

The Determinants and Consequences of Smoking Trends Among the Youths of Balochistan

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Abstract

Smoking is indeed the first ladder that elevates youth to the culmination of heavy drugs. The purpose of this paper is to examine the understanding of youth about the smoking orientation; the factors which are promoting smoking trends and the consequences of the smoking behavior. The study was carried out on the positivist approach of quantitative research study, where the data was collected from youth of Balochistan about the smoking trends. The data was gathered through simple random sampling technique from the sample size of 200 individuals/respondents. The findings outlined the company or the peer groups and the inadequate parental supervision are the major reasons turning the youth to smoking behavior, besides this the study found that ecigarette and different flavors in e-cigarette have accelerated the trend among the youth. Moreover, the study resulted that the smoking habit is causing health issues and familial and social stigma. The study suggests that smoking is a harmful risk factor subverting the most crucial segment of the society. The government should revisit the tobacco controlling policies, intervene to restrict perceived accessibility to cigarette and take all possible measure to discourage smoking.

Keywords: Smoking, Cigarette, Trends, Youth, Determinants, Consequences

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Introduction and Background

Cigarette is the prominent and easily accessible form of smoking used worldwide. It is a learnt behavior passing through different succeeding stages. These stages include the preparation, initiation, experimentation, regular smoking and then the addiction (Veeranki et al, 2013). It is further revealed that the preparation stage is the period where a person starts thinking about the smoking and establish idea and belief about cigarette smoking, and in the initiation stage a person smokes an entire cigarette (Aslam et al, 2014). The smoking trend among youth increased significantly during the early 1990s. Its rate soared from 28% to 36% between the 1991 and 1997. However, the initiation rates (those who ever tried smoking) continued to decline during the decade between 1980s and 1990s (Wayne & Connolly, 2002). The World Health Organization (WHO) has estimated that the tobacco will cause five million people death this year across the globe. Despite this warning the tobacco use is increasing throughout the world and especially in the developing countries like Pakistan. The consumption of cigarette was estimated in Pakistan as 90 billion in the year 2005. It is further revealed in the study that the current smoking prevalence is 15.2% and 6.3% among youth (Nizami et al, 2011). The study warns and as well predict that if current prevalence continued than the annual deaths will be over 8 million by the year 2030 globally and two third of them will occur in low-andmiddle-income countries.

Smoking is a global challenge and a growing epidemic. It is more common in developing countries than the developed countries. At present there are 1.1 billion cigarette smokers in the world where 70% of them are living in the developing countries with over 50% in Asia alone. (Hammond et al, 2009; Veeranki, et al, 2013). In the same way Masood et al (2013) argue that the low and middle-income countries (LMICs) are more affected. It is estimated that tobacco related deaths are expected to soar from 5.4 million in 2005 to 6.4 million in 2015 and 8.3 million in 2030. The study further suggests that there is the need to envisage the trends and patterns of tobacco use in different forms and form effective policies to control smoking. Adult in the developing countries start tobacco use during their teen age. Studies indicate several factors increasing the smoking risk among the adolescence. The relationship between perceived availability and youth tobacco has not been understood adequately. (Doubeni et al, 2008). Tobacco use is one of the leading causing of death among youth. Currently 1 out of 10 adult dies from tobacco use, and the number is increasing rapidly; and this number is predicted approximately to 10 million per year by the year 2030. While keeping in view this situation Thailand and Malaysia evolved multi-stage strategies in the critical regions to control the tobacco use. Thailand was the first among the countries in the world to chalk out policies to restrict tobacco advertisements and its promotion including pictorial warning labels on cigarette packets, which in return resulted an outstanding decline in the smoking rates (Hammond et al, 2008).

The smoking trends increases with the accessibility, peer gatherings, parental smoking etc. Youth with perceived accessibility and peer-smokers have been found at higher risk of regular smoking and progression. Moreover, borrowing cigarettes from friends have also been reported as 50% among adolescents, that may play a leading role in cigarette promotion (Nizami et al, 2011). Peer factor is the highest factors of all diverting youth to smoking. Adolescents typically regularly purchase cigarette from stores and then share it with their friends, which is becoming a primary and easy source for the new smokers (Doubeni et al, 2008). Moreover, it has also been found that the education has no concern with the smoking, both types (educated and uneducated) were found equally engage in smoking. They were found mostly aware of the smoking drawbacks, and the people with low levels of literacy witnessed paying less attention to their health as compare to educated people (Nizami et al, 2011). Smoking has become a habit, which is difficult to be quitted easily, however, there is an opinion that it can be quitted, but for those who are infrequent smokers (Panday et al, 2003).

