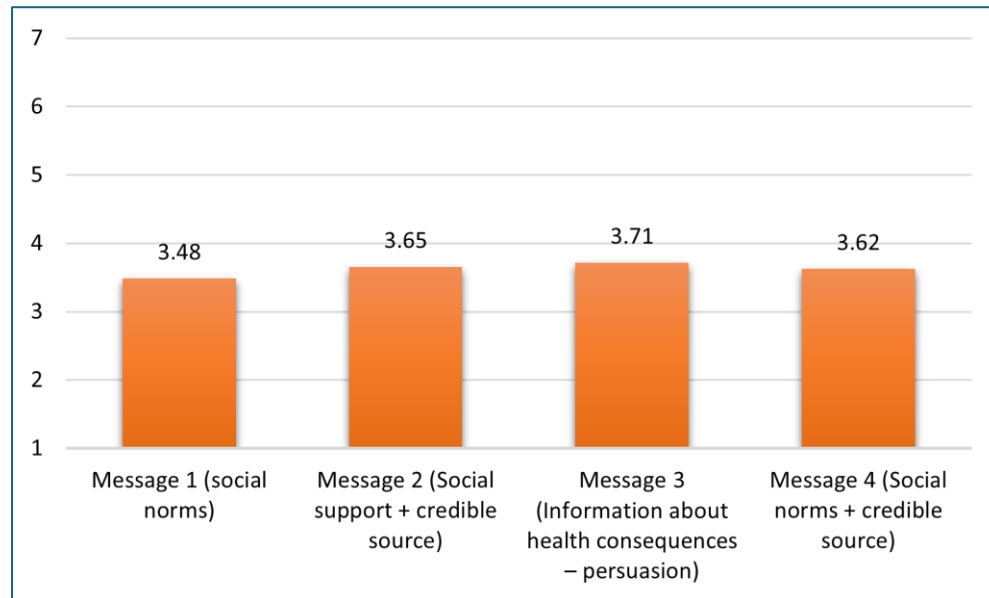


Participants *somewhat agreed* that other smokers would agree with the message.

## Research Question 3: Does the content of each message make smokers want to learn more about SSS?

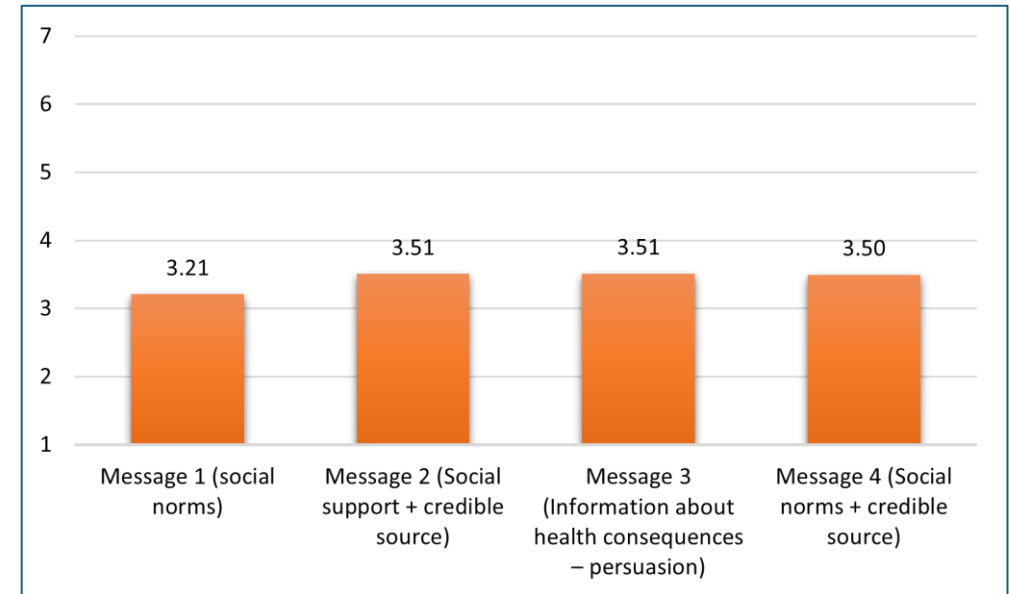
After participants viewed each message, they were asked to rate the following statement on a scale of 1 to 7, where 1 was “*strongly disagree*” and 7 was “*strongly agree*”.

*"This message makes me feel interested in learning more about the Stop Smoking Service"*



Participants *somewhat disagreed* that the messages made them feel interested in learning more about the Stop Smoking Service

*"This message makes me want to take action"*



Participants *somewhat disagreed* that the messages makes them want to take action.

