

Attitude and Behaviour of Residence of Ibadan North Local Government Area Towards Smoking

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Abstract

The study examined the attitude and behaviour of respondents in Ibadan North Local Government Area of Oyo State on smoking. The study adopted a survey research design of a descriptive type. The target population for the study consisted smokers in Ibadan North Local Government Area. The sampling method adopted in the study was in two phases: accidental and snow-balling to select 200 smokers. The instrument tagged Attitude and Behaviour towards Smoking of Cigarette Questionnaire (ABSCQ) was developed by the researcher. The validation of the instrument was through Cronbach alpha which yielded a coefficient of 0.7. The researcher and the research assistant went to parks and game areas where people play draft, ludo, snooker in Ibadan North Local Government Area. The data were analysed using frequency and percentages, as well as Chi square. Respondents had started smoking before they were 11 years old. About 24% of the respondents started smoking cigarette between 16 and 20 years. There were more new comers into cigarette smoking as almost half of them had been smoking between 1 and 5 years ago. A high proportion of the respondents also have been smoking for more than 25 years ago. Almost all the sampled respondents (89.4%) were cigarette smokers and very few were users of snuff and other smokeless tobacco. Some of the respondents (35.2%) used tobacco within 30 minutes of their waking up; whereas the remaining 64.8% used tobacco after 30 minutes of their waking up. The habit or behaviour of smoking was picked from friends and co-workers. It is recommended that there should be an enforcement of the law to disallow smoking in public places as it constitutes health challenges to both smokers and passive smokers.

Keywords: Attitude to smoking, Behaviour of smoking, Ibadan North Local Government Area

Introduction

Tobacco is a planted in order to obtain its leaves which are then dried and fermented and used for products containing tobacco. It contains nicotine, a substance when taken can lead to addiction. Therefore, it is very difficult for users of tobacco products to cease the consumption of such substances. Some users may not be aware of this. Tobacco constituents include tar, carcinogens, Nitrosamines, gases, Ammonia and Menthol. Tobacco products are produced in many forms, hence the reason why there are many ways in which they are consumed. People smoke, chew or sniff tobacco from their products (NIDA, 2021). However, the smoking of tobacco cigarettes is the focus of this

study. Cigarettes are the most popular tobacco products among its users. They include water pipe, roll-your-own tobacco, pipe tobacco, bidis and Kreteks (WHO, 2023).

According to the World Health Organization (2023), in year 2020, 22.3% of the world population used tobacco whereby 36.7% of that population were men and only 7.8% were women. Moreover, tobacco has been studied to lead to the death of half of its users who do not quit. Also, more than 8 million people die from the use of tobacco and this does not exclude non-smokers who are unfortunately exposed to the toxins from second-hand smoke. This is no wonder that the use of tobacco is one of the biggest public health problems in the world. Furthermore, Adeloje et al (2019) states that across 64 studies in Nigeria, the prevalence of current smokers was 10.4% and 17.7% for ever smokers (WHO, 2023).

Leone and Landini (2010) define smoking as a chemical toxicosis which is able to cause detrimental effects either of acute or chronic type, on different structures of the body, being some of these like cardiovascular system, respiratory system and epithelial glands target organs. Cigarette smoking is the inhalation of the smoke of burned tobacco that may occur occasionally or habitually. It has been established by several researches that the constituents of cigarette smoking play a strong role in the development and progression of cardiovascular damage, primarily atherosclerotic lesions.

According to McEwan, West and McRobbie (2008), people smoke because they are dependent on nicotine, they are rewarded with pleasure from dopamine, and they are seeking relief from stress. Other reasons may be because of peer pressure and some other sociological and environmental factors. This confirms what Kazunari and Toshitaka (2003) state in their study, that most people are introduced to smoking when they are still minors. This shows that youth are mostly at risk of falling into the habit of smoking.

Studies also show that knowledge of the health consequences of smoking does not necessarily lead to abstinence from smoking. Even though smokers are aware of the dire consequences of smoking, they still indulge in such practices. In spite of the depth of information and facts about how smoking causes ill health and ultimately leads to death, users of tobacco continue to ignore the warnings and indulge such harmful and risky behaviours. They probably believe that they have low chances of suffering some of the health consequences of smoking, as they are in denial that the habits they derive so much pleasure from is lethal and deadly (Botvin, 1992).