Beliefs about smoking is fairly important predictors for smoking behavior among youths. The youth who have positive attitude about smoking have been found more involved in smoking initiation and to the continuation than the others who have negative belief about it (Lee et al, 2013). A number of studies are indicating that there are substantial empirical evidences that the children are more exposed to cigarette advertisements. The studies argue that liking of cigarette advertisements is associated with smoking status and smoking initiation among young adults, which is an additional to other predictors like peer groups, siblings and parental smoking (VVakefield et al, 2003). It is further elucidated while looking into the gravity of the issue the USA has increased the anti-smoking advertisements for the purpose to condense the smoking intensity, which has proved fruitful and has reduced the intensity of tobacco practice (Centers for Disease Control, 1999). Moreover, a number of tobacco companies have formed and practiced strategies to expand a message about the youth to not smoke. These strategies have raised questions about the circumstances under which anti-smoking advertisement may have greater or lesser effects on youth smoking (VVakefield et al, 2003).

Smoking or the tobacco use is a declared risk factor for various diseases including lungs diseases, lungs cancer, cardiovascular disease and so on. Additionally, it also causes chronic impacts on passive smokers mentionable as Upper Respiratory Tract Infections (URTIs) and bronchial asthma in children (Nizami et al, 2011). The onset of cigarette occurs normally during the adolescent stage. A study outlines that about half of the smokers who start smoking in the adolescence die due to tobacco related diseases if they continue to smoke. These adolescences become habitual of the tobacco use later. The study explains that the daily smoking prevalence rates among 15-years-old European

teenagers ranged from 5.5% in Sweden to 20.0% in Latvia among boys, and from 8.9% in Poland to 24.7% in Austria among girls in the year 2002 (Hublet et al, 2009).

While looking into the severity of the issue the European commission (2004) and the United States policy makers continued to make plans for the purpose to increase taxes on cigarettes. "Healthy people 2010 (USDHHS 2004)" was the program that set its objectives to call for regular rise in cigarette taxes and to control smoking deaths and diseases in the future (Levy, Romano & Mumford, 2005; Orzechowski & Walker, 2007). In this connection forty-three (43) states in the USA enacted a number of laws aiming to discourage the tobacco use. These laws also equally suggested rise in the tobacco taxes. In 2007 when supplementary taxes were proposed through the federal cigarette tax department were vetoed as an extra burden on the people (DeCicca, Kenkel & Mathios, 2008). High taxes and smoking quittance have been found inversely proportional. The price increased found a specific impact on smoking prevalence among youth. Likewise, in an international study conducted in 87 countries resulted prevention of the initiation of cigarette smoking, cigarette quitting or the less smoking. However, in contrarily the cigarette promotion in price reduction facilitated from initiation to regular smoking among youth (Hublet et al, 2009). In addition, protective factors like parental opposition, sports engagements, physical consciousness, religiosity, and negative attitudes towards smoking may play outstanding role in reducing smoking orientation (Garrett et al, 2016). Moreover, the campaigns have also a prominent role in decreasing the smoking rate. In this regard a study found that in Florida "The truth campaign" led to paramount decline in the smoking intensity notably among the 8th-grade students by 50% and 35% among the high school students from 1998 to 2002 (Matthew et al, 2005).

In Pakistan a number of laws, ordinances and acts have been formed to counter the tobacco use. These laws included Cigarette (printing of warning) ordinance 1979, Prohibition of smoking in enclosed places and protection of non-smokers health ordinance 2002, Federal excise act 2005 and the Federal excise rules 2005. To make effective and viable these codes several amendments have been made overtime. Moreover, different committees have been constituted in different times on tobacco advertisements, guidelines, punishment standards, increasing taxes, and securing the other non-smokers. Additionally, in this move besides government organizations a large number of private institutions and non-governmental organizations are working to lessen the prevalence of smoking orientation and control the onset of tobacco use. But unfortunately, the state has not yet been succeeded in this move. More than 160000 people die from tobacco-related diseases each year in the country. Sadly, Pakistan is one of the most prominent countries among others in terms of cigarette smoking tendency among youth (Nizami et al, 2011).

