

Factors Associated with Smoking among Youths in Owerri Municipal Council, Imo State, Nigeria

Stella C. Okoroafor ¹, Augustine U. Akujobi ², Priscilla O. Chinedu-Eleonu ³, Chidera A. Akujobi ⁴

^{1,3} Department of Public Health, Imo State University, Owerri, Nigeria

² Department of Optometry, Imo State University, Owerri, Nigeria

⁴ Department of Surgery, Chukwuemeka Odumegwu Ojukwu University Teaching Hospital, Awka, Nigeria

Corresponding author

Stella C. Okoroafor

Phone: +2348034003118

Email: asinobistella09@gmail.com

Abstract

The cross-sectional study investigated the factors associated with smoking among youths in Owerri Municipal Council, Imo State, Nigeria. Structured questionnaires were administered on randomly selected participants, and the descriptive statistics of percentages and means were used to analyse the data. The study showed that smoking was influenced by various economic, environmental, emotional factors leading to difficulty in cessation and control. However, modern technological initiatives, community-based engagements, provision of welfare and infrastructural development, employment and good life, rehabilitation centers will help halt smoking as an unhealthy lifestyle.

Keywords: Smoking, Tobacco, Youths, Owerri, Imo State

Introduction

Smoking is the act of inhaling and exhaling, swallowing or tasting of fumes of a burning substance and a variety of plant materials into the body system ¹. The act is commonly associated with tobacco even as other products are smoked such as, cigar, pipe, marijuana, e-cigarettes, and shisha. The health implications of smoking have reached an epidemic proportion with very high mortality rates ¹. Smoking is an addictive act with adverse effects on health and social life. It is estimated to be practiced by over 1 billion of the world's population, with cigarette smoking being the most predominant and consumed by more males 30% ². than females (7%) ³. This is increasing with resultant devastating effects felt more in the rural areas due to poor health facilities, low nutritional status and dearth of knowledge on its negative effects on health. .

According to another study ⁴, the global adult tobacco survey report shows that in Nigeria, 4.5 million (5.6%) adults aged 15 years or older currently smoke (men 10.0% and women 1.1%), while 6.4 million adults (29.3%) are exposed to second-hand smoke during visits to public places. It is estimated that more people will indulge in smoking by the next decade compared to the current statistics of approximately 23% of smoking prevalence, with men (32%) smoking more than women (7%) ⁴.

Smoking has become a major cause of morbidity and mortality, accounting for about 6 million deaths with one person dying every six seconds due to tobacco-related disease and still expected to rise by 2030 ⁵. Understanding the patterns of smoking among youths is crucial to develop effective prevention and intervention strategies.

Methodology

Research Design

The study adopted the descriptive survey research design.

Study Area

The study was carried out in Owerri Municipal Council, Imo State. Owerri Municipal is in the heart of Owerri, the capital of Imo State. It is located within latitude $5^{\circ} 29'$ North and longitude $7^{\circ} 02'$ East of the equator. There are pockets of tropical savanna vegetations with notable vegetation areas. Owerri Municipal Council has an estimated population of 201,420 that is, 3,328 people per square kilometer with a land mass of between 60.5-73 square kilometers. It has a population with a median age of 23 years, male median age of 23.9 and female median age of 22.1 years.

Ethical Considerations

Ethical approvals were obtained from the participating institutions. Furthermore, all the respondents were informed about the objectives, methodology, potential risks and benefits of the study. They were assured of confidentiality of their responses and were freely allowed to decide whether to participate or opt out of the study voluntarily at any stage

Study Population

The population of the study comprised of 201,420 people constituting the estimated population of Owerri Municipal Council.

Sample and Sampling Technique

The sample size of 1000 was determined using the Taro Yamane's formula.

Instruments for Data Collection

Data were collected using self-administered questionnaires

Procedure for data collection

The questionnaires consisted of structured questions on the demographic characteristics of respondents, economic, emotional, and environmental factors contributing to smoking. The response type was patterned in the form of a four-point-Likert scale as follows: Strongly Agree (SA)= 4; Agreed (A)= 3; Disagreed (D)= 2; Strongly disagreed (SD =1). The face and content validity of the questionnaires were ensured. Section 2 of the questionnaire had a Yes or No response type.

Data Analysis

Data were analyzed using descriptive statistics of percentages and the arithmetic mean (X) for each item of the instrument. The response categories were assigned values as strongly agree (SA)=4, Agree (A) =3, Disagree (D) =2, Strongly Disagree (SD) =1. In answering research questions, YES or NO were used to elicit responses on the socio-demographic characteristics of respondents. The mean score of 2.5 and above was accepted a criterion for consideration as a major contributor for higher smoking prevalence/health implications among youths, while below 2.5 was accepted as a criterion for consideration as a minor contributor to smoking.