## Research Question 2 and 3: Summary



Message 1 (Social norms)



Message 2 (Social support + credible source)



Message 3 (Information about health consequences + persuasion about effectiveness)



Message 4 (Social norms + credible source)

Across all four messages, participants *somewhat agreed* that:

- ✓ The words used in the messages were clear
- ✓ They understood the aim of the messages
- ✓ Other smokers would agree with the messages

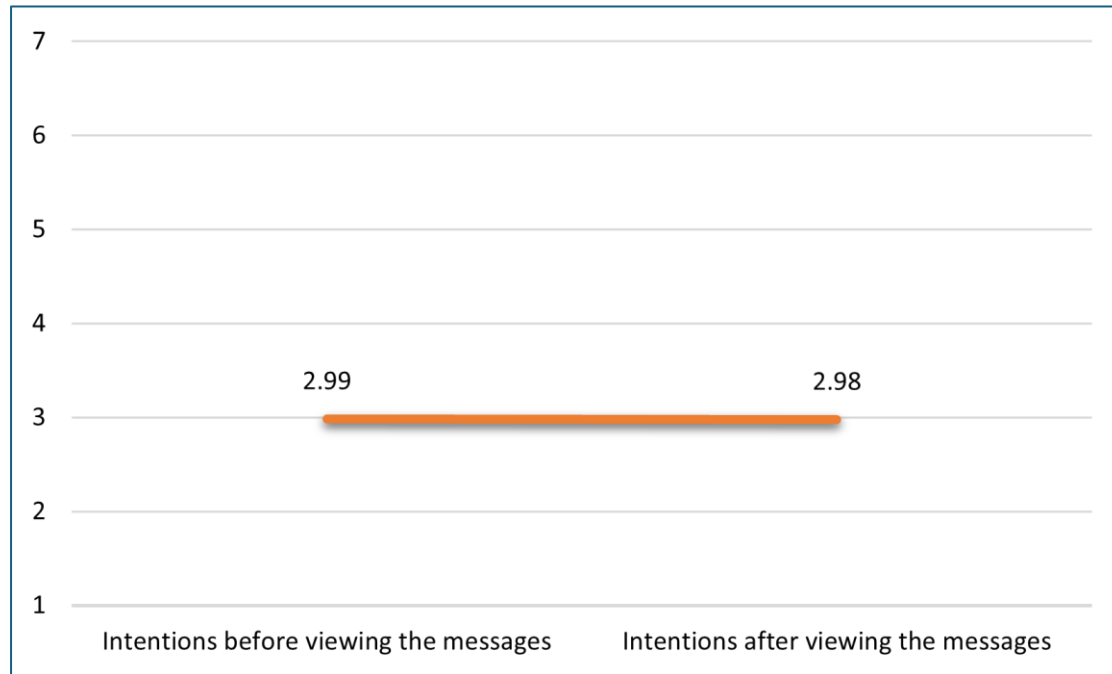
Across all four messages, participants *somewhat disagreed* that:

- The messages made them feel interested in learning more about the Stop Smoking Service
- The imagery used in the messages were appealing, although participants *somewhat agreed* that the imagery used in message 4 was appealing.
- The messages makes them want to take action.

## Research Question 4: To what extent does exposure to prototype messages influence intentions to access Stop Smoking Services?

Before and after participants viewed the messages, they were asked to rate the following statement on a scale of 1 to 7, where 1 was *“strongly disagree”* and 7 was *“strongly agree”*.