Objectives of the Study

- 1. To explore the factors and determinants that are promoting smoking trends among youth
- 2. To identify that what are the consequences of smoking orientation on the life of youth

Hypotheses of the Study

- 1. There is correlation between the individuals' association with smoker peers and a decline in their value in the family due to the use of smoking
- 2. The inadequate parental supervision is positively correlated with an increased youth engaging in smoking, and such smoking behavior is associated with adverse effects on the psychological well-being of youths

Methodology

The youths are more susceptible to the smoking settings. The causing factors are diversified from socio-economic, familial, educational, environmental, psychological and technological. To explore the promoting drivers of smoking trends and their consequences, a survey research method was employed. Accordingly, this study was carried out through the positivist approach of quantitative approach, where the data was collected from male youth ranging between 17 years and 32 years old about the determinants and consequences of smoking trends. The respondents were almost entirely literate. The data was gathered from the youth residing in Quetta, and were belonging from different parts of the province. In the study simple random sampling of probability sampling technique was employed while collecting data from the sample size of 200 individuals/respondents. For the study a well-structured questionnaire (consisting of 30 questions including a few open-ended questions in the personal profile and majority close-ended questions) was distributed among the youth to fetch the data. The questionnaire was filled in in front of the researcher and guided whenever the respondents felt any difficulty. The data was later on passed through Statistical Package for Social Sciences (SPSS) 2023 version, and it was further analyzed through descriptive statistics (univariate analysis) and inferential statistics (bivariate analysis). The data was later interpreted in easy words so that to make it understandable for the common men.

Findings and Results

The structured questionnaire consisted of different parts. In the sociodemographic part it was found that the ages of the respondents were ranging between 17 to 32 years. Likewise, their academic qualification ranged from primary (five years of education) to M.S/M.Phil. (18 years of education). Moreover, they were attached with different occupations and mostly of them were still students. All of the respondents were cigarette smokers. They had started smoking in the different years spanning 2008 to 2023. The number of cigarettes they smoke daily fall between 02 to 24 cigarettes.

Table# I. Distribution of the respondent regarding their understanding about the smoking

| S.# | Statement | SA | А | NO | DA | SDA |
|-----|---|-------|-------|-------|-------|-------|
| | | f & % | f & % | f & % | f & % | f & % |
| 1. | Smoking is harmful to health | (139) | (44) | (5) | (5) | (7) |
| | | 69.5% | 22% | 2.5% | 2.5% | 3.5 |
| 2. | Smoking is a financial loss | (93) | (76) | (15) | (9) | (7) |
| | | 46.5% | 38% | 7.5% | 4.5% | 3.5% |
| 3. | You like to quit smoking | (93) | (49) | (31) | (22) | (5) |
| | | 46.5% | 24.5% | 15.5% | 11% | 2.5% |
| 4. | It is possible to quit smoking | (84) | (71) | (14) | (23) | (8) |
| | | 42% | 35.5% | 7% | 11.5% | 4% |
| 5. | You have tried less or more times to quit | (68) | (88) | (19) | (19) | (6) |
| | smoking | 34% | 44% | 9.5% | 9.5% | 3% |
| 6. | You support others quitting smoking | (105) | (60) | (13) | (15) | (7) |
| | | 52.5% | 30% | 6.5% | 7.5% | 3.5% |
| 7. | Your friends are hurdle for you in quitting | (67) | (73) | (13) | (27) | (20) |
| | smoking | 33.5% | 36.5% | 6.5% | 13.5% | 10% |
| 8. | The high price of tobacco helps in quitting | (57) | (53) | (24) | (34) | (32) |
| | smoking | 28.5% | 26.5% | 12% | 17% | 16% |

The data about the statement that smoking is harmful to health indicate that 69.5% of the respondents strongly agreed that smoking is harmful to health. In the same way 22% of the respondents agreed with the statement. But in contrary, 3.5% of the respondents were found strongly disagree with the statement, and 2.5% of the respondents disagreed and with no opinion each regarding the statement.