This is why it is very important to examine the attitude and behavior of tobacco users. Attitude can be defined as a disposition towards something. Behaviour, on the other hand refers to the way in which a person, organism, or group responds to a specific set of conditions. Attitude and behavior play a strong role in the adoption and practice of a health behavior. They all stem from past experiences, socio-economic and environmental factors which influence an individual's belief and knowledge which will in turn influence his attitude and behavior. Most smokers are said to grow up in settings of low socio-economic status, as it is stated by the World Health Organization that around 80% of the world's population of smokers are endemic to low and middle income countries.

Therefore, this study aims to examine the attitude and behaviours of respondents in Ibadan North Local Government Area of Oyo State on smoking.

The researcher decided to research on this topic because he observed people in the market place when they were smoking cigarettes and he was concerned for their health. He is aware of the dangers of smoking and has also heard of many cases where the health of the smokers was adversely affected by their unhealthy practices.

Statement of problem

Smoking is one of the activities people from different socio-economic statuses, careers, educational backgrounds, gender, race and religion engage in. Tobacco smoking is seen by some people as a symbol of status, while others perceive it as a habit or behavior that must not be cultivated because of its health consequences. In spite of the known consequences and the awareness the smokers have about the impact it has on their health and health of others, they still continue to indulge themselves in the act of smoking cigarette. Therefore, this study examined the attitude and behaviours of respondents in Ibadan North Local Government Area of Oyo State on smoking

Research Questions

- 1) What is the behavior of the respondents towards smoking cigarettes?
- 2) What impacts do their smoking of cigarettes have on the community?
- 3) What is the main reason smokers consume tobacco products?
- 4) What is the respondents' knowledge of the constituents of cigarette?

Methodology

Research Design

The study adopted a survey design of a descriptive type. The survey research design was used because samples are chosen from the large populations (or universe) studied in order to discover the smokers' behaviour in Ibadan North Local Government Area.

Population

The target population for the study consisted smokers in Ibadan North Local Government Area. The characteristics of the population included government workers, like civil servants, teachers and police; self-employed, like mechanics, tailors, traders. Some of them are also students in secondary schools and tertiary institutions. Their ages range from 11 to 80 years, they are also male and female members of the population. A majority of the respondents lived in rented apartments ranging from one room to a three bed-room flat.

Sample and Sampling Techniques

The sampling method adopted in the study was in phases: accidental and snow-balling. The researcher and research assistants went to parks and game stations like ludo, draft, etc and observed some smokers (accidental). They were approached and anyone who

was willing to respond to the questionnaire was also asked to lead the researcher and the research assistant to others (snow-balling). The sample is made up of 142 (71.4%) male and 57 (28.6%) female from different ethnicities like 85 (42.7%) Yorubas; 53 (26.6%) Igbos; 52 (26.1%) Hausas and 9 (4.5%) others like Edos, Ibibios, etc. The samples' qualification status showed that a larger percentage had OND (42.2%), followed those with HND (18.1%), first degree (11.1%), NCE (11.1%), postgraduate degrees (5.5%), the least percentage of samples had secondary education qualification (0.5%). The socio-economic status of the samples revealed that majority of them use car/taxi/bus as their mode of transportation (40.2%), followed by those who use motorcycle (i.e. okada) (20.1%) and least percentage (4.0%) of samples used tricycle (keke NAPEP). Many of the samples (36.7) lived in a room apartment and very few (8.5%) lived in a three bed room flat.

Instrument

The instrument tagged Attitude and Behaviour towards Smoking of Cigarette Questionnaire (ABSCQ) was developed by the researcher. The researcher consulted books on attitude and behaviour to smoking. The instrument is divided into two sections: A and B. Section A dealt with the bio-data of the respondents in terms of gender, age, ethnicity, qualification, occupation, mode of transportation, type of house lived in. Section B solicited information on the current tobacco use, like the age when respondents started smoking, type of tobacco product used, number of sticks of cigarettes consumed per day, description of how respondents got to the habit of smoking, and where they smoke. Other aspects of the questionnaire dealt with the consequences of smoking, knowledge of the constituent of cigarette and how people around the smoker felt.

Validation

The instrument was given to experts in Research Design and the supervisor of the researcher. Ten copies of the questionnaire was administered to a sample who were not in the target population. Their responses were used to further correct the wordings of the instrument.

Method of Data Collection

A letter of introduction was collected from the Head of Department of Human Kinetic and Health Education. The researcher and the research assistants went to parks and game areas where people play draft, ludo, snooker in Ibadan North Local Government Area. The purpose of the the research work was explained to the respondents. The researcher and assistant identified one smoker, and the identified smoker led them to other smokers until they were able to get 200 smokers. A copy of the questionnaire was handed over to the respondents. They filled the questionnaire and they were retrieved the same day. One of the questionnaires was not properly filled and was removed from the set of 200.