*“I plan to access the Stop Smoking Service in the next 3 months”*

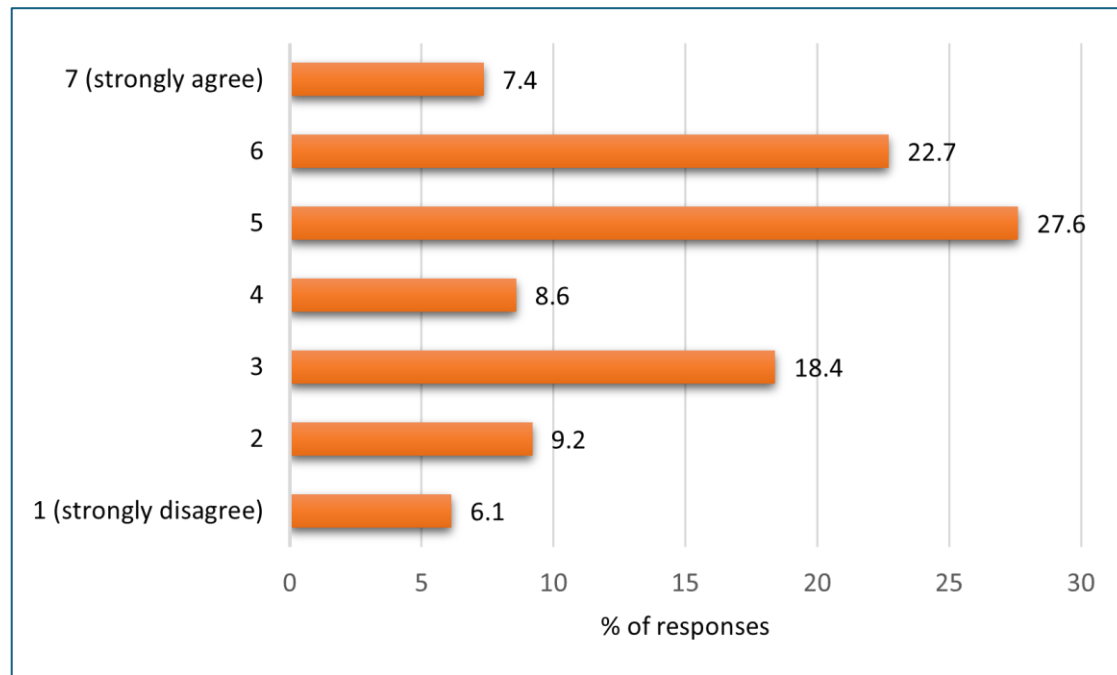


As shown in the graph, there were **no differences** in intentions to access the Stop Smoking Service in the next 3 months, before and after viewing the messages.

## Feedback: Knowledge about Stop Smoking Services in Cambridgeshire

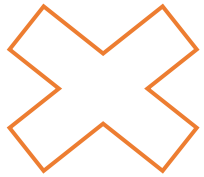
At the end of the study, participants were asked if they knew more than they did before about the service, they were asked to rate the following statement on a scale of 1 to 7, where 1 was *“strongly disagree”* and 7 was *“strongly agree”*.

*“I know more than I did before about the Stop Smoking Service in Cambridgeshire”*



Over half of the sample (57.7%) **strongly agreed, agreed, or somewhat agreed** that the messages had increased their knowledge about the local Stop Smoking Service.

## Research Question 4: Summary



Participants **did not report any differences in intentions to access SSS** after viewing the prototype messages. This indicates that the messages had no influence on behavioural intentions.



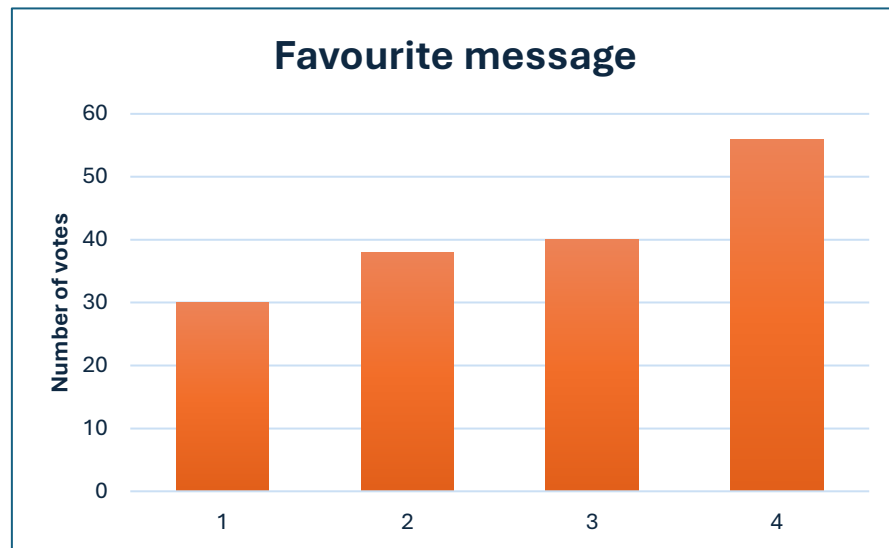
We did not expect that intentions would increase in this study. In our earlier recommendations, we highlighted that a more **in-depth intervention** would be needed to support smokers to develop the readiness to quit, following which they could be given social support to access SSS.