The data further communicate that smoking is a financial loss. Thus, in this context 46.5% and 38% of the respondents were found strongly agree and agree regarding the statement that smoking is a financial loss respectively. However, 7.5% of the respondents replied with the no opinion option. Moreover, 4.5% of the respondents disagreed with the statement and 3.5% of the respondents strongly disagreed with the statement.

About the statement that you like to quit smoking. 46.5% of the respondents strongly agreed with the statement that they want to quit smoking. On the same footing 24.5% of the respondents agreed with the statement. Furthermore, 15.5% of the respondents responded with the no opinion. Contrarily, 11% and 2.5% of the respondents viewed disagree and strongly disagree with the statement respectively.

In the table the statement that it is possible to quit smoking depict that 42% of the respondents strongly agreed with the statement that it is possible to quit smoking. Nevertheless, 35.5% of the respondents agreed with the statement, however, 11.5% of the respondents viewed differently and replied that they are disagree with the statement. Furthermore, 7% of the respondents answered with the no opinion and 4% of the respondents were found with strongly disagree option.

Tabulated data further reveal about the statement that you have tried less or more times to quit smoking noted that 44% and 34% of the respondents agreed and strongly agreed with the statement that they have tried less or more times to quit smoking respectively. But in contrary 9.5% of the respondents disagreed with the statement and with the same percentage (9.5%) of the respondents neither agreed nor disagreed with the statement and only 3% of the respondents strongly disagreed with the statement.

Regarding the statement that you support others quitting smoking, 52.5% of the respondents were found strongly agree with the statement. In the same way 30% of the respondents agreed with the statement, however, 7.5% of the respondents responded adversely, and replied that they are disagree with the statement. Nonetheless, 6.5% of the respondents answered with no opinion regarding the statement and 3.5% of the respondents strongly disagreed with the statement.

The primary data moreover about the statement that your friends are hurdle for you in quitting smoking demonstrate that 36.5% of the respondents were agree with the statement that their friends are hurdle in quitting smoking. Additionally, 33.5% of the respondents were found strongly agree with the statement. But contrarily, 13.5% of the respondents disagreed with the statement. Nevertheless, 10% of the respondents strongly disagreed with the statement and only 6.5% of the respondents were neither agree and nor disagree with the statement.

The table at the end about the statement that the high price of tobacco helps in quitting smoking elucidate that 28.5% and 26.5% of the respondents strongly agreed and agreed with the statement that the high price of tobacco helps in quitting smoking respectively. However, in the contrary, 17% of the respondents showed disagreement with the statement. Furthermore, 16% of the respondents strongly disagreed with the statement and 12% of the total sample opted the no opinion option.

| S.# | Statement | SA | А | NO | DA | SDA |
|-----|--|-------|-------|-------|-------|-------|
| | | f & % | f & % | f & % | f & % | f & % |
| 1. | Company or smoker peers make a person start | (116) | (50) | (13) | (14) | (7) |
| | smoking | 58% | 25% | 6.5% | 7% | 3.5% |
| 2. | Smoking is started as a fashion or show off | (84) | (64) | (14) | (21) | (17) |
| | | 42% | 32% | 7% | 10.5% | 8.5% |
| 3. | The e-cigarette promotes smoking as a modern | (81) | (81) | (7) | (26) | (5) |
| | way of smoking | 40.5% | 40.5% | 3.5% | 13% | 2.5% |
| 4. | The different flavors in e-cigarette attract the | (101) | (73) | (9) | (7) | (10) |
| | youth to smoking | 50.5% | 36.5% | 4.5% | 3.5% | 5% |
| 5. | The sense of economic constraints and | (58) | (84) | (10) | (34) | (14) |
| | unemployment is causing smoking | 29% | 42% | 5% | 17% | 7% |
| 6. | The smoker parents lead the children start | (56) | (52) | (11) | (45) | (36) |
| | smoking | 28% | 26% | 5.5% | 22.5% | 18% |
| 7. | Releasing depression and anxiety the youth | (99) | (73) | (6) | (16) | (6) |
| | start smoking | 49.5% | 36.5% | 3% | 8% | 3% |
| 8. | Low grade and achievement in the class forces | (69) | (55) | (5) | (30) | (41) |
| | adult to start smoking | 34.5% | 27.5% | 2.5% | 15% | 20.5% |
| 9. | The inadequate parental supervision leads the | (81) | (70) | (5) | (28) | (16) |
| | youth to smoking orientation | 40.5% | 35% | 2.5% | 14% | 8% |
| 10. | TV and media advertisements promote | (53) | (57) | (6) | (46) | (38) |
| | smoking | 26.5% | 28.5% | 3% | 23% | 19% |

| Table# 2. Distribution of the respondent regarding their views about the |
|--|
| determinants and factors of smoking |