Method Data Analysis

The data were subjected to statistical analysis using the Statistical Package for Social Sciences (SPSS Version 21). First, the data were captured and edited. Thereafter, such statistical tools like frequency and percentages were used.

Results and Discussion

The results are presented in the order which the research questions were stated.

Research question One

What is the behavior of the respondents towards smoking cigarettes?

The research question was answered using: the age the respondents started smoking tobacco product, how long they have been using tobacco, type of tobacco used by the respondents and interval between waking up and using tobacco.

Table 1: Ages at which Respondents Started Smoking Tobacco

Age	Frequency	Percentage
Less than 11 years	23	11.6
11-15 years	46	23.1
16-20 years	47	23.6
21-25 years	40	20.1
More than 25	43	21.6
Total	199	100.0

Although, the least number of respondents (23 i.e. 11.6%) that were exposed to using tobacco is less than 11 years, it is somehow worrisome to note that respondents at that tender age could use tobacco. Majority of the respondents started smoking at a young age. For example, 116 (58.3%) started smoking from 20 years and below. It is only 43 (21.6%) that started smoking at 25 years and above. Moreover, 40(20.1%) of the respondents stated that they started smoking tobacco within the ages of 21 and 25.

Table 2: how long has tobacco been used?

Duration	Frequency	Percent
1-5 years	91	45.7
6-10 years	15	7.5
16-20 years	17	8.5
21-25 years	31	15.6
25-30 years	17	8.5
More than 30 years	28	14.1
Total	199	100.0

Table 2 shows that most of the respondents started smoking of recent (91 i.e. 45.7 % which is the highest in the table). These people have been smoking for less than or up to 5 years. This means that the rate at which people are picking up the habit of smoking is alarming. Moreover, 15(7.5%) respondents stated that they have been smoking for 6-10 years; 17(8.5%) stated that they have been smoking for 16-20 years; 31(15.6%)

consumed tobacco cigarettes for 21-25 years; 17(8.5%) smoked tobacco cigarettes for 25-30 years, and 28(14.1%) have been smoking tobacco cigarettes for more than 30 years.

Table 3: Types of tobacco used by respondents

Types of tobacco used	Frequency	Percent
Cigarette	178	89.4
Smokeless tobacco (snuff or chew)	21	10.6
Total	199	100.0

The most common type of tobacco product among these respondents is cigarette. There were 178(89.4%) respondents who indicated that they use cigarettes, instead of smokeless tobacco. The ones who use smokeless tobacco were just 21(10.6%) in number.

Table 4: Interval between waking up and using tobacco

Types of tobacco used	Frequency	Percent
Within 30 minutes	70	35.2
After 30 minutes	129	64.8
Total	199	100.0

Many of the respondents (35.2%) stated that during the first 30 minutes of waking, they consumed tobacco cigarettes. While, majority of the respondents (64.8%) stated that they consumed tobacco cigarettes later than the first 30 minutes after they wake up.

Table 5: Places where Respondents Smoke

Places	Frequency	Percent
At work	78	39.2
At home	64	32.2
At parties	43	21.6
Others	14	7.0
Total	199	100.0

Surprisingly, the highest percentage of the smokers, who were studied, indicated that they actually smoke at work place (i.e.78 respondents representing 39.2%). This means that more places of work are beginning to accept the practice of smoking within the working environment. Furthermore, 64(32.2%) of the respondents stated that they would smoke at home; 43(21.6%) stated that they smoke at parties; and a few of the respondents (7.0%) stated that they smoke during parties. Apart from the places where respondents smoke cigarettes, number of cigarette sticks consumed in a day reflects their behaviour towards cigarette smoking, as shown in the table below.

Table 6: Number of Cigarette Sticks Consumed per Day

	Frequency	Percent
Low	86	43.2
Moderate	82	41.2
High	31	15.6
Total	199	100.0

The respondents' smoking habits were categorized into three groups based on the number of sticks they use in a day; low (1-10 sticks per day), moderate (11-30 sticks per day) and high (more than 30 sticks per day). Surprisingly, those who used a high quantity of cigarette sticks per day were in the lowest percentage (15.6%).

Research question 2

What impacts do their cigarettes have on the community?

