

**ORIGINAL RESEARCH ARTICLE****ATTITUDE AND PRACTICE OF SMOKING AMONG ADOLESCENT****Sabina Shrestha<sup>1</sup>, Sarita Panta<sup>1</sup>**<sup>1</sup>Nepalese Army Institute of Health Sciences, college of Nursing, Kathmandu, Nepal*\*Correspondence to: Sarita Panta, Nepalese Army Institute of Health Sciences, College of Nursing, Kathmandu, Nepal.**Email: saritas.panta@gmail.com***ABSTRACT**

Adolescence is the time between the beginning of sexual maturation and adulthood and considered to be the period between ages 12 and 19. Smoking becomes the major risk factors for various disease and life threatening condition. The numbers of smokers are increasing day by day due to varieties of influencing factors. Therefore, a study was conducted with the objective of identifying the attitude and practice of smoking among adolescent. Descriptive exploratory study design was used to identifying the attitude and practice of smoking among adolescent towards Niharika Shishu Kunja Secondary school, Bypass, Kathmandu. Data was collected using semi structured self-administered questionnaire from 68 students studying in Niharika Shishu Kunja Secondary school. Non-probability purposive sampling was used. This study revealed that All most all (95.6%) of respondents had negative attitude towards cigarette smoking. Majority (69.1%) of respondents were non- smoker whereas 30.9% were smoker. The study concludes that adolescents were influenced to have cigarette with curiosity and experimentation with the companionship of friends.

**Key words: Adolescent, Attitude, Practice, Smoking****INTRODUCTION**

Smoking refers to the process of burning a substance (tobacco, drugs, etc.) and inhaling the resultant smoke. Smoking is primarily practiced as a route of administration for recreational drug use because the combustion of the dried plant leaves vaporizes. The different forms or methods of smoking include cigar, cigarettes and pipes etc.<sup>1</sup>

The mortality due to smoking-related diseases was higher than the combination of all infectious diseases worldwide. By 2030, if there is no change in the trend, the mortality rate due to smoking will have increased by 2.5 fold, whereby 70% of this rate will be from developing and under-developed countries. In Malaysia, approximately 10,000 deaths attributed to smoking were reported annually.<sup>2</sup>

Smoking and use other tobacco products kill 15,000 people in Nepal each year.<sup>3</sup> Tobacco use is the leading global cause of preventable death. Currently about 5 million deaths per year are attributable to tobacco which is expected to rise to more than 8

million deaths a year by 2030. There is estimation that three quarters of these deaths will be in low and middle income countries.<sup>4</sup>

The overall smoking prevalence in Nepal ranges between 25% to 73% in adult men and between 0.8% to 60% in adult women across the different regions in the country. Prevalence of smoking in Sunsari is 17%.<sup>5</sup>

The strength of association between attitude and practice was higher as compared to the strength of association between knowledge and attitude, and between knowledge and practice towards prevention of smoking. Thus, the practice towards prevention of smoking was more prone to be affected by the level of attitude. Attitude towards smoking is essential as it plays an important role in the initiation and maintenance of self-motivated smoking. An opposite finding has been reported from China which when compared with the current study, there was a stronger anti-smoking attitude

among medical students.<sup>6</sup>

By enticing the youth to smoke, tobacco companies ensure the existence of a new generation of consumers who will likely be lifetime buyers (Doku, 2014). Consequently, tobacco companies specifically target the youth by associating cigarettes with trends which appeal most to the youth such as film, sex appeal, well-being, and sports.<sup>7</sup>

## METHODS

Descriptive exploratory research design was used and it was conducted in Niharika Shishu Kunja higher Secondary School located in Balaju, Kathmandu., The adolescent students of grade 8 ( 27), 9(25) and 10 (18) were taken as the study population.

## RESULTS

The findings are mentioned in tables as responses of nursing students to each question of questionnaire.