The tabulated primary data about the statement that company or smoker peers make a person start smoking illuminate that 58% of the respondents strongly agreed with the statement that the company or smoker peers make a person start smoking. In addition to this, 25% of the respondents showed agreement with the statement. However, 7% of the respondents replied with disagree regarding the statement. Moreover, 6.5% of the respondents were neither agree nor disagree with the statement and 3.5% of the total respondents were strongly disagree with the statement.

Responding to the question that smoking is started as a fashion or show off 42% of the respondents strongly agreed with the statement, 32% of the respondents agreed with the statement. However, on the other side 10.5% and 8.5% of the respondents disagreed and strongly disagreed with the statement respectively and only 7% of the respondents remained with no opinion reply.

In the table the statement that the e-cigarette promotes smoking as a modern way of smoking resulted that 40.5% of the respondents were found strongly agree and agree each with the statement that e-cigarette promotes smoking as a modern way of smoking respectively. But contrarily, 13% of the respondents disagreed with the

statement. Moreover, 3.5% and 2.5% of the respondents responded with no opinion and strongly disagree with the statement respectively.

The data further communicate that the different flavors in e-cigarette attract the youth to smoking. In this perspective 50.5% of the respondents strongly agreed with the statement. In addition to this 36.5% of the respondents agreed with the statement. But on the other hand, 5% of the respondents viewed strongly disagree with the statement. Nonetheless, 4.5% of the respondents replied with the no opinion option and only 3.5% of the respondents.

In terms of the statement that the sense of economic constraints and unemployment is causing smoking 42% of the respondents were found agree with the statement that the sense of economic constraints and unemployment is causing smoking. Likewise, 29% of the respondents answered that they are strongly agree with the statement, however, 17% of the sample replied that they are disagree with the statement. Furthermore, 7% of the respondents were strongly disagree with the statement and 5% of the respondents replied with the no opinion option.

The table next indicate about the statement that the smoker parents lead the children to start smoking. In this context the respondents with a very close response i.e., 28% and 26% replied with the strongly agree and agree with the statement respectively. Contrarily, 22.5% of the respondents disagreed with the statement, 18% of the respondents strongly disagreed with the statement and 5.5% of the total sample neither agreed nor disagreed with the statement.

About the statement that releasing depression and anxiety the youth start smoking, 49.5% of the respondents strongly agreed with the statement that releasing depression and anxiety the youth start smoking. Additionally, 36.5% of the respondents agreed with the statement. Meanwhile, 8% of the respondents disagreed with the statement, however, 3% of the respondents strongly disagreed and responded with no opinion option each respectively.

The table furthermore communicate that low grade and achievement in class force youth to start smoking. In this respect 34.5% of the respondents answered with strongly agree regarding the statement that low grade and achievement in class forces youth to start smoking. Likewise, 27.5% of the respondents replied with agree option regarding the statement. But in contrary, 20.5% and 15% of the respondents strongly disagreed and disagreed with the statement and only 2.5% of the respondents replied with neither agree nor disagree option.

The data moreover depict about the statement that the inadequate parental supervision leads the youth to smoking orientation. In this way 40.5% of the

respondents affirmed and showed strongly agreement with the statement. Similarly, 35% of the respondents agreed with the statement, however, 14% and 8% of the respondents were disagree and strongly disagree with the statement that the inadequate parental supervision leads the youth to smoking orientation respectively, and only 2.5% of the respondents replied with the no opinion option.

