

Youth Smoking Decision

Shahmir Hassan¹ and Amir Razi²

¹ University Of Lahore, Pakistan

Received: 10 December 2012 Accepted: 31 December 2012 Published: 15 January 2013

Abstract

This study is about the increasing trend of smoking in youth especially among university students which is increasing day by day. This cross sectional study was conducted from April 2013 to May 2013. A group of 200 students from university of Lahore took part in this study through a predesigned questionnaire which consists of 03 parts to meet the objectives of initial steps and reason behind smoking of youth. The results revealed that most of part of our youth is involved in use of smoking which is very dangerous for a country's welfare. We conclude that smoking is an evil that can be eradicated through strict laws, government and parent's supervision.

Index terms— predesigned questionnaire, initial steps, reason behind smoking of youth, dangerous for a country's welfare.

1 Introduction

Friends and social circles have a huge influence on youth smoking. According to economist Kenneth Warner, Ph.D., the tobacco industry needs 5,000 new young smokers every day in order to maintain the total number of smokers. Cigarette smoking and other tobacco use imposes a huge and growing public health burden globally. Tobacco products have no safe level of consumption, and are the only legal consumer products that kill when used exactly as a Manufacturer offers. Yet tobacco products continue to be aggressively marketed by tobacco companies. The result is that global tobacco consumption has doubled during the past 30 years and is still increasing in many areas of the world. Tobacco use in Georgia is an ever-increasing health and economic problem. "According to the Global Youth Tobacco Survey: country report" (2003) by CDC, smoking was estimated to have been the cause of about 3,200 deaths in Georgia. Tobacco caused 1 in 5 male deaths in middle age and about 1 in 3 male deaths, caused by cancer. The US Department of Health and Human Services estimates that 90% of smokers begin their tobacco usage before age 20. Of these, 50% begin tobacco use by age 14 and 25% begin their use by age 12. Children are three times more sensitive to advertising as concluded in the April 1996 Journal of Marketing study. The three most heavily advertised cigarette brands are Marlboro, Newport, and Camel. It is commonly known that the most of the smokers start smoking in the early age. Many authors (for example Chaloupka Warner, 1999) find that once a person becomes smoker he/she is less likely to give up later. Although there is considerable number of papers studying the effect of advertisement on smoking. Warner and Chaloupka (1999) proposed one more reason. They suggest that advertising can increase market size through its role in "brand proliferation". Pakistan with a population of 160 million is the 7th most populous country in the world. The health and demographic situation in Pakistan is characterized by a high birth rate (29 per 1000) a comparatively low death rate (8 per 1000).

2 Problem of the Study

3 Literature Review

The Clinton administration is soon expected to declare nicotine an addictive drug and announce restrictions intended to keep teenagers from smoking. The attempt to restrict tobacco companies' appeals to teenagers and

cut youngsters' access to cigarettes may come as early as tomorrow. That would cap a flurry of presidential activity signing popular legislation just days before the Democratic National Convention in Chicago. The long-expected move would give explicit authority to the Food and Drug Administration to regulate tobacco sales and advertising to minors.

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Congress took a first step yesterday toward curbing America's tobacco habit as the Senate Commerce Committee voted 19-1 to pass legislation aimed at sharply cutting youth smoking and tightening Lahore, Pakistan. E-mails : Chshahmir@gmail.com, 1000) [i] . Tobacco use in Pakistan is common and one of the highest in the South East Asian Region. There are about 22 million smokers in the country and 55% of the households have at least one individual who smokes tobacco [ii] . In Pakistan about 100,000 people die annually from diseases caused by use of tobacco. [iii] Tobacco consumption does not only occur in the form of cigarettes but also includes beedis (hand rolled cigarettes), Huqqa (water pipe) and chewing tobacco. [iv] August 22, 1996 | By Shankar Vedantam and Bob Geiger, INQUIRER WASHINGTON BUREAU. ??pril 2, 1998 | By Raja Mishra, INQUIRER WASHINGTON BUREAU ? Shahmir Hassan ? , Amir Razi ? , Razia Ahmad ? , Sohaib Shahid ? , Fahad Masood ¥ Iqra Malik § &