**Table 1: Age, Sex, Caste and Grade of Respondents (n=68)**

Variables	Frequency	Percentage (%)
<b>*Age (in years)</b>		
12	3	4.4
13	7	10.3
14	20	29.4
15	23	33.8
16	9	13.2
17	1	1.5
18	2	2.9
19	3	4.4
<b>Sex</b>		
Male	40	58.8
Female	28	41.2
<b>Caste</b>		
Dalit	1	1.5
Disadvantaged janajatis	2	2.9
Disadvantaged non- dalitterai	3	4.4
<b>Caste group</b>		
Religious minorities	6	8.8
Relatively advantaged janajatis	41	60.3
Upper caste groups	15	22.1
<b>Grade</b>		

Self-administered semi-structured questionnaire was used to collect data in 68 respondents. Non-probability purposive sampling was used. Approval was obtained from the institutional research committee of Nepalese Army Institute of Health Sciences. Permission was taken from the Principal of NSKHS after submitting request letter from NAIHS-CON. Informal verbal consent was obtained from each participant. Data was collected from 2074/04/15 to 2074/04/16. All collected data were checked, reviewed and organized i.e. edited, classified, coded and tabulated for the accuracy and completeness. Data processing was done on SPSS version 20. The findings were presented through tables and figures. Inferential statistic i.e. chi-square test was used.

Variables	Frequency	Percentage (%)
Eight	26	38.2
Nine	24	35.3
Ten	18	26.5

\*Mean age: 14.79 ± SD: 1.502, Range 12-19 years

Table 1 presents the age, sex, caste and grade of respondents. Age of the respondents ranged from 12 to 19 years with 33.8% of 15 years of age and mean age as 14.79 with standard deviation as 1.502. Majority (58.8%) were male respondents where as 41.2% were female. Similarly, majority of respondents (60.3%) were relatively advantaged janajatis followed by upper caste groups (22.1%). Likewise, 38.2% respondents were studying in grade eight, 35.3% were in grade nine and 26.5% respondents were in grade 10.

**Table 2: Parental Education, Occupation, Economical status and Types of Family of Respondents (n=68)**

Variables	Frequency	Percentage (%)
<b>Educational status of Father</b>		
Can't read and write	3	4.4
Can read and write only	21	30.9
Primary level	12	17.6
Secondary level	19	27.9
Higher secondary level	9	13.2
Bachelor and above	1	1.5
<b>Educational status of Mother</b>		
Can't read and write	10	14.7
Can read and write only	25	36.8
Primary level	11	16.2
Secondary level	15	22.1
Higher secondary level	5	7.4
Bachelor and above	3	4.4
<b>Occupational status of parents</b>		
Agriculture	6	8.8
Business	41	60.3
Service	17	25.0
Others	4	5.9
<b>Economical status</b>		
Insufficient for day to day expenditure for one year	3	4.4
Sufficient for day to day expenditure for one year	52	76.5
More than sufficient for day to day expenditure for one year	18	26.5
<b>Type of family</b>		
Nuclear	51	75.0
Joint	14	20.6
Extended	3	4.4

Table 2 reveals that high proportion (30.9%) of the respondent's fathers could read and write only and 27.9% completed secondary level of education. Likewise, highest proportion (36.8%) of the respondent's mother could read and write only and 22.1% completed secondary level. Majority of the parents (60.3%) were engaged in business. Majority (76.5%) had income that is sufficient for day to day expenditure for one year.

**Table 3: Respondent's Attitude towards Smoking**

Response	SA(%)	A(%)	U(%)	D(%)	SD(%)	Mean ±SD
Smoking is injurious to health	80.9	14.7	1.5	1.5	1.5	1.28± 0.709
Those who smoke has less friend	4.4	35.3	25.0	33.8	1.5	2.93±0.967
The longer you smoke, the harder it will be difficult to quit.	60.3	35.3	7.5	-	-	1.47±0.634
Smoking makes people more attractive.	2.9	2.9	8.8	27.9	57.4	1.66±0.971
Smoking should be banned in enclosed public places (such as	70.6	20.6	-	1.5	7.4	1.54±1.112
in restaurants, buses, schools, gyms and sports arenas, discos)	1.5	13.2	16.2	35.3	33.8	2.13±1.078
Smoking cigarettes help people feel more comfortable at celebrations, parties, or in other social gatherings	23.5	39.7	22.1	13.2	1.5	2.29±1.023
If parents smoke cigarette their child tends to smoke more.		39.7	22.1	13.2	1.5	2.29±1.023
Anti-smoking media messages (e.g., on TV, radio, posters, newspapers, magazines, movies, etc) should be delivered widely.	41.2	41.2	7.4	1.5	8.8	1.96±1.165
Cigarette Smoking helps to control weight.	2.9	4.4	22.1	27.9	42.6	1.97±1.051
Smoking helps to feel relax and stress free.	1.5	10.3	14.7	38.2	35.3	2.04±1.028

