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Research Article

**PREVALENCE OF SMOKING HABITS/PRACTICES IN
YOUNGSTERS AND ADULTS AGED 15-35 YEARS VISITING
'KHOKHA' CIGARETTE SHOPS IN LAHORE**Muhammad Muaaz Akram¹, Furqan Shahid², Saadullah³¹ Department of Cardiology Shaikh Zayed Hospital, Lahore² Department of Rheumatology Shaikh Zayed Hospital, Lahore³ Department of Urology Shaikh Zayed Hospital, Lahore

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Abstract:

Background: Increasing number of youth is indulging in smoking practices each day despite of the public health efforts for its eradication.

Objective: To identify perceived reasons for smoking in youngsters and adults visiting khokha shops in Lahore.

Methods: A cross-sectional study was conducted on a sample of 350 visitors of khokha shops in Lahore. Two union councils 110 and 117 were selected. Total 76 khokha/ cigarette shops in both UCs were included but for convenience 25 shops were randomly selected. Almost 1 hour was spent by researchers on each shop during a day and all eligible visitors were interviewed after taking verbal consent. Data was analyzed using SPSSv23.0.

Results: Preliminary analysis revealed tension reduction as the most important factor contributing 66.9% in smoking. Peer pressure ranked second as 37.7%. Mood elevation ranked third as 36.6%. Young participants of age group 15-19years gave higher ratings to peer pressure, cigarette availability at shops, to be gentle man and to impress the girls. Middle age group 24-35years gave higher ratings to reduce tension, excessive work load and addiction. 46.8% participants were found to have begun smoking at young age (15-24years). Nearly 37.4 % respondents smoke 6-10 cigarettes per day.

Conclusions: It is concluded that tension reduction/stress relieve is the most prevalent perceived reason of smoking in youngsters and adults. Peer pressure ranked second. Students show indulgence in smoking due to social evils. The employees smoked "to reduce tiredness" and for "mood elevation". Laborer mostly smoke to "reduce tension" and as an "addiction"

Keywords: khokha/cigarette shops, Smoking, tension/stress relieving, Peer pressure and addiction.

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INTRODUCTION:

Tobacco is an entrenched hazard figure for different chronic diseases including lung sickness, lung tumor and cardiovascular ailment. Inactive smoking has been related with upper respiratory tract contaminations (URTIs) and bronchial asthma in children[1]. The WHO evaluates that tobacco will execute more than five million individuals this year. Despite its wellbeing dangers, the utilization of tobacco is found throughout the world, particularly in developing nations like Pakistan. The utilization of cigarettes in Pakistan was assessed at 90,000,000,000 cigarettes in 2005[2]. Gately stated that the history of smoking is as early as 5000-3000 BC when there started cultivation in South America. Its consumption started due to accident burning of the plant. After it they invented other means of consumption[3]. In life the factors like stress, psychological pressure, to be a gentle man, the conflicts between parents and the negligence of parents sometimes leads the people to be indulged into smoking. This report shows how the parental smoking influences their children to do same thing. 27.8% of smoking teens have smoker parents of which 7.2% are of age 12years and 61% are in 17years of age[4].

A lot of studies present about the risk factors of smoking including cancers of oral cavity and lungs. Especially in teen age it leads to brain hemorrhage (Sub-arachnoid) and its risk is 6 times higher in teen age smokers than non-smokers of the same age[5]. According to the report of US Health Department 2006 smoking is fatal to smokers. The smoke of a cigarette contain 250 different chemicals which are injurious to health and out of 260, 69 chemicals are notorious for causing cancers of kidneys, mouth, throat, larynx, bladder and stomach[6]. In Pakistan about 22-25 million are smokers and 55% of households contain at least one smoker (Pakistan health Education Survey 1991-1999). Among population 30% are adult male smokers and 9% are adult females. In Pakistan about 100,000 people die annually due to tobacco use[7].

It is always not possible to collect all data about factors which lead to smoking in local population and in the semi-conservative areas of Pakistan where people mostly remain conservative and less likely to share main causes behind their smoking. This study is also done for the same purpose to collect beneficial information from the local population of age group 15-35 years about the factors which leads them to smoking in Lahore Pakistan.