regulation of cigarettes. The committee's bill would raise the price of a pack of cigarettes by \$1.10 over five years, give the Food and Drug Administration broad power to control cigarette ingredients, restrict cigarette advertising, and cap the tobacco industry's annual legal damages at \$6.5 billion. February 11, 1999, SAN FRANCISCO CNN A former smoker with inoperable lung cancer, awarded 51.5 million in damages in her lawsuit against a tobacco company, says she donates any money she receives to educate youngsters about the dangers of smoking. ; We have a huge problem in this country with teenage smoking, and there's a lot of groups out there that have pulled together to try to help stop children, Patricia Henley, 52, told CNN on Thursday. I intend to see that the money goes to these organizations and any organization that will try to prevent children from smoking June 14, 2001 | By JOSEPH P. KEARNEY ALL OF US have an obligation to do all we can to ensure that kids don't smoke. Smoking is a risky adult behavior, and for reasons of addiction and health, it is particularly risky for underage youth. Without question, it is up to parents, the government, our schools, retail merchants and the tobacco industry to pursue policies and programs restricting youth access to tobacco products. While all of us share a responsibility, parents have a special responsibility to educate and talk to their kids about the risks and dangers associated with tobacco use. Pennsylvania is also taking a hands-on approach as an active participant, especially in the areas of enforcing laws that will impose fines and sanctions against retailers who sell tobacco products to minors. August 29, 2002, Fourteen percent of people age 13 to 15 around the world smoke cigarettes, with nearly a quarter of them having tried their first cigarette by age 10, according to a report released Thursday. But the survey also found that most young smokers –nearly 70 percent –said they want to quit immediately. The report was issued by the Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO), which oversee the Global Youth Tobacco Survey, a worldwide effort to compile information on youth smoking

Mayor Nutter talked about one of his Christmas wishes yesterday -reducing smoking rates in Philadelphia. Just in time for the holiday weekend, Nutter signed into law legislation that hikes the fines for merchants who sell tobacco products to minors. "We cannot allow our children to become the next generation of addicts," Nutter said. "Smoking is not cool at all." The new law, approved by City Council several weeks ago, would raise the penalty for selling tobacco to minors from \$100 to \$250 per incident. By William Hudson, CNN | ??arch 7, 2012 Tobacco companies' advertising and promotional campaigns may influence young adults and adolescents to start smoking, says a new report from the Surgeon General, according to sources familiar with the document. Studies show that the vast majority of smokers begin smoking as young adults, and that the once steady decline in youth smoking has slowed in recent years. Not since 1994 has the U.S. Department of Health and Human Services issued a report on... May 19, 2012 | By Anna Edney, Bloomberg News Fewer American teenagers and young adults are lighting up as cigarette taxes that have broken the \$3-a-pack threshold in some states make smoking too costly, according to the latest National Survey on Drug Use and Health. Daily smoking, the leading cause of preventable illness and death in the United States, fell to 15.8 percent in 2010 among young adults 18 to 25, the Substance Abuse and Mental Health Services Administration said in a report. That share was down from 20.4 percent in 2004.

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5 Methodology

The study was conducted from April 2013 to May 2013. A group of 200 people was take part In this study through predesigned questionnaire which was consist of three parts, one related to the covering letter, 2nd related to demographic portion, 3rd related to the questions from respondent about the initial steps that trigger the smoking and reason behind it. Random sampling was used in our survey and 200 samples were selected from the population of University of Lahore, Pakistan.

