

THE MAJOR APPREHENSIONS IN YOUNG CHRONIC CIGARETTE SMOKERS TO QUIT SMOKING

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Abstract

To help young people to quit smoking, we have attempted to find out reasons of smoking in youngs and the reasons of non motivational aspects related to addiction in the smokers that actually discourage them to quit smoking. The data collected in this survey was based on the questions related to the psycho-social factors that influence young individuals to smoking. Two hundred and six chronic smokers were selected out of which 23% reported smoking as their dietary habit. The common reason to smoke given by 63% was the enjoyment and social factor and 64% of them were daily smokers. All the smokers were smoking minimum of 11 cigarettes a day. Only 16% of the subjects were interested in quitting smoking due to health issues. Thirty seven percent of the individuals only agreed with the fact that current health message available in the advertisements are effective in motivation towards withdrawal of smoking. The majority stated that they would find it difficult to stop smoking and this perception increased the longer they had been a regular smoker. Serious considerations are needed to help young smokers in an acceptable format to quit smoking by them.

Introduction

Smoking is the most popular and main cause of many preventable diseases (Rashid *et al.*, 2008). About 4.2 million people die globally due to smoking each year and these numbers are expected to climb by the coming years. It is expected that tobacco related mortality shall increase in future to around 9 million². Smoking has been on the rise in developing countries, including Pakistan (Amanda *et al.*, 2006). Several reasons have been suggested for this recent and continuing epidemic rise in smoking in the developing countries of Asia and the Middle East (Memon *et al.*, 2000). Smoking has been linked with various neurological, cardiovascular, and pulmonary diseases. Tobacco contains several carcinogens that can lead to lung cancer. Smoking is one of the major risk factors in the origin of coronary atherosclerosis and development of coronary heart disease (Qidwai, 2004., Zamir *et al.*, 2000). The tobacco industry give the evidence that most adult smokers begin smoking before the age of 18 years and few smokers ever take up smoking after age of 25 (Cummings *et al.*, 2002). Some studies have indicated that youth having at least one smoking parent are more prone to begin smoking. Several scientists have also described that a young person's decision to smoke is directly influenced by peers' smoking behavior (Rashid *et al.*, 2008). Exposure toward smoking in private and public places may also influence tobacco use initiation, maintenance, and cessation (Farkas *et al.*, 2000). Consistent with the previous literature, it was hypothesized that exposure to environmental cigarette smoking greater decision-making autonomy, and greater symptoms of depression would be positively linked with smoking and negatively linked with recent attempts to stop smoking (Parveen and Arsalan, 2005). Our teenagers are becoming depressed due to daily issues exaggeration in our society from economic, educational and social point of view. It is making conditions worse in terms of anxiety, fierceness dependency and depression to cope out with stress this class of individuals looking for a random factor that could give them satisfaction. Part of the reason for this is that while older adults continue to do smoking in large numbers, the number of young people starting to smoke has become fairly higher. Recent research has shown that nicotine acts on the brain to produce its addictive nature by activating the brain circuitry that regulates feelings of pleasure (reward pathways) via dopamine as it increases levels of dopamine in the reward circuits. The decrease in two forms of MAO (Monoamine Oxidase, A and B), results in higher dopamine levels and may be another reason that smokers continue to smoke - to sustain the high dopamine levels that result in the desire for repeated smoking use. Smoking is expensive behavior and smoking puts an extra financial load on smokers, their families and the country as a whole (Ali and Muhammad, 2004). Studies rapidly shows that more depended a person is on nicotine is more difficulty they have in quitting in smoking. For almost five years analysts have focus on adult smoking cessation (Fagerstrom *et al.*, 2005). Modern investigation have concluded smoking as drugs addiction, tobacco smoking can't be concluded as habit or psychological problem. (Fagerstrom *et al.*, 2005). Many studies raises the issue of difficulty of these smokers in try for quitting mainly because of the intricate and multifaceted role of tobacco dependence (Johnson *et al.*, 2003). Cigarette smoking assist to focus at work, it has been found that mostly people smoke to feel stress-free and smoking habits also amplify societal get-together. Most of the smokers stated that they wanted to stop

smoking but they don't know how to quit, a perceived lack of will power, and the influence of other smokers around the respondent (Memon *et al.*, 2000).