Results

Table 1: Demographic characteristics of respondents

Socio-Demographic Characteristics	No Respondents	% response
Age in Categories (Years)		
12-15	240	33.3
16-25	260	36.1
26-40	220	30.5
Mean (x)	720	3.7
Gender		
Male	460	63.9
Female	240	36.1
Mean (x)	720	3.9
Educational Qualification		
No Formal	130	18.05

Primary	210	29.2
Secondary	260	36.1
Higher	120	16.7
Location		
Owerri Municipal	720	100
Others	0	0
Mean (x)	720	4.0
Socio-Demographic Characteristics	No Respondents	% response
Religion		
Christianity	700	97.2
Moslem	10	1.4
Others	10	1.4
Mean (X)	720	3.9
Marital Status		
Single (Not in a relationship)	276	38.2
Single (In a relationship)	324	45
Married (Stable)	58	8.05
Married (Toxic)	22	3.05
Divorced	40	5.5
Occupation		
Motor Drivers	111	7.5
Okada Riders	101	7.2
Artisans: Bricklayers	54	3.05
Iron Benders	52	2.5
Carpenters	22	3.6
Block moulders	18	3.3
Mechanics	26	6.3
Painters	24	8.3
Doctors/Nurses	46	11.9
Sales Boys/Girls	60	16.6

Students: Secondary School	86	22.9
Undergraduates	120	33.2
Total	720	100

Table 2: Economic factors contributing to smoking prevalence in Owerri Municipal

S/N	ITEM	SA	A	D	SD	N	Efx	X
1	Household income inequality breeds cravings to smoking behavior among youths?	312	190	148	70	720	2184	3.4
2	Unemployment status and job stress of families predispose youths to smoke?	340	103	89	188	720	2035	2.8
3	Cost of cigarettes and other tobacco products (affordability) and accessibility contribute to smoking prevalence?	240	200	150	130	720	1990	2.7
4	Poverty and socio-economic backgrounds of youths provoke smoking prevalence?	290	240	100	90	720	2170	3.01
5	Food insecurity occasioned by strife, civil disturbances brings frustration, disappointment, depression predispose youths to smoking?	705	0	9	6	720	2844	3.9
6	Poor economic opportunities breeds stress hence youths take to smoking to cope?	310	120	190	100	720	2080	2.8
7	Financial support (money to spend from parents, savings, spending habits) increases the propensity to smoke by youths?	390	128	90	112	720	2231	3.1
8	Lack of provision of basic infrastructure breeds frustration among youths hence take to smoking to cope?	400	248	30	42	720	2446	3.4
9	Exposure to tobacco marketing and advertising increases the smoking prevalence?	180	175	190	175	720	1800	2.5
10	Influx of unregulated, cheap, tobacco products contributes to its affordability and accessibility							

thereby increasing consumption? 520 90 40 70 720 2500 3.5

Table 4.2 above shows that all the items have mean scores above 2.5 which depicts that economic factors contribute enormously to smoking in Owerri Municipal.

Table 3: Emotional factors contributing to smoking among youths in Owerri Municipal Council

S/N	ITEM	SA	A	D	SD	N	Efx	X
1	Stress and anxiety (feeling of unease) predisposes youths to smoke in Owerri Municipal?	538	128	34	20	720	2624	3.6
2	Smoking reduces negative emotions?	388	222	60	50	720	2388	3.3
3	Smoking provides temporal escape from emotional pain or discomfort?	301	208	130	8	720	2169	3.0
4	Smoking calms oneself, reduce the feeling of overwhelm and provide comfort and sense of security?	388	222	60	50	720	2388	3.3
5	Smoking helps youths cope with traumatic experiences or emotions?	490	130	72	28	720	2522	3.5
6	Smoking reduces boredom, provides sense of relaxation among youths in Owerri Municipal?	512	103	66	39	720	2528	3.5
7	Smoking prevalence is as a result of it being associated with specific cues such as getting to toilet, after meals, during breaks thus become a routine?	382	264	59	15	720	2453	3.4
8	Most youths smoke to express individuality and maturity and fight low self esteem?	228	216	174	102	720	2010	2.8
9	Youths enjoy the taste, smell or sensation of smoking thus smoke for pleasure?	270	214	153	83	720	2111	2.9
10	Smoking reduces panic attacks and help cope with depression?	460	108	80	72	720	2396	3.3

The result shows that all the items have mean scores above 2.5. This shows that the emotional factors are associated with smoking.

