# COMPARISON OF THE EFFECTIVENESS OF FIVE 'A' PLAN TO QUIT SMOKING BY SAILORS IN TWO POPULATION SAMPLES IN SRI LANKA NAVY 

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Non-communicable diseases (NCDs) have become the leading cause of morbidity and mortality, and tobacco use is a recognized causal factor in the genesis of NCDs. The current smoking prevalence is $39 \%$ among males and $2.6 \%$ among females. Sri Lanka was the fifth country in the region to sign the WHO Framework Convention on Tobacco Control (FCTC) and the first country in the region to ratify it. Hence quitting smoking is very important health intervention and 5 A's (US-public health clinical practice guideline) is a recommended psychological intervention method for persons willing to quit smoking. A non-random purposive first sample of fortyseven sailors who were in the habit of smoking, diagnosed with non-chronic disease (NCD) in northwestern naval area in year 2013 was selected for study. A number of thirty smokers with $87 \%$ NCD patients were included in the second study
sample in 2016 at northern naval area. 19.8\% were in 20-29 age group, $66.6 \%$ in $30-39,66.6 \%$ and $13.2 \%$ in $40-49$ year age groups. Only $17 \%$ had advanced educational qualifications and $83 \%$ were junior sailors. Both samples were directed to brief intervention and 5 A's method (ask, awareness, assess, arrange, award) and follow-up for a 3-month period by naval nurses, counseling officers and public health inspectors. $72.34 \%$ of first study sample and $100 \%$ of second study sample quit/reduced smoking after 3 months, after commencing brief intervention and 5A method. Brief intervention and 5A's method can be used as an effective low-cost method to quit smoking. Age, educational status, discipline and seniority may have an effect on the outcome.

Keywords: Non-Communicable Diseases, Five 'A's Method