In the context of the statement that TV and media advertisements promote smoking the data indicate that 28.5% and 26.5% of the respondents agreed and strongly agreed with the statement that TV and media advertisements promote smoking respectively. However, in the contrary 23% of the respondents viewed differently and showed disagreement with the statement. Likewise, 19% of the sample communicated that they are strongly disagree with the statement and 3% of the total sample remained neutral in this regard.

| S.# | Statement | SA | А | NO | DA | SDA |
|-----|--|-------|-------|-------|-------|-------|
| | | f & % | f & % | f & % | f & % | f & % |
| 1. | Smoking is leading to lungs and other diseases | (137) | (47) | (2) | (9) | (5) |
| | in the human body | 68.5% | 23.5% | 1% | 4.5% | 2.5% |
| 2. | Smoking disturbs mental health of the youth | (69) | (79) | (7) | (25) | (20) |
| | | 34.5% | 39.5% | 3.5% | 12.5% | 10% |
| 3. | Smoking is leading youth to start other heavy | (81) | (80) | (5) | (24) | (10) |
| | drugs | 40.5% | 40% | 2.5% | 12% | 5% |
| 4. | Smoking is leading to money loss | (92) | (69) | (4) | (27) | (8) |
| | | 46% | 34.5% | 2% | 13.5% | 4% |
| 5. | Smoking decreases youths' value in the family | (81) | (82) | (7) | (21) | (9) |
| | | 40.5% | 41% | 3.5% | 10.5% | 4.5% |
| 6. | Smoking decreases youths' value among the | (77) | (83) | (4) | (23) | (13) |
| | people | 38.5% | 41.5% | 2% | 21.5% | 6.5% |
| 7. | Smoking keeps adverse effects on the | (60) | (69) | (6) | (35) | (30) |
| | psychological well-being of youths | 30% | 34.5% | 3% | 17.5% | 15% |

Table# 3. Distribution of the respondent regarding their views about the effects and consequences of smoking

The table communicate about the statement that smoking is leading to lungs and other diseases in the human body. In this context 68.5% of the respondents strongly agreed with the statement that Smoking is leading to lungs and other diseases in the human body. Moreover, 23.5% of the respondents agreed with the statement. However, 4.5% of the respondents replied with disagree. 2.5% of the respondents were strongly disagree with the statement and only 1% of the respondents were neither agree nor disagree with the statement.

In terms of the statement that smoking disturbs mental health of the youth 39.5% of the respondents were found agree with the statement. In addition to this, 34.5% of the respondents were strongly agree with the statement. But contrarily, 12.5% and 10%

of the respondents were disagree and strongly disagree with the statement respectively. Meanwhile, 3.5% of the respondents were found neutral with no opinion option.

Regarding the statement that smoking is leading youth to start other heavy drugs 40.5% and 40% of the respondents stood affirmative with the responses of strongly agree and agree regarding the statement respectively. But on the other side 12% and 5% of the respondents were found disagree and strongly disagree with the statement respectively and only 2.5% of the respondents were neither agree nor disagree with the statement.

About the statement that smoking is leading to money loss 46% of the respondents strongly agreed with the statement. Likewise, 34.5% of the respondents were agree with the statement. In contrary, 13.5% of the respondents were disagree with the statement, nevertheless, 4% of the respondents were strongly disagree with the statement and only 2% of the respondents were found neither on any side.

The table moreover elucidate about the statement that smoking decreases youths' value within the family. In this context 41% of the respondents responded that they are agree with the statement. Additionally, 40.5% of the respondents replied with strongly agree, however, 10.5% of the respondents disagreed with the statement. Furthermore, 4.5% of the respondents were found strongly disagree with the statement and 3.5% of the respondents replied with the no opinion option.

The tabulated data further explains regarding the statement that Smoking decreases youths' value among the people. In this perspective 41.5% and 38.5% of the respondents were found agree and strongly agree with the statement respectively. Contrarily, 21.5% and 6.5% of the respondents were viewing otherwise and opted the disagree and strongly disagree options respectively. Moreover, 2% of the respondents neither agreed nor disagreed with the statement.

In the context of the statement that Smoking keeps adverse effects on the psychological well-being of youths. 34.5% of the respondents agreed with the statement. In addition to this 30% of the respondents strongly agreed with the statement. However, 17.5% of the respondents were disagree with the statement. In the same move 15% of the respondents were strongly disagree with the statement and only 3% of the total respondents were found neutral with no any other option rather than the no opinion one.