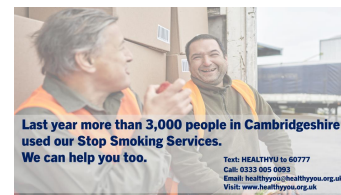
However, over half of participants agreed that they had more understanding about SSS after viewing the messages. This suggests that the messages were effective at educating and persuading people about SSS, but that this alone is not enough to support smokers to develop the readiness to quit.

## Feedback: Favourite message

At the end of the survey, participants were asked which message was their favourite, and why. Reasons given by participants were coded and merged into descriptive themes. Themed reasons for choosing each message are shown on the following pages along with examples of open text feedback recorded by the market researchers.



Most preferred



Least preferred

When asked why they chose their favourite message, participants commonly cited one of the following broad reasons:

- Relatability of the person in the image
- Perceiving the message as friendly or positive
- Clarity of the message
- Persuasiveness of the content (e.g., use of statistics)

## Feedback: Favourite message



Reasons given for choosing this message:

Relatable person in the image	8
'Happy' image	8
Highlights specialist help	7
Appealing / friendly / giving advice rather than 'telling'	6
Clear wording	5
Portrays ease of quitting	5
Informative / thought provoking	5
Highlights that services are free	4
Like that it shows a successful quitter	3

*"He looks an average geezer that quit"*

*"He looks happy with his decision to quit"*

*"It shows that it's free and its specialists who know what to do to break the habit"*

*"It really makes you stop and think about stopping smoking"*

*"More information given, it actually mentions that it worked and he stopped smoking"*

*"It's clear that you get help from actual specialists"*

*"The guy in the picture reminds me of myself so it takes my eye"*

## Feedback: Favourite message



Reasons given for choosing this message:

<b>Persuasive statistic about higher likelihood of quitting with support</b>	12
<b>Relatable image of woman / young person</b>	11
<b>Clear / informative</b>	5
<b>Honest / realistic</b>	4
<b>"Wish you could stop" wording resonates</b>	3
<b>Appealing / positive</b>	3
<b>Emphasises that services are free and local</b>	2
<b>Colours used are appealing</b>	2
<b>Offer of help is appreciated</b>	1

*"If you're planning on quitting then this message would attract you because it's saying 3 times more likely to quit"*

*"Clearer, more aimed at my age range, not as patronising"*

*"It's the bit where it says "Wish you could stop smoking?", it draws you in"*

*"I think because it was a woman not an older man"*

*"Because it's saying that you're more likely to quit using the stop smoking service than trying on your own"*

*"She was younger more like me"*

## Feedback: Favourite message



Reasons given for choosing this message:

Friendliness of the message/image	10
Acknowledges challenges of quitting	10
Easy to read	6
Like the point about helping 'thousands of people'	5
Appealing/relatable/ image looks like an ex-smoker	5
Understated	1

*"It makes out they know how hard it is to stop smoking so I expect they will be able to help smokers"*

*"It's realistic as it's saying how hard it is to stop smoking"*

*"It's saying to me that the people who help you are ex smokers themselves who have quit"*

*"Reassuring that they have helped all those people"*

*"He might understand"*

*"Looks friendly and kind"*

## Feedback: Favourite message



Reasons given for choosing this message:

<b>Positive, friendly image</b>	15
<b>Clear and understandable</b>	9
<b>Authentic / relatable / inclusive</b>	5
<b>Persuasive / encouraging statistics</b>	3
<b>Informative / thought provoking</b>	3

*"Makes a change to be showing healthy people in a smoking ad rather than rotting lungs or blind people"*

*"I like the two blokes in the photo. They are everyday working class and draws me in to read the text"*

*"It shows two healthy looking men still enjoying life even without a fag"*

*"It's obvious what it's getting at, better written than other messages"*

*"Less words, not cluttered, easier to understand"*

## Feedback: Negative comments about the messages

A small number of participants commented more negatively on the images. These comments were often linked to the perceived relatability of the image and suggest that for younger smokers, a different style of messaging might be more acceptable.

Other comments suggest that specific messaging or local campaigns that focus directly on normalising repeat quit attempts and encouraging people to try again after relapsing could be useful.

*“As a younger person I wasn't really drawn to any of the adverts as it's all old people and not relevant to me”.*

*“I just picked any as I don't think were very interesting, I think they're quite dull and boring I don't think they would encourage people to take much notice and also why are they all old people.”*

*“...They didn't really interest me they're not catching my attention some look more like an advert for tradesmen”*

*“They do make it easy but I do not feel they really understand just how hard it is, if you relapse they never understand”*

*“I don't know really, I'm personally not interested in stopping smoking but I do think it's good that efforts are being made for those that do”.*

## Summary

This proof-of-concept study complemented our earlier insight gathering work, finding that many respondents had never accessed SSS in Cambridgeshire, and a large proportion did not intend to stop smoking.