Methodology: In this study we conducted interviews of the young males, age group ranges from 18 to 30 yrs of age who have been smoking. These smokers were asked about social factors and peers that promote or challenge smoking in their lives. This paper draws on these interviews to explore how issues around quitting are linked with the social context of young people's smoking and how they understand their own smoking, especially perception of habit, addiction and health issues. We also discuss what they think about current health message available in the advertisements.

Results

The data presented in this survey was based on the questions related to psychosocial factors that influence these individuals to do smoking. 200 chronic smokers were selected out of which 21% reported smoking as their dietary habits the common reason to smoke given by 60% is the enjoyment and social factor and 63% of them are daily smokers. All the smokers were taking minimum of 11 cigarettes per day. Only 16% of the subjects were interested in quitting smoking while the main reason for that are the concerned health issues. 52% of the individuals only agreed with the fact that current health message available in the advertisements are effective in motivation towards withdrawal of smoking. The majority stated that they would find it difficult to stop smoking and this perception increased the longer they had been a regular smoker.

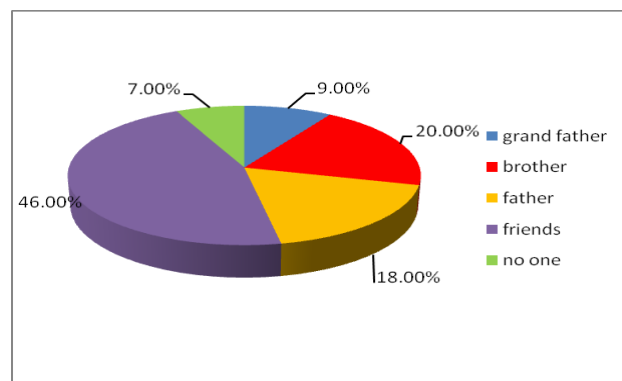


Fig.1. The figure showing the proportion of relatives or friends smoking. 46% people reported that their friends used to smoke in front of them while 18% reported that their fathers, 20% reported that their brothers, and 9% reported that their grandfather used to smoke at home

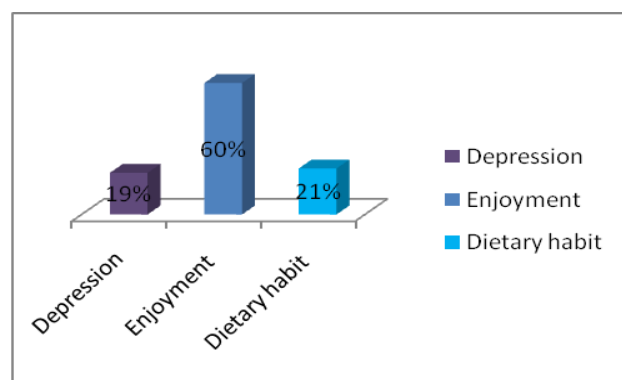


Fig.2. The reasons to smoke amongst the smokers population interviewed

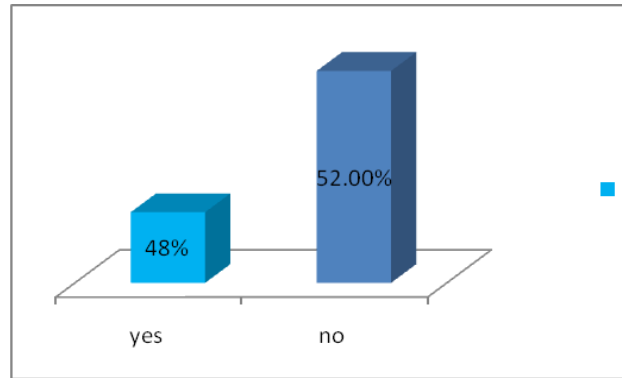


Fig.3. Percent proportion of smokers desirous to quite smoking and those who don't want to quit smoking

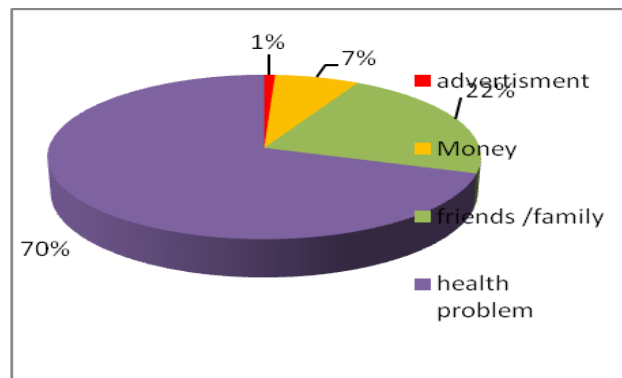


Fig.4. This figure shows upon a reply of 200 peoples regarding the prevailing rate of tobacco consumption among youth, 70% of population wants to quit smoking due to health problems, 22% wants to quit smoking due to friends/family while there were less than 1% people who wants to quit smoking due to health penalty advertisement on the pack