METHODOLOGY:

This descriptive cross sectional survey was conducted in the KHOKHA (cigarette) shops of UC-110 and UC-117 of Lahore, Punjab from February 1, 2017 to April 15, 2017. Which were selected after random selection by lottery method. All 76 shops were included; 35 from UC 110 and 41 from UC 117. For convenience sampling first 10, 10 shops were selected from both UCs by random selection sampling technique. But when the required sample was not completed from these shops further shops were included to complete the sample. These shops were also selected by random sampling techniques until we got our required sample. So, for these 2 shops from UC 110 and 3 shops from UC 117 were selected. Only males were included in this study. A sample of 350 people was selected by using online software, Raosoft (<http://www.raosoft.com/samplesize.html>) with 95% confidence level and 5.15% margin of error over 10000 population. A pilot survey was conducted on these shops and after a comprehensive study and survey; a structured questionnaire was developed to cover all the perceived reasons of smoking related to our study. After pilot survey eleven factors were identified including stress relieving/tension reduction, peer pressure, reduce tiredness, availability, excessive work load, to be a gentle man, to impress the girls, mood elevation, to increase soothing effect, anger reduction and addiction. During these surveys two hours of maximum visitor activity on these shops were noted first from 3-4pm and second from 8-9pm in a day.

The local population had been accessed after verbal consent and to insure the good sampling the questions of the questionnaire were asked and the respondent were free to express their opinion [YES, NO and OFF AND ON (some-times) options] regarding causative factors of smoking. For convenience an hour (30 min from 3-4pm and 30 min from 8-9pm) was spent on each shop during a day. Their demographic data, age of start of smoking and smoking status (number of cigarettes per day) were also noted. To lessen the biasness the shops were approached at same time, weekdays and weekends. The khokha (cigarette) shops are the main cites where the smokers got cigarettes easily. Here also a null hypothesis is made that social factors (age and occupation) has no relation with psychological factors like tension reduction peer pressure and etc.

Data was analyzed by using SPSS vs23.0 and percentage were calculated for each factor. The psychological factors are also compared with social factors like age and occupation by using chi-square. A p-value of <0.05 was taken to be statistically significant.

RESULTS:

In data collection the questions were directly asked from the respondent.

The table given below describes the pattern of smoking in youth and middle age group people and the main factors both social and psychological.

As our study comprises just over smokers so the factors associated have following percentage among 350 male sample size.

In our study as shown in table 1 the age group of 25-29-year is 32.3% and age group 20-24 years is 31.1%. By occupation the students are more prevalent as 43.4%, the employees as 26.6% and the labors comprise 30.0% of our study population.

Un-married males are 56.6%. The people of 20-24 years of age have highest percentage 37.1% and 15-19 years have 35.4% who start cigarette smoking in this age period. 37.4 % percent cigarette smokers smoke 6-10 cigarettes per day and 34.3% smoke 1-5 cigarettes per day and 24.6% smokers smoke 11-15 cigarettes per day. Among the factors the tension reduction has highest percentage i.e.66.9%, peer pressure has ranked second as 37.7%, mood elevation has 36.9% influence on smoking, excessive work load has 36.6%, reduce tiredness 25.1%, availability 33.7%, to be gentle 22.9%, to impress girls 23.4%, reduce anger 19.1%, soothing effect 21.4% and addiction 16.0%. The percentages are present in table 2.

Table 1

Variables	Sub-categories	Frequency (n=350)	Percentage %
Age	15-19	55	15.7
	20-24	109	31.1
	25-29	113	32.3
	30-35	73	20.9
Occupation	Student	152	43.4
	Employee	93	26.6
	Labors	105	30.0
Marital status	Married	152	43.4
	Un-married	198	56.6
Residence	UC-110	131	37.4
	UC-117	114	32.5
	Others	105	30.0
Start of cigarette smoking	15-19	124	35.4
	20-24	130	37.1
	25-29	93	26.6
	30-35	3	9.0
Number of cigarette smoked per day	1-5	120	34.3
	6-10	131	37.4
	11-15	86	24.6
	16-20	13	3.7
	21-25	0	0.0
	26-30	0	0.0