6 VI. esults

About the youth smoking 100% young youth know about the smoking. That smoking can be stopped through education awareness in educational institutes. 43% male of smoker are strongly agree and 16.5% male are agree that they are regular smoker cannot stopped through education awareness in educational institutes. And 10% are neutral and 8.5% are disagreed and 22% strongly disagree male that they are regular smoker. 28.5% male are strongly agree and 4.5% are strongly disagree that they have tried cigarette smoking even just few a puffs. About the effect of smoking cigarette will try in future 34.5% males are strongly agree and 12% males are strongly disagreed. 41% males are agreed and 12.5% disagree that if one of your best friends was to offer a cigarette they would smoke it. 32% people are strongly agreed, 31.5% people are agreed and 20%

7 Analytical Result

The statistical figure of the table shown below that there is no association between youth smoking decision in all cases because the P-values of all cases/questions is greater than 0.05. All respondents (male) are on the same side regarding youth smoking decision.

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9 Conclusion

According to our study we conclude that the responses from the respondents it is clear that people are aware about the smoking. In this study we discover that there is no association between youth smoking decision and youth awareness of smoking it means they both are known about the smoking. In this study we discover that the smoking is having an effect on health but some peoples are satisfied for smoking the cigarettes. 43% people are regular smoker and 22% people are non-regular smoker. The reasons for smoking are: influence from elders, peer effect, as a fashion, just as a habit to spare leisure time, to release stress and overall the environment has been developed in such a way that it encourages the smokers rather than discouraging them which support smoking among youth especially in students. The study assumes initiation begins with a shock to the smoking benefit function that makes smoking suddenly desirable. These benefits include both the peer pressure effects and the pleasures associated with nicotine consumption. A youth also recognizes the long-term negative health consequences by assuming each cigarette will reduce life expectancy. However, since this impact occurs late in life, it has only a small impact during teenage years. Once regular smoking begins, the smoking stock, or smoking history, rises to induce a reinforcement and tolerance effect typical of addictive goods. Cessation of smoking is also assumed to induce a withdrawal effect represented by a loss of utility.

These implications are supportive of efforts for intervention, either governmental or otherwise, to help prevent smoking onset. This model suggests that interventions can reduce smoking and can be welfare improving for some smokers. In essence, interventions can prevent clear choice mistakes made because of difficulties in planning a consistent over life consumption plan.

However, different types of intervention will have sometimes surprising results. For example, expanded education programs to inform youths about the dangers of smoking are unlikely to have much impact. First, because youths are reasonably well-informed already and are likely already incorporating that information into their choice problem. Second, because the health consequences are so far in the future, it would be necessary to exaggerate the effects considerably to have even a small impact on teen decisions. ¹

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Figure 1:

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	You get your	40	50	56		28	9		4.5
	cigarettes from your relatives?								
	Have you ever	42	21	30		15	18		9
	been asked for ID when buying cigarettes in a store?								
Y ear 2013	smoking tried to abandon Have you ever	57	28.5	52		26	41		20.5
	cigarettes?								
	Do you suffer	46	23	48		24	25		12.5
Volume XIII Issue IV Ver- sion I	from any disease due to smoking?	64	32	29	57.5	48	79	68	39.5
	Your closest friends offer you to smoke	58							
	cigarettes? Do you smoke at friend's	115							
	home? Do you believe								
() G	that smoking cigarettes could								
Managemen	be harmful to your health? Do you smoke	55	27.5	76	8.5	40	35.5	61	38
and	to decrease stress? Do you smoke in front	17							40
Busi- ness Re- search	of your parents? just for fun? Do you	71							30.5
	smoke								22
									33
									27
									16.5

[Note: G]

Figure 2: Table 2 :

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Global	Your closest friends offer you to smoke	21.996	.038	significant	In-
Journal of	cigarettes? Do you smoke at friend's	6.477	.890	significant	In-
Management	home? Do you believe that smoking	17.781	.123	significant	In-
and Business	cigarettes could be harmful to your	16.070	.188	significant	In-
Research	health? Do you smoke to	4.717	.967	significant	
	decrease stress?				
	Do you smoke in front	18.249	.108	Insignificant	
	of your parents?				
	Do you smoke just for	7.261	.840	Insignificant	
	fun?				

[Note: GVIII.]

Figure 3: Do you suffer from any disease due to smoking?

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