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# A Pilot Randomized Controlled Trial of a Videoconferencing Smoking Cessation Intervention for Korean American Women: Preliminary Findings

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**Presenter Information**

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A Pilot Randomized Controlled Trial of a Videoconferencing Smoking Cessation Intervention for Korean American Women: Preliminary Findings

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## ABSTRACT

**Introduction:** Korean American women prefer online or telephone smoking cessation interventions that can be remotely accessed from home. However, these interventions have been found ineffective for the group.

**Methods:** This study is a pilot clinical trial testing the feasibility and acceptability of a videoconferencing smoking cessation intervention for Korean American women and compared its preliminary efficacy with a telephone-based smoking cessation intervention. Korean women in the United States were recruited nationwide and randomly assigned at a ratio of 1:1 to either a video arm or a telephone arm. Participants in both arms received eight 30-minute weekly individualized counseling sessions of a culturally adapted smoking cessation intervention and nicotine patches for 8 weeks. They were followed up at post-quit 1, 2, and 3 months.

**Results:** A total of 168 Korean Americans were assessed for eligibility, 77 were determined to be eligible and 49 participated in the study. The videoconferencing intervention was acceptable and feasible for women under 50 years, whereas it was not for older women. The videoconferencing intervention produced abstinence rates of 67% at post-quit 1 month and 42% at post-quit 3 months based on self-report. The rate at post-quit 3 months dropped to 33% when those women whose abstinence could not be validated with salivary cotinine tests were treated as smoking. Abstinence rates in the telephone arm did not differ from those in the video arm.

**Conclusion:** Findings suggest that videoconferencing smoking cessation intervention may be feasible and acceptable for Korean American women under 50 years. However, for older Korean American women, the intervention may not be feasible and telephone-based intervention seems to be just as effective if smoking cessation intervention components are adapted at a deep structural level of Korean culture by integrating its core cultural values and addressing psychosocial, social and environmental forces affecting the behavior.

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