Table 4: Environmental and demographic factors contributing to smoking among youths in Owerri Municipal

S/N	ITEM	SA	A	D	SD	N	Efx	X
1	Youths living in urban areas smoke more than those living in rural areas?	108	107	241	264	720	1499	2.08
2	Living in areas with high or low tobacco outlet density encourages youths smoking behavior?	224	216	130	150	720	1954	2.7
3	Living close to clubs, recreation parks, outdoor-youth-friendly areas increases the cravings of youths to smoke?	381	131	100	108	720	2225	3.0
4	Living in slums or areas with high pollution levels increases smoking prevalence among youths?	176	174	186	184	720	1812	2.5
5	Living in areas with high or low crime rate influence youths craving to smoke?	270	214	153	83	720	2111	2.9
6	Living in areas with tobacco-free smoking policies in public spaces (secondhand smoke) increase prevalence among youths?	381	210	102	27	720	2385	3.3
7	Age influences smoking initiation and prevalence among youths?	338	50	150	182	720	1982	2.7
8	Male youths smoke more than females youths in Owerri Municipal?	538	128	34	20	720	2624	3.6
9	Youths from families with low social and economic wealth smokes more than those from wealthy/financial stable families?	380	260	30	50	720	2410	3.3
10	Youths with less education and poor educational background of parents smoke more than those with							

higher level of education and as well from educated families?	362	102	182	74	720	2192	3.04
11 Family structure (single: not in a relationship and in a relationship; marriage: stable and toxic; divorced; single-parent) influences smoking behaviours among youths?	514	128	50	28	720	2568	3.5
12. Smoking prevalence is influenced by race, region and religion?	400	248	30	42	720	2446	3.4

Table 4.4 shows that all items except urban and local residency have mean scores above 2.5 signifying that environment contributes to smoking among youths.

Discussion

The study evaluated the various economic, emotional and environmental indices associated with smoking in Owerri Municipal Council. The findings of the study corroborate those of other studies ^{6,7} that suggested that family, school, community and workplace environment, to a large extent, shape attitude to smoking among the youths. In addition, the study showed that environmental factors also contribute to the initiation and maintenance of smoking behavior among youths in Owerri Municipal Council.

Furthermore, various response options indicate that economic factors such as level of income, educational attainment, employment/occupation, poverty and so on were recorded as significant predictors of smoking. In addition, it was discovered that the emotional disposition of the youths such as, anxiety, low self-esteem, stress, bias, illusion of control, depression, sensation-seeking, impulsivity and rebelliousness, self-efficacy, cognitive biases, social learning and emotional regulation played a significant role in shaping the smoking behavior of the youths. These findings corroborate other studies ^{4,5} which postulated that these emotional and psychological determinants influence the initiation or cessation of smoking behaviors among youths.

Conclusion

The findings provide valuable insights into the multifaceted predictors of smoking among youths and highlight the need for comprehensive targeted interventions to prevent smoking initiation, promote cessation and protect youths from the devastating consequences of smoking. Policy makers, healthcare providers, educators and community leaders must collaborate to implement evidence-based tobacco control efforts.

References

1. Aniwada EC, Uleanya ND, Ossai EN, Nwobi EA, Anibueze M. Tobacco use: prevalence, pattern, and predictors, among those aged 15-49 years in Nigeria, a secondary data analysis. *Tobacco Induced Diseases*. 2018; 7. doi:10.18332/tid/82926.
2. Connolly GN. Environmental Determinants of Tobacco Smoking. *American Journal of Public Health*, 2019; 109 (9): 1233-1238.
3. Emery S. Exposure to Tobacco Marketing and Smoking Susceptibility among Youths. *Journal of Nicotine & Tobacco Research*, 2019; 21 (5): .639-646.
4. Eriksen M, Nyman A, Whitney,C. The Tobacco Atlas Sixth Edition. www.tobaccoatlas.org. accessed 14 Sep 2024.
5. Glantz SA (2020). Environmental factors influencing tobacco smoking. *Journal of Tobacco Control*, 2020; 29 (e1): e1-e9.
6. Rees VW. Social Norms and Tobacco Smoking. *Journal of Social Science and Medicine*, 2019; 233: 241-248.
7. West R. Psychological Factors in Smoking Cessation. *Journal of Smoking Cessation*, 2020; 15 (1): 1-9.