The research question was answered by how people felt among smokers and effects of smoking which were stated by the respondents

Table 7: How people feel when you smoke

Reactions	Frequency	Percent
Comfortable	86	43.2
Hold their breath	25	12.6
Try to avoid you	88	44.2
Total	199	100.0

The highest percentage (try to avoid you i.e. 44.2 %) shows that most people try to shun smokers and smokers are perceived as people who should not even be associated with at all. However, many of the respondents (43.2%) stated that people were comfortable around them; while only 25(12.6%) of the respondents stated that people hold their breath while they are with them.

Table 8: Effect of smoking

	Frequency	Percent
Cancer	177	88.9
Untimely death	22	11.1
Total	199	100.0

The effects of smoking were stated by the respondents and most of them indicated that cancer is the effect of smoking for a long time, which is true. Smoking causes lung cancer, cancer of the liver, fibrosis, etc. The respondents also stated that smoking for a long time causes untimely death, due to the diseases that one is at the risk of developing. Most of the respondents (88.9%) were aware of the fact that smoking was associated with the risk of developing cancer; while only 22(11.1%) respondents stated that smoking can lead to untimely death.

Research question 3

What is the main reason why smokers consume tobacco products?

The research question was answered by why and how smoking habits started

Table 9: Why smoking habits started

Why smoking	Frequency	Percent
To impress your friends	35	17.6
To be like your friends	12	6.0
For leisure	11	5.5
To get out of depression	42	21.1
As analgesic i.e. Painkiller	99	49.7
Total	199	100.0

As the Table 9 indicated above, 99 respondents i.e. 49.7 % of the respondents stated that they use tobacco cigarette as a way to reduce pain. It contains highly addictive substances that can kill pain. The second most common reason for which people smoke is that they want to get out of depression. They believe that in smoking, they can forget all the things that trouble them in life; there were about 42 of them which was equivalent to 21.1%. The third reason was to impress their friends; there were 35 of them at 17.6%. Reasons like trying to be like their friends or leisure activities were surprisingly the least selected option.

Table 10: How smoking habits started

	Frequency	Percent
I was introduced to smoking by my friends	120	60.3
From my workplace	63	31.7
Cigarette is always available	16	8.0
Total	199	100.0

Table 10 shows that the introduction of tobacco cigarette through friends is the most common way through which people start smoking. The respondents who indicated these were 120 in number at 60.3 %. This implies that peer pressure is a strong factor through which the habit of smoking can be picked up. Furthermore, many of the respondents (31.7%) stated that they adopted the habit of smoking from their places of work; and only 16(8.0%) stated that they consumed tobacco cigarettes because the cigarettes were always available.

Research question 4

What is the respondents' knowledge of the constituents of cigarette?

This was answered by the table of result showing the knowledge of the smokers about the constituents of smoking and knowledge of the effect of smoking

Table 11: Constituents of Tobacco Cigarette

constituents	Right		Wrong	
	Frequency	Percent	Frequency	Percent
Carcinogens	4	2.0	195	98.0
“Tar”	4	2.0	195	98.0
Gases	7	3.5	192	96.5
Nitrosamines	22	11.1	177	88.9
Sweeteners	107	53.8	92	46.2
Menthol	107	53.8	92	46.2
Ammonia	19	9.5	180	90.5
Nicotine	105	52.8	94	47.2

Only four people knew that carcinogens are contained in cigarettes. Moreover, only four people knew that tars are also present in cigarettes. About 7 people were able to indicate that gases are also present in cigarettes. 22 people indicated that nitrosamines are also present in cigarettes. About 107 people knew about sweeteners being constituents of cigarettes. Menthol was highlighted as being part of the constituents of cigarette by 107 people. About 19 respondents chose ammonia as being part of cigarette and finally nicotine which 105 people identified.

Table 12: knowledge of effect of smoking

	Frequency	Percent
Yes	53	26.6
No	146	73.4
Total	199	100.0

As shown in the table, only 53 of the respondents know the effects of smoking and most of them were able to state the effects which were cancer and untimely death. The rest who stated that they did not know the effects were 146 in number which was 73%. The implication of this is there is more need for creation of public awareness on the dangerous and adverse consequences of constant consumption of tobacco cigarette.

Discussion

From the report above, about 11.6% of the respondents started smoking before the age of 11. That is to show that more children are being introduced to the habit of smoking every day, whether in schools, at home, in parties or less likely, even in churches that despite strict laws that are intended to inhibit or minimize the rate at which minors or children take up smoking habits, more children are still found smoking (Satomura and Nakahara, 2003); and it can be caused by various reasons which are:

- 1) Curiosity
- 2) Peer group influence
- 3) Depression
- 4) Poor examples and models

As time goes on, the chemical dependence on cigarette smoking is established. This will later lead to excessive consumption of the cigarettes. During the study, it was discovered that in some cases, people can consume up to 40 sticks of cigarette. In fact, after 30 minutes of waking up from sleep, they can still go and take more. This is known as addiction.