Survey respondents generally scored the perception that other smokers access SSS, the lived experience and reliability of the staff, and the effectiveness and helpfulness of the service as around neutral at baseline (before viewing the messages). These ratings complement our earlier findings, which found that smokers in Cambridgeshire had reservations about the effectiveness, or the suitability of SSS.

To address these beliefs, four messages were developed which aimed to:

- 1) Increase the belief that it is typical for local smokers to access SSS
- 2) Increase the belief that stop smoking service advisors have appropriate expertise and lived experience
- 3) Increase the belief that quitting smoking with support increases chances of success
- 4) Increase the belief that other similar people have had positive experiences of stop smoking services

Messages 1 and 4 were effective in increasing the intended beliefs. No changes were observed for Message 2. Unexpectedly, Message 3 produced the opposite effect, with participants reporting a decrease in belief. This was surprising given that Message 3 received positive ratings for clarity, ease of understanding, perceived agreement among smokers, and overall appeal.

One possible explanation is that its content conflicted with respondents' prior perceptions or experiences, leading to resistance rather than persuasion. In phase one of our research, a commonly reported barrier was the desire to quit smoking without support. This belief in independent quitting may have contributed to the reduced acceptance of Message 3.

When asked to explain why they preferred a particular message, participants often cited the reliability of the image, perceiving the message as friendly or positive, clarity and simplicity of the wording and/or the persuasiveness of the content (e.g. statistics).

Finally, although messages proved effective in shifting some beliefs and enhancing knowledge of the service, they did not produce changes in intentions to quit smoking. This was anticipated, as altering intentions typically requires more intensive interventions.

## Recommendations

As a result of this study, we propose several recommendations:

### 1) *A more enhanced intervention to help smokers develop the readiness to quit*

- Intentions to quit smoking are unlikely to shift through messaging alone. Interventions need to build readiness to quit smoking, with tailored outreach that challenges barriers (such as common aspirations or myths surrounding independent quitting).
- Once people are ready to quit, it is important to emphasise the benefits of quitting with support through evidence-based messaging.

### 2) *Incorporation of peer stories and testimonials*

- Use real examples from local smokers who have successfully quit using the service, to increase relatability and credibility.
- Collect word-of-mouth recommendations and ask service users to share their experiences with peers.

### 3) *Emphasis on relatability and lived experience*

- Recruit and showcase staff with lived experience of smoking and quitting, to help existing smokers relate to advisors.
- Encourage non-judgemental, supportive communication in resources, to help smokers feel welcome in the service.

### 4) *Consider alternative messaging and communication approaches to appeal to younger smokers*

- Use images and testimonials that are representative of young people's lives and experiences
- Undertake targeted co-design and audience testing of different message content, styles and communication approaches with younger smokers

### 5) *Normalise repeat quit attempts and relapse*

- Develop communications that promote a non-judgemental approach to relapse – let people know it's normal to have several failed quit attempts before a successful one
- Encourage previous service users who have relapsed to “come back and try again” emphasising the variety of support and approaches that can be offered

### 6) *Consider messaging that avoids images of people*

- Participants often stated that the image was the thing that drew them to the message, however it is impossible to select images of people that will appeal to all demographics and age groups
- Explore alternative messaging styles that avoid issues around representativeness

## Conclusions

Many smokers in Cambridgeshire do not access SSS and have no intention to quit smoking in the short-term. Barriers to accessing SSS include scepticism about the service (e.g., lack of lived experience of staff and effectiveness of support). Messages which emphasise evidence-based outcomes, relatability, and positive and authentic testimonials with direct quotations appear best suited to shift these beliefs and increase message acceptance.

Based on these insights, we have made a series of recommendations, with the aim to strengthen engagement with the service, improve outreach strategies, and design in-depth interventions that go beyond messaging alone. These steps could help to increase smokers' readiness and intentions to quit in future.

### Recommended citation:

Humphreys, H., Tkacova, D., Hope, D. & Thorneloe, R. (2025). *Addressing barriers to accessing Stop Smoking Services in Cambridgeshire: Proof-of-concept testing for behavioural science-informed messaging*. A report commissioned by Cambridgeshire County Council.

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