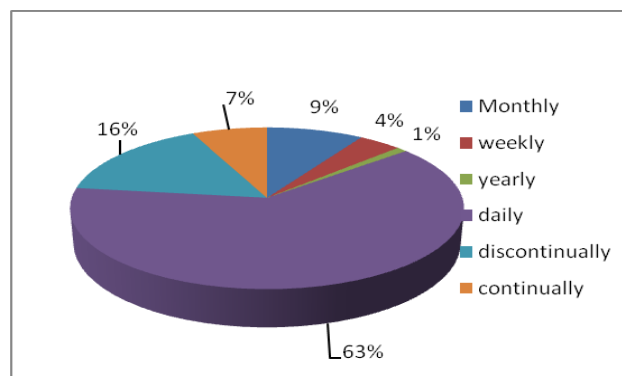


Fig.5. This figure shows upon a reply of 200 peoples regarding how many time did they smoked Monthly 9% ,weekly 4% daily 64% ,yearly 1% and discontinuallly 16% continually 7%

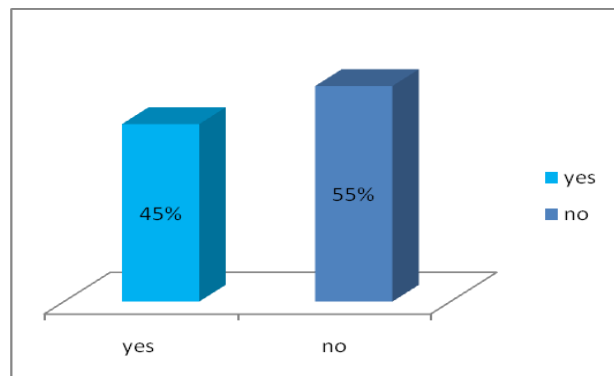


Fig.6. Percent effectiveness of health messages motivating smokers to quit and not quit smoking

Discussion

Smoking is continuously becoming a weakness in this age group especially because of two main factors which are also dependable on each other, the first one addictive potential of nicotine smoking and second one is the easy target of reducing depression (Currie *et al.*, 2002). The acute effects of nicotine dissipate in a few minutes, causing the smoker to continue dosing frequently throughout the day to maintain the drug's pleasurable effects and prevent withdrawal (NIH, 2001). As our teenagers are becoming depressed due to day to day issues exaggeration in our society it is making conditions worse in terms of anxiety fierceness dependency and depression to cope out with stress this class of individuals looking for a random factor that could give them satisfaction. Nicotine smokers mainly in our study were poorly educated in terms of health consequences and risks of many diseases that could be vulnerable as they continue to smoke moreover they also do not benefited by the non motivating anti tobacco campaigns as their urge to smoke is much stronger. Advertising is a medium that delivers a visual experience which elevates the idea of smoking into a trip of mental pleasure. Creating an urge to smoke another to a regular smoker and to tempt others non-smokers to join the experience (Ernster *et al.*, 2000). The tobacco manufacturers do not market or sell their product to younger buyers. They claim that the desire of their marketing is to convince adults to maintain product constancy or to toggle variety, to a certain extent than to raise the integer of new smokers. However, the promotion of products in youth is of major commercial value for tobacco corporations, and the reason was the strong influences on this set of population to be targeted as well as high chances of addiction to be opted for years (Wen *et al.*, 2005). The roles of peers and family is a prior factor of interest in our study as many of the negotiable consequences with a young smoker is to break the social circle and family influence many of our subjects repeated that as they are not regular smokers but they can't quit smoking totally because it make them feel out of their peer company (Judy, 2009). The do not only do smoking by them but also exaggerate this habit in situations as social gatherings (Siegel *et al.*, 2005). As many studies suggest that in last few years many countries have overcome their disease burden of smoking only by spreading awareness and improving the anti smoking campaigning without any kind of economic decline (Giovino *et al.*, 1995). Our government must also take steps at root level. As Pakistan is one of the most targeted countries for the cardiovascular diseases burden we need to work at this in priority.

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