Also, one might think that people do not smoke in places of work, but surprisingly, according to the research that was conducted for this study, it may seem that the most common place where the respondents indicated that they smoke is their place of work. The percentage of people who indicated that they smoke in their places of work were about 39.2 % of the people in this study which was the highest percentage compared to other places to smoke. It will be reasonable to think that people love to smoke in secret places, homes, parties and bars.

Non-smokers will always not want to associate with smokers. That is why the respondents in this study indicated that other people always try to avoid them, reason being that they have been sensitized and educated about how dangerous smoking is, they are religious, or afraid. About 88 of the respondents indicated that, people try to avoid them each time they see them smoke. This is because they have had information about how dangerous tobacco smoking is and how it can kill. This confirms what Ajzen (1991) stated that the attitude that one has towards something is based on the information that was obtained, and those attitudes can be changed through persuasion (Ajzen, 1991).

Also, cancer is one of the effects of smoking tobacco. Constant and frequent use of cigarette causes cancer. It is important that people should stay off this unhealthy habit. In addition to this, smoking tobacco, certainly causes untimely death. The use of tobacco will predispose one to the risk of developing diseases such as cardiovascular diseases, fibrosis of the liver, cerebrovascular rupturing, cancer of the lungs, respiratory associated diseases such as tuberculosis, etc. in some extreme cases, it may even cause insanity.

In this study, it was discovered that the influence of peer on one can make an individual pick up smoking as a habit. When it came to how smoking habits started, which is located in table 10, 120 respondents indicated that they were introduced to smoking by their friends. They may have had different opinions about smoking before, but when they encountered people close to them who smoke, their attitudes were changed. This goes in line with the postulation of Ajzen in his theory of planned behaviour that the attitude that one has towards something is based on the information that was obtained and those attitudes can be changed through persuasion, which was proposed by Ajzen (1991).

Another strong reason why smokers indulge in the habit of smoking is to alleviate pain. Cigarettes also serve as pain killers. About 99 of the respondents (49.7%) indicated that they used cigarettes to alleviate or reduce pain. This is to confirm the information supplied by the UK ministry of health that cigarettes have a chemical called menthol, which has a numbing effect on sensory nerve endings in the respiratory tract and helps to temporarily soothe sensations of discomfort in areas of inflammation and irritation.

The respondents demonstrated some degree of knowledge pertaining to the constituents of tobacco cigarette and also the effects of tobacco. Though it was not impressive. Only four people knew that carcinogens are contained in cigarettes. Moreover, only four people knew that tars are also present in cigarettes. About 7 people were able to indicate that gases are also present in cigarettes. 22 people indicated that nitrosamines are also present in cigarettes. About 107 people knew about sweeteners being constituents of cigarettes. Menthol was highlighted as being part of the constituents of cigarette by 107 people. About 19 respondents chose ammonia as being part of cigarette and finally nicotine, which 105 people identified. Though, with all these, one could say it was mere guess work. As shown in table 12, only 53 of the respondents know the effects of smoking, and most of them were able to state the effects which were cancer and untimely death. The rest who stated that they did not know the effects were 146 in number which was 73. %. The implication of this is there is more need for creation of public awareness on the adverse consequences of constant consumption of tobacco cigarette.

This goes in contrast to Botvin (1992) that smokers may know the consequences of smoking but tend to ignore them and persist on doing what they like. In this study, a large percentage of the respondents indicated that they did not know of the consequences of smoking at all.

Conclusion and Recommendations

From the findings of this study, it was revealed that the habit or behaviour of smoking was picked from friends and co-workers at workplace. This implies that the behaviour was learnt and could be unlearned. Almost all the respondents who indulge in tobacco consumption were aware that it is dangerous to smoke. They also did not know the constituents of the cigarettes they smoke. Highest proportion of respondents who smoked between 11 and 20 sticks of cigarettes were government workers. The following recommendations were made.

1. There is a law banning people from smoking in public places, however, most of the respondents indicated that they smoke in workplaces (which were usually public places); therefore there should be an enforcement of the law to ban smoking in public places..
2. Highest proportion of respondents who smoked between 11 and 20 sticks of cigarettes were government workers; therefore, government should put in place measures on how to discourage public and civil servants from smoking.

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