Relationship between variables regarding smoking trends among youths Table# 4.There is correlation between an individual's association with smoker peers and a decline in his value in the family due to the use of smoking

| Company or smoker peers | Smoking decreases youths' va | value in the family | | |
|-----------------------------|------------------------------|---------------------|--|--|
| make a person start smoking | Pearson correlation | .283** | | |
| | Total number | 200 | | |

*and**. Correlation is significant at the 0.01 and 0.001 levels [2-tailed].

The tabulated data argues that the individual's association with smoker peers had a positive correlation with the decline of his value in the family due to the use of smoking ($r = .283^{**} p < 0.01$). In this respect when the young members increased association with the smoker peers, they faced their value declined in their family. The variables show a positive correlation, which indicates that the decline in the value in the family due to the use of smoking is linked with the individuals' association with the smoker peers.

Table# 5. Inadequate parental supervision is positively correlated with an increased likelihood of youth engaging in smoking, and such smoking behavior is associated with adverse effects on the psychological well-being of youths

| The inadequate parental | Smoking keeps adverse effects on the psychological well- | | |
|-----------------------------|--|--------|--|
| supervision leads the youth | being of youth | | |
| to smoking orientation | Pearson correlation | .207** | |
| | Total number | 200 | |

*and**. Correlation is significant at the 0.01 and 0.001 levels [2-tailed].

The table signifies data that the inadequate parental supervision is positively correlated with an increased likelihood of youth engaging in smoking, and in return such smoking behavior is associated with adverse effects on the psychological well-being of youths ($r = .207^{**} p < 0.01$). In this context when there is inadequate parental supervision which is positively correlated with an increased likelihood of youth engaging in smoking, that causes adverse effects on the psychological well-being of youths. The variables delineate a positive correlation and illustrate that smoking behavior keeps adverse effects on the psychological well-being of youths the inadequate parental supervision in this regard.

Discussion

Smoking is as dangerous as it is easily accessible. The perceived accessibility and the unchecked prevalence of cigarette has penetrated among the youth significantly. The present study highlights the prominent detrimental factors fostering smoking trends among the youth and consequences that occur as a result of smoking habits. Applying quantitative research method, the study resulted that the company, smokers peer, esmoking and different flavor of e-smoking are the leading causes pulling the youth towards smoking orientation. It is further communicated that the inadequate parental supervision or the parents being smokers are the other factors turning youth to start smoking. The study moreover outlines the increasing cases of unemployment and economic crunch are the other indicators attracting youth to come in the circle of smoking cohort. Additionally, it was noted in the study that the media and T.V advertisement of cigarettes and poor academic performance were viewed as secondary causal indicators of smoking initiation. The study nonetheless demonstrated further that the fashion or show off attitude is also one of the determining factors of smoking tendency. The study in addition to these factors summarized that smoking habits are causing different physical and mental health issues. The respondents confessed that the smoking prevalence and addiction besides lungs and heart diseases accumulate the familial and social stigma, which has led to the devaluation and disrespect of young cohort within the family and among the social gatherings. The respondents also affirmed that the smoking trends affect the youths' psychological well-being. The study highlighted the most important risk factor in a way that cigarette smoking is the initial stage that leads to heavy drugs in the future.

Conclusion

Smoking is harmful to health is a universal fact. But ironically it is increasing equally especially in the developing countries. Pakistan is also in this sphere, where the statistics regarding smoking addiction is growing. Though the smokers acknowledge that cigarette smoking is injurious and a financial loss; and they are willing to quit smoking, but in reality, their number is increasing. This study indicates that the prominent reasons behind is the perceived accessibility to cigarette and the inadequate supervision from the family side. Nevertheless, the impunity and the outlawed selling of e-smoking instruments and the different smoking flavors are not the least reasons promoting smoking tendencies. In addition, the unchecked smoking practices in the public places are also the encouraging indicators to the smoking boom. Youth are the most important segment of the society. They should be rescued at all means from smoking corners. The prime responsibility goes to the government to bring structural changes, form strict policies, take pragmatic steps and show zero tolerance to minimize the smoking prevalence to the maximum level. Certainly Pakistan has been increasing the rates and prices of tobacco more heavily and frequently, however, it has not been proved fruitful if the number of smokers is increasing adversely. Consequently, the strategies are indeed of no gain. So, there is the need to revisit the policies and take all those measures which may prove productive and minimize the smoking prevalence.

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