**Keys: SA = Strongly agree, A= agree, U= Uncertain, D= disagree, SD= Strongly disagree**

Table 3 depicts that most (80.9%) of the respondents, strongly agree that smoking is injurious to health. Majority (70.6%) of the respondents strongly agrees that Smoking should be banned in enclosed public places (such as in restaurants, buses, schools, gyms and sports areas, discos). Highest proportion (35.3%) of the respondents disagrees that Smoking cigarettes help people feel more comfortable at celebrations, parties, or in other social gatherings. Likewise, highest proportion (39.7%) of the respondents agrees that if parents smoke cigarette their child tend to smoke more. Similarly, 41.2% of the respondents strongly agrees followed by 41.2% respondents agrees that Anti-smoking media messages (e.g., on television, radio, posters, newspapers, magazines, movies, etc) should be delivered widely.

**Table 4: Respondent's level of Attitude**

Attitude	Frequency	Percentage (%)
Positive	3	4.4
Negative	65	95.6
Total	68	100.0

Table 4 shows that almost all (95.6%) of respondents had negative attitude towards cigarette smoking whereas least (4.4%) of the respondents had positive attitude towards cigarette smoking.

**Table 5: Association between Selected demographical variables with Practice of smoking**

Variables	Cigarette smoking				Chi-square value	P value
	Yes		No			
	n	%	n	%		
<b>Sex</b>						
Male	180	45.0	22	55.0	9.071	0.003
Female	3	10.7	25	89.3		
<b>Grade</b>						
Eight	13	50.0	13	50.0	7.357	0.025
Nine	4	16.7	20	83.3		
Ten	4	22.2	14	77.8		
<b>Occupation of parents</b>						
Business	12	44.4	15	55.6	3.859	0.045
Others	9	22.0	32	78		

Percentage calculation in row total

Note: P Value < .05 (significant association)

Table 10 reflects that there is significant association between sex of the respondents and Practice of cigarette smoking by respondents ( $p = 0.003$ ). Likewise, there is association between grade and practice of smoking by respondents ( $p=0.025$ ). Similarly, occupation of parents is associated with practice of smoking by respondents ( $p=0.045$ ).

#### DISCUSSION & CONCLUSION:

Current study found that almost all (95.6%) of respondents have negative attitude towards cigarette smoking. The similar study conducted in Canada where negative attitude of respondents towards cigarette smoking were 78%. This variation may be due to different demographic characteristics and different geographical distribution.<sup>8</sup>

Present study shows that majority (61.90%) of respondents start the cigarette smoking for curiosity and experimentation whereas 38.09% smoke due to peer pressure. Likewise, 47.7% respondents smoke rarely (1 stick per month), 38.1% smoke cigarette occasionally and least 14.3% respondents smoke regularly (1 stick per day). Majority (71.4%) of respondents continue smoking to enjoy. This study is contrast with the study done in colleges of Kathmandu district showed that around half

of (52.5%) influence from friends and 18.8% of respondents influence of parents or senior family members who smoke as the major reasons for cigarette smoking. Similarly, 20% smoke rarely, 22.80% smoke occasionally and 57.20% smoke in a regular basis.<sup>9</sup>

Recent study reveals that there is strong significant association between sex and Practice of the smoking ( $p \text{ value}=0.003$ ). Grade of the respondents also associated with practice of smoking ( $p \text{ value} = 0.025$ ) and occupation and practice of smoking has significant association ( $p= 0.045$ ). Study done on Africa showed that there was strong association between gender and practice of the smoking.<sup>10</sup>

Study shows that most (81%) of respondents bought cigarette from store or shop and least

(19%) of respondents has friends to bought for them. Majority (57.1%) smoke at hotel followed by smoke at home (23.8%). Previous study done in colleges of Kathmandu found that most (88.1%) of the respondents bought cigarette from shops by themselves. Similarly, common places of smoking were found to be café/hotel/restaurants (31.3%), and other unspecified places outside school (38.8%).<sup>9</sup>

## CONCLUSION

Based on the findings of the study it is concluded that one- third of respondents possess negative attitude and practice towards smoking. Highest proportion of the respondents smoke rarely followed by occasional and least were regular smoker, majority of respondents used filtered cigarette with friend's companionship. The finding of the study has given some important aspects that must be changed to decrease the number of smokers.

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