TABLE 2

Variables		Frequency (n=350)	Percentage%
Tension reduction/stress relieving	Yes always	234	66.9
	Some times	29	8.3
	No	87	24.9
Work load	Yes always	128	36.6
	Some times	27	7.7
	No	195	55.7
Reduce tiredness	Yes always	88	25.1
	Some times	116	33.1
	No	146	41.7
Peer pressure	Yes always	132	37.7
	Some times	49	14.0
	No	169	48.3
Availability	Yes always	118	33.7
	Some times	20	5.7
	No	212	60.6
To be gentle	Yes always	80	22.9
	Some times	44	12.6
	No	226	64.6
To impress the girls	Yes always	82	23.4
	Some times	80	22.9
	No	188	53.7
Mood elevation	Yes always	129	36.9
	Some times	64	18.3
	No	157	44.9
Anger reduction	Yes always	67	19.1
	Some times	100	28.6
	No	183	52.3
Soothing effect	Yes always	75	21.4
	Some times	107	30.6
	No	168	48.0
Addiction	Yes always	56	16.0
	Some times	93	26.6
	No	201	57.4

Analysis:

Social factors like age when compared with the psychological factors as shown in table 3 the tension reduction has highest percentage 77.9% (p-value >.001) among age group 25-35 years. Work load is 43.5% (p-value >.001) and reduce tiredness is 32.2% (p-value >.001) in age group 30-35 years. Peer pressure is 57.9% (p-value >.001), availability of cigarettes is 48.1% (p-value >.001), to be gentle man is 48.1% (p-value >.001), to be gentle man is 33.5% (p-value >.001) and to impress the girls 38.4% (p-value >.001) in an age group 15-25 years. Mood elevation, anger reduction, soothing effect and addiction are 44.0%, 21.5%, 23.1% and 20.9% respectively among 25-35 years of age group (p-value >.001). Work load has .001 and addiction has .083 of p-value.

Percentages as shown in table 4 of tension reduction among students and labor are 57.8% (p-value >.001) and 80.9% (p-value >.001) respectively. Work load is 49.5% (p-value .002) in labors and reduce tiredness is 37.6% (p-value >.001) in employees. Peer pressure is 40.7% (p-value .003), availability is 38.1% (p-value .006), to be gentle is 26.9% (p-value .047) and to impress the girls is 30.9% (p-value >.001) among the students. Mood elevation and anger reduction are 46.2% (p-value .001) and 20.4% (p-value .002) among employees respectively and 44.7% (p-value >.001) and 20% (p-value >.001) are among labors respectively. Increase soothing effect and addiction has percentages of 35.2% (p-value >.001) and 33.3% (p-value >.001) respectively among labors.

TABLE 3:

		Age (in years)		p-value
		15-24	25-35	
Tension reduction/ stress relieving	Yes always	89(54.2%)	145(77.9%)	.000
	Some times	17(10.3%)	12(6.4%)	
	No	58(35.3%)	29(15.5%)	
Work load	Yes always	47(28.6%)	81(43.5%)	.001
	Some times	17(10.3%)	10(5.3%)	
	No	100(60.9%)	95(51.0%)	
Reduce tiredness	Yes always	28(17.0%)	60(32.2%)	.000
	Some times	31(18.9%)	85(45.6%)	
	No	105(64.0%)	41(22.0%)	
Peer pressure	Yes always	95(57.9%)	37(19.8%)	.000
	Some times	21(12.8%)	28(15.0%)	
	No	48(29.2%)	121(65.0%)	
Availability	Yes always	79(48.1%)	40(21.5%)	.000
	Some times	12(7.3%)	8(4.3%)	
	No	74(45.1%)	138(74.1%)	
To be gentle	Yes always	55(33.5%)	25(13.4%)	.000
	Some times	24(14.6%)	24(12.9%)	
	No	85(51.8%)	141(75.8%)	
To impress the girls	Yes always	63(38.4%)	19(10.2%)	.000
	Some times	42(25.6%)	38(20.4%)	
	No	59(35.9%)	129(69.3%)	
Mood elevation	Yes always	47(28.6%)	82(44.0%)	.000
	Some times	33(20.1%)	31(16.6%)	
	No	84(51.2%)	73(39.2%)	
Anger reduction	Yes always	27(16.46%)	40(21.5%)	.000
	Some times	28(17.0%)	72(38.7%)	
	No	109(66.46%)	74(39.7%)	
Soothing effect	Yes always	32(19.5%)	43(23.1%)	.000
	Some times	35(21.3%)	72(38.7%)	
	No	97(59.1%)	71(38.1%)	
Addiction	Yes always	17(10.3%)	39(20.9%)	.083
	Some times	51(31.0%)	42(22.5%)	
	No	96(58.5%)	105(56.4%)	
Total		164	186	

TABLE 4:

Perceived reasons		Occupation			p-value
		Students	Employee	Labors	
Tension reduction/ stress relieving	Yes always	88(57.8%)	61(65.5%)	85(80.9%)	.000
	Some times	14(9.2%)	13(13.9%)	2(1.9%)	
	No	50(32.8%)	19(20.4%)	18(17.1%)	
Work load	Yes always	39(25.6%)	37(39.7%)	52(49.5%)	.002
	Some times	11(7.2%)	8(8.6%)	8(7.6%)	
	No	102(67.1%)	48(51.6%)	45(42.8%)	
Reduce tiredness	Yes always	22(14.4%)	35(37.6%)	31(29.5%)	.000
	Some times	62(40.7%)	19(20.4%)	35(33.3%)	
	No	68(44.7%)	39(41.9%)	39(37.1%)	
Peer pressure	Yes always	62(40.7%)	35(37.6%)	35(33.3%)	.003
	Some times	32(21.0%)	8(8.6%)	9(8.5%)	
	No	58(38.1%)	50(53.7%)	61(58.0%)	
Availability	Yes always	58(38.1%)	27(29%)	33(31.4%)	.006
	Some times	6(3.9%)	12(12.9%)	2(1.9%)	
	No	88(57.8%)	54(58.0%)	70(66.6%)	
To be gentle	Yes always	41(26.9%)	17(18.2%)	22(20.9%)	.047
	Some times	25(16.4%)	12(12.9%)	7(6.6%)	
	No	86(56.5%)	64(68.8%)	76(72.3%)	
To impress the girls	Yes always	47(30.9%)	20(21.5%)	15(14.2%)	.000
	Some times	51(33.5%)	13(13.9%)	16(15.2%)	
	No	54(35.5%)	60(64.5%)	74(70.4%)	
Mood elevation	Yes always	39(25.6%)	43(46.2%)	47(44.7%)	.001
	Some times	39(25.6%)	12(12.9%)	13(12.3%)	
	No	74(48.6%)	38(40.8%)	45(42.8%)	
Anger reduction	Yes always	27(17.7%)	19(20.4%)	21(20%)	.002
	Some times	28(18.4%)	33(35.4%)	39(37.1%)	
	No	97(63.8%)	41(44.0%)	45(42.8%)	
Soothing effect	Yes always	12(7.8%)	26(27.9%)	37(35.2%)	.000
	Some times	60(39.4%)	21(22.5%)	26(24.7%)	
	No	80(52.6%)	46(49.4%)	42(40%)	
Addiction	Yes always	11(7.2%)	10(10.7%)	35(33.3%)	.000
	Some times	34(22.3%)	29(31.1%)	30(28.5%)	
	No	107(70.3%)	54(58.0%)	40(38.0%)	
Total		152	93	105	

DISCUSSION:

An ever-increasing number of youth is getting into smoking propensities in nowadays. Regardless of how much government and guardians attempt to stop under-age cigarette smoking. So, expect of the present study was to investigate the elements that drive youngsters and middle age group people to connect with into smoking. For a considerable length of time the cigarette smoking commercials are prohibited on media in our nation. Under-age offer of cigarette and tobacco is entirely disallowed. However, we have some profound established causes and driving components that pull a large number of individuals to play with their

wellbeing.

Most smokers begin smoking in their youth and continue smoking from there on[8]. Respondents gave a high percentage to start of cigarette smoking at an age of 20-24 years 37.1% while a study was conducted in Iran regarding prevalence of smoking, which also shows that the mean age of starting to smoke cigarette was 21.3 years[9]. Most of the respondents 37.4% expressed that they smoke 6-10 cigarettes per day. A conductive research was done regarding prevalence of smoking in Pakistan it also reflects that current tobacco users smoked an average of 10 cigarette

per day[10]. Now days instead of heavy taxation and regularity duties on cigarettes there is a rising number of smokers among youth and middle age people. In our study most of the people smoke to reduce tension 66.9% either it is due excessive work load (36.6%) or they want to reduce their tiredness (25.1%). Second most prevalent factor in our study is peer pressure[8] 37.7% teens are indulged into smoking because their parents has or had that habit. A single person in the house can lead to smoking to the emerging youth. Guardians are known to impact their kids 'conduct; pre-adult young ladies with smoking moms tend to create unending smoking when contrasted with those whose guardians do not[11]. A review in Karachi likewise found a huge relationship between smoking in youths and smoking among their folks, uncles, peer smoking and spending relaxation time outdoors[12]. Some respondent gave a heavy weightage to the social evils like if they smoke they will look like a hero (22.9%) or they think that cigarette smoking can attract the females [girls (23.4%)] towards them. Another reason behind cigarette smoking is its easy availability in the market especially the teen agers indulge into smoking due to this reason (33.7%). Age has a characteristic relation with this habit and the values of p (0.000) which is less than the table value 0.05 for tension reduction($X^2(6) > = 61.148, p = 0.000$) and peer pressure($X^2(6) > = 83.191, p = 0.000$)so it rejects the null hypothesis that the age has no comparative association with these two factors. Age has a statistically significant impact on cigarette smoking[13].

As the clustered bar chart shows it is the age group 25-35 years mostly and 15-24 years age group on second number who primarily smoke due to tension reduction. The students 57.8% and labors 80.9% show high propensities to tension reduction ($p=.000$) due to their nature of work respectively. Research regarding prevalence of cigarette smoking in Pakistan shows that stress was the most common reason 50% given by students for which they smoked[10]. The results of smoking habit due to peer pressure comes second[8] in association with age are astonishing because it is the youth (15-24 years) who is more indulged into smoking because of they have or had a significant smoker member in their houses and has less guiding members in their peers. High rating of smoking among students due to peer pressure ($p=.003$) is an alarming situation as no serious actions were taken by their parents and poor implementations of laws against smoking in institutes.

As a third cause a huge number of respondents show inclination towards the option of mood elevation ($p=.000$) as they smoke because they do not want to live in depression. Employee and labors

are indulged in smoking because they want continuous elevation in their mood ($p=.001$). Students are also highly involved in social evils like to be a gentle man ($p=.047$) and to impress the girls ($p=.000$), guardians should take eagle's eye on their adults. The addictive power of nicotine can also not to be forgotten[8]. It is the major cause of smoking in local population. The labors are more addicted to this habit than other field of occupation. It is also proven from the value of $p=.000$ which is statistically significant that shows a strong relation between occupation and addictive power of smoking.

A descriptive study can also be done on the relation between number of cigarettes and occupation, to study which occupational persons are more prone to cigarette smoking and how many cigarettes they smoke.

CONCLUSION:

It is conclusive that tension reduction/ stress relieve the most prevalent perceived reason of smoking in adolescent and adults. Peer pressure ranked second, mood elevation, excessive work load are also the reasons behind smoking. Addictive nature of nicotine also contributes to smoking. Students also show indulgence in smoking due to social evils like "to be a gentle man and to impress the females (girls)". The employee smoked "to reduce tiredness" and for "mood elevation". Labors mostly smoke as to "tension reduction/ stress relieving", due to "excessive work load" and "addiction".

SIGNIFICANCE OF STUDY:

The study is built on the conclusion of psychosocial factors that lead to accept smoking customs in age group 15-35years. This stays an indirect method reviewing the psychosocial factors that affect or inspire the adolescents and middle age group persons to get used to smoking. We are here not to include the consumption of tobacco or through ratio of subjected population of smokers and nonsmokers. This research is greatly attentive on the several psychosocial factors behind smoking. We can invent the origins, and then the situation will be bitterly handled. So, this is a pure root cause analysis of the reasons different age groups have in their mind to be a smoker, to think starting smoking or just being inspired of people they see doing the smokes[14]. Conclusions of this study increases the understanding of parents, teachers and schools, colleges and universities management regarding one of the significant youth issues. Now they can help them efficiently to overcome this bad habit. Schools, colleges and universities can arrange workshops or seminars regarding the effects of smoking on physical health and many NGOs can act against the smoking habits of local population by arranging seminars and by

folk shows. Effects of smoking can also be added in the curriculum. Teachers can deliver lectures on this sensitive topic[14] and media should work sensibly by showing the outcomes of cigarette smoking. So that the youngsters and middle age group should rethink before starting this habit.

Recommendations:

1. Anti-cigarette smoking campaigns should be launched in colleges and universities for the students and in the community for the local population by means of folk shows and advertisements.
2. Cigarette smoking is injurious to health GOVT should take serious actions for public health education.
3. Parents have to keep an eye on their children's activities and should stop cigarette smoking if they are the smokers.
4. Research should also be made on smoking practices/habits in females of our society.

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